



CITY-WIDE RETIREE OPEN ENROLLMENT MEETINGS

Meeting Dates	Groups	Meeting Time	Meeting Location
October 14, 2020	Non-Medicare Retirees	9:00 am – 10:00 am	Will Rogers Round Up Room - In Person
	Medicare Retirees	11:00 am – 12:00 pm	
	Non-Medicare Retirees	3:00 pm – 4:00 pm	
October 29, 2020	Non-Medicare Retirees	9:00 am – 10:00 am	Will Rogers Round Up Room - In Person
	Non-Medicare Retirees	1:00 pm – 2:00 pm	
	Medicare Retirees	3:00 pm – 4:00 pm	

Meeting Dates	Groups	Meeting Time	Meeting Location
October 13, 2020	Non-Medicare Retirees long program	9:00 am – 10:00 am	Virtual Meetings
	Medicare Retirees	11:00 am – 12:00 pm	
October 22, 2020	Medicare Retirees	10:00 am – 11:00 am	
	Non-Medicare Retirees short program – changes only	3:00 pm	
October 21, 2020	Non-Medicare Retirees short program – changes only	10:00 am	Note: The password for the virtual meetings is “2021”

CONTACTS

City of Fort Worth Benefits Office
Phone: 817-392-8644
Fax: 817-392-2624
Email: benefits@fortworthtexas.gov

Aetna
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

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

There are no changes to the Medicare Advantage, dental or vision plans. If you are not making any changes, you do not need to attend a meeting.

FORT WORTH
CITY OF FORT WORTH HUMAN RESOURCES
BENEFITS DIVISION
200 TEXAS STREET, FORT WORTH, TX 76102
HR BENEFITS TEAM CAN BE CONTACTED AT
817-392-8644, FAX # 817-392-2624

2021



No Action Required for Health Plan if Already on the Medicare Advantage Plan. Dental Benefit Options are staying the same for 2021.

Open Enrollment begins
OCT. 19th - NOV. 6th

Go online to www.FortWorthTexas.gov/OpenEnrollment to get more detailed information.

RETIREE HEALTHCARE PLAN HIGHLIGHTS FOR 2021

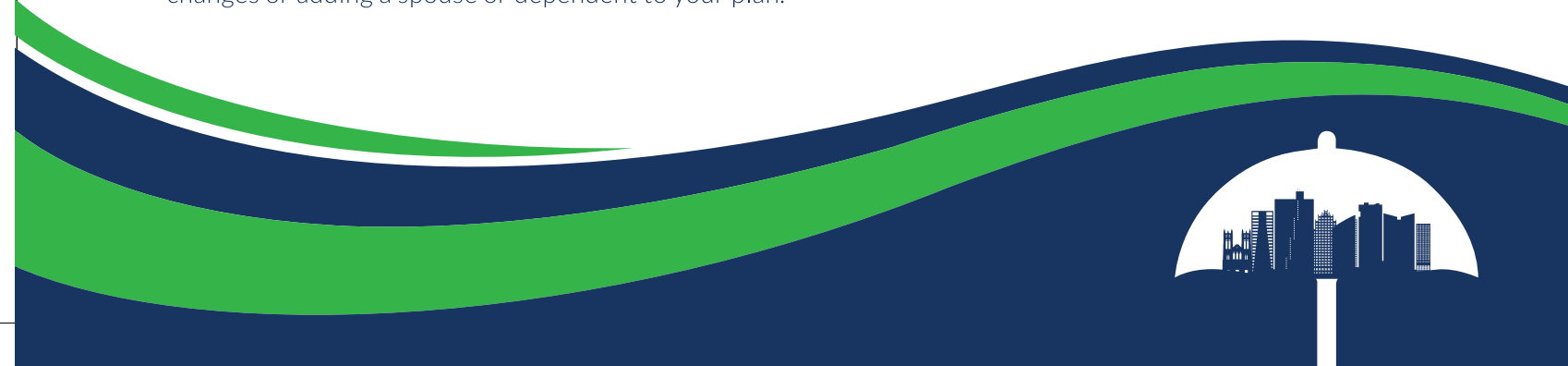


2021 PLAN HIGHLIGHTS

The City of Fort Worth is proud to continue offering the Medicare Advantage plan to all retirees 65 years or older for the 2021 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:

- **Vision plan offered in 2021 through EyeMed**
- \$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 November 6, 2020. This includes any dental or vision 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) Specialty Pharmacy	\$100 per person \$10/\$30/\$50 \$25/\$75/\$125 20% to max \$200

NO COVERAGE

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



Only three dental plans offered in 2021:

- DPPO High
- DPPO Low
- DHMO

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%

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/>.