



2023 BENEFITS EMPLOYEE GUIDEBOOK

Hernando County Sheriff's Office
January 1, 2023 - December 31, 2023



SELECT THE BEST BENEFITS FOR YOU AND YOUR FAMILY.

The Hernando County Sheriff's Office strives to provide you and your family with a comprehensive and valuable benefits package. We want to make sure you are getting the most out of our benefits—that is why we have put together this *Employee Benefits Guidebook*.

Open enrollment is a short period each year when you can make changes to your benefits. This guide will outline all the available benefits, so you can identify which offerings are best for you and your family.

Elections you make during open enrollment will become effective on January 1, 2023. If you have questions about any of the benefits mentioned in this guide, please do not hesitate to reach out to Human Resources.

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Note: This booklet is a summary of coverage only; the summary plan description contains exclusions and limitations that are not shown here. Please refer to the summary of benefits (SBC) or call your plan administrator for further details into each plan.

WHO IS ELIGIBLE?

If you are a full-time employee or retiree at the Hernando County Sheriff's Office, you are eligible to enroll in the benefits outlined in this guide. In addition, the following criteria specify who is eligible for benefits:

- Dependent children are eligible for:
 - Medical and dental coverage to the end of the calendar year in which they reach age 30 without regard to marriage, student status, or financial dependence.
 - Vision coverage is to the end of the calendar year in which they turn 26, regardless of school status or living arrangements. However, if a dependent is disabled, they would be allowed to remain on the vision plan.
 - Voluntary life insurance coverage if an unmarried dependent child through age 20, or through age 24 if a full-time student; or unmarried children who are disabled and meet the criteria of a disabled child according to policy guidelines.
- Legal spouse
- Dual spouse: If both spouses are employed with HCSO, they cannot double cover each other on *any* plan.
- Retirees for Medicare: As you and/or your spouse near eligibility for Medicare Part A and Part B due to age (65) or disability, you should contact the Social Security Administration (SSA) about Medicare benefits. Enrollment in Medicare is time sensitive, and you may be subject to substantial financial penalties if you fail to meet federal deadlines. Contact your local SSA office or call 1-800-MEDICARE (633-4227) or visit on the web at www.medicare.gov for more information. TTY users call 877-486-2048.

ADDITIONAL INFORMATION

If you are an active employee with a dependent and Medicare, this plan will typically be primary to Medicare. You should inform your health care provider of all plans that you or your dependents have.

The information contained in this booklet is only a summary of coverage and is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Should there be differences between the information in the booklet and the contract, the contract will govern.



WHAT YOU NEED TO ENROLL

When it is time for you to enroll, you will need to have the following items on hand:

- A computer or tablet;
- Your MUNIS log-in Information;
- The names, Social Security numbers, dates of birth and addresses of any/all dependents that you may wish to enroll in one or more of the plans;
- If you are adding a new dependent to the medical or dental insurance plans, proof of dependent status (i.e., marriage certificate, birth certificate, court order); and,
- Name, relationship, date of birth and age for all beneficiaries.

VIRTUAL ENROLLMENT PROCESS

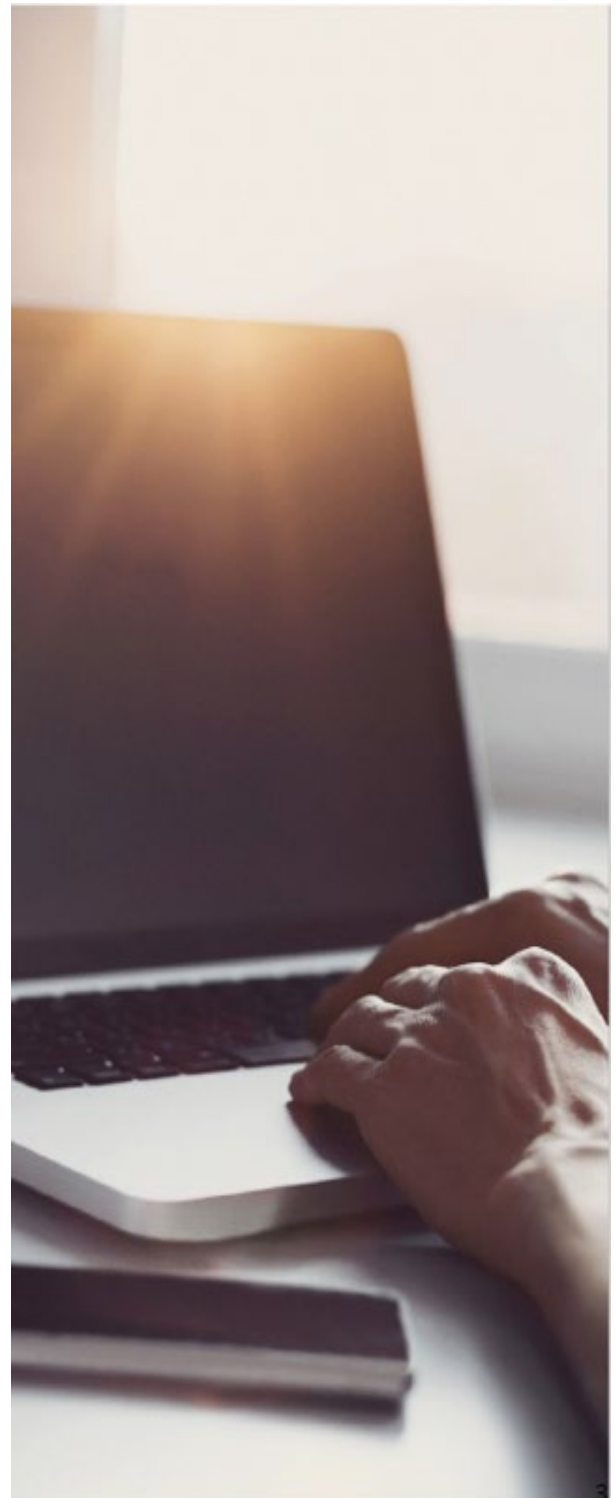
Every employee or retiree will have the option to self-enroll in medical, dental, vision, and NEW Colonial voluntary benefits through MUNIS or over the phone with a knowledgeable benefit counselor.

Visit <https://flimp.live/hernandocounty> to learn more and schedule an appointment today. On the day of your scheduled enrollment, you will receive a phone call from a Colonial Life benefit counselor who can answer questions about all available Sheriff's Office benefits. Your benefit counselor will send you a link so you can sign into Global Meet in order to begin your virtual enrollment session.

If you need help enrolling using the MUNIS enrollment platform or want to learn more about the medical, dental, vision plans or the NEW Colonial voluntary benefits, they will assist. Look for important emails on how to schedule your enrollment session with a counselor.



Scan the QR code with a smartphone or tablet to access MUNIS online and enroll in benefits today!





WHAT'S NEW FOR 2023

You will find some positive changes to your benefits plans for the upcoming plan year!

- **GREAT NEWS!** Premiums will remain the same for medical, dental, and vision insurance.
- **NEW** – New York Life Insurance will take over as your life and disability insurance provider. Active employees can elect up to \$150,000 of voluntary life insurance at *guaranteed issue!* No medical underwriting required.
- **NEW** – An Employee Assistance Program offered through Cigna with access to certified counselors offering five free sessions, *per instance*, in 2023.
- Retirees will see a slight reduction in the premiums for Retiree-only and Retiree & Spouse coverage on Blue Options PPO plan 5782.
- Florida Blue Medical will continue offering two medical PPO plans, 3766 and 5782, with a few changes.

WHEN TO ENROLL

Open enrollment begins on **October 3, 2022 and runs through October 14, 2022**. We will have a virtual open enrollment meeting on Monday, **October 3, 2022**, to review all the benefits available for 2023: one morning session from 10:00 am – 1:30 pm and one evening session from 6:00 pm – 9:30 pm.

On **October 5, 2022**, we will have an in-person Benefits Fair at the Jerome Brown Center from 8:00 am to 6:00 pm. Carrier representatives and HR will be on hand to help you complete your enrollment. **Remember:** The benefits you choose during open enrollment will become effective **January 1, 2023**. If you'd like a one-on-one session to review your benefits, schedule a virtual enrollment appointment with a Colonial Life benefit counselor by visiting <https://flimp.live/hernandocounty>.

TAKING ADVANTAGE OF PRE-TAX BENEFITS

HCSO has put into place a Section 125 Pre-Tax Plan. Certain coverages you contribute to are deducted from your paycheck on a pre-tax basis to save you money. The IRS stipulates that when you elect to have your deductions taken out with pre-tax dollars, you also agree to remain in the benefit plan of your selection for one full year, unless you experience a life-changing qualifying event. *You must notify Human Resources in writing within 30 days of the qualifying event and provide appropriate documentation.*

Examples of qualifying events include the following:

- Marriage, divorce, or legal separation;
- Birth or adoption of a child;
- Change in child's dependent status;
- Death of a spouse, child, or other qualified dependent; or,
- Change in employment status or a change in coverage under another employer-sponsored plan.

HEALTH INSURANCE

You will find changes to your benefits plans for the upcoming plan year!

	My Health Onsite Employee Wellness Center	Blue Options 3766	Blue Options 5782
In-Network Services	<i>As of Jan. 1, 2023</i>		
Physician Services: Virtual Visit/PCP/SP Visit	All Provider Services Free with \$0 Copay	\$0 /\$25/\$50 Copay	\$0/\$35/\$50 Copay
Urgent Care	\$0 Copay	\$50 Copay	\$50 Copay
Deductible (Individual/Family)	No cost to you.	In-Network: \$0 / \$0 Out-of-Network: \$500 / \$1,500	In-Network: \$1,800 / \$3,500 Out-of-Network: \$4,000 / \$8,000
Coinsurance (Individual/Family)		In-Network: 80% / 20% Out-of-Network: 50% / 50%	In-Network: 80% / 20% Out-of-Network: 50% / 50%
Maximum Out-of-Pocket Limit (Individual/Family)	N/A	In-Network: \$2,500 / \$5,000 Out-of-Network: \$5,000 / \$10,000	In-Network: \$3,500 / \$5,000 Out-of-Network: \$7,000 / \$14,000
Hospitalization In-Patient	N/A	\$600 Copay	\$500 Copay
Hospitalization Out-Patient	N/A	\$0 Copay – Surgical Center \$400 Copay – OP Hospital	\$0 Copay – Surgical Center \$400 Copay – OP Hospital
Lab Services & Simple X- Ray's	\$0 Copay	\$0 Copay	\$0 Copay
Emergency Room	N/A	\$300 Copay	\$400 Copay
Hearing Benefits (In-Network Only)	N/A	\$300 Per Plan Year	\$500 Per Plan Year
Prescription Drugs - Generic - Preferred - Non-preferred - Specialty Medications	Generic Prescriptions are free! No cost to you.	Prescription Copays: \$10 Copay \$25 Copay \$40 Copay \$50 Copay per month	Prescription Copays: \$10 Copay \$25 Copay \$40 Copay \$50 Copay per month

Note: This is a summary of coverage only; the summary plan description contains exclusions and limitations that are not shown here. Please refer to the summary of benefits (SBC) or call your plan administrator for further details.



AMAZON PHARMACY

Amazon Pharmacy offers a home delivery service that lets you easily order and quickly get your non-specialty prescription medication delivered at home.

And as a Florida Blue member, you get access to MedsYourWay™ prescription drug discount card pricing. The prescription discount card gives you up to 80% savings on name brand and generic medicines and is seamlessly built into the Amazon Pharmacy experience. You can get the lowest cost available while saving time and money. Using the MedsYourWay discount card is not insurance; however, using it for covered medications will also count toward your out-of-pocket maximum.



SHOP Easy to use

Amazon Pharmacy makes ordering your medications easier because it's like shopping on Amazon:

- Easy sign up, which includes the option to have your account auto-populated with your prescription history.
- Option for 90+ day supply.
- Pharmacists on call 24/7.
- Ability to manage your medication and order history.



SAVE Built-in drug discount card

Some drugs may be available at lower prices with a discount card. MedsYourWay discount pricing is built right into the Amazon Pharmacy experience.

- At check out, you'll see the lowest cost available for your medication. That's the price you'll pay.
- MedsYourWay discount card pricing is not insurance; however, all prescribed and covered purchases, whether paying a copay or using the discount card pricing, automatically count toward your annual out-of-pocket maximum.



SHIP Convenient home delivery

Skip the pharmacy line with home delivery.

- Fast delivery: Amazon Prime members get 2-day no-cost shipping on most orders; standard no-cost shipping for non-Amazon Prime members is 5-day but can be expedited to 2-day delivery for an additional fee.
- Real-time package tracking from order to delivery.

AMBULATORY SURGICAL CENTERS

Below is a list of in-network Ambulatory Surgical Centers in your area. Please utilize one of these out-patient facilities to take advantage of the \$0 copay versus visiting a hospital, where you will have a \$400 copay.

Ambulatory Surgical Center	Address	City	County
Citrus Endoscopy and Surgery Center	6412 W Gulf to Lake Hwy	Crystal River	Citrus
Citrus Surgery Center	110 N Lecanto Hwy	Lecanto	Citrus
Lecanto Surgery Center	3075 W Gulf to Lake Hwy	Lecanto	Citrus
Suncoast Endoscopy Center	3621 E Forest Dr	Inverness	Citrus
All Saints Surgery Center	11377 Cortez Blvd	Brooksville	Hernando
Florida Endoscopy and Surgery Facility	12900 Cortez Blvd Ste 103	Brooksville	Hernando
Florida Springs Surgery Center LLC	366 Beverly Ct.	Spring Hill	Hernando
Hernando Endoscopy and Surgery Center	12180 Cortez Blvd	Brooksville	Hernando
Mariner Surgery Center	5193 Mariner Blvd	Spring Hill	Hernando
Bayonet Point Surgery and Endoscopy Center	14104 Yosemite Drive	Hudson	Pasco
Florida Medical Clinic Special Procedures	38135 Market Sq.	Zephyrhills	Pasco
Heart & Rhythm Institute of Trinity	11308 State Road 54 Suite B	New Port Richey	Pasco
Holiday Surgery Center	1109 US Highway 19 Ste B	Holiday	Pasco
Longleaf Surgery Center LLC	3010 Starkey Blvd	New Port Richey	Pasco
New Port Richey Surgery Center at Trinity	9332 State Road 54 Ste 100	New Port Richey	Pasco
New Tamp Surgery Center	2407 Cypress Ridge Blvd	Wesley Chapel	Pasco
Same Day Surgery Centers of Florida LLC	6733 Gall Blvd	Zephyrhills	Pasco
Seven Springs Surgery Center Inc	2024 Seven Springs Blvd	New Port Richey	Pasco
Suncoast Eye Center	14003 Lakeshore Blvd	Hudson	Pasco
Suncoast Specialty Surgery Center	4519 US Highway 19	New Port Richey	Pasco



GET TO KNOW OUR SERVICES

My Health Onsite Employee Health & Wellness Center:

Employee Health Center includes **FREE** routine checkups, sick visits, and acute condition treatment. Providers see employees, spouses, dependents, retirees and children from the ages of 8 and up for non-urgent acute care such as sore throats, ear aches, bumps and scrapes.

Personalized Health Assessment - Vital Health Profile (VHP):

My Health Onsite offers a complimentary personalized health assessment called the **Vital Health Profile (VHP)**, *previously known as Health Risk Assessment*, which includes biometric screening and laboratory studies. The VHP gives patients an opportunity to review their results with our medical provider and receive a complete physical.

Registered Dietitian & Nurse Educator Available at **NO COST** to You:

Our comprehensive Health & Wellness Program provides over 30 services offered totally **FREE** including the addition of diabetic and nutrition counseling with a dietitian nutritionist. Plus, personalized one-on-one health coaching is available. Please contact your provider to be referred to our **FREE** Wellness Programs.

No Deductible or Co-Pays at My Health Onsite for:

- **Generic medications**—most available onsite at Health Center
- **Personalized wellness program with one-on-one health coach**
- **X-rays and diagnostic testing**
- **Laboratory testing** ordered at the health center and labs ordered outside by your provider
- **Pre-diabetes & hypertension management, nutritional counseling, immunizations and more!**



Schedule an appointment today via the **healow app** (practice code: DAAEBD), through our online patient portal at www.my-patientportal.com or by calling the toll free **24-hr Call Center Support Team** at: 888-644-1448.



FREQUENTLY ASKED QUESTIONS



How Do I Make An Appointment?

All patients with a unique valid email address should receive an email invitation from "no-reply@eclinicalmail.com" with the subject line: Patient Portal Access Information from My Health Onsite (MHO). Once registered, you can access the patient portal at www.my-patientportal.com. Then you can schedule an appointment and you will receive email reminders for upcoming appointments. *Appointments can be scheduled through the online patient portal, 24-hr Call Center Support Team at 888-644-1448 or the Healow App.*

How Do I Reset My Password?

Click "Forgot Password" on the My Health Onsite Log In page to have a temporary password sent to your email address.

If I Choose To Keep My Doctor, But I'm Seen For Something At The Employee Health & Wellness Center, How Will My Doctor Know?

You may sign a release of information form at the Health Center to request your information be forwarded to your doctor.

Do I Have To Pay To Use The Employee Health & Wellness Center?

No. Your employer provides access to the center for all employees and their family members on medical plan.

Can My Children Be Seen At The Employee Health & Wellness Center?

Yes. Children from the ages of 8 & up can be seen for non-urgent acute care such as sore throats, ear aches, bumps and scrapes. However, children between 8 & 11 must continue to see their pediatrician for regular wellness exams, school physicals and all chronic conditions. Children from the ages of 12 & up can be seen for non-urgent acute care and annual wellness exams (i.e. school physicals, sports physicals.)

Please Note: Chronic pediatric medical conditions at any age need to be followed by a pediatrician and cannot be managed at My Health Onsite Employee Health & Wellness Centers.

Can I Use The Employee Health & Wellness Center Doctor For Primary Care Services?

Yes. Employees can see a provider at the health center for colds, sore throats, high blood pressure, high cholesterol, diabetes, asthma, annual physicals, school physicals, lab work, EKG's, pap smears, blood work, vaccines and much more.

What Are Some Of The Benefits Of Using The Employee Health & Wellness Center?

In addition to no charge for using the center, we offer free onsite prescriptions, lab work, vaccinations, and timely offsite imaging services. We provide confidential medical records, the convenience of scheduling your appointment online, the ability to access your medical records online, more one-on-one time with the doctor, a convenient location and an average wait time far less than you will typically experience elsewhere.

All services are provided by My Health Onsite. The Hernando County Sheriff's Office does not have access to any My Health Onsite's patient medical records. My Health Onsite abides by all federal HIPAA and confidentiality regulations.



FREQUENTLY ASKED QUESTIONS CONT.

What Is Offered In The Health & Wellness Program?

A more comprehensive health & wellness program (over 30 services) is offered including the addition of diabetic and nutrition counseling with a dietitian nutritionist. Plus, personalized one-on-one health coaching is available. Please contact your provider to be referred to our free wellness programs.

Will My Employer Have Access To My Medical Records?

No. My Health Onsite is mandated by Federal HIPAA Regulations to not provide any personal medical health information to your employer, or anyone for that matter, without your written consent.

Can I Bring In An “Outside Lab Order” From My Doctor And Get Them Drawn Through The Employee Health & Wellness Center?

Yes, but outside lab orders need to be discussed and approved during an appointment with the doctor at the Employee Health Center. Outside labs cannot be drawn during your “New Patient Lab” appointment (a nurse-only visit).

What Is The Difference Between Urgent Care And Non-Urgent Acute Care?

Non-urgent acute care addresses new onset minor symptoms – i.e. sore throats, sinusitis, sprained ankle, etc. Such symptoms can be evaluated at the Employee Health & Wellness Center during a “Sick Patient” appointment.

What If I Have A Question After Hours?

If you have a medical emergency, please call 911. To speak to a registered nurse about medical questions or to schedule an appointment by calling the 24-hr Call Center Support Team at 888-644-1448.

What Happens At The “New Patient Medical” Appointment After I Complete My Lab Work?

The “New Patient Medical” appointment will be scheduled before you leave your “New Patient Lab” appointment. During the “New Patient Medical” appointment, a doctor will review your medical history, lab results and current medications.

May I Bring A Prescription From My Doctor & Have It Filled At The Employee Health & Wellness Center?

Yes, but realize that the Employee Health & Wellness Center doctor will be prescribing as a physician (not acting as a pharmacy). Per Florida statute, every outside prescription will require a medical evaluation by the Employee Health Center doctor.

Why Is There A 10-Minute Tardy Reschedule Policy For Appointments?

The good news is this policy will help reduce the wait times to see the doctor. While late arrivals are unintentional, late appointments can disrupt the entire daily schedule.

How Do I Cancel Or Reschedule An Appointment?

It is important to reschedule when unable to attend your scheduled appointment. This allows other employees access to that appointment time. You can cancel existing appointments and then immediately reschedule a different day or time via the patient portal at www.my-patientportal.com or by calling the 24-hr Call Center Support Team at 888-644-1448.

Who Do I Contact With Comments, Suggestions And Feedback?

Please email feedback@myhealthonsite.com.

All services are provided by My Health Onsite. The Hernando County Sheriff's Office does not have access to any My Health Onsite's patient medical records. My Health Onsite abides by all federal HIPAA and confidentiality regulations.



HERNANDO COUNTY
SHERIFF'S OFFICE



When you need a doctor, call one **anytime, anywhere**



Skip the trip to the waiting room. With Teladoc, you can talk with a doctor within an hour by phone or app from wherever you are.

Know your care options



Teladoc

For non-emergency conditions like the flu, allergies, infections, and much more. Our doctors can also prescribe medicine, if needed.



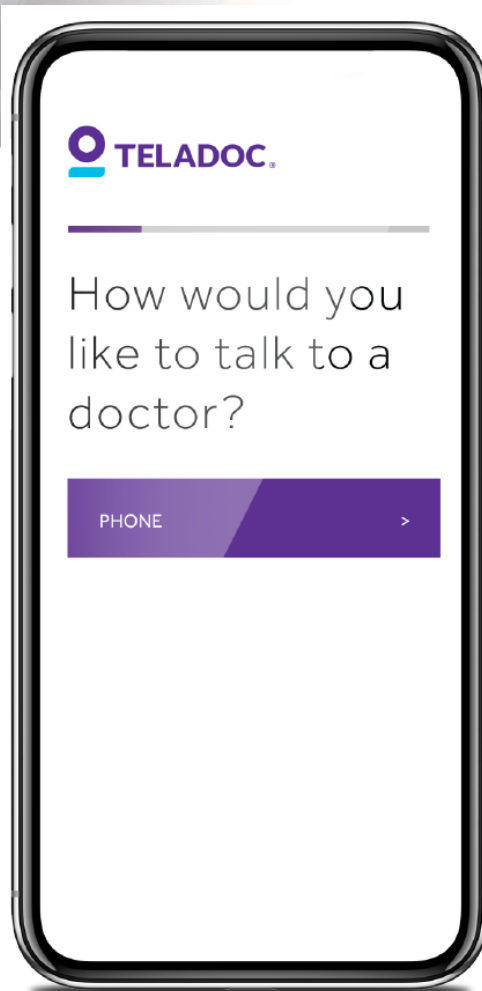
General practitioner

For annual exams and ongoing medical conditions needing regular monitoring.



Urgent care/ER

For severe conditions like chest pain, sprains, cuts, burns, or broken bones.



How would you like to talk to a doctor?

PHONE



Feel better when you need to with Teladoc

Visit www.Teladoc.com

Call 888-983-5236 | Download the app

DENTAL INSURANCE

In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings, and x-rays. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery. Several studies also suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart. The following chart outlines the dental benefits we offer.

TYPE OF SERVICE	WHAT'S INCLUDED	
Deductible -Per Person -Per Family	In-Network \$50 \$150	Out-of-Network \$75 \$225
Preventive Services Basic Services Major Services	100% 70% 50%	80% 50% 30%
Preventive Services	Exams, 3 cleanings per year, office visits, restorations, fluoride-child, x-rays including bitewings, intraoral/complete series.	
Basic Services	Fillings, simple extractions, sealants, root canal, periodontal scaling	
Major Services	Oral surgery, crowns, complete dentures, pontics, implants	
Annual Maximum	\$2,000	
Orthodontia Services Adult & Child(ren) to age 19	Adults and Dependent Child(ren) to age 19: 50% to a Lifetime Max of \$1,000	
Dental Rollover Rewards	If, at the end of the year, the member has \$800 or less in unused claims, FL Blue will roll over a \$600 credit to next year's annual maximum benefit, making the new benefit \$2,600. See chart on page 10 for more details.	
Find a Dentist	https://www.floridabluedental.com/members/find-a-dentistfind-a-dentist/	



BlueDental Maximum Rollover



Maximum Rollover for BlueDental Choice Plan Members

Maximum Rollover is a BlueDental Choice member benefit that rewards you just for visiting the dentist. There are no fees for Maximum Rollover and no paperwork to complete. Whenever you use less than the yearly threshold amount, you'll receive Rollover dollars for the following year. What if you could use your Rollover dollars for unexpected visits the next year? Or wouldn't those extra dollars come in handy when you have to pay out-of-pocket for expensive dental work in the following year?

See the chart below for some examples. Any available Rollover dollars will be added to your Rollover account approximately 60 days after the end of your plan year. It's that easy.

Maximum Rollover* is applied to your BlueDental Choice, BlueDental Choice Plus or BlueDental Choice Copayment plan automatically if you:

- Receive at least one covered service during your plan year,
- Are an active member of the plan on the last day of the plan year,
- Don't exceed the claim payment threshold in your plan year.

Use the chart below to see what your Maximum Rollover dollars could add up to.

1. Look in the first column to find your plan's annual maximum benefit.
2. Next, find the threshold amount for your plan in the second column. If we pay out less than this amount in benefits, you'll automatically receive Maximum Rollover dollars next year.
3. Check the third column for the maximum amount of dollars you qualify for next year.
4. The last column provides the maximum amount of rollover dollars that you can accumulate.

1. Plan's Annual Maximum Benefit Amount	2. Yearly Threshold Amount	3. Maximum Rollover you'll receive next year	4. Maximum Rollover you can accumulate
\$500 - \$749	\$200	\$150	\$500
\$750 - \$999	\$300	\$200	\$500
\$1,000 - \$1,249	\$500	\$350	\$1,000
\$1,250 - \$1,499	\$600	\$450	\$1,250
\$1,500 - \$1,999	\$700	\$500	\$1,250
\$2,000 - \$2,499	\$800	\$600	\$1,500
\$2,500 - \$2,999	\$900	\$700	\$1,500
\$3,000 or more	\$1,000	\$750	\$1,500

Questions? Want to learn more about Maximum Rollover or any of our other products and services? Our BlueDental Customer Service Representatives can help. Just call **1-888-223-4892** or find us online at **FloridaBlueDental.com**. Maximum Rollover is not available for our BlueDental CareSM plans.

Florida Blue is a trade name of Blue Cross and Blue Shield of Florida, Inc. BlueDental plans are offered through Florida Combined Life Insurance Company, Inc., D/B/A Florida Combined Life, an affiliate of Blue Cross and Blue Shield of Florida, Inc., D/B/A Florida Blue. These companies are Independent Licensees of the Blue Cross and Blue Shield Associations.



VISION INSURANCE



Driving to work, reading a news article, and watching TV are all activities you likely perform every day. Your ability to do all of these activities depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various other health problems.

HCSO's vision insurance through Humana entitles you to specific eye care benefits. Our policy covers routine eye exams and other procedures, and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses.

If you seek the services of a provider listed in our preferred provider directory, your benefits include the following:

- Routine vision exams for a \$10 copay.
- Preferred pricing on a large selection of designer frames, lenses, and lens options.



Clear 90 Plan Provisions	In-Network	Out-of-Network
Exam	\$10 Copay	Up to \$30
Hardware (Frames)	\$15 Copay (Up to \$130 Allowance)	Up to \$65
<u>Frequency:</u> <ul style="list-style-type: none"> • Exam • Lenses • Frames 	<ul style="list-style-type: none"> • 12 Months • 12 Months • 24 Months 	<ul style="list-style-type: none"> • 12 Months • 12 Months • 24 Months
<u>Lenses:</u> <ul style="list-style-type: none"> • Single Vision • Bifocal • Trifocal 	<ul style="list-style-type: none"> • Covered up to 100% • Covered up to 100% • Covered up to 100% 	<ul style="list-style-type: none"> • Up to \$25 • Up to \$40 • Up to \$60
Medically Necessary Contact Lenses	Covered at 100%	Up to \$200
Elective Contact Lenses in lieu of glasses	Up to \$130	\$104 Allowance
Find a Vision Provider	https://www.humana.com/vision-insurance/find-an-eye-doctor	

EMPLOYEE ASSISTANCE PROGRAM (EAP)

As an employee of the Hernando County Sheriff's Office, you have access to our valuable Employee Assistance Program (EAP) at no cost to you. EAP personal advocates will work with you and your household family members to help resolve issues you may be facing, connect you with the right mental health professionals, direct you to a variety of helpful resources in your community, and more.

HOW CAN WE HELP YOU TODAY?

Our Employee Assistance Program (EAP) has you covered.

Take advantage of a wide range of services offered at no cost to you

- › **5** face-to-face counseling sessions with a counselor in your area, as well as video-based sessions.
- › **Legal assistance:** 30-minute consultation with an attorney, face-to-face or by phone.*
- › **Financial:** 30-minute telephone consultation with a qualified specialist on topics such as debt counseling or planning for retirement.
- › **Parenting:** Resources and referrals for childcare providers, before and after school programs, camps, adoption organizations, child development, prenatal care and more.
- › **Eldercare:** Resources and referrals for home health agencies, assisted living facilities, social and recreational programs and long-distance caregiving.
- › **Pet care:** Resources and referrals for pet sitting, obedience training, veterinarians and pet stores.
- › **Identity theft:** 60-minute consultation with a fraud resolution specialist.



We're here to listen. Contact us any day, anytime.

Call 1.877.622.4327

Or log in to myCigna.com.

Employer ID: [hernandodsheriff](https://myCigna.com)
(Needed for initial registration only)

If already registered on myCigna.com, simply log in and go to the EAP link under the Review My Coverage tab.



BASIC LIFE INSURANCE AND AD&D

LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

Life insurance is an important part of your financial security, especially if others depend on you for support. Accidental death and dismemberment (AD&D) insurance is designed to provide a benefit in the event of accidental death or dismemberment. In 2023, the Hernando County Sheriff's Office will offer life and disability insurance through New York Life Insurance.

All eligible employees will receive basic life and AD&D insurance coverage in the flat amount of \$10,000 at no cost. Retirees can continue this benefit at their current election. Benefits reduce by 35% at age 65 and by 50% at age 70.

Employees who want to supplement their group life insurance benefits by covering a spouse and/or child/ren may purchase additional coverage through payroll deduction.

ACTIVE EMPLOYEES

Active employees may select \$10,000 in supplemental life and AD&D insurance coverage in increments up to the lesser of five times your salary or \$200,000. Supplemental dependent life insurance is available for spouses and dependent children through payroll deduction and provides your choice of the following benefits: \$2,500, \$5,000, or \$10,000; election cannot exceed 50% of the employee's combined basic and voluntary life amount through this policy. If you currently have voluntary life and AD&D coverage, your benefit amount will be carried over to New York Life. However, if you would like to increase your coverage, now would be the time. You can increase your benefit up to \$150,000 without having to provide evidence of insurability at this time.

RETIRING EMPLOYEES

If you currently have voluntary life coverage, your benefit amount will be carried over to New York Life. Benefits reduce according to the same age schedule as explained above. For additional plan information please refer to your official plan summary/documents.



**GROUP BENEFIT
SOLUTIONS**



DISABILITY INSURANCE COVERAGE

The goal of the disability plan is to provide you with income replacement should you become disabled and unable to work due to a non-work-related illness or injury. The Hernando County Sheriff's Office provides eligible employees with long-term disability income benefits.

If you become disabled from a non-work-related injury or sickness, disability income benefits will provide a partial replacement of lost income. Please note that you are not eligible to receive short-term disability benefits if you are receiving workers' compensation benefits.

Employees may sign up to reduce their benefit waiting period to 90 days through payroll deduction. Applications for coverage may be subject to medical underwriting, based on time of application. For additional plan information please refer to your official plan summary/documents.

	Long-Term Disability Buy-Down	Long-Term Disability
Benefits Begin	90-Day benefit waiting period	180-Day benefit waiting period
Benefits Payable	1/1/23	1/1/23
Percentage of Income Replaced	Covers 60% of the first \$6,000 of pre-disability earnings; the maximum benefit period is to age 65 or SSNRA; pays own occupation for first 36 months	Covers 60% of the first \$6,000 of pre-disability earnings; the maximum benefit period is to age 65 or SSNRA; pays own occupation for first 36 months
Maximum Benefit	\$6,000	\$6,000
Cost Per Semi-Month Pay Period	\$0.115 (Per \$100)	No cost – employer paid

To calculate your "Buy Down" cost, please take the following steps:

1. Figure out your monthly earnings capped at \$6,000 and write them here: _____
2. Multiply your monthly earnings by 0.23 and write your answer here: _____
3. Divide by 100.00; this amount is an estimate of how much you would pay each month: _____
4. To get a sense of your bi-weekly premium, divide your monthly premium amount by 2:

*The above result is your cost per paycheck for the LTD Buy Down - 90-day benefit waiting period. Please note that this cost is accurate within a penny or two. The actual payroll deduction may differ slightly due to rounding of numbers.



HEALTH REIMBURSEMENT ACCOUNTS (HRA)

The HRA is set up for each individual employee through contributions made by the Sheriff’s Office. This is a great benefit in which money is accrued that can be used to cover co-pays, deductibles, prescription drug costs, and other approved medical expenses. This results in much lower out-of-pocket costs for employees!

Employees who elect associated medical plans will have the corresponding HRA funds contributed in January 2023.	
Medical Option 1—Blue Options Plan 3766	\$25.00 Monthly
Medical Option 2—Blue Options Plan 5782	\$200.00 Monthly
If you waive medical coverage (<i>see details below</i>)	*\$25.00 Monthly

**If you waive medical coverage (proof of other insurance will be required), you may elect to accept the \$25 monthly as taxable income in lieu of the HRA contribution.*

Funds may be used for IRS-defined “unreimbursed” medical expenses for yourself or your eligible dependents. You may use the debit card or file paper claims for reimbursement, but most expenses must be documented per IRS regulations. The Sheriff’s Office has contracted with PrimePay to provide claims services and complete plan information will be provided upon enrollment.



Any unused funds in the HRA at the end of the year will carry over into the next plan year, as long as the plan remains in effect, and you remain an employee of the Sheriff’s Office (or if COBRA continuation coverage is elected). Retirees with funds in their HRA are eligible to use those funds until all monies are depleted. You may only access the funds in your account as they accrue.

CRITERIA PER IRS REGULATIONS FOR ELIGIBLE EXPENSES

- Qualify as a federal income tax deduction under Section 213 of the IRS code; *and*
- Be rendered for the diagnosis, treatment, or prevention of disease; *and*
- Not be reimbursable by any insurance plan (i.e., you may only claim your remaining patient responsibility, not anything that is written off or paid by insurance); *and*
- Spouses and dependents must be covered on the plan to pay for their eligible expenses.



VOLUNTARY BENEFITS

You never know when an unexpected illness or injury could leave you and your family with financial difficulties. Health insurance can help, but you can still have deductibles, co-payments, other out-of-pocket expenses, or reduced income.

That's where Colonial Life's voluntary benefits come in. Sometimes called *supplemental insurance*, voluntary benefits are designed to complement your health insurance and help provide extra financial protection.

This year, your employer is helping you protect your way of life by giving you the opportunity to purchase the following voluntary benefits from Colonial Life:

- Accident Insurance/Gunshot Wound Benefit – *Guaranteed issue for 2023*
- Critical Illness with Cancer Insurance – *Guaranteed issue for 2023*
- Disability Insurance – *Guaranteed issue for 2023*
- Hospital confinement indemnity insurance – *Guaranteed issue for 2023*

To learn more about your voluntary benefit options, visit the digital postcard at:

<https://flimp.live/hernandocounty>

Your benefits counselor will be happy to review all your benefit options during your personal enrollment appointment.



Accident Insurance



ACCIDENTS CAN HAPPEN TO ANYONE

You never know when you or someone you love can get hurt in an accident. And accidents come with costs, such as emergency room fees, doctor's bills, and lost income from missing work. Even if you have good health insurance, deductibles and co-pays can really add up.

With accident insurance from Colonial Life, you can receive benefits to help with the expenses of a covered accident. This financial protection can help you focus on what really matters: healing.



With this coverage:

- A set amount is payable based on the injury you suffer and the treatment you receive.
- You do not need to answer medical questions or have a physical exam to get basic coverage.
- Unlike workers' compensation, which only covers on-the-job injuries, accident insurance covers injuries that happen on-the-job *or* off-the-job.
- Coverage is available for you, your spouse, and eligible dependent children.

Do you qualify?

This plan is available to full-time, active employees for the 2023 benefit year as *guaranteed issue*, meaning no health questions will be asked.

ColonialLife.com

Talk with your
Colonial Life
benefits counselor
to learn more.



Critical Illness Insurance



YOU CAN'T PREDICT AN ILLNESS, BUT YOU CAN BE PREPARED

No matter where you are in life, you never know when you or a loved one could experience a critical illness, such as a heart attack or stroke. Medical advancements and early detection are helping many people survive critical illnesses. However, preventive tests and treatment can lead to increased medical expenses, and your health insurance may not cover these costs.

Critical illness insurance from Colonial Life helps supplement your major medical coverage by providing a lump-sum benefit that you can use to pay the indirect costs related to a covered critical illness.



With this coverage:

- Benefits are paid directly to you, unless you specify otherwise.
- You may receive additional benefits if you're diagnosed with more than one critical illness.
- Coverage is available for you, your spouse, and eligible dependent children.

Do you qualify?

This plan is available to full-time, active employees for the 2023 benefit year as *guaranteed issue*, meaning no health questions will be asked.

ColonialLife.com

Talk with your Colonial Life benefits counselor to learn more.



Cancer Insurance



WOULD YOU BE FINANCIALLY PREPARED FOR CANCER?

If you were diagnosed with cancer, you could have expenses that medical insurance doesn't cover. In addition to your regular, ongoing bills, you could have to pay for out-of-network treatment, childcare, home health care services, and other indirect treatment and recovery costs.

Hopefully, you and your family will never face cancer. If you do, cancer insurance from Colonial Life can help protect the lifestyle you've worked so hard to build.



With this coverage:

- Coverage options are available for you and your eligible dependents.
- You're paid regardless of any other insurance you may have with other companies.
- You can use benefits to help pay for travel to and from treatment centers, lodging and meals, deductibles – or any other way you choose.
- You may have the option of purchasing additional riders for even more financial protection against cancer.

Do you qualify?
 This plan is available to full-time, active employees for the 2023 benefit year as *guaranteed issue*, meaning no health questions will be asked.

ColonialLife.com

Talk with your Colonial Life benefits counselor to learn more.



Disability Insurance



HELP PROTECT YOUR INCOME

Losing just one paycheck would be difficult, but a disability could have you out of work for weeks or even months. And while your paychecks might stop, your bills could continue coming. Without your income, how would you pay for housing, utilities, and other everyday living expenses?

Disability insurance from Colonial Life helps protect your income, so you can have help paying the bills while you recover from a covered accident or sickness.



With this coverage:

- Coverage options are available for you and your eligible dependents.
- You're paid regardless of any other insurance you may have with other companies.
- You can use benefits to help pay for travel to and from treatment centers, lodging and meals, deductibles – or any other way you choose.
- You may have the option of purchasing additional riders for even more financial protection against cancer.

Do you qualify?
This plan is available to full-time, active employees for the 2023 benefit year as *guaranteed issue*, meaning no health questions will be asked.

Talk with your Colonial Life benefits counselor to learn more.

ColonialLife.com

Hospital Confinement Indemnity Insurance



GET HELP WITH RISING HEALTH CARE COSTS

If you're admitted to the hospital because of an accident or sickness, it's important to focus on your recovery – not your finances. That's easier said than done if you have costly co-payments, deductibles, and other expenses coming your way.

Hospital confinement indemnity insurance from Colonial Life can help you pay for medical expenses that your health insurance may not cover.



With this coverage:

- Benefits are paid directly to you (unless you specify otherwise) and can be used as you see fit.
- Coverage is available for you, your spouse, and eligible dependent children.
- You're paid regardless of any other insurance you may have with other companies.

Do you qualify?

This plan is available to full-time, active employees for the 2023 benefit year as *guaranteed issue*, meaning no health questions will be asked.

[ColonialLife.com](https://www.ColonialLife.com)

Talk with your
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benefits counselor
to learn more.



Policyholder Service Guide

Getting started

The easiest way to manage your business with us is through ColonialLife.com. To sign up for the website, click Register at the top right of the home page and follow the instructions.

Contact us

ONLINE

ColonialLife.com

Log in and click on [Contact Us](#)

TELEPHONE

1-800-325-4368

Hearing-impaired customers

803-798-4040

If you do not have a TDD, call Voiance Telephone Interpretation Services. 844-495-6105

Consider your options

At Colonial Life, our goal is to give you an excellent customer experience that is simple, modern and personal. For your convenience, you can choose how you interact with us. For the quickest service, we recommend using our website, which lets you do the following:

- Review, print or download a copy of your policy/certificate by clicking on the **My Correspondence** tab.
- Update contact information or add family member profile information for use when filing online claims.
- Access service forms to make changes to your policy, such as a beneficiary change.
- Submit your claim using our eClaims system.
- Check the status of your claim and view claims correspondence.
- Access claim forms.

eClaims are quick and easy

With the eClaims feature on ColonialLife.com, you can file most claims online by simply answering a few questions and uploading your supporting documentation. You're able to spend less time on paperwork, and we're able to process your claim faster.

- From Colonial Life.com, file claims from any device. It's fast, easy and available 24/7.
- Select direct deposit to receive your benefit payment faster.
- Easily submit additional documents.

Paper claims

- If you don't want to file online, download the form you need by visiting the Claims Center page on ColonialLife.com and clicking on [claim and service forms](#).
- You may fax your claim to 1-800-880-9325.
- Follow the instructions, tips and videos to complete and submit your claim.



Set and achieve your financial goals



KOFE can answer questions about:

- Personal finance
- Budgets
- Savings
- Debt
- Payment options
- Credit and credit reports

Colonial Life.



Knowledge of Financial Education

A product of **CONSOLIDATED CREDIT™**
When debt is the problem, we are the solution.

Your employer works hard to provide you with the resources you need in the workplace. But personal financial worries can get in the way of your productivity.

In fact, one in three employees say that personal financial issues have been a distraction at work.¹ With more than three-quarters of employees feeling this strain, it's normal to want some assistance.

That's why we're providing access to this valuable program, which can help you set goals—and be successful in achieving them.

Our service solution

Colonial Life has partnered with Knowledge of Financial Education (KOFE), a corporate financial wellness program created by Consolidated Credit. Consolidated Credit is one of the largest non-profit credit counseling agencies with more than 20 years of expertise.

While some companies only provide financial education and others only offer counseling, you can have both. And it's available to you without increasing your budget. With this service, you'll get a variety of resources to help improve your financial situation:

- **Financial coaching** – Unlimited access to highly trained senior certified credit counselors by calling 866-932-4185
- **Online tools** – Access to 100+ videos, books, budgeting tools and more, all easily accessible at ColonialLife.com/KOFE
- **Webinars** – Educational sessions throughout the year on a variety of topics

Get the support you need to succeed

Taking advantage of KOFE's services can help you gain control of your financial difficulties. That means you can better focus on your career—and on building a safe financial future for yourself and your family.

Take steps today toward reaching financial success.
Visit ColonialLife.com/KOFE to learn more.

ColonialLife.com

¹ Center for Financial Services Innovation, Employee Financial Health: How Companies Can Invest in Workplace Wellness, 2017

Terms and availability of service are subject to change. No purchase necessary to receive coverage. This coverage may not be available in all states.

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DEFERRED COMPENSATION

Employees of the Hernando County Sheriff's Office are eligible to enroll in voluntary deferred compensation plans. Deferred compensation is an arrangement which permits you to authorize a portion of your salary to be withheld and invested in a group variable annuity contract for payment to you at a later date.

State retirement and Social Security may not be enough to cover all your needs depending on when you plan to retire. Deferred compensation is a voluntary contribution made by you to supplement retirement planning needs. Neither the contributed amount nor any investment earnings are subject to current federal and (in most cases) state income taxes until the deferred income plus earnings are distributed to you. These distributions are generally taken at retirement when you may be in a lower income bracket.

Per IRS guidelines, retired sworn personnel may be able to elect a withdrawal of up to \$3,000 once per calendar year, tax free, to pay for their health insurance premiums. Please check with your plan provider for more information.





EMPLOYEE & RETIREE RATES

The Finance and Human Resource team have worked very hard to enhance your benefits package this year. We are pleased to announce premiums for active employees remain the same for medical, dental and vision plans. Retirees may see a slight reduction depending on the medical plan selected and enrollment tier!

Many do not know, but the HCSO health plan is self-funded. Florida Blue acts as a third-party administrator to secure discounts from physicians and hospitals, processes the claims, and the care-management nurses help coordinate and improve the quality of care. What that means is HCSO pays all the claims, except, generally, for those above a certain catastrophic level. That is why employee stewardship of the health plan financially benefits all parties. Every member has a stake.

Our ability to keep these premiums low depends on your wise use of your medical and dental benefits. Please take advantage of the services our employee wellness center has to offer and pay attention to the many educational notices sent throughout the year. When you stay healthy, control your chronic conditions, and use the agency resources to be well, you keep the costs down!



EMPLOYEE RATES

Semi-monthly payroll deductions as shown:

EMPLOYEE SEMI-MONTHLY DEDUCTIONS				
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
Blue Options PPO Plan 3766	\$20.00	\$260.00	\$185.00	\$310.00
Blue Options PPO Plan 5782	\$0	\$26.00	\$0.00	\$26.00
Florida Combined Life Dental Plan	\$0	<i>Employee + 1 dependent: \$9.42 Employee + 2 or more dependents: \$21.20</i>		
Humana Vision Plan	\$2.63	\$7.53		
Additional Life Insurance (\$10,000 increments)	\$1.46	N/A	N/A	N/A
New York Life Long-Term Disability Buy-Down (per \$100)	\$0.13	N/A	N/A	N/A
DEPENDENT LIFE COVERAGE				
Rates Per Dependent Per Semi-Monthly	Bi-Monthly		Issue Amount Units	
	\$0.25		\$2,500	
	\$0.50		\$5,000	
	\$1.00		\$10,000	



RETIREE RATES

Monthly rates as shown:

RETIREE MONTHLY RATE				
	Retiree Only	Retiree & Spouse	Retiree & Children	Retiree & Family
Blue Options PPO Plan 3766	\$650.00	\$1,130.00	\$980.00	\$1,230.00
Blue Options PPO Plan 5782	\$375.00	\$650.00	\$845.00	\$945.00
Florida Combined Life Dental Plan	\$28.97	\$47.81	<i>Retiree + 2 or more dependents: \$71.37</i>	
Humana Vision Plan	\$5.26	\$15.06		
Portable Basic Life with AD&D upon Retirement (in \$10,000 increments)	\$8.81	N/A	N/A	N/A
Additional Life is the Portable amount determined on separation date	\$7.74	N/A	N/A	N/A
DEPENDENT LIFE COVERAGE RETIREES				
Rates Per Dependent Monthly Based on Portable amount determined as of separation date	Monthly		Issue Amount Units	
	\$0.50		\$2,500	
	\$1.00		\$5,000	
	\$2.00		\$10,000	

CONTACTS

Medical/Health Insurance

Carrier/Vendor	Florida Blue
Group Number	46017
Phone Number	(800) 322-2808
Website	www.floridablue.com

Dental

Carrier/Vendor	Florida Combined Life
Policy Number	605s70
Phone Number	(888) 223-4892
Website	www.floridabluedental.com

Vision

Carrier/Vendor	Humana
Policy Number	786460
Phone Number	(877) 398-2980
Website	www.humana.com

HRA

Carrier/Vendor	PrimePay
Email Address	BenefitSuccess@Primepay.com
Phone Number	877-769-3539
Website	www.primepay.com

Teladoc

Carrier/Vendor	Teledoc
Policy Number	N/A
Phone Number	888-983-5236

Voluntary Benefits

Carrier/Vendor	Colonial Life
Customer Service	(800) 325-4368
Representative	Lyn Lindsay (727) 560-6183
Website	www.ColonialLife.com

Life, AD&D, Long-Term Disability

Carrier/Vendor	New York Life
Policy Numbers	Life: FLX970210
	Voluntary Life: OK971564
	Long Term Disability: FLK961155
Phone Number	(800) 225-5695
Website	www.newyorklife.com

Employee Assistance Program (EAP)

Carrier/Vendor	Cigna
Employer ID	hernandosheriff
Phone Number	(877) 622-4327
Website	www.mycigna.com

Deferred Compensation

Carrier/Vendor	Empower Retirement
Customer Service	(800) 773-5274
Representative – Jody Clayton	(813) 294-3201

GLOSSARY

This glossary defines many commonly used terms but is not a full list. These glossary terms and definitions are intended to be educational and may be different from the terms and definitions in your plan or health insurance policy. Some of these terms may not have exactly the same meaning when used in your policy or plan, and in any case the policy or plan governs (see your *Summary of Benefits and Coverage* for information on how to get a copy of your policy or plan document).

Coinsurance—The amount or percentage that you pay for certain covered health care services under your health plan. This is typically the amount paid after a deductible is met and can vary based on the plan design.

Consumer Driven Health Care (CDHC)—Health insurance programs and plans that are intended to give you more control over your health care expenses. Under CDHC plans, you can use health care services more effectively and have more control over your health care dollars. CDHC plans are designed to be more affordable because they offer reduced premium costs in exchange for higher deductibles. Health Reimbursement Arrangements (HRAs) and Health Savings Accounts (HSAs) are common examples of CDHC plans.



Know Your Benefits

Copayment—A flat fee that you pay toward the cost of covered medical services.

Covered Expenses—Health care expenses that are covered under your health plan.

Deductible—A specific dollar amount you pay out of pocket before benefits are available through a health plan. Under some plans, the deductible is waived for certain services.

Dependent—Individuals who meet eligibility requirements under a health plan and are enrolled in the plan as a qualified dependent.

Flexible Spending Account (FSA)—An account that allows you to save tax-free dollars for qualified medical and/or dependent care expenses that are not reimbursed. You determine how much you want to contribute to the FSA at the beginning of the plan year. Most funds must be used by the end of the year, as there is only a limited carryover amount.

Health Management Organization (HMO)—A type of health insurance plan that usually limits coverage to care from doctors who work for or contract within a specified network. Premiums are paid monthly, and a small copay is due for each office visit and hospital stay. HMOs require that you select a primary care physician who is responsible for managing and coordinating all of your health care.

Health Reimbursement Arrangement (HRA)—An employer-owned medical savings account in which the company deposits pre-tax dollars for each of its covered employees. Employees can then use this account as reimbursement for qualified health care expenses.



Health Savings Account (HSA)—An employee-owned medical savings account used to pay for eligible medical expenses. Funds contributed to the account are pre-tax and do not have to be used within a specified time period. HSAs must be coupled with qualified high-deductible health plans (HDHP).

High Deductible Health Plan (HDHP)—A qualified health plan that combines very low monthly premiums in exchange for higher deductibles and out-of-pocket limits. These plans are often coupled with an HSA.

In-network—Health care received from your primary care physician or from a specialist within an outlined list of health care practitioners.

Inpatient—A person who is treated as a registered patient in a hospital or other health care facility.

Medically Necessary (or medical necessity)—Services or supplies provided by a hospital, health care facility or physician that meet the following criteria: (1) are appropriate for the symptoms and diagnosis and/or treatment of the condition, illness, disease or injury; (2) serve to provide diagnosis or direct care and/or treatment of the condition, illness, disease or injury; (3) are in accordance with standards of good medical practice; (4) are not primarily serving as convenience; and (5) are considered the most appropriate care available.

Medicare—An insurance program administered by the federal government to provide health coverage to individuals aged 65 and older, or who have certain disabilities or illnesses.

Member—You and those covered become members when you enroll in a health plan. This includes eligible employees, their dependents, COBRA beneficiaries and surviving spouses.

Out-of-network—Health care you receive without a physician referral, or services received by a non-network service provider. Out-of-network health care and plan payments are subject to deductibles and copayments.

Out-of-pocket Expense—Amount that you must pay toward the cost of health care services. This includes deductibles, copayments and coinsurance.

Out-of-pocket Maximum (OOPM)—The highest out-of-pocket amount paid for covered services during a benefit period.

Preferred Provider Organization (PPO)—A health plan that offers both in-network and out-of-network benefits. Members must choose one of the in-network providers or facilities to receive the highest level of benefits.

Premium—The amount you pay for a health plan in exchange for coverage. Health plans with higher deductibles typically have lower premiums.

Primary Care Physician (PCP)—A doctor that is selected to coordinate treatment under your health plan. This generally includes family practice physicians, general practitioners, internists, pediatricians, etc.

Usual, Customary and Reasonable (UCR) Allowance—The fee paid for covered services that is: (1) a similar amount to the fee charged from a health care provider to the majority of patients for the same procedure; (2) the customary fee paid to providers with similar training and expertise in a similar geographic area, and (3) reasonable in light of any unusual clinical circumstances.

WHAT IS SELF-FUNDING?

HCSO is a self-funded plan. A self-funded, or self-insured plan is one in which the employer assumes the financial risk for providing health care benefits to its employees. In practical terms, self-insured employers pay for claims out of pocket as they are presented instead of paying a pre-determined premium to an insurance carrier for a fully-insured plan. Typically, a self-insured employer will set up a special trust fund to earmark money (corporate and employee contributions) to pay incurred claims.

WHAT IS A TPA?

Florida Blue is HCSO's third-party administrator, or TPA. A TPA is an entity that processes or adjudicates claims for an employee benefit plan. A TPA may provide additional services to an employee benefit plan or employer, such as collecting premiums, contracting for PPO services, providing utilization review of claims, and similar ancillary services to the operation of the employee benefit plan. Self-insured employers can either administer the claims in-house or subcontract this service to a TPA.

WHY DO EMPLOYERS SELF-FUND THEIR HEALTH PLANS?

There are several reasons why employers choose the self-insurance option. The following are the most common reasons:

- The employer can customize the plan to meet the specific health care needs of its workforce, as opposed to purchasing a 'one-size-fits-all' insurance policy.
- The employer maintains control over the health plan reserves, enabling maximization of interest income – income that would be otherwise generated by an insurance carrier through the investment of premium dollars.
- The employer does not have to pre-pay for coverage, thereby providing for improved cash flow.
- The employer is not subject to conflicting state health insurance regulations/benefit mandates, as self-insured health plans are regulated under federal law (ERISA).
- The employer is not subject to state health insurance premium taxes, which are generally 2-3 percent of the premium's dollar value.
- The employer is free to contract with the providers or provider network best suited to meet the health care needs of its employees.



CAN SELF-INSURED EMPLOYERS PROTECT THEMSELVES AGAINST UNPREDICTED OR CATASTROPHIC CLAIMS?

Yes. While the largest employers have sufficient financial reserves to cover virtually any amount of health care costs, most self-insured employers purchase what is known as *stop-loss insurance* to reimburse them for claims above a specified dollar level.

WITH WHAT LAWS MUST SELF-INSURED GROUP HEALTH PLANS COMPLY?

Self-insured group health plans come under all applicable federal laws, including the Employee Retirement Income Security Act (ERISA), Health Insurance Portability and Accountability Act (HIPAA), Consolidated Omnibus Budget Reconciliation Act (COBRA), the Americans with Disabilities Act (ADA), the Pregnancy Discrimination Act, the Age Discrimination in Employment Act, the Civil Rights Act, and various budget reconciliation acts such as Tax Equity and Fiscal Responsibility Act (TEFRA), Deficit Reduction Act (DEFRA), and Economic Recovery Tax Act (ERTA).

