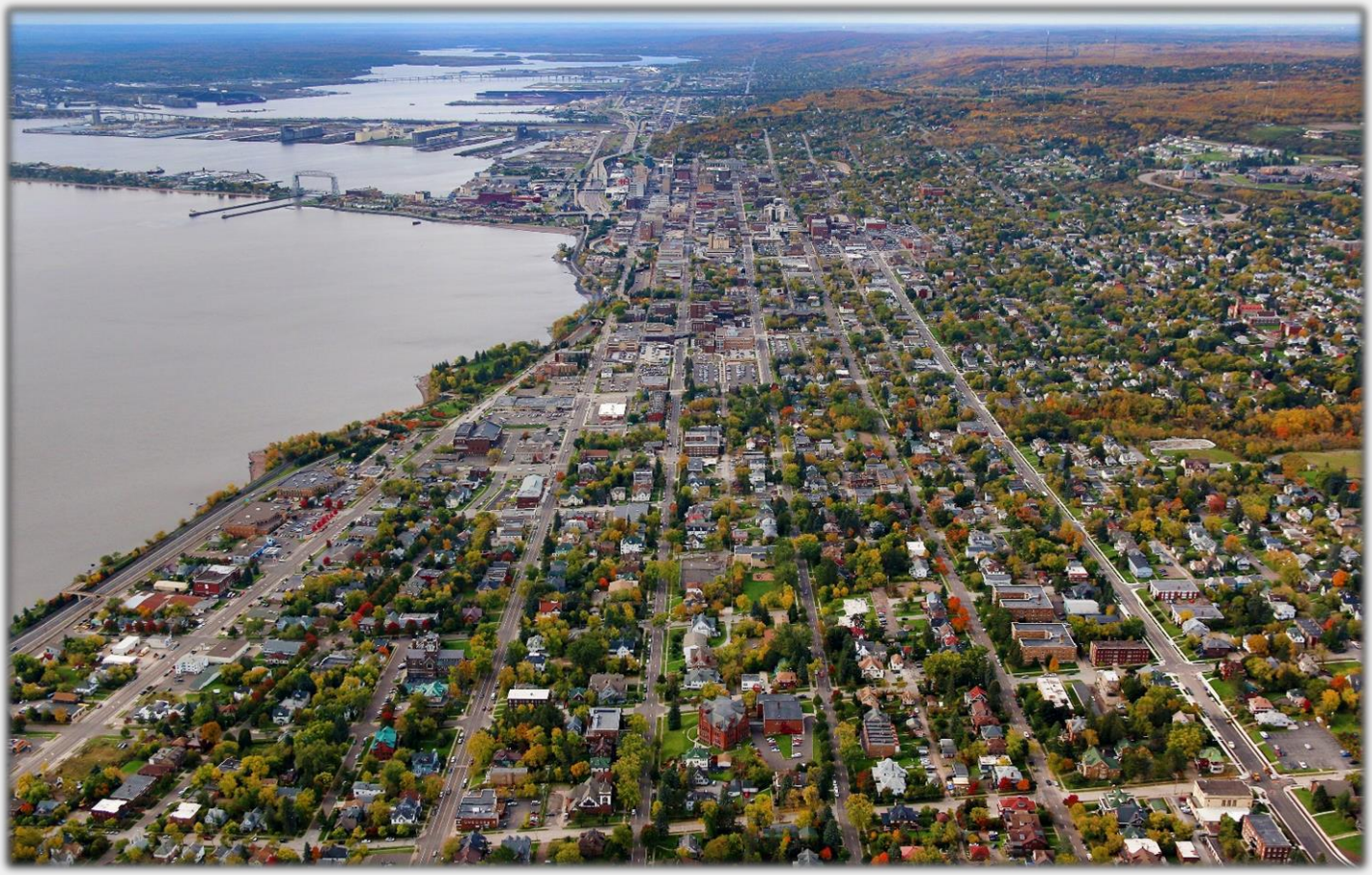

Your

# Retiree Benefit Guide

January 1, 2020 through December 31, 2020

THE CITY OF DULUTH MINNESOTA

# Open Enrollment

**Open Enrollment for 2020 begins Monday, November 4, 2019, and closes at 11:59 p.m. on Monday, November 18, 2019.**

**The 2020 Open Enrollment is a "passive enrollment"**. Passive enrollment means that if you are satisfied with your health and dental benefit plan coverage and elections, **you do not need to complete the enrollment form**. If you wish to make changes to your coverage or election tier, you must submit a benefits change form by 11:59 p.m. on Monday, November 18, 2019.

If you would like to complete your Open Enrollment form electronically, you can go to:
**https://forms.duluthmn.gov/Forms/openenrollnonemp**

**ID Cards:** New ID cards for medical/Rx coverage will only be issued for newly enrolled dependents or those newly enrolled in the Medicare plans. If you are making no changes, you will not receive new medical cards. All dental participants will receive new cards in January of 2020. Please continue to use your current card until the new cards are received. If you are in need of new cards, throughout the year, you may log into your online account for HealthPartners or Delta Dental and request new cards. Alternatively, you can call customer service (the number is on your ID card or on page 5 of this booklet) and request a new ID card.

**Payment Coupon Books:** You should receive new payment coupon books in mid to late December reflecting the new premiums for 2020. Please keep an eye on your mailbox for them. They will be sent directly from 121 Benefits.

**Eligibility** – Eligible Dependents include:

- Your legally married spouse;
- Your eligible children under age 26; including stepchildren, foster children, and legally adopted children;
- Your dependent children of any age who are physically or mentally unable to care for themselves.

**Qualifying Life Event Changes:** The IRS stipulates that changes to your benefit elections can only be made during special enrollment periods for life changing events. During the year, you may change or drop your coverage, or add/remove dependents ONLY in the event you have a change of status.

**A qualifying event includes:**

- Marriage, legal separation, or divorce
- Birth or adoption of a child
- Change in employment status for you or your spouse
- Change in dependent's eligibility status
- Change in place of residence causing a loss of eligibility
- Death of your spouse or child

All qualifying changes must be reported to Human Resources within 31 days of the event; in most cases, supporting documentation will be required, or the change may not be made until the next annual benefit enrollment.

# Medicare

## Turning Age 65 and Medicare

**MEDICARE ELIGIBILITY:**
If you or a dependent turn 65, you will receive a packet from HealthPartners which must be completed to maintain coverage. In order to maintain your coverage, post 65, you will need to apply for Medicare Parts A and B, and complete the HealthPartners Freedom/National Plan application which will be sent to you directly from HealthPartners. Failure to complete all steps will result in a lapse of coverage. If you or a dependent become Medicare eligible before age 65, please notify the City of Duluth Human Resources office.

**ADDRESS CHANGES:**
As a participating member of the City of Duluth Joint Powers Enterprise Trust benefit programs, it is your responsibility to keep the City of Duluth and benefit providers up to date with contact information such as address and phone numbers. Please keep in mind that permanent address changes may require you to change plans during the year.

The ***Freedom Plan*** is for members residing in certain counties in Minnesota and northwestern Wisconsin. This plan allows for members to be out of the area for up to 9 months of the year.

**Minnesota Counties** Eligible for Freedom Plan Coverage:

| Aitkin | Goodhue | Koochiching | McLeod | Pine | Rock | Stevens |
|---|---|---|---|---|---|---|
| Carlton | Itasca | Lake | Meeker | Pipestone | Sibley | Traverse |
| Cook | Kanabec | LeSueur | Mille Lacs | Rice | St. Louis | Yellow Medicine |

**Wisconsin Counties** Eligible for Freedom Plan Coverage:

| Barron | Douglas | Pierce | St. Croix |
|---|---|---|---|
| Burnett | Dunn | Polk | Washburn |

The ***National Plan*** is for members that permanently reside outside of the Freedom areas.

## Making Careful Choices

Your annual Open Enrollment is the only time you can change benefit plans or add/drop dependents during a plan year, unless you have a qualified status change, so please choose your benefits carefully!

Additional information regarding your benefit plans, Open Enrollment, and the health fair are available at: http://duluthmn.gov/human-resources/employee-benefits.

Any questions, concerns or suggestions regarding these benefits can be directed to Human Resources at 218-730-5210 or emailed to hrinformation@duluthmn.gov.

# Medical Costs

## 2020 Premiums – COBRA/Retirees Medical Plan Costs

| | COBRA | Retiree |
|---|---|---|
| Under 65 / Non-Medicare Eligible **Single** Coverage | $999.60 | $980.00 |
| Under 65 / Non-Medicare Eligible **Family** Coverage | $2,458.20 | $2,410.00 |
| | **COBRA** | **Retiree** |
| Medicare Eligible **Single** Coverage | $291.72 | $286.00 |
| Medicare Eligible **Retiree + Spouse over 65** Coverage | $583.44 | $572.00 |
| Medicare Eligible **1 over 65 / 1 under 65** Coverage | $1,291.32 | $1,266.00 |
| Medicare Eligible **Family (at least 1 over 65)** Coverage | $1,750.32 | $1,716.00 |

**Note to Retirees:** The percentage level of your share of the health care premium cost is not changing. For example, if you are responsible for 50% of your health care premium for 2019, the percentage will be the same for 2020. If your health care premium is fully subsidized, you will not be required to pay any part of the premium in 2020.

## 2020 Premiums – COBRA/Retirees Dental Plan Costs

| | Low Option ($1,000 Annual Benefit) | | High Option ($2,000 Annual Benefit) | |
|---|---|---|---|---|
| | **COBRA** | **Retiree** | **COBRA** | **Retiree** |
| Single | $33.66 | $33.00 | $65.28 | $64.00 |
| Single + 1 | $69.36 | $68.00 | $116.28 | $114.00 |
| Family | $116.28 | $114.00 | $183.60 | $180.00 |

Only existing participants are eligible for continued enrollment in 2020.
For example, those no longer participating in dental coverage will not have an opportunity to re-enroll in the dental program.

# Contacts

The City of Duluth, in partnership with the following carriers, strives to meet your benefit needs. If you have any questions regarding your benefits, please contact the corresponding carrier listed below or Human Resources at 218-730-5210 or email to hrinformation@duluthmn.gov.

| CARRIER | CUSTOMER SERVICE | WEBSITE |
|---|---|---|
| MEDICAL / RX<br>HealthPartners Non-Medicare Retirees Policy Number: 25077 | 800-883-2177 | www.healthpartners.com/cityofduluth |
| HealthPartners **Freedom Plan**<br>Policy Number: 25077 | 800-233-9645 | www.healthpartners.com/cityofduluth |
| HealthPartners **National Plan**<br>Policy Number: 25077 | 877-816-9539 | www.healthpartners.com/cityofduluth |
| ONLINE CARE<br>Virtuwell | | www.virtuwell.com |
| DENTAL<br>Delta Dental<br>Policy Number: 000405 | 800-553-9536 | www.deltadentalmn.org |
| COBRA & RETIREE BILLING<br>121 Benefits | 800-300-1672 | www.121benefits.com |
| MN LIFE/SECURIAN<br>Retiree Life Insurance<br>Policy Number: 28410 | 800-392-7295 | |
| PERA | 800-652-9026 | www.mnpera.org |
| Minnesota State Retirement Systems (MSRS) | 800-657-5757 | www.msrs.state.mn.us |
| City of Duluth Human Resources<br>Front Desk<br>Keely Downs, Employee Benefits | 218-730-5210<br>218-730-5197 | hrinformation@duluthmn.gov |

# Notices

## Federal regulations require City of Duluth – JPE to provide benefit-eligible employees with the following notices:

**Newborns' and Mothers' Health Protection Act** Group health plans and health insurance issuers generally may not, under federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under federal law, require that a provider obtain authorization from the plan or the issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

**Women's Health and Cancer Rights Act** Under the federal Women's Health and Cancer Rights Act of 1998, you are entitled to the following services:
1. Reconstruction of the breast on which the mastectomy was performed;
2. Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
3. Prosthesis and treatment for physical complications during all stages of mastectomy, including swelling of lymph glands (lymphedema).
Services are provided in a manner determined in consultation with the physician and patient. Coverage is provided on the same basis as any other illness.

**HIPAA Special Enrollment Rights** If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage. However, you must request enrollment within "30 days" after your or your dependents' other coverage ends. This Special Enrollment opportunity is available only if you indicated information regarding your or your dependents' other coverage on your initial enrollment form/waiver. In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption. To request special enrollment or obtain more information, contact your Human Resources office.

**Notice of Availability of HIPAA Privacy Notice under the Health Insurance Portability and Accountability Act (HIPAA)** Health plans are required to provide covered individuals with a Privacy Notice that describes, among other things, the uses and disclosures of protected health information that may be received by the plans, your rights regarding that information and the plan's responsibilities. Our original Notice was issued in April 2004 and was distributed to all covered individuals at that time. HIPAA requires that at this time we advise you that a copy of the Privacy Notice is available by contacting Human Resources and requesting a hard copy. If you have any questions on this Notice, please contact your Human Resources representative.

**Medicaid and the Children's Health Insurance Program (CHIP)** Offer Free or Low-Cost Health Coverage to Children and Families.
If you are eligible for health coverage from your employer, but are unable to afford the premiums, some states have premium assistance programs that can help pay for coverage. These states use funds from their Medicaid or CHIP programs to help people who are eligible for employer-sponsored health coverage, but need assistance in paying their health premiums. If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed in the table below, you can contact your State Medicaid or CHIP office to find out if premium assistance is available. If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, you can ask the state if it has a program that might help you pay premiums for an employer-sponsored plan. Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, your employer's health plan is required to permit you and your dependents to enroll in the plan- as long as you and your dependents are eligible, but not already enrolled in the employer's plan. This is called "special enrollment" opportunity and you must request coverage within 60 days of being determined eligible premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at **www.askebsa.dol.gov** or call **1-866-444-EBSA (3272)**.

To see if any more states have added a premium assistance program since July 31, 2016, or for more information on special enrollment rights, contact either:

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Ext. 61565

# Notices

### Premium Assistance Under Medicaid and The Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit **www.healthcare.gov**.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at **www.askebsa.dol.gov** or call **1-866-444-EBSA (3272)**.

Following is a list of states you may be eligible for assistance paying your employer health plan premiums as of January 31, 2017. Contact your state for more information on eligibility.

U.S. Department of Labor
Employee Benefits Security Administration
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

### Where to Call by State for CHIP Information

| State | Department | Phone |
|---|---|---|
| Alabama | Medicaid | 855-692-5447 |
| Alaska | Medicaid | 866-251-4861 |
| Arkansas | Medicaid | 855-692-7447 |
| Colorado | Health 1st CO | 800-221-3943 |
| Florida | Medicaid | 877-357-3268 |
| Georgia | Medicaid | 404-656-4507 |
| Indiana | Medicaid | 877-438-4479 |
| Iowa | Medicaid | 888-346-9562 |
| Kansas | Medicaid | 785-296-3512 |
| Kentucky | Medicaid | 800-635-2570 |
| Louisiana | Medicaid | 888-695-2447 |
| Maine | Medicaid | 800-442-6003 |
| Massachusetts | Medicaid & CHIP | 800-462-1120 |
| **Minnesota** | **Medicaid** | **800-657-3739** |
| Missouri | Medicaid | 573-751-2005 |
| Montana | Medicaid | 800-694-3084 |
| Nebraska | Medicaid | 855-632-7633 |
| Nevada | Medicaid | 800-992-0900 |
| New Hampshire | Medicaid & CHIP | 603-271-5218 |
| New Jersey | Medicaid | 609-631-2392 |
| New York | Medicaid | 800-541-2831 |
| North Carolina | Medicaid | 919-855-4100 |
| North Dakota | Medicaid | 844-854-4825 |
| Oklahoma | Medicaid & CHIP | 888-365-3742 |
| Oregon | Medicaid | 800-699-9075 |
| Pennsylvania | Medicaid | 800-692-7462 |
| Rhode Island | Medicaid | 401-462-5300 |
| South Carolina | Medicaid | 888-549-0820 |
| South Dakota | Medicaid | 888-828-0059 |
| Texas | Medicaid | 800-440-0493 |
| Utah | Medicaid & CHIP | 877-543-7669 |
| Vermont | Medicaid | 800-250-8427 |
| Virginia | Medicaid & CHIP | 800-432-5924 |
| Washington | Medicaid | 800-562-3022 |
| West Virginia | Medicaid | 877-598-5820 |
| Wisconsin | Medicaid & CHIP | 800-362-3002 |
| Wyoming | Medicaid | 307-777-7531 |

**Benefits Open Enrollment**
November 4 – 18, 2019*

*No changes will be accepted after the deadline.

- All Open Enrollment materials, including a benefits handbook, step-by-step FSA enrollment guide, and more, are available online at: https://duluthmn.gov/human-resources/open-enrollment.

City of Duluth Human Resources
411 West First Street
City Hall, Room 340
Duluth, MN 55802
218-730-5210

## City of Duluth/Duluth Joint Powers Enterprise Trust

# Open Enrollment

# November 4 – 18, 2019

Closes at 11:59 p.m. on 11/18/19

All open enrollment materials are available on the Human Resources website.