

# Baltimore City DHR-Office of Employee Benefits

## HR Practitioner's Guide For (Variable-Hour) Newly Benefit-Eligible Temporary, Contractual & Seasonal Employees

### Health Benefits Enrollment Process

This document should be used as a guide for variable-hour temporary, contractual or seasonal employees working at least 30 variable hours per week (130 variable hours per month/1560 variable hours per 12-month period) over a designated 12-month measurement period (Initial & Standard) to determine eligibility for enrollment in Medical & Prescription benefits.

Initial 12-Month Measurement Period	
<b>Initial 12-Month Measurement Period</b>	The <b>Initial 12-Month Measurement Period</b> starts the 1 <sup>st</sup> day of the month following the hired date of a variable-hour temporary, seasonal or contractual employee. <i>Example: The temporary, seasonal or contractual employee is hired 08/03/2015. The Initial 12-Month Measurement Period starts the first day of the month following the hired date, which would be 09/01/2015 through 08/31/2016.</i>
<b>Eligibility Requirement for Offering of Medical &amp; Prescription benefits after the end of the Initial 12-Month Measurement Period</b>	Eligibility Requirement for Offering of Medical & Prescription Benefits: If a temporary, seasonal or contractual employee works <b>an average of 30 or more variable hours per week</b> (130 hours per month/1560 hours per 12-month period) during the Initial 12-Month Measurement Period, then that employee would be eligible to elect Medical and Prescription benefits effective the first day of the month following the administrative period.
<b>(30- Day) Administrative Period (Starts after the end of the Initial 12-Month Measurement Period)</b>	The <b>Administrative Period</b> is 30 days starting the day after the end of the Initial 12-Month Measurement Period. <i>Example: The Initial 12-Month Measurement Period is from 09/01/2015 through 08/31/2016. The Administrative Period starts on 09/01/2016 and ends 09/30/2016.</i> During the Administrative Period, the newly benefit eligible employee will be offered Medical and Prescription benefits.
<b>Mailing of Health Benefit Enrollment Notice During the Administrative Period (Starts after the end of the Initial 12-Month Measurement Period)</b>	Newly benefit-eligible variable-hour employees (temporary, contractual or seasonal) will receive a <b>Health Benefit Enrollment Notice</b> in the mail at their home address of record during the 30-day Administrative Period. The notice includes a cover letter and worksheet informing employees that they must acquire a Baltimore City Government/Quasi Baltimore City Government Agency assigned email address for mandatory registration; deadline date to enroll online and submit required documentation for newly added dependents; online enrollment website; health benefit offerings and costs, etc.
<b>Health Benefits Enrollment Period after the end of the Initial 12-Month Measurement Period</b>	Newly benefit-eligible variable-hour employees (temporary, contractual or seasonal) have <b>45 days</b> from their benefit-eligible date ( <i>effective date of coverage</i> ) to elect Medical and Prescription benefits on the City's online Health Benefits Enrollment System. <i>Example: If a temporary, contractual or seasonal employee meets the eligibility criteria for enrollment in Medical and Prescription Benefits, he/she will have 45 days from the benefit-eligible date of 10/01/2016 to elect benefits online.</i>
<b>Stability Period (Period of Coverage for Medical and Prescription Benefits) after the end of the Initial Administrative Period</b>	The <b>Stability Period</b> is a 12-month period of time in which benefit-eligible variable-hour employees (temporary, contractual or seasonal) are <b>eligible to be enrolled in Medical and Prescription coverage</b> once elected online. The Stability period is effective the 1 <sup>st</sup> day of the month following the Administrative Period and runs until the end of 12-months. <i>Example: If the temporary, contractual or seasonal employee works at least an average of 30 variable hours per week (130 hours per month/1560 hours per 12-month period) during the Initial 12-Month Measurement Period (09/01/2015 – 08/31/2016), Medical and Prescription benefits would be offered effective 10/01/2016 and ends 09/30/2017 (after the 30-day administrative period 09/01/2016 – 09/30/2016).</i>



Annual Standard 12-Month Measurement Period	
<b>Annual Standard 12-Month Measurement Period</b>	The <b>Standard 12-Month Measurement Period</b> always runs from November 1 of the prior year through October 31 of the current year annually. <i>Example: If a temporary, contractual or seasonal employee was hired 08/03/2015, variable hours worked will also be measured during the Standard 12-Month Measurement Period (11/01/2015 – 10/31/2016). If the temporary, contractual or seasonal employee works at least an average of 30 hours per week (130 hours per month/1560 hours per 12-month period) during the Standard 12-Month Measurement Period (11/01/2015 – 10/31/2016), then that employee would be eligible to elect Medical and Prescription benefits during the administrative period, which is (Annual Open Enrollment Period, for an effective date of coverage January 1.</i>
<b>Administrative Period - Annual Open Enrollment Period (Dates TBD and Announced Annually)</b>	The <b>Administrative Period</b> is during <b>Annual Open Enrollment Period</b> , which is customarily held between the end of October and beginning of November each year. During the annual Open Enrollment Period, benefit-eligible variable-hour employees are offered to elect or continue enrollment in Medical and Prescription Benefits for the next plan year. <i>Example: The Standard 12-Month Measurement Period runs from November 1, 2015 through October 31, 2016. The annual Open Enrollment Period runs from October 21, 2016 through November 4, 2016.</i>
<b>Mailing of Annual Open Enrollment Notice During the Administrative Period (Annual Open Enrollment Period)</b>	During the annual <b>Open Enrollment Period</b> , benefit-eligible variable-hour employees (temporary, contractual or seasonal) will receive an <b>Open Enrollment Flier</b> in the mail at their home address of record. The annual Open Enrollment flier informs employees of the Open Enrollment Period, online enrollment website address, log on information. The flier also directs them to the website to review current elections, health benefit offerings, brochures and costs and make new benefit elections for the next plan year.
<b>Annual Open Enrollment Period (Administrative Period)</b>	Benefit-eligible variable-hour employees (temporary, contractual or seasonal) must elect Medical and Prescription coverage on the City's online Health Benefits Enrollment System during the designated Annual Open Enrollment Period. <i>Example: If a temporary, contractual or seasonal employee meets the eligibility criteria for enrollment in Medical and Prescription Benefits during the Standard 12-Month Measurement Period, he/she may elect or continue Medical and Prescription coverage for the next plan year during the annual open enrollment period.</i>
<b>Stability Period (Coverage Period for Medical and Prescription Benefits - January 1 through December 31)</b>	The <b>Stability Period</b> is a 12-month period of time in which the benefit-eligible variable-hour employees (temporary, contractual or seasonal) are <u>eligible to be enrolled in Medical and Prescription coverage</u> once elections are made online. The Stability period is effective January 1 and ends December 31 of the next plan year. <i>Example: The Standard 12-Month Measurement Period runs from November 1, 2015 through October 31, 2016. The annual Open Enrollment Period runs from October 21, 2016 through November 4, 2016. The Stability Period starts January 1, 2017 and ends December 31, 2017. Eligible variable-hour employees will receive Medical and Prescription coverage for the entire plan year as long as they are still employed with the City of Baltimore.</i>
<b>Subsequent Annual Standard 12-Month Measurement Period, Administrative Period (Annual Open Enrollment Period) &amp; Stability Period</b>	<p>The subsequent annual <b>Standard 12-Month Measurement Period</b> runs from November 1 of the prior year through October 31 of the current year. <i>Example: A temporary, contractual or seasonal employee's variable hours worked will be measured during the Standard 12-Month Measurement Period (November 1, 2016 through October 31, 2017). The Administrative Period (Annual Open Enrollment Period) runs from November 13, 2017 through November 26, 2017. The Stability Period starts January 1, 2018 and ends December 31, 2018.</i></p> <ul style="list-style-type: none"> <li>• If variable-hour employees (temporary, contractual or seasonal) meet the 30 or more variable hours per week eligibility criteria during each annual Standard 12-Month Measurement Period, then they will be offered to elect or continue enrollment in Medical &amp; Prescription benefits for the next plan year.</li> <li>• If variable-hour employees (temporary, contractual or seasonal) do <u>not</u> meet the 30 or more variable hours per week eligibility criteria during each annual Standard 12-Month Measurement Period, then they will <u>not</u> be offered nor be eligible to continue Medical and Prescription coverage for the next year.</li> </ul>

## Life Cycle of a Variable-Hour Temporary, Contractual or Seasonal Employee

### Eligibility Criteria . . . *Must Work At Least*

- 30 Variable Hours Per Week Per 12-Month Measurement Period
- 130 Variable Hours Per Month Per 12-Month Measurement Period
- 1560 Cumulative Variable Hours Per 12-Month Measurement Period

### Initial 12-Month Measurement Period

<b>Hired Date: 08/03/2015</b>	Ms. Smith was hired 08/03/2015.
<b>Initial 12-Month Measurement Period: 09/01/2015 through 08/31/2016</b>	Ms. Smith's Initial 12-Month Measurement Period started the first day of the month following her hired date, which was 09/01/2015 through 08/31/2016. During Ms. Smith's Initial 12-Month Measurement Period (09/01/2015 – 08/31/2016), she worked an average of <b>142.7 hours per month</b> (1712.45 cumulative hours). Ms. Smith met the <b>130 hours per week</b> /1560 cumulative hours per 12-month requirement during her Initial 12-Month Measurement Period.
<b>30-Day Administrative Period: 09/01/2016 through 09/30/2016</b>	During the 30-Day Administrative Period, Ms. Smith was mailed a Health Benefit Notice offering her to elect Medical and Prescription benefits on the City's online Health Benefits Enrollment System <b>within 45 days</b> of her benefit-eligible effective date of coverage, which would be 10/01/2016 - 11/15/2016.
<b>Stability Period (Coverage for Medical &amp; Prescription Benefits): 10/01/2016 through 09/30/2017</b>	Ms. Smith's Stability Period, which is the period of time she may be enrolled in coverage for up to 12 consecutive months, is effective 10/01/2016 and ends 09/30/2017. She elected Medical and Prescription coverage online effective 10/01/2016 and received coverage through 09/30/2017.

### 1<sup>st</sup> Annual Standard 12-Month Measurement Period

<b>1<sup>st</sup> Annual Standard 12-Month Measurement Period: 11/01/2015 through 10/31/2016</b>	During Ms. Smith's 1 <sup>st</sup> Annual Standard 12-Month Measurement Period (11/01/2015 – 10/31/2016), she worked an average of <b>139.59 per month</b> (1675.03 cumulative hours). Ms. Smith met the <b>130 hours per week</b> /1560 cumulative hours per 12-month requirement during her 1 <sup>st</sup> Annual Standard 12-Month Measurement Period.
<b>2017 Annual Open Enrollment Period: (Dates TBD &amp; Announced Annually)</b>	During the Annual Open Enrollment Period, Ms. Smith was mailed a <b>2017 Open Enrollment Flier</b> offering her to elect or continue Medical and Prescription benefits on the City's online Health Benefits Enrollment System for the remainder of the 2017 plan year (10/01/2017 through 12/31/2017).
<b>Stability Period (Coverage for Medical &amp; Prescription Benefits): 01/01/2017 through 12/31/2017</b>	Ms. Smith elected to continue her Medical and Prescription coverage effective 01/01/2017 and received coverage through 12/31/2017. As a result, Ms. Smith was able to continue Medical and Rx coverage effective 10/01/2017 until 12/31/17.

### 2<sup>nd</sup> Annual Standard 12-Month Measurement Period

<b>2<sup>nd</sup> Annual Standard 12-Month Measurement Period: 11/01/2016 through 10/31/2017</b>	During Ms. Smith's 2 <sup>nd</sup> Annual Standard 12-Month Measurement Period (11/01/2016 – 10/31/2017), she worked an average of <b>112.47 per month</b> (1349.59 cumulative hours). Ms. Smith did <b>not</b> meet the <b>130 hours per week</b> /1560 cumulative hours per 12-month requirement during her 2 <sup>nd</sup> Annual Standard 12-Month Measurement Period.
<b>2018 Annual Open Enrollment Period: (TBD &amp; Announced Annually)</b>	During the <b>2018 Annual Open Enrollment Period</b> , Ms. Smith was <b>not</b> mailed a 2018 Open Enrollment Flier offering her to elect or continue Medical and Prescription benefits for the 2018 plan year (01/01/2018 through 12/31/2018).
<b>Stability Period (Coverage for Medical &amp; Prescription Benefits): Ineligible for Medical &amp; Prescription Coverage from 01/01/2018 through 12/31/2018</b>	As a result, Ms. Smith became ineligible for Medical and Prescription coverage for plan year 2018 and she was <b>not</b> allowed to continue coverage effective 01/01/2018 (beyond 12/31/2017). Therefore, Ms. Smith's Medical and Prescription coverage was terminated effective 12/31/2017. Note: Continuation of Coverage through WageWorks COBRA Benefits was offered to Ms. Smith effective January 1, 2018.

Health Benefits Enrollment Process	
<b>Mandatory Baltimore City Government Email Address</b>	<b>HR Practitioners must request from BCIT/Agency IT a Baltimore City Government/Quasi Baltimore City Government Agency email address for all benefit-eligible variable-hour new hires.</b>
<b>When Can Employees Log onto the Health Benefits Enrollment System after the Initial 12-Month Measurement Period</b>	<ul style="list-style-type: none"> <li>Newly benefit-eligible variable-hour employees (temporary, contractual or seasonal) do not have to wait until they receive their Health Benefit Enrollment Packet in the mail to make health benefit elections online. They may access the Health Benefits Enrollment System as early as the 4th Tuesday of the month during their 30-day administrative period.</li> </ul>
<b>Requirements For One-Time Registration on the Employee Self-Service Portal</b>	<ul style="list-style-type: none"> <li>Newly benefit-eligible variable-hour employees must have a Baltimore City Government/Quasi Baltimore City Government Agency email address in order to register.</li> <li>Employees must obtain the registration code for the day by emailing the DHR Systems Support at <a href="mailto:dhrsystems.support@balimorecity.gov">dhrsystems.support@balimorecity.gov</a> using their Baltimore City Government/Quasi Agency assigned email address in order to register.</li> </ul>
<b>Employee Self-Service Portal Website</b>  <i>(Use Google Chrome as your Web Browser)</i>	<p>Once employees have acquired a Baltimore City/Quasi Agency email address and the registration code for the day, they must log onto the Employee Self-Service Portal website at <a href="https://my.adp.com">https://my.adp.com</a> to self-register, which is available 24 hours a day, 7 days a week. Then click on <b>First Time User? REGISTER NOW</b> and follow the prompts:</p> <ul style="list-style-type: none"> <li>Enter the registration code you received from DHR System Support and click <b>NEXT</b>.</li> <li>Click <b>YES</b> (Do you want to set up an account with Baltimore City?)</li> <li>Identify Yourself: Enter your First Name, Last Name, full Social Security Number and partial Date of Birth (Month/Day). Check the "I'm not a robot" box and then click <b>CONFIRM</b>.</li> <li>If the reCAPTCHA prompt page appears, follow the step by step instructions.</li> <li>Help Us Verify Your Identity: At this step, you may be asked to answer several identity questions based on public records. Then click <b>NEXT</b>.</li> <li>Help Us Protect Your Account: Enter your Baltimore City Government/Quasi Baltimore City Government Agency email address as your primary email address and at least one telephone number including your mobile phone number. If you wish to receive text messages, please click on the box at the bottom of the page. Click <b>CONTINUE</b>. (Important Note: Personal email accounts are prohibited by Baltimore City.)</li> <li>Create a password and click <b>CREATE YOUR ACCOUNT</b>.</li> <li>Select and answer (3) security questions. Click <b>CONTINUE</b>.</li> <li>Your one-time self-registration with Employee Self-Service Portal is complete.</li> <li>An email will be sent to your Baltimore City Government or Quasi Baltimore City Government Agency email address to confirm your registration, which include your assigned User ID.</li> <li><b>Save your User ID and Password that was created during the one-time self-registration process. Your User ID and Password will be required to log onto the new Employee Self-Service Portal to access the New ADP Benefits Enrollment System and your Pay Information.</b></li> </ul> <p>If you have trouble registering with or logging onto the new Employee Self-Service Portal, please contact <b>DHR Systems Support</b> at <a href="mailto:dhrsystems.support@baltimorecity.gov">dhrsystems.support@baltimorecity.gov</a> for assistance.</p>



<b>How To Access the Health Benefits Enrollment System</b>	Employees must log onto <a href="https://my.adp.com">https://my.adp.com</a> , enter their <b>User ID</b> and <b>Password</b> , and click <b>Sign In</b> . Then click on the “ <b>Your Benefits</b> ” link to access the Health Benefits Enrollment System.
<b>How to Access Forms &amp; Plan Documents</b>  <i>Variable-Hour Employees are only eligible to elect a Medical &amp; Prescription Plan.</i>	When employees log on, they must click on the <b>Forms &amp; Plan Documents</b> tile to access the Employee Health Benefits Booklet, Medical & Rx Rate Charts, and brochures for each benefit plan ( <i>Medical &amp; Prescription Drug</i> ) describing in detail covered services. Employees can also access the Dependent Eligibility & Required Documentation form.
<b>Online Enrollment Deadline</b>	Newly benefit-eligible variable-hour employees must elect Medical & Prescription benefits online and upload required documentation for newly added dependents <u>within 45 days from their newly benefit-eligible date</u> . Otherwise, their health benefits options will default to “No Coverage” and employees will have to wait until the next Annual Open Enrollment Period ( <i>customarily in the fall</i> ) to enroll for a January 1 effective date of coverage.
<b>JellyVision: Meet Alex, Your Interactive Health Benefits Counselor (24/7)</b> <i>Variable-Hour Employees are only eligible to elect a Medical &amp; Prescription Plan</i>	<b>JellyVision</b> is an interactive tool to help employees decide what health benefit options to elect based on how they respond to a series of questions. Alex does not elect your health benefits for the employee. Alex only makes recommendations. Employees can access JellyVision on the Benefits page.
<b>Elect Health Benefits Online</b>	After employees have reviewed their benefit options and rates, they must click on <b>ENROLL NOW</b> under the <b>Newly Eligible event</b> tile to elect their health benefits.
<b>Eligible Dependents</b> <i>(Full list of eligible dependents is posted under the FORMS tab)</i>  <b>Required Documentation for Newly Added Dependents</b>   <b>Deadline for Required Documentation Submission</b>  <b>Note:</b> Health Benefit elections are pending until all required documentation is received and approved by EBD for all newly added dependents.	<b>Eligible Dependents &amp; Required Documentation:</b> <ul style="list-style-type: none"> <li>• Legal Spouse: Copy of Court Certified Marriage Certificate</li> <li>• Biological Child: Copy of Birth Certificate*</li> <li>• Adopted Child: Copy of Birth Certificate &amp; Official Court Documents*</li> <li>• Stepchild: Copy of Court Certified Marriage Certificate &amp; Birth Certificate*</li> <li>• Legal Guardianship: Copy of Official Court Documents*</li> <li>• Disabled Child Age 26 &amp; Older: Disability Certification Approved by Plan</li> </ul> <p>*Dependent children are covered until the end of the calendar year (December 31) in the year they turn age 26.</p> <p><b>Note:</b> Required documentation for newly added dependents must be submitted to the Office of Employee Benefits <u>within 45 days from benefit-eligible date</u>. If required documentation is not submitted to the Office of Employee Benefits by the enrollment deadline date, the employees’ elections will be removed from the system, defaulted to “No Coverage” and the employees’ will have to wait until the next Annual Open Enrollment Period (<i>customarily in the fall</i>) to enroll and provide the required documentation for a January 1 effective date of coverage.</p>
<b>Upload Required Documentation for Newly Added Dependents Using Secured Link</b>	Newly benefit-eligible variable-hour employees (temporary, contractual or seasonal) can scan their required documentation for newly added dependents and upload them from the Benefits page by clicking on <a href="#">Save Time &amp; Upload Documents Here</a> .
<b>Health Benefits Effective Date</b>	All health benefit elections are effective the <u>1<sup>st</sup> day of the month following the end of the 30-day administrative period</u> once online elections are made and required documentation for newly added dependents are received and approved by the Office of Employee Benefits.

## Health Benefits Enrollment Process

<p><b>When Healthcare Deductions Should Start</b></p>	<p>Healthcare deductions should start on the <u>1<sup>st</sup> pay date of the month health benefits are effective</u>. Because new hires/benefit-eligible employees are allowed 45 days from date of hire/health benefit eligible date to elect health benefits online and submit required documentation for newly added dependents, the 1<sup>st</sup> healthcare deduction doesn't always start on time.</p>
<p><b>Recovery Health Care Deductions</b></p>	<p>Recovery of missed healthcare deductions will be taken from employees' paycheck in increments of one set of healthcare deductions per paycheck in addition to the regular healthcare deductions until all missed deductions have been recovered.</p> <ul style="list-style-type: none"> <li>• Example: If health benefits are effective June 1, healthcare deductions should be deducted from the employee's first paycheck received in June. If the initial healthcare deductions are <u>not</u> taken from the employee's paycheck until the first paycheck received in <u>July</u>, then the new biweekly employee will owe for two missed healthcare deductions for the month of June.</li> <li>• Continued Example: If the Medical contribution is \$50 and the Rx contribution is \$20 per paycheck and two biweekly deductions were missed (pay dates: 6/12 and 6/26), then an additional total healthcare deduction of \$70 (\$50 + \$20) will be deducted from the next two paychecks in addition to the regular \$70 total healthcare deduction; for a total deduction of \$140 per paycheck until all missed deductions are recovered.</li> </ul> <p>Note: There are two months in each plan year (<i>January 1 through December 31</i>) where biweekly employees receive three paychecks in a month as opposed to two paychecks in a month. If health benefits are effective in the month where there are three paychecks received in that month, recovery of all missed healthcare deductions will be deducted.</p>
<p><b>Health Benefit Elections Transmitted to Healthcare Providers</b></p>	<p>Health Benefit elections are pending until all required documentation is received and approved by the Office of Employee Benefits for all newly added dependents, if applicable. Once the online elections are made and all required documentation is received and approved by the Office of Employee Benefits for all newly added dependents, enrollments will be transmitted electronically to the healthcare providers elected on the next weekly carrier enrollment file. (<i>The healthcare deduction file will also be transmitted electronically to Central Payroll for payroll healthcare deductions on the next weekly scheduled date.</i>)</p>
<p><b>Membership ID Cards</b></p>	<p>Membership ID cards will be issued by the healthcare providers within 7 – 10 business days from the date they receive the electronic carrier enrollment file.</p>
<p><b>Change in Personal Information (Name, SSN, DOB, Address &amp; Gender)</b></p>	<p>Personal information such as the employee's name, social security number, date of birth, address and gender is transmitted to the Health Benefits Enrollment System electronically on the weekly health benefit eligibility file from the City's HRIS/Payroll System. If an employee discovers that any one of the personal information listed above is incorrect or has changed, the employee must contact the HR Practitioner to make the correction or change in the HRIS/Payroll System. When the HR Practitioner has corrected or changed the personal information in the HRIS/Payroll System, the Health Benefits Enrollment System will receive the correction or change electronically on the next health benefit eligibility file. In turn, the Health Benefits Enrollment System will then transmit the correction or change on the next weekly carrier enrollment file to the healthcare providers.</p>

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DHR-Office of Employee Benefits

2019 Health Benefits At A Glance



## Health Benefit Options for New Benefit-Eligible Variable Employees

### Medical Plan Options >>>>>

Medical Plan Options	Biweekly (26 Pays) Employee (EE) Cost	Benefit Plan Highlights
<b>HMO</b>	EE Only \$ 24.67 EE + Child \$ 46.88 EE + Spouse \$ 51.82 EE + Family \$ 74.02	<b>Kaiser Permanente HMO (In-Network Only w/ PCP Designation)</b> <ul style="list-style-type: none"> <li>• Must select an In-Network Primary Care Physician (PCP) or Facility and receive service from the PCP or Facility selected (except emergency care)</li> <li>• Must obtain a referral from your PCP to visit a specialist</li> <li>• No Annual Deductible</li> <li>• Preventive Services: Covered in Full</li> <li>• Office Visit - \$5 Copay / Specialist Visit - \$5 Copay</li> <li>• Access to Most Services at One Facility</li> </ul>
<b>Open Access HMO</b>	EE Only \$ 20.37 EE + Child \$ 37.68 EE + Spouse \$ 42.78 EE + Family \$ 61.11	<b>Open Access Aetna Select HMO (In-Network Only)</b> <ul style="list-style-type: none"> <li>• Must utilize In-Network Providers</li> <li>• No Primary Care Physician (PCP) Selection Required</li> <li>• No PCP Referrals Required</li> <li>• No Annual Deductibles</li> <li>• Preventive Services: Covered in Full</li> <li>• Office Visit - \$5 Copay / Specialist Visit - \$5 Copay</li> <li>• Nationwide In-Network Provider Access</li> </ul>
<b>PPO Standard Option</b>	EE Only \$ 48.92 EE + Child \$ 90.50 EE + Spouse \$102.73 EE + Family \$146.76	<b>BlueChoice Advantage PPO Standard Option (In-Network &amp; Out-of-Network)</b> <ul style="list-style-type: none"> <li>• In-Network &amp; Out-of-Network Providers (Higher Out-of-Pocket Costs)</li> <li>• Annual Deductible</li> <li>• No PCP or Referrals Required</li> <li>• Preventive Services: Covered 100% of Allowed Benefit</li> <li>• In-Network: Office Visit - \$25 Copay / Specialist Visit - \$40</li> <li>• Nationwide Network Provider Access</li> </ul>
<b>PPO High Option</b>	EE Only \$ 69.48 EE + Child \$128.52 EE + Spouse \$145.89 EE + Family \$208.42	<b>BlueChoice Advantage PPO High Option (In-Network &amp; Out-of-Network)</b> <ul style="list-style-type: none"> <li>• In-Network &amp; Out-of-Network Providers (Higher Out-of-Pocket Costs)</li> <li>• No Annual Deductible</li> <li>• No PCP or Referrals Required</li> <li>• Preventive Services: Covered 100% of Allowed Benefit</li> <li>• In-Network: Office Visit - \$5 Copay / Specialist Visit - \$5</li> <li>• Nationwide Network Provider Access</li> </ul>

Department of Human Resources – Office of Employee Benefits

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## Prescription Plan Options >>>>>

Prescription Plan Options	Biweekly (26 Pays) Employee (EE) Cost	Benefit Plan Highlights Prescription coverage is bundled with Medical plan election, but with a separate payroll deduction.
<b>Standard Option</b>	EE Only \$ 7.02 EE + Child \$12.99 EE + Spouse \$14.75 EE + Family \$21.07	<b>CareFirst CVS Rx Standard Option</b> <ul style="list-style-type: none"> <li>Automatically enrolled if BlueChoice Adv PPO Standard Option medical plan is elected</li> <li>Annual \$50 Deductible (Each Member)</li> <li><b>Retail – 30 Day Supply</b> (Copays: Generic - \$5 / Preferred Brand (Formulary) - \$30 / Non-Preferred Brand - \$50)</li> <li><b>Retail &amp; Mail Order – 90 Day Supply</b> (Copays: Generic - \$10 / Preferred Brand (Formulary) - \$60 / Non-Preferred Brand - \$100)</li> </ul>
<b>High Option</b>	EE Only \$ 8.49 EE + Child \$15.70 EE + Spouse \$17.82 EE + Family \$25.46	<b>CareFirst CVS Rx High Option</b> <ul style="list-style-type: none"> <li>Automatically enrolled if BlueChoice Adv PPO High Option, Aetna Select Open Access HMO or Kaiser Permanente HMO is elected</li> <li>No Annual Deductible</li> <li><b><u>MAPS &amp; Unrepresented Employees</u></b></li> <li><b>Retail – 30 Day Supply</b> (Copays: Generic - \$15 / Preferred Brand (Formulary) - \$30 / Non-Preferred Brand - \$40)</li> <li><b>Retail &amp; Mail Order – 90 Day Supply</b> (Copays: Generic - \$20 / Preferred Brand (Formulary) - \$40 / Non-Preferred Brand - \$60)</li> <li><b><u>Represented Employees</u></b></li> <li><b>Retail – 30 Day Supply</b> (Copays: Generic - \$10 / Preferred Brand (Formulary) - \$20 / Non-Preferred Brand - \$30)</li> <li><b>Retail &amp; Mail Order – 90 Day Supply</b> (Copays: Generic - \$15 / Preferred Brand (Formulary) - \$25 / Non-Preferred Brand - \$35)</li> </ul>

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