

2017 Open Enrollment Retiree Fact Sheet

Enrollment begins Monday, March 13 and ends Friday, April 7.

What's new?

- Medical rates are increasing in all Cigna plans
- Out-of-pocket maximums are increasing in all plans
- Pharmacy benefits are being expanded to include a network of 30- and 90-day retail pharmacies

What do I need to do?

Retirees in a Cigna plan

If you are happy with your current plan, you don't need to do anything — your coverage will remain in effect. Rates will change effective May 1, 2017.

Medicare-covered retirees

Although you have the option of switching from one Medicare plan to another at the first of any month, you can only make changes to your dental and vision plans during open enrollment. If you have a dependent in a Cigna plan and you need to make changes, now is the time. Your next available time to make a change is during Open Enrollment next year, or if you have a qualified life event.

Retirees with dental or vision plans

There are no changes to the vision and dental plans. If you are happy with it — do nothing and your coverage will remain the same.

To make changes

Download a form at cityofhoustonbenefits.org, or call Benefits at 832-393-6000 between 8 a.m. and 5 p.m. Monday through Friday to have forms mailed to you.

Before your retirement, if you waived medical, dental, or vision coverage at the City of Houston you and your dependents are not eligible to enroll during Open Enrollment.

If you opted out of your medical, dental, or vision coverage you and your dependents are eligible to participate in Open Enrollment.

Monthly medical contributions for retirees under 65 without Medicare

	Cigna Limited Network	Cigna Open Access	CDHP	RTOP
Retiree only	\$345.41	\$575.68	\$287.84	\$575.68
Retiree + children	\$552.66	\$921.13	\$460.55	\$921.13
Retiree + spouse	\$898.06	\$1,419.08	\$748.41	\$1,419.08
Retiree + family	\$1,105.32	\$1759.37	\$921.13	\$1759.37

Retiree monthly dental contributions

	DHMO	Indemnity
Retiree only	\$8.48	\$34.22
Retiree + one	\$19.44	\$78.68
Retiree + family	\$26.64	\$107.74

Retiree monthly vision contributions

	Superior Vision
Retiree only	\$7.64
Retiree + children	\$13.80
Retiree + spouse	\$13.04
Retiree + family	\$20.70

Retiree monthly Medicare plan contributions

Aetna Steerage PPO	\$96
Cigna HealthSpring	\$29
KelseyCare Advantage HMO	\$45
Medicare supplement plan F with prescription drug plan*	\$107
TexanPlus HMO	\$22

* Excludes disabled members under age 65

Contacts

Human Resources Benefits Services

832-393-6000 | 888-205-9266
benefits@houston.tx.gov
cityofhoustonbenefits.org

Cigna

800-997-1406
cityofhouston.service.inquiries@cigna.com
mycigna.com

Delta Dental

DHMO 844-282-7637 | DPPO 855-242-1549
deltadentalins.com/cityofhouston

Superior Vision

866-265-0517
superiorvision.com

Dearborn National (Life Insurance)

800-348-4512
Claims_Customer_Service@dearbornnational.com

Cigna plan comparison chart (2017 changes are highlighted in orange)

Plan features	Cigna Limited Network	Cigna Open Access	Consumer-Driven Health Plan		Retirees of Texas Option Plus
			In-network	Out-of-network	
Medical service deductible	Individual \$150 Family \$450	Individual \$750 Family \$1,500	Individual \$1,750 Family \$3,500	Individual \$3,500 Family \$7,000	Individual \$150 Family \$450
Plan year out-of-pocket max	Individual \$4,500 Family \$9,000	Individual \$6,840 Family \$13,700	Individual \$6,840 Family \$13,700	Individual \$12,000 Family \$24,000	Individual \$4,500 Family \$9,000
Health reimbursement account	No	No	Yes. The city pays the first \$500 to \$1,000 depending on coverage tier.		No
Network options	Choose from one of three Cigna Limited Network provider groups: Kelsey-Seybold, Memorial Hermann Health Network or Renaissance. Only true emergencies* are covered out of the provider group	Includes Cigna's national network Only true emergencies* are covered out of network	Includes Cigna's national network Out-of-network services provided with higher coinsurance and deductibles		Includes Cigna's national network Only true emergencies* are covered out of network
PCP	\$35	\$40	You pay 20% after the deductible is met	You pay 40% after the deductible is met	\$35
Specialist	\$65	Cigna Care Network specialist \$65 Non-CCN \$80			\$65
Outpatient surgery	\$350 per surgery Maximum of \$700 per plan year after the deductible is met	You pay 30% after the deductible is met			\$350 per surgery Maximum of \$700 per plan year after the deductible is met
Inpatient facility	\$600 per day Maximum of \$2,400 per plan year after the deductible is met				
Emergency room	\$400	\$400			
Urgent care services	\$65	\$75 facility fee 30% after deductible			\$65

Prescription benefits					
Prescription deductible	Individual \$100 Family \$300	No	Yes. Combined medical and pharmacy deductible, except for certain preventive drugs which are not subject to deductible		Individual \$100 Family \$300
Retail generic	\$10 or cost	\$10 or cost	You pay 20% Plan pays 80% after the deductible is met Specialty drugs are 30-day supply only	You pay 60% Plan pays 40% after the deductible is met	\$10 or cost
Retail preferred	\$45	20% (\$45 min/\$100 max)			\$45
Retail non-preferred	\$60	40% (\$55 min/\$150 max)			\$60
Retail specialty	\$100	40% (\$100 min/\$300 max)			\$100

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