# 2023 City of Houston COBRA Continuance Open Enrollment Guide

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## **MEDICAL PLANS**

City of Houston offers you three (3) unique medical plans. All plans include preventive care services and a four-tier prescription drug plan. Full-time and part-time employees who consistently worked 30 or more hours per week over the past 12 months are eligible for benefits. The three (3) plans offered are the Cigna Open Access, the Cigna Limited Network, and the Consumer-Driven Health Plan (CDHP).

- Cigna Open Access Under the Open Access plan you will be able to visit any of the more than 572,800 providers in Cigna's national network, but only true\* emergency services are available out-of-network. This is the most expensive option.
- **Cigna Limited Network** Under the Limited Network Plan, all your medical care comes from one of three provider groups Kelsey-Seybold, Renaissance or Village Medical. This is the middle-of-the-road option.
- Consumer-Driven Health Plan (CDHP) The CDHP plan offers the same broad network as the Cigna Open Access plan, plus access to out-of-network services at higher deductibles and coinsurance as well as a Health Reimbursement Account. This is the least expensive option.

## **MEDICAL PLAN RATES**

| Medical Plan: Monthly COBRA Premiums* |                                       |                         |                  |
|---------------------------------------|---------------------------------------|-------------------------|------------------|
| Tier                                  | Consumer-Driven<br>Health Plan (CDHP) | Limited<br>Network Plan | Open Access Plan |
| Employee Only                         | \$570.57                              | \$634.62                | \$826.36         |
| Employee + Children                   | \$1,074.96                            | \$1,201.97              | \$1,575.49       |
| Employee + Spouse                     | \$1,294.91                            | \$1,454.23              | \$1,907.97       |
| Employee + Family                     | \$1,954.59                            | \$2,209.75              | \$2,906.18       |

\*Medical Rates include a 2% COBRA Administration Fee.

## **MEDICAL PLAN COMPARISON**

| Plan features                       | Consumer-Driven Health Plan   |  | Limited Network   |  |  |
|-------------------------------------|---|--|---|--|--|
| Plan realures                       | In Network Out-of-Network   |  | Plan  | Open Access Plan   |  |
| Plan Year                           | May 1 - April 30  | May 1 - April 30                       | May 1 - April 30  | May 1 - April 30   |  |
| Medical Service<br>Deductible       | Individual \$1,750<br>Family \$3,500  | Individual \$3,500<br>Family \$7,000   | Individual \$200<br>Family \$600  | Individual \$850<br>Family \$1,700   |  |
| Plan Year<br>Out-of-Pocket Max      | Individual \$8,700<br>Family \$17,400   | Individual \$17,400<br>Family \$34,800 | Individual \$8,700<br>Family \$17,400   | Individual \$8,700<br>Family \$17,400  |  |
| Prescription Plan<br>Deductible     | Yes. Combined medical and pharmacy deductible,<br>except for certain preventive medications which are<br>not subject to deductible. |  | Individual \$150<br>Family \$450 (except for certain<br>preventive medications which<br>are not subject to deductible.) | No   |  |
| Health<br>Reimbursement<br>Account  | Yes. The City pays the first \$500 to \$1,000 depending<br>on coverage tier.  |  | No  | No   |  |
| Network Options                     | Includes Cigna's national network<br>Out-of-network services provided with higher<br>co-insurance and deductibles.                  |  | Choose from one of<br>the provider groups.<br>Only true emergencies* are<br>covered out of the provider<br>group.       | Includes Cigna's national<br>network.<br>Only true emergencies* are<br>covered out of network. |  |
| РСР                                 | 20%<br>after deductible is met  | 40%<br>after deductible is met         | \$35  | \$40   |  |
| Specialist                          | 20%<br>after deductible is met  | 40%<br>after deductible is met         | \$65  | Tier I Specialist \$65<br>Non-Tier 1 Specialist \$80   |  |
| Outpatient surgery                  | 20%<br>after deductible is met  | 40%<br>after deductible is met         | \$350 per surgery<br>Maximum of \$700 per plan<br>year after deductible is met  | 30%<br>after deductible is met   |  |
| Inpatient facility                  | 20%<br>after deductible is met  | 40%<br>after deductible is met         | \$600 per day<br>Maximum of \$3,000 per plan<br>year after deductible is met  | 30%<br>after deductible is met   |  |
| Emergency room                      | 20%<br>after deductible is met  | 20%<br>after deductible is met         | \$400   | 30%<br>after deductible is met   |  |
| Urgent care<br>services             | 20%<br>after deductible is met  |  | \$65  | \$75   |  |
| Wellness Programs                   | Yes   | Yes                                    | Yes   | Yes  |  |
| Prescription Drug<br>Plan           | Yes   | Yes                                    | Yes   | Yes  |  |
| Employee<br>Assistance<br>Program** | Yes   | Yes                                    | Yes   | Yes  |  |
| Basic Life<br>Insurance**           | Yes   | Yes                                    | Yes   | Yes  |  |

\* A true emergency is when an illness or injury places a person's health or life in serious jeopardy and treatment cannot be delayed. Examples include difficulty breathing, chest pain, a head injury or ingestion of a toxic substance.

\*\* Available outside of Cigna medical insurance enrollment.

## PHARMACY PLAN

When it comes to filling your prescriptions, choice, convenience and cost are important to you. There are over 4,000 retail pharmacies in your network for 30-day prescriptions and 31,000 retail pharmacies for 90-Day prescriptions.

## **Free Medications**

**Preventive Generic Medications:** Preventive medications are used to prevent conditions like high blood pressure, high cholesterol, heart attack, stroke, diabetes, asthma, prenatal nutrient deficiency, etc. The City's prescription drug plan covers most of these medications at no cost to you. Go to myCigna.com website, app or call Cigna Express Scripts at 800-997-1406 to learn which medications are free. You can also use the Drug Cost tool to estimate costs of any medications that are not on the no cost list. **Medications:** The City's pharmacy plan covers prescription and over-the-counter smoking cessation and contraceptive products with no copay, coinsurance or deductible.

Patient Assurance Program: Certain preferred brand insulin drugs are eligible for a maximum copayment of \$25 for a 30-day supply and \$75 for a 90-day supply at participating in-network pharmacies.

| Pharmacy Plan Features Comparison   |   |                         |                                    |                              |
|---|---|-------------------------|------------------------------------|------------------------------|
| Pharmaqualan  | Consumer-Driven Health Plan   |                         | Limited Network                    |                              |
| Pharmacy plan –<br>features   | In Network  | Out-of-Network          | Plan                               | Open Access<br>Plan          |
| Prescription deductible   | Yes. Combined medical and pharmacy deductible,<br>except for certain preventive medications which are<br>not subject to deductible. |                         | \$150 individual / \$450<br>family | No                           |
| Retail Generic  | 20%   | Plan pays 80% after the | \$10 or cost                       | \$10 or cost                 |
| Retail Preferred  | Plan pays 80% after the   |                         | \$45                               | 20% (\$45 min/\$100 max)     |
| Retail Non-preferred  | deductible is met   | Plan pays 40% after the | \$60                               | 40% (\$55 min/\$150 max)     |
| Retail Specialty  | Specialty medications are 30-day supply only  | deductible is met       | \$100                              | 40% (\$100 min/\$300<br>max) |
| Free mail-order prescriptions<br>through Cigna Home Delivery<br>Pharmacy<br>Generic and preferred brand diabetes, asthma, blood pressure, osteoporosis, prenatal vitamins, cholesterol,<br>anxiety, depression, and bipolar related drugs and supplies. |   |                         |                                    |                              |

### No Cost Smoking Cessation and Contraceptive

## Participating Pharmacies: 30-day

- CVS/Target
- H-E-B Pharmacy
- Kelsey-Seybold
- Walgreens
- Walmart

Visit Cigna.com/Rx9onetwork to see a complete list of pharmacies in your network.

### Participating Pharmacies: 90-day

- CVS/Target
- Walmart

Visit Cigna.com/Rx9onetwork to see a complete list of pharmacies in your network.



## **VISION PLAN**

Eye health is another important component in your overall health. The City offers a stand-alone vision plan administered by Superior Vision.

| Vision Plan Biweekly Rates*   |  |  |  |
|---|--|--|--|
| Tier  | Superior Vision  |  |  |
| Employee only   | \$9.26   |  |  |
| Employee + children   | \$16.75  |  |  |
| Employee + spouse   | \$15.83  |  |  |
| Employee + family   | \$25.11  |  |  |
| Plan Features   |  |  |  |
| Plan year   | May 1 - April 30   |  |  |
| Annual routine eye exam   | \$20   |  |  |
| Yearly eyewear benefit for either eyeglasses or contact lenses  | \$25<br>\$150 retail allowance for frames<br>\$150 retail allowance for contact lenses |  |  |
| The following standard lens options are covered at 100 percent:<br>single vision, bifocal, trifocal, lonticular, progressives, high index,<br>polycarbonate, UV coating, photochromic, anti-reflective, scratch coat,<br>and tints. | Included in yearly eyewear benefit   |  |  |
| Lasik benefit \$300 toward cost of Lasik  |  |  |  |

\*Vision Rates include a 2% COBRA Administration Fee.



## **DENTAL PLANS**

#### Cigna Dental Care® (DHMO) Plan Facts

- No dollar maximums
- No deductibles
- Benefits start right away with no waiting periods
- No claim forms to file when using network dentists
- You will select a Cigna Dental Care network general dentist to manage all of your dental health care needs who will refer you to any network specialists. (Referrals are not required for pediatric dentists for children under age 7 and orthodontists.)

#### Total Cigna DPPO Plan Facts

- Freedom to visit any licensed dentist or specialist
- No specialty referrals required
- The plan will cover eligible dental expenses after you satisfy any applicable waiting periods and meet any deductibles
- The plan is based on coinsurance levels that determine the percentage of costs covered by the plan for different types of services

For more information or to enroll, visit cityofhoustonbenefits.org.



| Biweekly Dental Rates***   |  |   |  |
|--|--|---|--|
| Tier   | Cigna Dental Care <sup>®</sup> (DHMO)  | Total Cigna DPPO  |  |
| Employee only  | \$9.08   | \$34.41   |  |
| Employee + one   | \$22.01  | \$78.66   |  |
| Employee + two or more   | \$30.15  | \$107.71  |  |
| Plan Features  |  |   |  |
| Plan Year  | May 1 - April 30   | May 1 - April 30  |  |
| Service area   | Throughout the United States except for 13<br>states*  | Throughout the United States  |  |
| Annual maximum benefit   | No annual maximum benefit  | \$2,000 for Class I, II, & III Expenses   |  |
| Annual deductible  | No annual deductible   | \$50 per individual / \$150 per family  |  |
| Primary dentist referrals for specialty care   | Yes  | No  |  |
| Claim forms  | No   | In-Network: No / Out-of-Network: Yes  |  |
| Preventive services: Cleaning and oral examinations, bitewing X-rays   | Preventive services - \$0  | Class I Expenses: Plan pays 100%<br>No deductible   |  |
| Basic services**: Extractions, root canals, oral<br>surgery, restorative services (excluding gold<br>fillings) and periodontal scaling | Extraction, Coronal remnants: \$9<br>Periodontal scaling: \$14-\$24<br>Root canal therapy, molar:<br>Premolar — \$300 / Anterior - \$200 | Plan pays 80% after the deductible is met   |  |
| Major services**: Initial fixed bridgework, crowns and dentures, replacement of bridgework   | Crown, titanium : \$210 - \$300<br>Complete denture, maxillary: \$260 upper and<br>lower each  | Class III Expenses: Plan pays 50% after the deductible is met   |  |
| Orthodontic services**:<br>Covered services up to two years  | \$40.00 - \$1,080.00<br>Coverage provided for twenty-four (24)<br>months of active treatment.  | Class IV Expenses: Plan pays 50%<br>No Ortho Deductible<br>Lifetime Maximum: \$1,000<br>Children & Adults |  |

\*DHMO NOT available in Alaska, Maine, Montana, New Hampshire, New Mexico, North Dakota, South Dakota, Vermont, and Wyoming.

\*\* Refer to Cigna Dental Care Access DHMO Charge Summary and the Total Cigna DPPO Summary for more detailed information. You can find them online at cityofhoustonbenefits.org.

\*\*\*Dental Rates include a 2% COBRA Administration Fee.

## How to find out if your current dentist participates in a Cigna Dental Plan

- 1. Go to www.cigna.com
- 2. Select "Find a Doctor, Dentist or Facility" tab
- Under "How are you Covered?" select "Employer or School"
- 4. Enter address, city, or zip
- 5. Select "Doctor by Type"
- 6. Select "General Dentist" from drop down
- 7. Under "Please Select a Plan" enter address, city or zip after "I Live In" and choose continue.
- 8. Select either Cigna Dental Care Access or Total Cigna DPPO depending upon which type plan you are interested in.
- 9. Review list of dentists in the city you typed in.

## Your dentist not in the Cigna network?

To nominate a Dental Provider, you can submit a Dental Provider Nomination Form for contracting outreach. Forms are available at cityofhoustonbenefits.org or you can request one from the Cigna Pre-Enrollment Line at 800-401-4041.

### Important note

If you enroll in the DHMO, you are required to select a Primary Care Dentist (PCD). If your current dentist is not in the Cigna Dental Care Access (DHMO) network, you will be auto-assigned to a dentist near your zip code. After May 1, 2023, you may call Cigna at 800-997-1406 to select a different PCD from the Cigna network. PCD changes are effective the first of the following month.

## For more information

For detailed information, visit cityofhoustonbenefits.org to download PDFs:

- DPPO and DHMO FAQs
- Transition of Care FAQs
- Provider directories
- DPPO Orthodontics in Progress FAQs
- DHMO Orthodontics in Progress FAQs

## **Need help?**

If you need help choosing a dental plan, contact the pre-enrollment help line at 800-401-4041.





Dental insurance cards are dispersed to new enrollees and to current members that change to a different plan. Please note, the Dental Office/Dental Provider name is printed on the ID card Carrier and not on the actual ID card itself.



### **Retirement Benefits**

**Empower Retirement/Deferred** Compensation

713-426-5588 832-393-9062 877-313-7693 empower-retirement.com

**Houston Firefighters' Relief** and Retirement Fund 281-372-5100 hfrrf.org

**Houston Municipal Employees** Pension System 713-595-0100 hmeps.org

**Houston Police Officers Pension System** 713-869-8734 hpops.org

## For more information

For detailed information, visit cityofhoustonbenefits.org to download PDFs:

- FSA Eligible Expenses
- Card Experience •
- Web Experience
- Mobile Experience •
- **Dependent Care FSA Qualifications**

## **CONTACTS**

#### **City of Houston Benefits Division**

611 Walker, 4th Floor Houston, Texas 77002 832-393-6000 benefits@houstontx.gov retireebenefits@houstontx.gov cityofhoustonbenefits.org

#### **Cigna Medical**

800-997-1406 832-393-6191 832-393-6305 832-393-6193 cityofhoustonserviceinquiries@cigna.com myCigna.com



**Cigna Mental Health and Substance Abuse** 800-997-1406

Cigna Express Scripts Pharmacy for Mail Order 800-835-3784

#### Cigna Dental

myCigna.com

800-997-1406 myCigna.com

#### Employee Assistance Program (EAP)

832-393-6510 855-378-7485 TTY:711 employeeassistanceprogram@houstontx.gov guidanceresources.org Web ID: HOUSTONEAP

#### **Superior Vision**

800-507-3800 superiorvision.com



#### **Total Administrative Services** Corporation (HFSA & DCRP)

800-422-4661 tasconline.com

**Continental American Insurance Company** (Supplemental Insurance)

888-687-1883 www.wecareworks.com Wecare Case ID: A932 User ID: Your employee ID Password: Houston23

#### **Dearborn Life Insurance**

877-442-4207 ancillaryquestionsTX@bcbstx





















**City of Houston Benefits Division** 611 Walker, 4th Floor Houston, Texas 77002 832-393-6000 benefits@houstontx.gov cityofhoustonbenefits.org

