

OCTOBER 19 – October 29



OPEN ENROLLMENT FOR PLAN YEAR 2022

**NO CHANGES,
NO ACTION NEEDED**

If you are not making changes for 2022
then you **DO NOT** need to do anything

Your coverage will automatically carry over to 2022!

You **WILL** receive a new Medical card for 2022!

OE FAST FACTS

No changes or premium increases!

Online Access To Enroll via our online system
cfwbenefits.com Starts October 11

Open Enrollment Deadline for ALL Plans is
October 29, 2021, 11:59 pm

Changes Are Effective January 1, 2022

Copayment

A payment made by a beneficiary (especially for health services) in addition to that made by an insurer.

Deductible

A specified amount of money that the insured must pay before an insurance company will pay a claim.

INSURANCE TERMS

Coinsurance

A type of insurance in which the insured pays a share of the payment made against a claim.

Total Out of Pocket Maximum

The most you have to pay for covered services in a plan year. After you spend this amount on deductibles, copayments, and coinsurance, your health plan pays 100% of the costs of covered benefits.

MEDICAL PLAN OPTIONS FOR 2022

Meritain Aetna –
Choice Point of Service II
Open Access Network

Medical Insurance Provider & Personalized Health & Benefits Support



Insurance Provider

- An Aetna Company
- Processes claims
- Provides network
- Aetna Choice Point Of Service II Open Access Network (POS II)



Health & Benefits Support Team

- Enrollment support
- Find a provider
- Claims Questions
- Pharmacy Questions
- Logistics
- Care coordination

Meritain Health

an Aetna Company



When asked “who is your health insurance carrier?” you reply:

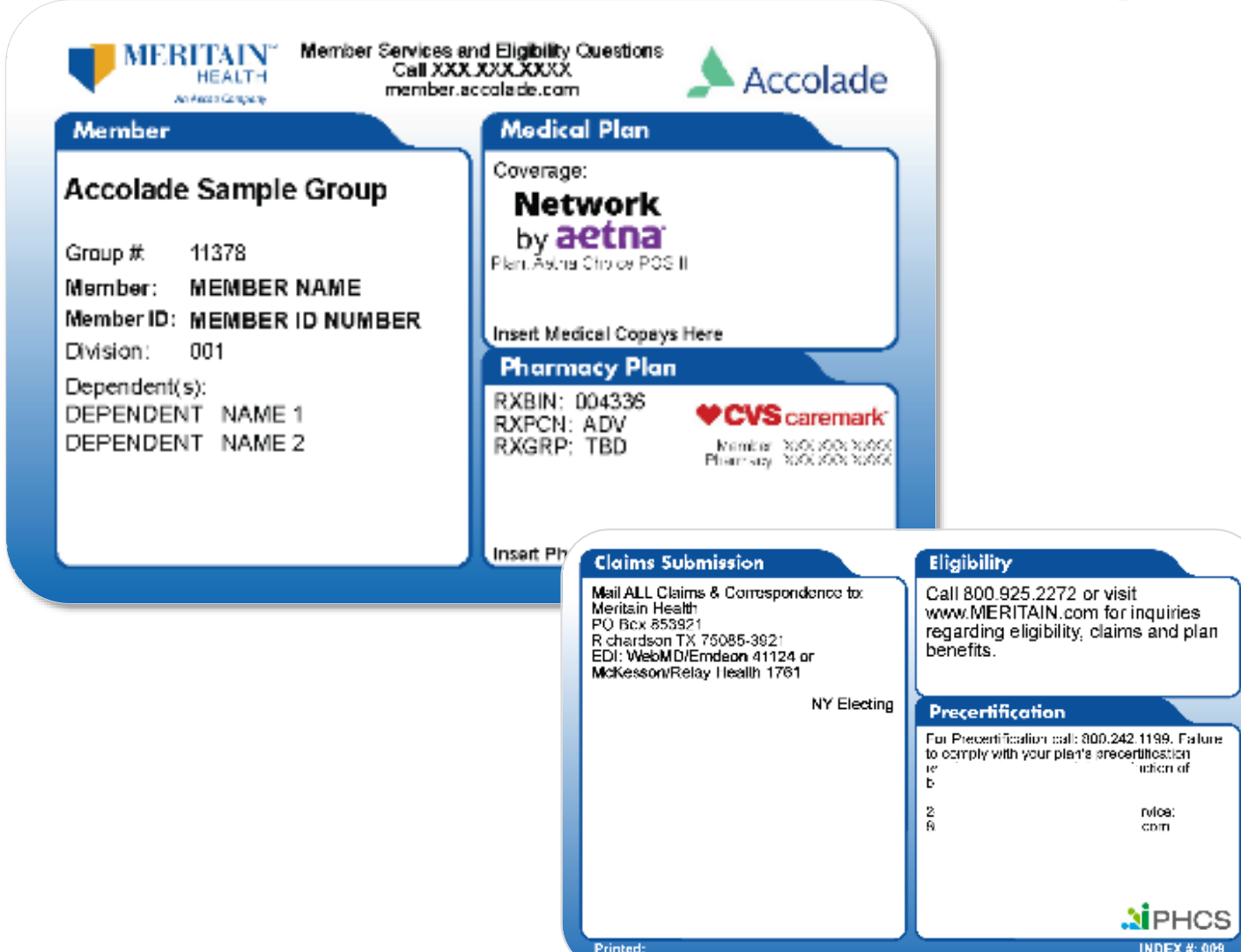
1. My coverage is through Meritain Health with Aetna managing my provider network.
2. Accolade is there to help you navigate the health care system and answer any questions along your journey.

Here is how we partner for you...

Your Healthcare Journey

Begins when you receive your ID card in the mail it will include:

1. The Aetna logo—Aetna manages your provider network
2. Your company's unique phone number and website for your Accolade Health Assistant[®] by Accolade
3. And, the Meritain Health claim submission information




MERITAIN HEALTH Member Services and Eligibility Questions
 Call XXX.XXX.XXXX member.accolade.com

Accolade

Member
Accolade Sample Group
 Group #: 11378
 Member: MEMBER NAME
 Member ID: MEMBER ID NUMBER
 Division: 001
 Dependent(s):
 DEPENDENT NAME 1
 DEPENDENT NAME 2

Medical Plan
 Coverage:
Network by aetna
 Plan: Aetna Choice POS II
 Insert Medical Copays Here

Pharmacy Plan
 RXBIN: 004336
 RXPCN: ADV
 RXGRP: TBD

 Member: XXX.XXX.XXXX
 Pharmacy: XXX.XXX.XXXX
 Insert Pharmacy Information Here

Claims Submission
 Mail ALL Claims & Correspondence to:
 Meritain Health
 PO Box 855921
 Richardson TX 75085-3921
 EDI: WebMD/Emdeon 41124 or
 McKesson/Relay Health 1781
 NY Electing

Eligibility
 Call 800.925.2272 or visit
www.MERITAIN.com for inquiries
 regarding eligibility, claims and plan
 benefits.

Precertification
 For Precertification call: 800.242.1199. Failure
 to comply with your plan's precertification
 requirements may result in denial of
 coverage.
 For more information visit:
www.meritain.com

Printed: INDEX #: 009

iPHCS



Accolade

Our mission is to empower people through expertise, empathy, and technology to make the best decisions for their health and well-being.

Member.accolade.com



Ericka
Accolade Health Assistant

Meet the Accolade Health Assistant

- + We work for City of Fort Worth employees and their family members — not the health plan
- + Personalized experience: Your own professional Health Assistant
- + Identifying and removing barriers to care
- + Total assistance at no additional cost
- + Completely confidential — information is not shared with the city.
- + Just one number to call for health and health benefits questions

Claims & Billing Questions

I thought this visit was covered?



Provider Option & Network Status

I'm not sure I like my doctor, can you help me find one who understands me?



Eligibility Questions

Can I add my 24 year old daughter to my insurance plan?



Is there a better way to manage my stress?



Health & Wellness Programs

Can you help me understand what plan is best for me to enroll in?



Benefits Questions

Connecting with Your Accolade Health Assistant is easy



833-909-2353

Call toll-free Monday through Friday,
8:00 AM – 11:00 PM EST
Nurses also available after hours



member.accolade.com

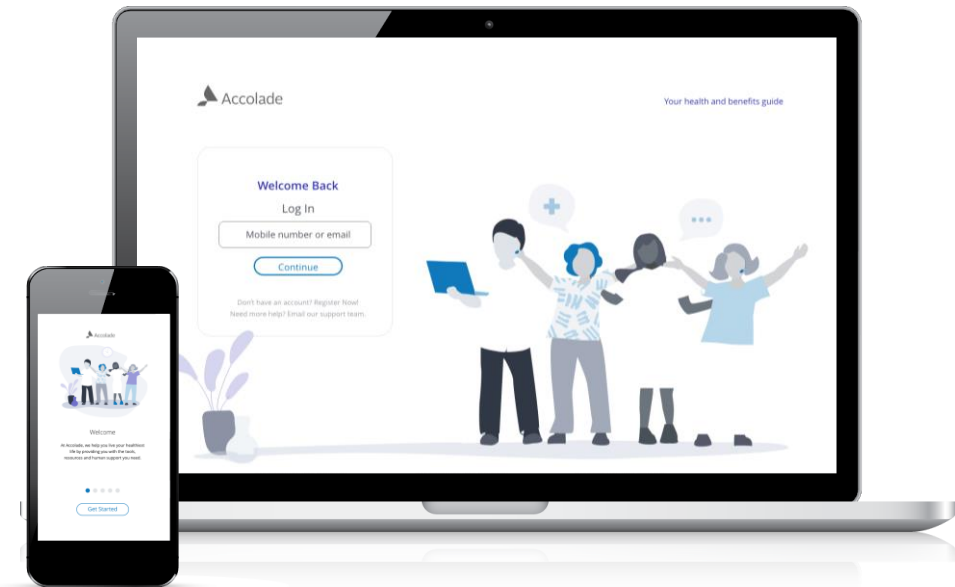
Send a secure message to
your Accolade Health Assistant or nurse



Accolade mobile app

Download on the App Store
or Google Play

Text PMC7 to 67793 to download the Accolade mobile app now!*



Same Two Plan Options For 2022

Health Center Plan

- Free primary physician care
- Provides copays for specialists and prescription drugs
- Maintains lower deductibles and out of pocket costs
- Pediatrics, obstetrics and mental health services continue with network physicians outside of health centers

Consumer Choice Plan

- High-deductible
- Health Savings Account (HSA) available to allow people to save for health costs on a pre-tax basis
- Members will be able to use the health centers at a discounted rate

All **preventive** care, including mammograms and colonoscopies, are free to members on both the Health Center Plan and the Consumer Choice Plan

HEALTH CENTER PLAN DETAILS

(Free Primary Care)

Advantages of Using the Health Centers

EMPLOYEE HEALTH CENTERS established through Texas Health Resources (THR)

All services at the health centers and satellite locations are FREE

Sick visits available children ages 2 yrs old and up

Services open to all covered family members

Control quality of care

Unlimited Health Center office visits

Health Center Plan:

- ✓ Three health centers supported by five satellite locations in the North Texas area
- ✓ All members seen same or next day for sick appointments in Health Centers locations only
- ✓ Staffed with quality doctors, physician assistants and nurse practitioners
- ✓ No mandatory referrals required
- ✓ Appointments are scheduled, walk-ins or no shows are not acceptable

Physician Network



Primary Care

➤ Primary Care (Family Medicine, Internists, OB/Gyn, Pediatricians)

- All Health Center services are FREE
- All other Primary Care Providers = \$60 co-pay

➤ Specialists (All other physicians) = \$75 co-pay

➤ Find a provider = www.aetna.com

- Aetna Choice Point of Service II Open Access Network



CONSUMER CHOICE PLAN DETAILS

(HSA Tax Savings Benefit)

Consumer Choice Plan



Physicians Network

- Full access to Aetna Choice Point of Service II Open Access Network
- No referrals needed for specialists
- Can still use the Health Center at a reduced cost



Co-pay/Co-insurance

- Deductible \$2,800 individual/\$5,400 family
- Out of pocket maximums remains at \$6,550 individual/\$13,000 family
- Pharmacy – deductible, then 20% co-insurance up to Out-of-Pocket maximum



Contributions

- City contributes \$540/\$1,000
- Premiums lower than Health Center Plan

Health Savings Accounts

- ✓ Pre-tax dollars to pay for out-of-pocket health care expenses
 - You own the account
 - No documentation needed
 - Grow your account through investments
- ✓ Funds rollover from year to year
- ✓ Doubles as a retirement account
 - Withdrawal funds without a penalty at age 65 for non-medical expenses (taxes apply)



2021 Summary of Medical Plan Benefits

Plan Features	Health Center Plan	Consumer Choice Plan
Annual Deductible		
· Individual	\$1,500	\$2,800
· Family	\$3,000	\$5,400
Total Out of Pocket Max – including deductibles, copays, coinsurance, prescription deductible, prescription copays		
· Individual	\$6,000	\$6,550
· Family	\$12,000	\$13,000
Physician Office Visit		
· PCP (At Health Center)	\$0 copay	\$60 per visit
· PCP	\$60 copay	20% after deductible
· OBGYN/Peds	\$60 copay	20% after deductible
· Specialist	\$75 copay	20% after deductible
Emergency Room visits – for true emergencies only	\$300 copay (waived if admitted)	20% after deductible
Surgeries through Surgery +	Covered 100%	Covered 100% after deductible

Convenient Care Clinic:

Health Center Plan = \$30

Consumer Choice Plan =
20% after deductible

Urgent Care:

Health Center Plan = \$75

Consumer Choice Plan = 20%
after deductible

Non-emergency use of
emergency rooms will be:

Health Center Plan =
\$300 then 50% after deductible

Consumer Choice Plan =
50% after deductible

Virtual Visits are free on the
Health Center Plan and low cost
on the Consumer Choice Plan

New Programs!

New Programs



Hello Heart

- Track your blood pressure
- Connects to an app to provide your doctor your numbers



2nd MD

- Second Opinion Service when diagnosed with a difficult medical condition
- Virtual appointments with top of the line specialists nationwide
- Covered 100% for both the Health Center and Consumer Choice Plans.



Hinge Health

Hinge Health

- Virtual Physical Therapy
- Connect with a provider via an app
- Covered 100% for both Health Center and Consumer Choice Plans

PHARMACY PLAN

OptumRx



Pharmacy Benefits - OptumRx

Health Center Plan

- \$100 Deductible, then Coinsurance
- Maintenance Medications through Walgreens (retail) or
- Select90 Program for Maintenance Medications

Consumer Choice Plan

- **Deductible, then Coinsurance**
- Medications through Walgreens (retail)
- Select90 Program for Maintenance Medications

Mail Order

- OptumRx Mail Order
- 90 day supply

Health Center Pharmacy Plan

	Retail	Mail Order/Select 90
Generic	20% coinsurance, \$10 min/\$20 max	20% coinsurance, \$25 min/\$50 max
Brand Formulary	20% coinsurance, \$30 min/\$50 max	20% coinsurance, \$75 min/\$125 max
Brand Non-Formulary	20% coinsurance, \$50 min/\$70 max	20% coinsurance, \$125 min/\$175 max
Specialty	20% coinsurance, \$200 max	20% coinsurance, \$200 max

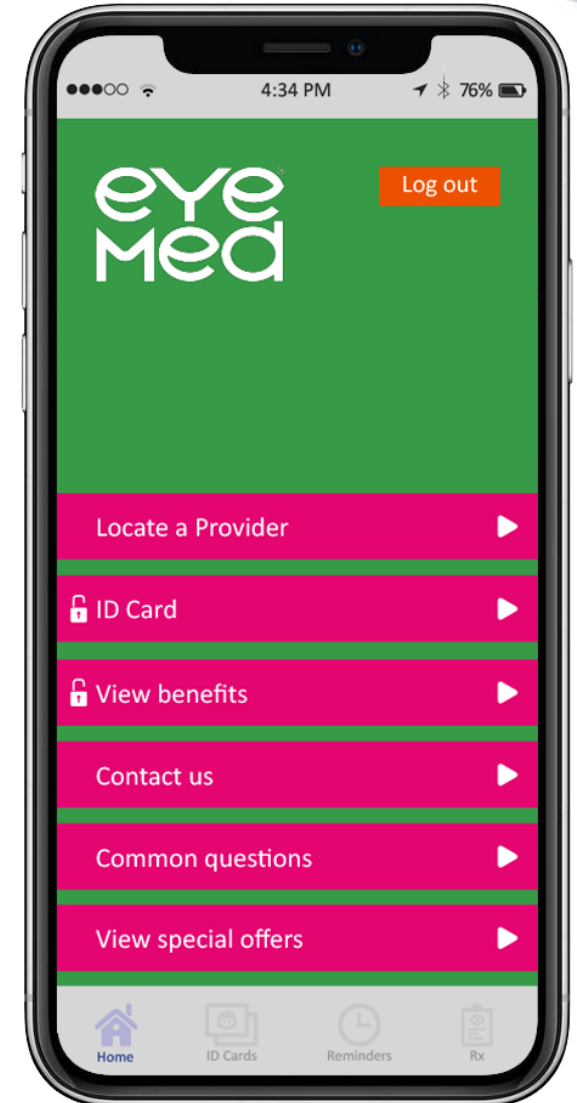
- \$100 deductible
- Maintenance medications still obtained through mail order or Walgreens

VISION PLAN

EYEMED

Vision Plan Highlights

- **Exam \$10 copay**
- **Frames \$130 frame allowance + 20% discount over \$130 every 24 months**
- **Lenses – \$20 copay for single, bifocal, trifocal and lenticular**
 - Various copays for progressive tiers
 - Various copays for reflective coating
 - Every 12 months
- **Contacts \$125 allowance + 15% discount over \$125**
 - Every 12 months
- **Rates range from \$3.00 per check for individual to \$8.82 per check for family**



WELLNESS PROGRAM

Virgin Pulse

Wellness Program



Main Program – Premium Incentive

- Complete a Member Health Assessment (MHA) questionnaire
- Complete the Tobacco Affidavit or Alternative (TOB)
- Obtain Annual Physical, and submit the Physician Screening Form (PSF)
- \$0-\$100/Month on Premium



Purpose of Program

- Know your numbers
- Have a relationship with a health care provider who knows you
- Better insure gaps in care are addressed

Go to www.fortworthtexas.gov/departments/hr/employees/wellness

Weight Loss Management Programs



Please Note:

Retirees can only enroll in one of the weight loss programs at a time

Specific Enrollment Periods Enroll Online

Learn how to lose weight and improve your health while eating the foods you love. You don't have to starve yourself or count calories to lose weight and keep it off forever.

Weightwatchers Reimagined Enroll online anytime

Easy online app allows you to track food, activity and weight anytime.

Database of online recipes

Weight Watchers coach available
24/7

Online community to provide support

SURGERYPLUS

(Option for Non-Emergent Surgeries)



Most Common Procedures

Over Hundreds of Non-Emergent Procedures are Covered

Knee:

- Knee Replacement
- Knee Replacement Revision
- Knee Arthroscopy
- ACL/MCL/PCL Repair

Hip:

- Hip Replacement
- Hip Replacement Revision
- Hip Arthroscopy

Shoulder:

- Shoulder Replacement
- Shoulder Arthroscopy
- Rotator Cuff Repair
- Bicep Tendon Repair

Others
Bariatric
Hernia
Hysterectomy

Spine:

- Laminectomy / Laminotomy
- 360 Spinal Fusion
- Artificial Disk

Wrist & Elbow:

- Elbow Replacement
- Elbow Fusion
- Wrist Fusion
- Wrist Replacement
- Carpal Tunnel Release

Foot & Ankle:

- Bunionectomy
- Hammer Toe Repair
- Ankle Arthroscopy
- Ankle Replacement



To learn more, call the City of Fort Worth's dedicated line at
1-855-200-9508 or visit cfw.surgeryplus.com

DENTAL PLANS

Provider Delta Dental

Delta Dental Benefits – DPPO

	Dental PPO (DPPO)	
	DDPO - Low Option*	DPPO - High Option
Deductible	\$50 per person/ \$150 per family	\$50 per person/\$150 per family
Annual Maximum	\$1,000 per person	\$2,000 per person
Provider	Unlimited - PPO Network available	Unlimited - PPO Network available
Preventive & Diagnostic Care	Plan pays 100% with no deductible	Plan pays 100% with no deductible
Basic Restorative Care	Plan pays 50%	Plan pays 80%
Major Restorative Care	Plan pays 50%	Plan pays 50%
Orthodontia	Plan pays 50%	Plan pays 50%

*You may be balance billed for going to a non-Delta Dental PPO network dentist. You will be billed the difference between the PPO fee and the Delta Dental Premier dentist fee or the Out-of-Network dentist fee.

Delta Dental Benefits - DHMO

	DeltaCare Prepaid (DHMO)
Deductible	None
Annual Maximum	None
Provider	Member must use participating provider
Preventive & Diagnostic Care	You pay fixed copayments according to the plan's schedule of benefits
Basic Restorative Care	You pay fixed copayments according to the plan's schedule of benefits- Specialist referral is required under this plan.
Major Restorative Care	You pay fixed copayments according to the plan's schedule of benefits- Specialist referral is required under this plan.
Orthodontia	You pay fixed copayments according to the plan's schedule of benefits

HELP/COMMUNICATIONS

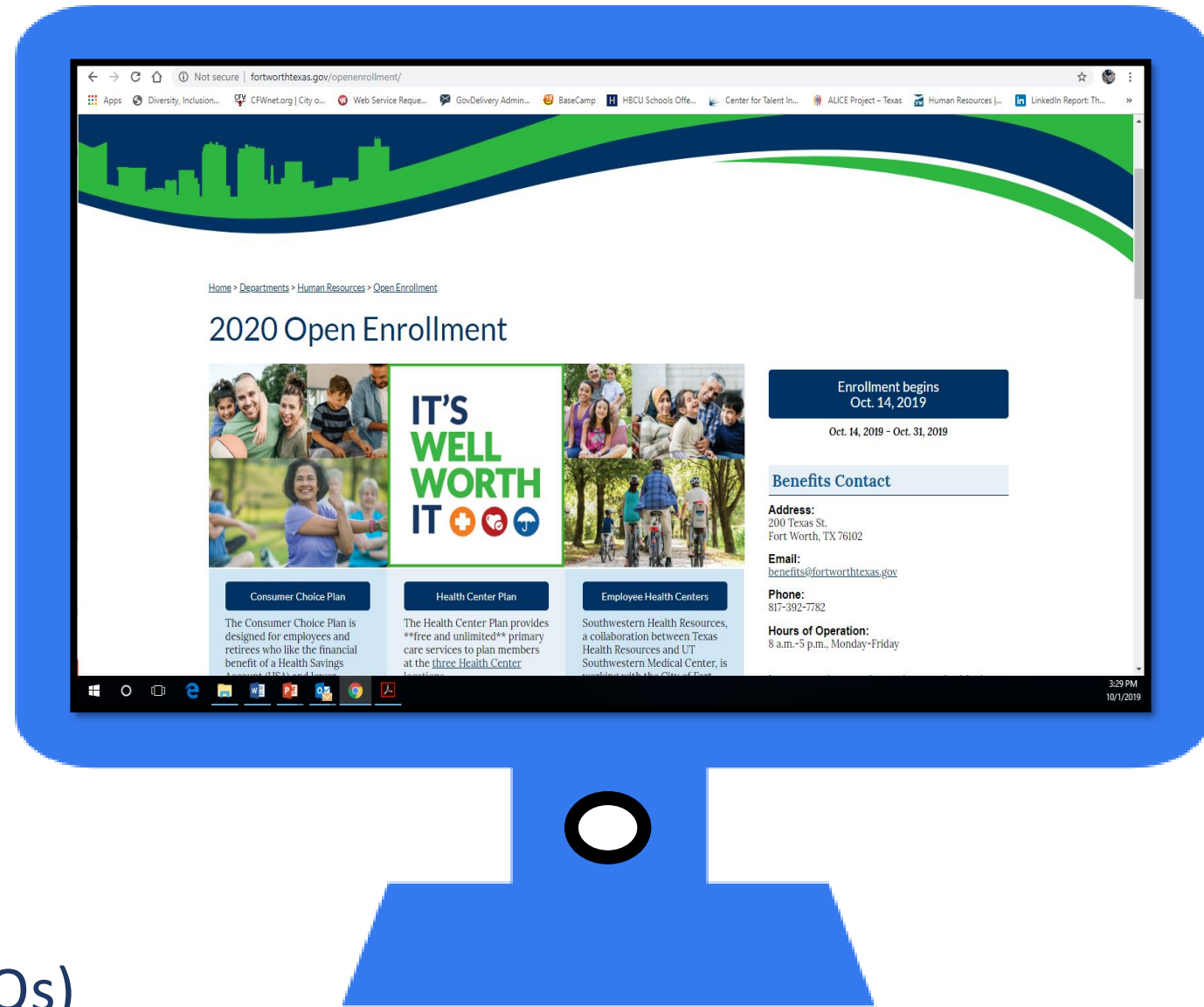
WHERE TO FIND MORE INFORMATION

Go online to the Open Enrollment page

On the city's webpage you can learn more about:

- ✓ Plan Comparisons
- ✓ Plan Design
- ✓ Open Enrollment Meeting Dates
- ✓ Healthcare Vendors
- ✓ Frequently Asked Questions (FAQs)

<https://www.fortworthtexas.gov/departments/hr/employees/openenrollment>



HOW TO ENROLL ONLINE



At home

Or at work



Online Enrollment

- ✓ Enroll from any desktop or laptop:

www.cfwbenefits.com

- ✓ Upload proof documents online – birth certificates, marriage license, etc.

- ✓ Online enrollment help available:

- Kiosk in HR Benefits Office: Monday -Friday
8:00 AM – 5:00 PM
- See your Human Resources Coordinator (HRC)

City of Fort Worth HR Benefits Office

200 Texas Street, Fort Worth, TX 76102

City Hall, Lower Level

817-392-7782 phone

817-392-2624 fax

Accolade at 833-909-2353

benefits@fortworthtexas.gov

QUESTIONS

