

### City-wide Retiree Open Enrollment Meetings

Meeting Dates	Groups	Meeting Time	Meeting Location	
October 9, 2019	Non-Medicare Retirees	2:00pm - 3:00pm	Botanic Gardens Lecture Hall 3220 Botanic Gardens Blvd.	
October 14, 2019	Medicare Retirees	9:30am - 10:30am		
October 14, 2019	Non-Medicare Retirees	1:30pm - 2:30pm		
October 15, 2019	Medicare Retirees	10:00am - 11:00pm		

### **CONTACTS**

### City of Fort Worth Benefits Office

Phone: 817-392-8644 Fax: 817-392-2624

http://fortworthtexas.gov/benefits/medicare/Benefits Retirees@fortworthtexas.gov

#### Δetna

Aetna Medicare Member Services: 888-267-2637 Vision Discount Program: 800-793-8616

**HearPO**: 888-432-7464 **GlobalFit**: 800-298-7800

**457 Plan TIAA Deferred Compensation**: 800-842-2252
www.tiaa.org/fortworth

### **Retirement Fund**

Fort Worth Employees Retirement Fund 817-632-8900 www.fwretirement.org

### **Aetna Website**

www.aetna.com

- Check claims.
- Find doctors.
- Access your health records.
- Cost calculator
- Discount programs

### Aetna Mobile

With Aetna Mobile, you can download an application to your smartphone that allows you to:

- Pull up your medical ID card information.
- Get estimated costs of prescriptions.
- Locate doctors and specialists in your area.
- Search claims.
- Check benefits and coverage information.

### **Delta Dental**

DPPO 800-521-2651; www.deltadentalins.com DHMO 800-422-4234; www.deltadentalins.com

### **About This Document**

This document describes the benefit plans available to you as a retiree of the City of Fort Worth. The details of these plans are contained in the official plan documents, including some insurance contracts. This guide is meant only to cover the major points of each plan. It does not contain all of the details that are included in your Summary Plan Description (SPD).

If there is ever a question about one of the plans, or if there is a conflict between the information in this guide and the formal language of the plan documents, the formal wording in the plan document will govern.

Please note that the benefits described in this guide may be changed at any time and do not represent a contractual obligation on the part of the City of Fort Worth.

Get the facts at

## FortWorthTexas.gov/OpenEnrollment

and be sure to attend the Open Enrollment meetings to learn everything you need to know about the 2020 health plan changes.



CITY OF FORT WORTH HUMAN RESOURCES
BENEFITS DIVISION
200 TEXAS STREET, FORT WORTH, TX 76102
HR BENEFITS TEAM CAN BE CONTACTED AT
817-392-7782, FAX # 817-392-2624

# GET COVERED, STAY COVERED.

No Action Required for Health Plan if Already on the Medicare Advantage Plan. Dental Benefit Options Have Changed for 2020. Must make a Dental Selection if currently on the DHMO Low Plan.





Open Enrollment is from October 14<sup>th</sup> to October 31<sup>st</sup>, 2019. Go online to www.FortWorthTexas.gov/OpenEnrollment to get more detailed information and enroll online.

### **RETIREE HEALTHCARE PLAN HIGHLIGHTS FOR 2020**

### 2020 Plan Highlights

The City of Fort Worth is proud to continue offering the Medicare Advantage plan to all retirees 65 years or older for the 2020 plan year. The city will also continue to offer the Medicare Advantage plan with no monthly premium to retirees hired prior to 1988 or retirees with 25 years or more of service. The plan offers medical and prescription benefits as well as the following:

- NEW vision plan offered in 2020 through EyeMed
- Free membership in Silver Sneakers.
- \$200 reimbursement for eyewear every 24 months. Call Vision Discount Program at 800-793-8616.
- \$2,000 Hearing Aid reimbursement once every 36 months. Call 888-432-7464 for assistance. Centers for Medicare and Medicaid Services (CMS) requires Aetna to send communications to MAPD (Medicare Advantage with Prescription Drug Plan) members; however a large portion of those communications only apply to individual plan coverage — not to your group-plan coverage. For example, only the totals shown for the amount of your prescription cost that would make you eligible for the "donut hole" here; ignore any reference to you paying an amount other than the copay when you do enter the "donut hole."
- 95% medical benefit coverage
- \$100 deductible for pharmacy

The Benefits Office encourages you to review your benefit options carefully. Open enrollment is in place if you are making plan changes. If you do not have computer access, you will need to submit an enrollment form. Enrollment forms mailed in must be POSTMARKED by October 31, 2019. This includes any dental plan changes or adding a spouse or dependent to your plan.



Medical Benefits at a Glance (Your cost)				
Medicare Advantage with Prescription Drug Plan (MAPD)	Medicare 100 ESA PPO In Network and Out of Network			
Annual Deductible Individual/Family	None			
Annual Out-of-Pocket-maximum (Excluding Deductible) Individual Your coinsurance	\$1,000 5%			
Physician Services Office Visits PCP Office Visits Specialist Independent Diagnostic Lab & X-Ray Services Preventive Office Visits Annual Visits: OB-GYN, mammogram, PSA	5% coinsurance 5% coinsurance 5% coinsurance \$0			
Colonoscopy - Initial Screening 1 screening every 12 months for individual age 50 & over	\$0			
Hospital Services Inpatient hospitalization Outpatient Facility	\$250 copay 5% coinsurance			
Emergency Services Emergency Room Urgent Care	\$50 copay \$35 copay			
Mental Health Inpatient hospitalization Outpatient Facility (per visit)	\$250 copay 5% coinsurance			
Durable Medical Equipment (DME)	5% coinsurance			
Prescriptions Annual Deductible Individual/Family Generic/Preferred/ Nonpreferred Retail (30-day supply) Mail Order (90-day supply)	\$100 per person \$10/\$30/\$50 \$25/\$75/\$125			
Only three denta offered in 2020:	20% to max \$200			
DPPO High     DPPO Low     DHMO High.				

### NO COVERAGE

If you choose to drop your medical coverage you cannot re-enroll in medical through the City again.

### **Dental Benefits at a Glance**

	DeltaCare (DHMO)	Dental PPO (DPPO)	
	DHMO Option	DPPO - Low Option	DPPO - High Option
Deductible	None	\$50 per person \$150 per family	\$50 per person \$150 per family
Annual Maximum	None	\$1,000 per person	\$2,000 per person
Provider	Member must use participating provider.	Unlimited PPO Network available	Unlimited PPO Network available
Preventive & Diagnostic Care	You pay fixed copayments according to the plan's schedule of benefits.	Plan pays 100% with no deductible.	Plan pays 100% with no deductible.
Basic Restorative Care	You pay fixed copayments according to the plan's schedule of benefits. Specialist referral is required under this plan.	Plan pays 50%	Plan pays 80%
Major Restorative Care	You pay fixed copayments according to the plan's schedule of benefits. Specialist referral is required under this plan.	Plan pays 50%	Plan pays 50%
Orthodontia	You pay fixed copayments according to the plan's schedule of benefits.	Plan pays 50%	Plan pays 50%
Lifetime Maximum	None	\$1,000 Dependent Children to age 26 and Adults	\$1,500 Dependent Children to age 26 and Adults
Implants	Not Covered	Plan pays 50%	Plan pays 50%
Additional Information		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 Out-of-Network dentist fee.	You may be balance billed for going to a non-Delta Dental network dentist.

### **Dependent Eligibility**

Retiree's spouse, common-law spouse, a natural child, foster child, stepchild, grandchild, legally adopted child or child under the retiree's legal guardianship or custodianship.

### **Dependent Certification**

In order to add any dependents to the dental plan, you need to supply Benefits with the required forms of proof of relationship status. For children, this is typically their birth certificate. For spouse this would be a marriage certificate and last year's tax return. For additional acceptable documentation, please go to http://fortworthtexas.gov/benefits/medicare/.