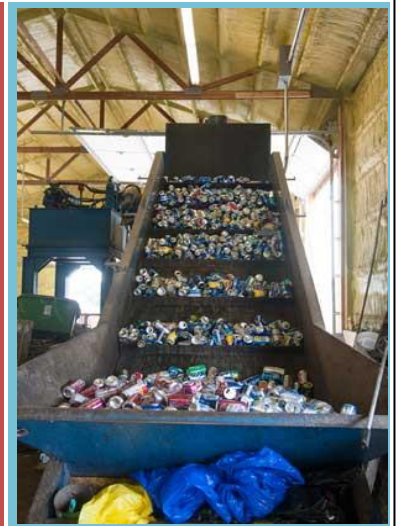




City of Lawrence

KANSAS

2020 Open Enrollment



OCTOBER 24TH – DECEMBER 6TH

Welcome to the 2020 Benefits Open Enrollment. This year's Open Enrollment begins October 24th and ends on December 6th, 2019.

The following pages of this booklet summarize the benefits offered by the City including any plan design and premium changes. This information is a general guide and does not reflect a complete summary of the plans. Detailed plan summaries can be found on the intranet, by calling Human Resources at 785-832-3204 or by emailing Human Resources at humanresources@lawrenceks.org.

Each year the Healthcare Committee and Human Resources staff are charged with establishing and maintaining a high quality, cost effective healthcare plan that offers meaningful benefits to its employees and retirees all while balancing the best interest of the City of Lawrence and the best interest of City employees/retirees (plan members).

Healthcare expenses include medical, vision, dental and prescription claims, administrative fees and wellness program expenses.

Revenues into the healthcare plan include contributions from employees (each pay period), retirees (monthly) and from the City.

2019 (estimated): Healthcare expenses are projected to be **\$11.8M**. The city will contribute \$9.9M toward those expense and the plan members will contribute approximately \$2.5M.

2020 (estimated): Healthcare expenses are projected to be **\$12.9M**. The city will contribute approximately \$10.8M and plan members will contribute approximately \$2.5M.

When expenses and revenues are not equal, the plan will either use from or add to its fund balance (reserve fund). In 2019 the plan is expected to add \$1M to the fund balance. It is projected that by the end of 2020, the plan will add approximately \$200,000 to the reserve fund. From 2013 – 2016, the plan used \$2.8M from the fund balance.

Having this reserve fund can help prevent drastic changes to contributions and out of pocket costs for employees when claims are higher than expected in a year.

The best way to keep plan costs down is by managing overall health. The City continues to offer resources to help employees manage their health. Our healthcare claims information shows that more and more employees are taking advantage of the preventive benefits that our plan offers. These services are paid at 100% by the city.

- Access to WellCare Clinic for wellness and acute care visits
- Annual routine physical at your primary care doctor
- Immunization
- Annual vision exam
- Dental cleanings/exams/x-rays, twice per year

Provider Contact Information

Open Enrollment information is also available on [Intranet](#) as well as the City's [website](#).

◆ **Medical**
Aetna

855-788-5785
www.aetna.com

◆ **Dental**
Delta Dental of Kansas

800-234-3375
www.deltadentalks.com

◆ **Prescription Drug Coverage**
MedTrak Services

800-771-4648 or e-mail:
customerservice@medtrakrx.com
www.medtrakrx.com

◆ **Employee Assistance Program**
New Directions Behavioral Health

800-624-5544
www.ndbh.com (Login code is: Lawrence)

◆ **Flexible Spending Accounts**
ASIFlex

800-659-3035 or e-mail: asi@asiflex.com
www.asiflex.com
Claims fax: 1-866-381-9682

◆ **Life Insurance**

Advance Insurance Company of Kansas
(Term Life, AD&D, Dependent Life,
Voluntary Life)

Contact Human Resources
785-832-3210

Standard Insurance Company
(Basic & Optional Group Life through
KPERS)

844-289-2306

◆ **Retirement**
KPERS & KP&F

888-275-5737
Fax: 785-296-6638
www.kpers.org

Nationwide
(457 Deferred Compensation Plan)

877-677-3678
www.nrsforu.com

October 2019

Sun	Monday	Tuesday	Wednesday	Thursday	Friday	Sat
20	21	22	23	24 <u>Fire</u> Training Center 8:30-9:30/9:30-10:30	25	26
27	28 <u>Fire</u> Training Center 8:30-9:30/9:30-10:30	29 <u>Fire</u> Training Center 8:30-9:30/9:30-10:30	30			

November 2019

Sun	Monday	Tuesday	Wednesday	Thursday	Friday	Sat
27	28	29	30	31	1	2
3	4 <u>Solid Waste</u> 6:15 - 7:15am <u>Police - ITC</u> 11am - 12pm	5 <u>Solid Waste</u> 6:15 - 7:15am	6	7 <u>Central Maintenance</u> 8 - 9am <u>Police - ITC</u> 11am - 12pm	8	9
10	11 <u>KAW Plant</u> 9 - 10am	12 <u>Streets</u> 7 - 8am <u>Police - ITC</u> 11am - 12pm	13	14 <u>City Hall</u> 8:30 - 9:30am <u>Police - ITC</u> 11am - 12pm	15 <u>Parks & Rec</u> Train Depot 9 - 10am	16
17	18 <u>Clinton Plant</u> 8 - 9am	19 <u>CSO Shop</u> 7 - 8am	20 <u>WWTP</u> 7:30 - 8:30am	21	22 <u>City Hall - Comm Room</u> 9 - 10am	23
24	25	26	27			30

December 2019

Sun	Monday	Tuesday	Wednesday	Thursday	Friday	Sat
1	2	3	4	5	6 <u>Open Enrollment</u> <u>Ends</u>	7

Updating/Verifying Benefits



Open enrollment changes will need to be made through bswift including changes to healthcare and enrollment in flexible spending. Fitness Club enrollments must be done via paper.

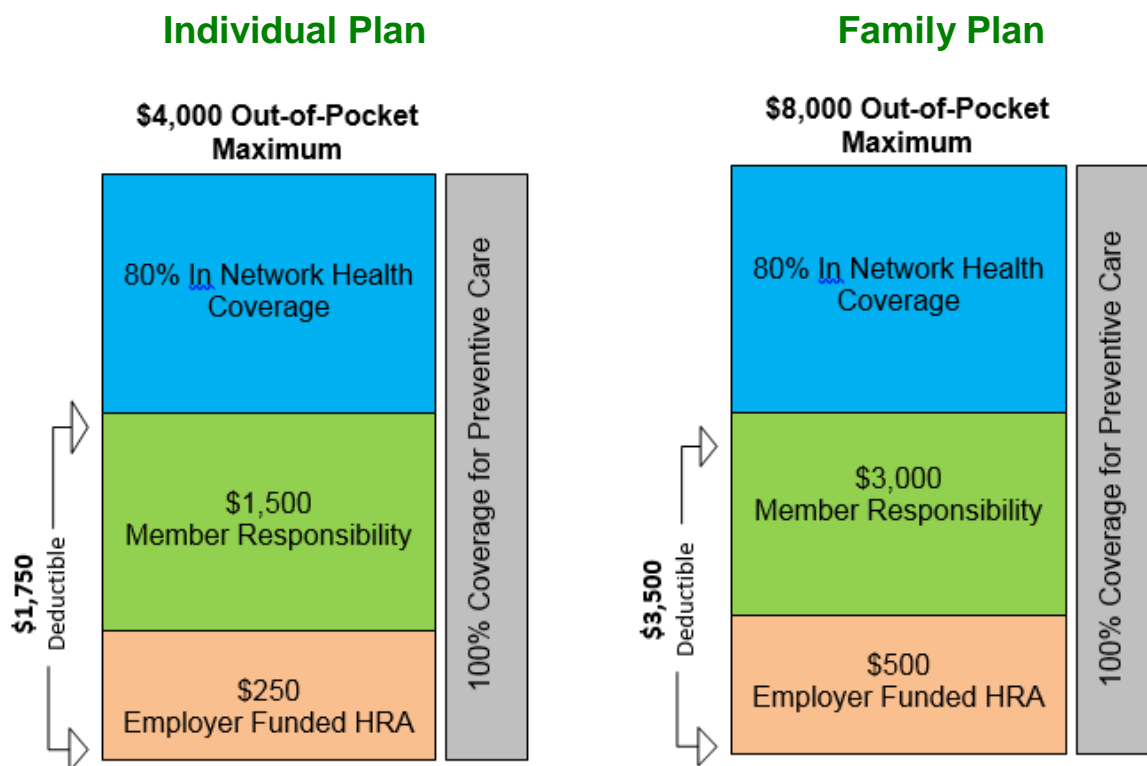
Go to cityoflawrence.bswift.com

- Logging in:
 - Username: first initial of your first name and your full last name.
 - Password: last 4 digits of your SSN – **ALL PASSWORDS HAVE BEEN RESET TO THE LAST 4 OF YOUR SSN; EVEN IF YOU CREATED A PERSONAL PASSWORD PREVIOUSLY.**
- After enrolling/making changes, you'll be able to print a confirmation page.

2020 Benefits



- **Medical** (No change to deductible or out of pocket maximum)
- **Health Reimbursement Account (HRA)**



- The City will fund \$250 to the HRA for an individual and \$500 for a family. These funds will be available for use on Jan. 1st for medical claims only (cannot be used for Rx or Dental).
- The HRA funds help offset some your deductible of \$1,750 for an individual / \$3,500 family.
- Preventive (routine) medical services such as yearly physicals/exams will be paid at 100% by the plan (will not use HRA funds).
- Claims for non-preventive services will first be paid for with funds out of the HRA.
- Once you have used all of the funds in the HRA, you will pay the costs of claims until you reach the remainder of the deductible.
- Once you have met the deductible, eligible in-network claims will be paid at 80% by the plan (you pay 20%).
- You continue to pay 20% until the out of pocket maximum of \$4,000 individual / \$8,000 family has been met (amounts include deductible).
- **One family member can use all of the HRA funds in a family plan.**
- No one on a family plan will have to meet more than an individual deductible or out of pocket maximum.
- Unused HRA funds can be rolled over from year to year. The maximum rollover is \$2,500.
- To view your claims and HRA balances log onto www.aetna.com.

• **Vision** (no changes)



Aetna Vision plan

- Covers one routine eye exam at 100% for every person on your plan. No coverage for hardware.
- This does not include a contact lens exam.
- Must use a network provider to receive 100% routine benefit and discount
- Ask your current provider if they accept Aetna Vision or log onto www.aetna.com to find a list of participating providers.
- Use your Aetna medical card for the vision benefit

◆ **Aetna Concierge Customer Service**

Aetna offers a staff that are trained on the City of Lawrence Healthcare. You call one number for all benefits and claims questions. All calls are handled in the U.S. Hours of operation are Monday – Friday, 8am – 6pm central time. Self-Service options (claims status, ordering ID cards, obtaining benefits, etc.) are available 24/7. Toll free, 855-788-5785, option 4.

- **Prescription Plan (no changes)**

Specialty Medications

- Name brand and generic 30 day supply \$25 + 20%.
- Out of pocket maximum \$1,000 individual, \$2,000 family.

All other medications

- Generics 20%
- Name brand 30 day supply \$25 + 20%.
- Name brand 90 day supply \$50 + 20%.
- Out of pocket maximum \$1,000 individual, \$2,000 family.
- Will not receive new prescription card for 2020.

- **Delta Dental (no changes)**



Deductible	N/A
Maximum Benefit Payment per person	Unlimited
Preventative/Diagnostic (cleanings, exams, x-rays*)	Covered at 100% of the allowable charge, twice per year *Panoramic x-rays are covered at 80% once per year
Basic (simple extractions, fillings, periodontics)	Covered at 80% of the allowable charge
Major (crowns, dentures, bridge, oral surgery**)	Covered at 50% of the allowable charge **Oral surgery of impacted teeth (i.e. wisdom teeth) is covered under the medical benefit.

Please see the Summary of Dental Plan Benefits for more detailed information

Premium Contributions

For ALL Benefit Eligible Employees (FT/PT Regular, City Commission, Extraboard)

Coverage Level	Employee Per Pay Period	City Per Pay Period
Employee Only (Single)	\$10	\$289
Employee Plus Children	\$91	\$490
Employee Plus Spouse	\$99	\$542
Employee Plus Dependents (Family)	\$167	\$755

City of Lawrence WellCare Clinic

The WellCare Clinic with services provided by Lawrence Memorial Hospital is open to all employees (full time and part time regular) and members of the healthcare plan ages 18 and older.

Clinic Hours and Location

7:30am – 5pm Monday, Wednesday, Thursday

8am – 5pm Tuesday and Friday

The clinic is located inside Lawrence Memorial Hospital across from the Business Health Center. Parking is available on the corner of 4th and Maine Streets (4th Street Health Plaza building). Take stairs or elevator down 1 floor and follow hallway to the end. You may also enter through the emergency room doors and take a left at the first hallway.

To schedule an appointment call 785-505-3112

BeHealthy City of Lawrence Wellness Program

Wellness Program Participation for 2021 money!

You can log onto your Cerner Health Account by going to www.lmh.org. Under **Be Healthy** click on WellCare then choose City of Lawrence in the green box on the right.

Remember – if you cover your spouse on the City's Healthcare Plan then they are eligible to participate and earn incentive money in the BeHealthy City of Lawrence Wellness Program. The requirements are the same for employees and spouses.

Tier 1 (required to move onto Tier 2 or 3)

- Complete the Personal Health Assessment (PHA).
- Complete your biometric screening/blood draw;
 - Blood work from your doctor can be accepted but it cannot be older than 3 months.
 - FIRE/EMT – Blood work from your annual firefighter physical can be used.
- Attend required Advisor Visit
 - FIRE/EMT – You may choose to have your initial advisor visit at the same time as your annual firefighter physical.
- Routine Annual Physical with Primary Care doctor – self report in your Cerner account.
 - FIRE/EMT – Your annual firefighter physical can be used to meet this requirement.

Tier 2 - \$150 incentive (not required to move to Tier 3)

12 months tobacco free or enrolled in Aetna's Tobacco Cessation Program (more info in your Cerner account portal at www.lmh.org).

Tier 3 - \$250 incentive

Log at least **400** points through your Cerner Health Account between the dates of October 1, 2019 and September 30, 2020.

Flexible Spending Accounts



What are Flexible Spending Accounts (FSA's)?

FSA's are tax-favored accounts that allow participants to set aside money pretax for eligible health care and dependent care costs. When you enroll in a Flexible Spending Account, you decide how much to contribute for the entire Plan Year. The money is then deducted from your paycheck, pre-tax (before Federal & State income taxes and FICA taxes are deducted) in equal amounts over the course of the plan year (26 pay periods).

General FSA Information

Use the [Medical Expense Calculator](#) on ASI's website to help you estimate out of pocket costs for the plan year.

- **Medical Flexible Spending** – Plan Year Contribution Limit is **\$2,700**. This is a per employee limit. If your spouse has access to a flexible spending plan, they can also contribute up \$2,700; depending on the employers' maximum.
 - **You may roll over up to \$500 of unused funds to the following plan year. Any unused amount over \$500 will be forfeited.**
 - You may choose to pay for your eligible expenses with the Debit card option. If you currently have a debit card it can be used until the expiration date on the card. **KEEP ALL RECEIPTS!** Click [here](#) to find out more about the debit card option.
 - You may also choose to file a [General FSA Claim Form](#) and ASI can reimburse via direct deposit to your checking or savings account.
- **Dependent Care Flexible Spending** – Plan Year Contribution Limit is **\$5,000** per household (\$2,500 if married and filing separate tax returns).
 - Submit a [General FSA Claim Form](#) to ASI Flex to request reimbursement of incurred expenses.

Flexible Spending Online Enrollment – log into bswift (instructions on page 5).

Shared Leave Donations - Executime

- Choose code: LC (vacation) / LE (sick)
- Start date 1/1/2020
- Leave end date blank
- Benefit hours per day – enter total amount you want to donate from that code
 - Max donation is 96 hours (136 hours for fire working 24 hours shifts)
- Click Save.
- Supervisor approves as with any other time off request

Employee Assistance Program

New Directions Behavior Health



To learn more go to www.ndbh.com

- Click on 'For Individuals and Families'
- Employer code = lawrence
- The EAP....
 - Provides free counseling sessions for you and family members; Click on 'Request EAP Session' for that; or Call 800-624-5544.
 - Offers 30-minute free legal consultation; and will build a will for free.
 - Offers help with Money Matters.
 - And so much more!
 - Free and totally confidential!

Retirement



457 deferred Compensation Plan

- Currently the City's 457 plan is managed by Nationwide Retirement Solutions.
- **2020 Contribution limits (TBA by IRS)**
- 2019 Limits
 - Regular Contributions \$19,000
 - Age 50+ Catch-up \$6,000
 - 3 – Year Catch-up \$37,000

Kansas Public Employers Retirement System



Active Members

KPERS members contribute 6% of gross, federal income.

KPERS 1 – membership date on or before 6/30/2009

KPERS 2 – membership date between 7/1/2009 and 12/30/2014

KPERS 3 – membership date on or after 1/1/2015

KP&F members contribute 7.15% of gross, federal income

KPF Tier 1 – employed before 7/1/89 and did not choose Tier II

KPF Tier 2 – all NEW members are Tier II. You are a Tier II member if you were employed on or after 7/1/89 or before 7/1/89 and chose Tier II coverage.

Service Credits

Service credits represent how long a member has worked. Employees automatically earn “participating” credit for the years they work in a KPERS-covered position. Purchasing additional service credit could help you vest your benefit faster, get more at retirement and possibly retire sooner.

Types of service that KPERS/KPF members can purchase include:

- Withdrawn service – KPERS and KPF members
- Military service – KPERS and KPF members
- Year of service (those hired before 7/1/2009 had a one year waiting period before participating) – KPERS members only
- Out-of-state non-federal public service – KPERS members only
- In-state non-federal public service – KPERS members only

Contact KPERS at 888-275-5737 to see if your past service is eligible. Don't wait. Purchase costs are based on salary and age.

Thinking about retiring?

- Attend a pre-retirement seminar – hosted by KPERS each spring, these free seminars are designed to help you navigate the steps to retirement. Watch for emails/printed materials from Human Resources.
- Find out when you are eligible – know when you'll meet the age and service requirements to help you decide on the best retirement date. Contact KPERS at 888-275-5737 or Michelle Spreer at 785-832-3204 to discuss your eligibility.
- Calculate a retirement benefit estimate – you can calculate your own estimate online by logging into your personal account at www.kpers.org/mykpers. You can also complete a Benefit Estimate Request Form (KPERS-15E) and fax directly to KPERS. Contact Michelle Spreer with questions on how to complete the form.



Covered preventive services for adults commonly include:

Screenings for:

- Abdominal aortic aneurysm (one-time screening for men of specified ages who have ever smoked)
- Alcohol misuse
- Cholesterol (for adults of certain ages or at higher risk)
- Colorectal cancer*
- Depression
- Diabetes
- Hepatitis B surface antigen
- High blood pressure
- Human immunodeficiency virus (HIV)
- Lung cancer* (for adults with a history of smoking)
- Obesity
- Prostate cancer*
- Syphilis (for all adults at higher risk)
- Tobacco use
- Tuberculosis (TB) testing

Medicine and supplements

Doses, recommended ages and recommended populations vary.

- Aspirin for women at risk of preeclampsia and adults ages 50 – 69 with certain heart risk factors*
- Bowel preparation medication (for preventive colorectal cancer screening)
- Low-dosage statins: dependent on cardiovascular disease (CVD) and risk factors
- Tobacco-cessation medicine approved by the U.S. Food and Drug Administration (FDA), including over-the-counter medicine when prescribed by a health care provider and filled at a participating pharmacy

Counseling for:

- Alcohol misuse
- Domestic violence
- Nutrition (for adults with cardiovascular and diet-related chronic disease)
- Obesity
- Sexually transmitted infection (STI) prevention (for adults at higher risk)
- Tobacco use (including programs to help you stop using tobacco)

Immunizations

Doses, recommended ages and recommended populations vary.

- Hepatitis A and B
- Herpes zoster
- Human papillomavirus (HPV)
- Influenza (flu)
- Measles, mumps, rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Tetanus, diphtheria, pertussis (Tdap)
- Varicella (chickenpox)

*Subject to age restrictions.



Covered preventive services for women commonly include:

Screenings and counseling for:

- Breast cancer chemoprevention if you're at a higher risk
- Breast cancer (BRCA) gene counseling and genetic testing if you're at high risk with no personal history of breast and/or ovarian cancer
- Breast cancer mammography*
- Cervical cancer*
- Chlamydia infection*
- Gonorrhea
- Interpersonal or domestic violence
- Osteoporosis* (depending on risk factors)

Medicine and supplements:

- Folic acid supplements (for women of childbearing ages)
- Risk-reducing medicine, such as tamoxifen and raloxifene, for women with an increased risk for breast cancer*

Counseling and services**:

- Prescribed FDA-approved over-the-counter or generic female contraceptives*** when filled at a network pharmacy
- Two visits a year for patient education and counseling on contraceptives
- Voluntary sterilization services

Covered preventive services for pregnant women:

- Anemia screenings
- Bacteriuria, urinary tract or other infection screenings
- Breastfeeding interventions to support and promote breastfeeding after delivery, including up to six visits with a lactation consultant†
- Diabetes screenings
- Expanded counseling on tobacco use
- Hepatitis B counseling (at the first prenatal visit)
- Maternal depression screening
- Rh incompatibility screening, with follow-up testing for women at higher risk
- Routine prenatal visits (you pay your normal cost share for delivery, postpartum care, ultrasounds, or other maternity procedures, specialist visits and certain lab tests)

Covered preventive supplies for pregnant women:

- Breast pump supplies if you get pregnant again before you are eligible for a new pump
- Certain standard electric breastfeeding pumps (nonhospital grade) anytime during pregnancy or while you are breastfeeding, once every three years
- Manual breast pump anytime during pregnancy or after delivery for the duration of breastfeeding

*Subject to age restrictions.

**Certain eligible religious employers and organizations may choose not to cover contraceptive services as part of the group health coverage.

***Brand-name contraceptive drugs, methods or devices are only covered with no member cost sharing under certain limited circumstances, including when required by your doctor due to medical necessity.

†Limits may vary depending upon state requirements and applicability.



Covered preventive services for children commonly include:

Screening and assessments* for:

- Adolescent depression screening
- Alcohol and drug use
- Anemia
- Attention deficit disorder (ADD)
- Autism
- Behavioral and psychological issues
- Congenital hypothyroidism
- Development
- Hearing
- Height, weight and body mass index
- Hematocrit or hemoglobin
- Hemoglobinopathies or sickle cell
- Hepatitis B
- HIV
- Lead (for children at risk for exposure)
- Lipid disorders (dyslipidemia screening for children at higher risk)
- Medical history
- Newborn blood screenings
- Obesity
- Oral health (risk assessment)
- STIs
- TB testing
- Vision

Medicine and supplements:

- Gonorrhea preventive medicine for the eyes of all newborns
- Oral fluoride for children* (prescription supplements for children without fluoride in their water source)
- Topical application of fluoride varnish by primary care providers

Counseling for:

- Obesity
- STI prevention (for adolescents at higher risk)

Immunizations

From birth to age 18 — doses, recommended ages and recommended populations vary.

- *Haemophilus influenzae* type B
- Hepatitis A and B
- HPV
- Inactivated poliovirus
- Influenza
- Meningococcal (meningitis)
- MMR
- Pneumococcal (pneumonia)
- Rotavirus
- Tdap/diphtheria, tetanus, pertussis (DTaP)
- Varicella (chickenpox)

*Subject to age restrictions.