



Health Benefits – Employee Health Plans Employee Wellness Program Employee Assistance Program

PRESENTED BY HR HEALTH BENEFITS DIVISION



Presenters



Sonya Graham

Benefits – Employee Health Plans
Administrative Coordinator



Sean Small

Benefits – Wellness Program
Sr. Public Health Educator



Margaret Nabors

Benefits – Employee Assistance
Program
Administrative Associate - EAP



Employee Health Plans

PRESENTED BY HR HEALTH BENEFITS DIVISION – BENEFITS TEAM



2020 – 2021 Benefit Plans



Benefits On Demand

- Get more detailed City Houston benefits information at <http://cityofhoustonbenefits.org>
- Click on **NEW HIRES** button for video on demand

BENEFITS



Here at the City of Houston, each employee is valued for their individual skills, talents and contributions to the success of our resilient city. And when it comes to health, we empower our employees with a comprehensive set of benefits designed to protect their physical and emotional well-being.

The following benefits are offered based on eligibility:

- Medical
- Dental
- Vision
- Life Insurance
- Flexible Spending Account
- Dependent Care Reimbursement


NEW HIRES


THINKING ABOUT RETIRING?

- Dental
- Vision
- Life Insurance
- Flexible Spending Account
- Dependent Care Reimbursement
- Long-term Disability
- Supplemental Plans
- Medicare Supplemental Plan
- Retiree Benefits
- Wellness
- Be Better Campaign
- Employee Assistance Program
- Provider Contact List
- Forms and Documents

OTHER BENEFITS LINKS

- City Employee Paid Time Off



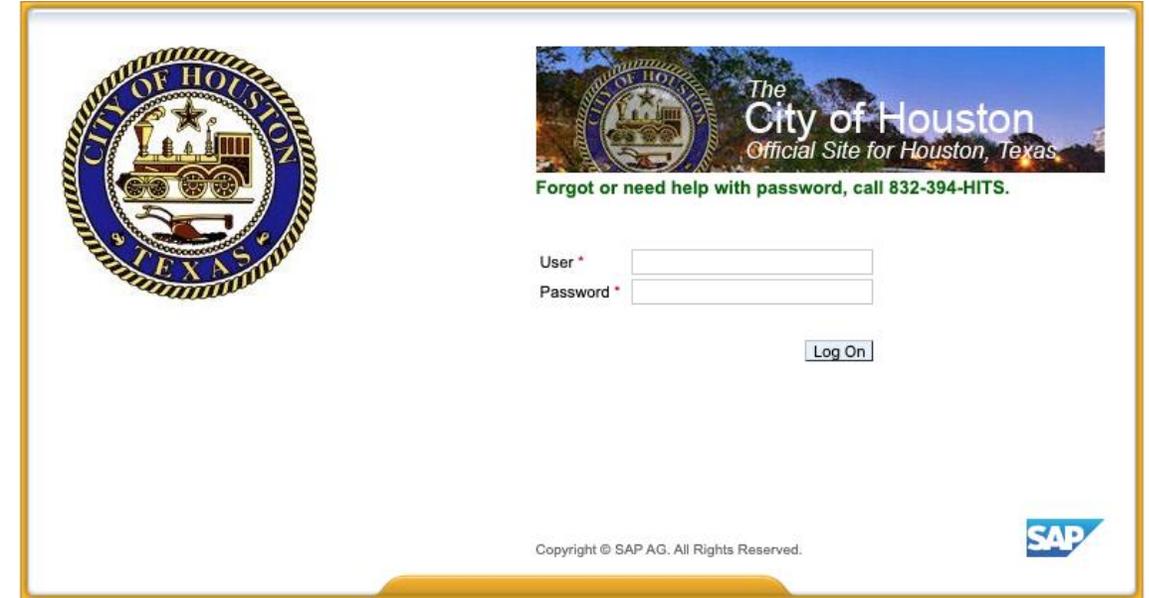
Enrolling

STEP 1

- You have 30 Days from your hire date to enroll (No Exceptions)

STEP 2

- Enroll using the Employee Self Service Portal at <https://portal.houstontx.gov/>
- Use your user ID (E123456) and an active password
- If you have trouble logging on contact HITS at 832-394-4487





Enrolling

- ❑ Click on My Benefits link
- ❑ Click Benefits Enrollment
- ❑ Click on Anytime Changes link
- ❑ For password resets contact HITS at 832-394-4487 (HITS)
- ❑ **30 Days to make selections**
- ❑ Benefits are effective on either the 1st or 16th of month following 30 days of hire

HIRE DATE

JULY 2020						
SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

BENEFITS EFFECTIVE

AUGUST 2020						
SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					



- My Profile
- My Pay
- Kronos
- Total Compensation
- **My Benefits**
- Wellness

The screenshot shows the 'Employee Services' portal. Under the 'Benefits Enrollment' section, there are two options: 'Change Your Beneficiaries' and 'Anytime Changes'. The 'Anytime Changes' option is circled in black.



Required Supporting Documents

Required Supporting Documents				
ALL necessary documents as identified below must be submitted and verified before dependents can be covered under any of the City of Houston benefits plans. Submitted documents must be County Clerk certified or court-filed documents. Each submitted document will be reviewed by the Benefits Division for approval before processing changes to coverage.				
Supporting Documents Required to Add Dependent Coverage				
Legal Spouse	Biological Children (under the age of 26)	Stepchildren (under the age of 26)	Biological Grandchildren* (under the age of 26)	Adopted/Court Ordered Dependents
<input type="checkbox"/> Social Security Number <input type="checkbox"/> Marriage Certificate copy (front) and <input type="checkbox"/> Marriage Certificate copy (back) OR <input type="checkbox"/> Social Security Number and <input type="checkbox"/> Declaration of Registration of Informal Marriage (Common Law)	<input type="checkbox"/> Social Security Number and <input type="checkbox"/> Birth Certificate OR <input type="checkbox"/> Verification of Birth Facts and <input type="checkbox"/> Social Security Number	<input type="checkbox"/> Social Security Number <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Marriage Certificate copy (front) and <input type="checkbox"/> Marriage Certificate copy (back)	<input type="checkbox"/> Social Security Number <input type="checkbox"/> Current IRS Filing <input type="checkbox"/> Birth Certificate (of covered grandchild) and <input type="checkbox"/> Birth Certificate (of covered grandchild's natural parent/ employee's biological child) <i>*Step-grandchild(ren) are not eligible for coverage</i>	<input type="checkbox"/> Social Security Number and <input type="checkbox"/> Adoption/Guardianship documents OR <input type="checkbox"/> Social Security Number and <input type="checkbox"/> Custody/ Court Order documents

Deadline to submit documentation is **30 days** from your hire date

To submit all forms and supporting documents go to cityofhoustonbenefits.org, click on benefits then click on





Qualifying Life Events

QUALIFYING LIFE EVENTS

 LOSS OF ESSENTIAL COVERAGE	 LOSS OF COBRA BENEFITS	 MARRIAGE	 BIRTH
 PERMANENT RELOCATION	 DIVORCE	 PREVIOUS POLICY HOLDER DIED	 ADOPTION
 NAMED LEGAL GUARDIAN	 GAINED NEW FOSTER CHILD	 CHANGE IN CITIZENSHIP	 NEWLY ELIGIBLE FOR GOV. ASSISTANCE

Notify Benefits Division within 30 days of Qualifying Life Event

To submit all forms and supporting documents go to cityofhoustonbenefits.org, click on benefits then click on



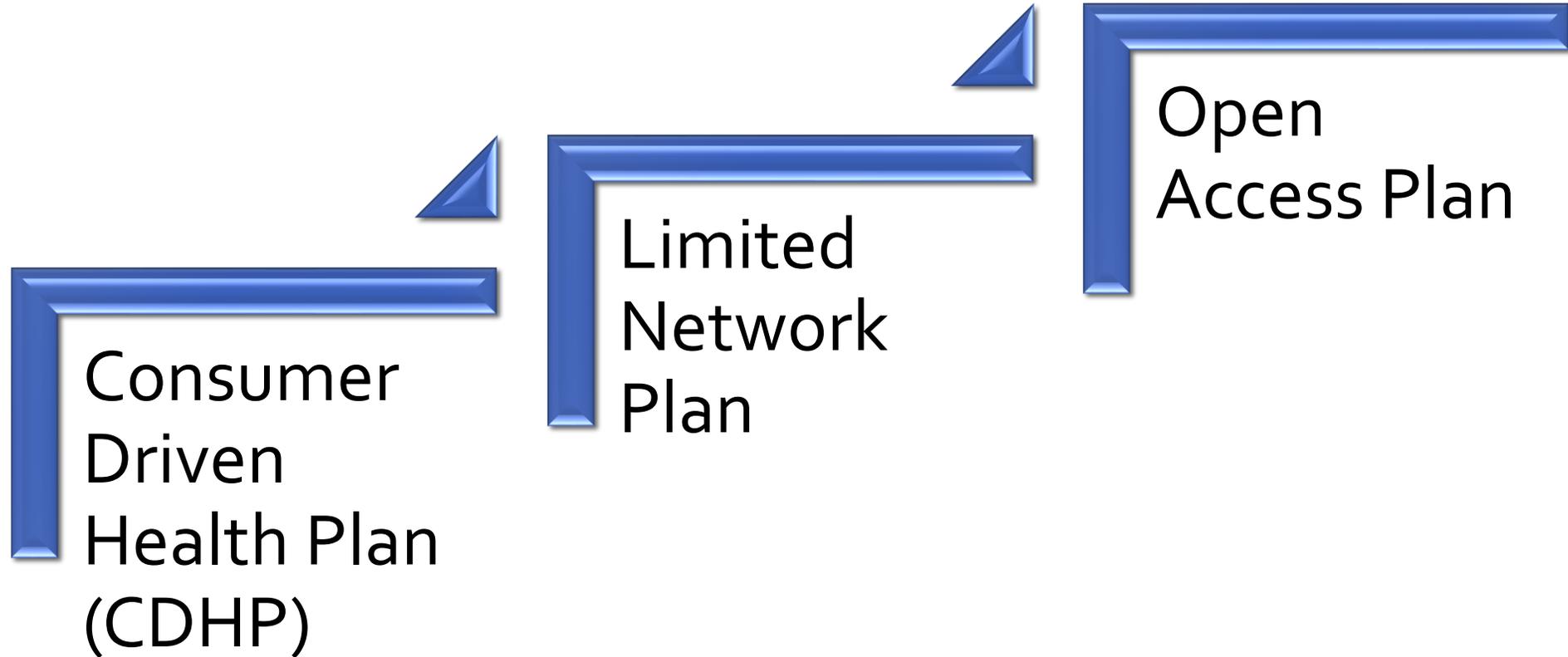


Medical Plans

ADMINISTERED BY CIGNA



Medical Plans



**All plans include free preventive care services and a four-tier prescription drug plan*



Consumer-Driven Health Plan

Medical Plan Biweekly Rates*		
Tier	Consumer-Driven Health Plan (CDHP)	
Employee Only	\$23.61	
Employee + Children	\$70.89	
Employee + Spouse	\$94.53	
Employee + Family	\$141.80	
Plan Features		
	In Network	Out-of-Network
Medical Service Deductible	Individual \$1,750 Family \$3,500	Individual \$3,500 Family \$7,000
Plan Year Out-of-Pocket Max	Individual \$8,150 Family \$16,300	Individual \$16,000 Family \$32,000
Prescription Plan Deductible	Yes. Combined medical and pharmacy deductible, except for certain preventive medications which are not subject to deductible.	
Health Reimbursement Account	Yes. The City pays the first \$500 to \$1,000 depending on coverage tier.	
Network Options	Includes Cigna's national network Out-of-network services provided with higher co-insurance and deductibles.	



Limited Network Plan

Medical Plan Biweekly Rates*	
Tier	Limited Network Plan
Employee Only	\$0
Employee + Children	\$106.78
Employee + Spouse	\$142.39
Employee + Family	\$213.59
Plan Features	
Medical Service Deductible	Individual \$200 Family \$600
Plan Year Out-of-Pocket Max	Individual \$8,150 Family \$16,300
Prescription Plan Deductible	Individual \$150 Family \$450
Health Reimbursement Account	No
Network Options	Choose from one of the provider groups. Only true emergencies* are covered out of the provider group.



Open Access Plan

Medical Plan Biweekly Rates*	
Tier	Open Access Plan
Employee Only	\$63.63
Employee + Children	\$190.86
Employee + Spouse	\$254.51
Employee + Family	\$381.75
Plan Features	
Medical Service Deductible	Individual \$850 Family \$1,700
Plan Year Out-of-Pocket Max	Individual \$8,150 Family \$16,300
Prescription Plan Deductible	No
Health Reimbursement Account	No
Network Options	Includes Cigna's national network. Only true emergencies are covered out of network.



Prescription Plan Features

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



Pharmacies



30-day prescription pharmacies:

- CVS/Target
- Kroger
- H-E-B Pharmacy
- Kelsey-Seybold
- Walgreens
- Walmart
- Participating independent pharmacies

90-day prescription pharmacies:

- CVS/Target
- Kroger
- Walmart



For more information visit:

<https://www.cigna.com/individuals-families/member-resources/90-day-network>



Free Medications

Express Scripts (formerly Cigna Home Delivery Pharmacy) offers three-month supply of these medications delivered to your home for \$0 copayment:

- Generic and brand name asthma medications
- Generic cardiovascular/high blood pressure medications
- Generic cholesterol medications
- Generic diabetic medications
- Preferred-brand diabetic test strips
- Brand name insulin

City health plan members not enrolled in Medicare are eligible for \$0 co-pay diabetic blood glucose meters

Call Express Scripts at 1-800-835-3784 to get started!





Dental Plans

ADMINISTERED BY DELTA DENTAL



Dental Plans

City offers 2 plans:

- Dental Health Maintenance Organization (DHMO)
- Dental Preferred Provider Plan (DPPO)





Dental Health Maintenance Organization



Biweekly Dental Rates

Tier	DHMO
Employee only	\$4.24
Employee + one	\$9.72
Employee + two or more	\$13.32

- No annual deductible
- No maximum annual limits
- Must select a primary care dentist
- Referrals needed for specialists
- Must live in service area
- Fixed copayments
- No claim forms



Dental Preferred Provider Organization

Biweekly Dental Rates

Tier	DPPPO
Employee only	\$17.11
Employee + one	\$39.34
Employee + two or more	\$53.87

- \$50 individual deductible / \$150 family deductible
- Maximum annual benefit of \$2,000
- Choose any dentist in the United States
- In-network dentist option helps reduce costs
- Coinsurance for services



Vision Plan

ADMINISTERED BY SUPERIOR VISION



Vision Plan

Biweekly Vision Rates	
Tier	Superior Vision
Employee only	\$4.54
Employee + children	\$8.21
Employee + spouse	\$7.76
Employee + family	\$12.31

- No deductibles
- \$20 annual exam copayment
- \$25 copayment for glasses or contact lenses
- \$150 allowance for glasses or contact lenses
- \$300 credit toward Lasik



Vision Plan

- Eyemasters/Visionworks
- Sam's Club
- TSO
- Today's Vision
- America's Best
- Walmart
- Lens Crafters
- Pearle Vision
- Vision Source
- Plus over 1,000 more providers



For a complete list, visit: <https://superiorvision.com/>



Health Flexible Spending Account

ADMINISTERED BY WAGeworks



How the HFSA Works



- To enroll log into ESS
- Select contribution amount
- You will receive a WageWorks Healthcare Card.
- Use it like a debit card at your doctor's dentist, vision visits, pharmacy and more to pay for eligible expenses.
- Bi-weekly deduction amount is determined by dividing election amount by how many pay days left in plan year which ends April 30.

CAUTION

The closer you are to the end of Plan year which is April 30, 2021 the higher your bi-weekly deduction for this benefit will be.



HFSA Eligible Expenses Examples

- Co-payments, co-insurance and deductibles for medical, dental and vision services
- Chiropractor
- Eyeglasses, reading glasses, contact lenses and contact lens solution
- LASIK
- Bandages and related items
- First aid kits
- Hearing aids and batteries
- Medical equipment
- Lab fees and diagnostic services
- Hospital services and fees





Life Insurance

ADMINISTRATED BY DEARBORN NATIONAL



Basic Life Insurance



- Basic Life Insurance at one times your base salary at no cost
- Spouse is eligible for a \$2,000 life insurance benefit
- Dependent children are eligible for a \$1,000 life insurance benefit

Voluntary Life Insurance

As a new employee:

- Up to 3x salary: no Evidence of Insurability
- 4x salary: must submit Evidence of Insurability (EOI)

Spouse: up to half your salary – \$50,000 max

Child(ren): \$10,000 max

Premiums are based on age, salary and coverage options

Rates are available on the Employee Self Service portal



LIFE INSURANCE

Gender: M



Life Insurance: Things to Consider

- A life insurance benefit will not be paid to a minor without legal financial guardianship documents
- Update beneficiaries if you encounter a life event change such as marriage, death, divorce or birth





Death Termination Pay Form

Checklist:

1. Legibly complete the form
2. Have notarized by:
 - Human Resources Benefits Representative at 611 Walker 4th floor OR
 - Notary public convenient for you





Supplemental Insurance

ADMINISTERED BY CONTINENTAL AMERICAN INSURANCE COMPANY



Hospital Indemnity Plan

Includes additional \$100 a day ICU benefit for 30 days

Plan pays a one-time hospital admission benefit of \$500

\$150 for up to 30 days for hospital confinement

\$125 for out-patient surgery

\$25 health screening benefit



Group Critical Illness with Cancer

Up to a \$20,000 lump sum is paid directly to you upon diagnosis.

Covers cancer, heart attack, stroke, coma, major organ transplant, kidney failure, burns, etc.

Different illness reoccurrence benefit payable at 100% if at least six months apart

Same illness reoccurrence benefits payable at 100% if at least six months apart (12 months for cancer)

No lifetime limit on payout

\$75 health screening benefit



Supplemental Insurance Enrollment



**Continental American Insurance
Company (CAIC)**



866-849-0011 or 832-639-4453



**Enroll on-line at
www.wecareworks.com/wecare**

Case ID: A932

User ID: Your Employee ID

**Password: Houston20 (Case
Sensitive)**



Contact Information



Email: benefits@houstontx.gov



Phone: (832)393-6000



Fax: (832)395-9409



Web:
www.cityofhoustonbenefits.org

To submit all forms and supporting documents go to cityofhoustonbenefits.org, click on benefits then click on





Employee Wellness Program

PRESENTED BY HR HEALTH BENEFITS DIVISION – WELLNESS TEAM



Wellness Program Overview

2020-2021



**Employees
and
Covered
Spouses**





THE GOAL...

Complete your annual physical, health assessment, and a wellness engagement option by the deadlines to lock in savings of up to \$900 off your 2021 medical plan rate.



Add up the savings

Level of Completion	Save \$300 (Annually)	Save \$600 (Annually)	Save \$900 (Annually)
Spouse only completes Win for Life Program Requirements	✓		
Employee only completes Win for Life Program Requirements		✓	
Employee AND Spouse complete Win for Life Program Requirements			✓



Example Savings

Medical Plan	Bi-Weekly Rate (With Medical Rate Discount)	Bi-Weekly Rate (Without Medical Rate Discount)		
		Employee does not complete Program Requirements	Spouse does not complete Program Requirements	Employee AND Spouse do not complete Program Requirements
Consumer Driven-Health Plan Employee Only	\$23.61	$\$23.61 + \$25.00 = \$48.61$	Employee Only Plan – Spouse is not required to complete Program	
Limited Plan Employee + Spouse	\$142.39	$\$142.39 + \$25.00 = \$167.39$	$\$142.39 + \$12.50 = \$154.89$	$\$142.39 + \$25.00 + \$12.50 = \179.89
Open Access Plan Employee + Family	\$381.75	$\$381.75 + \$25.00 = \$406.75$	$\$381.75 + \$12.50 = \$394.25$	$\$381.75 + \$25.00 + \$12.50 = \419.25



Does the Win for Life Wellness Program apply to me?

Exemptions – Automatically Earn Medical Rate Discount

- Employees and Covered Spouses with medical insurance benefits beginning effective on or after **Sept. 1, 2020** are **NOT** required to complete the 2020-21 Wellness Program
- Dependent children are **NOT** required to complete the Wellness Program
- Pregnant women, Employees out on Military Leave, and Employees out on FMLA or Worker's Comp (for a minimum of 2 months during the program year) are **NOT** required to complete the Wellness Program.



Win for Life Wellness Program

Employees and Covered Spouses complete 3 *easy steps* to earn a medical rate discount in 2021!

STEP 1: Complete your annual physical = **10%**

STEP 2: Health Assessment = **10%**

STEP 3: Wellness Engagement Option = **80%**

In Order to Receive
the Premium Rate
Discount,
you must reach
100%



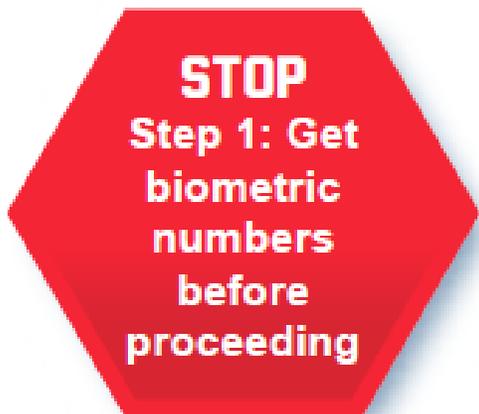
PROGRAM OVERVIEW

STEP 1 – Annual Physical – 10%

February 1, 2020 – January 31, 2021

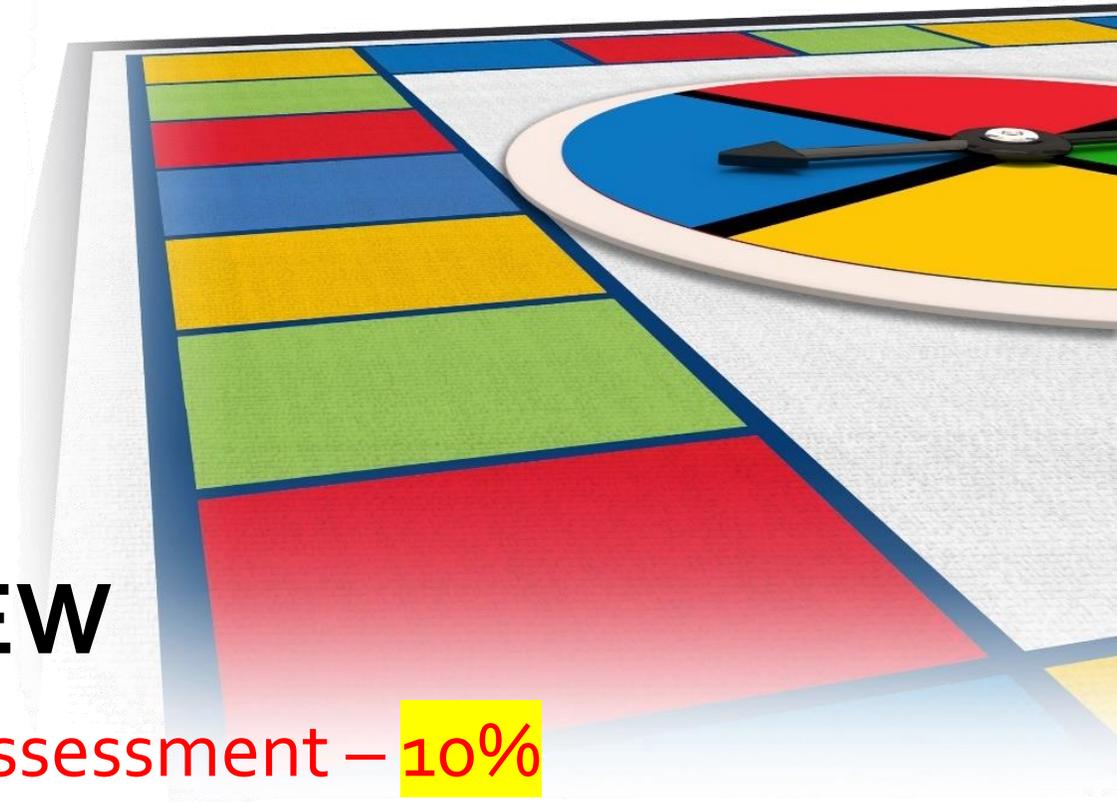
Obtain your biometric numbers **from your annual preventive exam.**

- Height
- Weight
- Blood Pressure
- Total and HDL Cholesterol
- Waist Circumference



Worth 10 % of total for discount.





PROGRAM OVERVIEW

STEP 2 – Online Health Assessment – 10%

May 1, 2020 – March 12, 2021

Use your biometric measurements to complete the health assessment on **MyCigna.com**

*Spouses must complete on their own MyCigna.com account



Worth 10 % of total for discount.



PROGRAM OVERVIEW



STEP 3 – Wellness Engagement – 80%

February 1, 2020 – March 12, 2021

Complete a Wellness Engagement Option

- Option A: Preventive Care
- Option B: Health Coaching (Virtual or Telephonic)
- Option C: Virtual Health Education Programs
- Option D: Achieve a Health Goal
- Option E: Tobacco Cessation Program

**Worth 80% of the total
for the discount**



Wellness Engagement

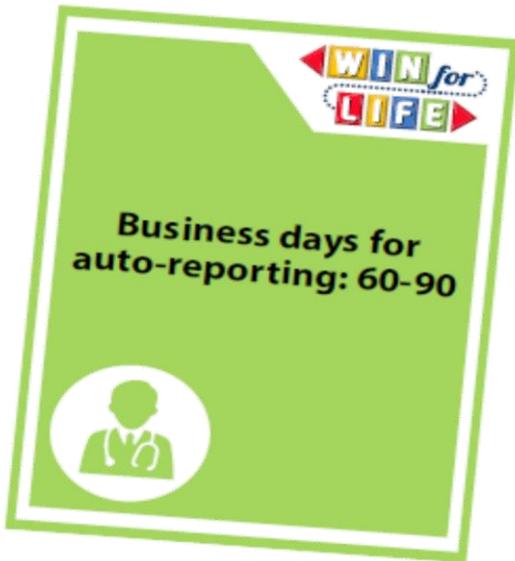
Option A: Preventive Care

February 1, 2020 – January 31, 2021

Each one is worth **40%** of the total for the discount.
Must complete 2 of this option.

- Cervical cancer screening
- Mammogram
- Prostate cancer screening
- Flu shot
- Annual Dental Exam*
- Annual Vision Exam*
- Validated Fitness Facility Attendance*
- Immunizations
(full list available on MyCigna.com)*

*** Self-reported**





Wellness Engagement

Option B: Health Coaching

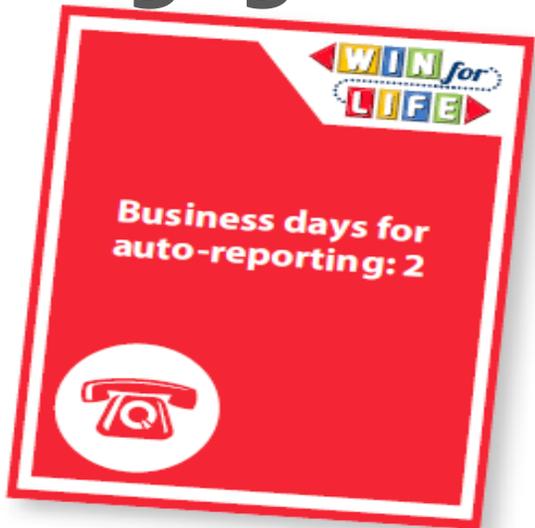
March 16, 2020 – March 12, 2021

Worth **80%** of the total for the discount.

Achieve a health goal with the support of a telephonic or virtual health coach.

You and your coach will create a health plan to help you reach your personal health goal(s) on the following topics: diabetes, low back pain, osteoarthritis, heart disease, weight management, stress management, tobacco cessation*, physical activity, healthy eating and much more.

** One-on-one tobacco coaching is only available telephonically*





Wellness Engagement

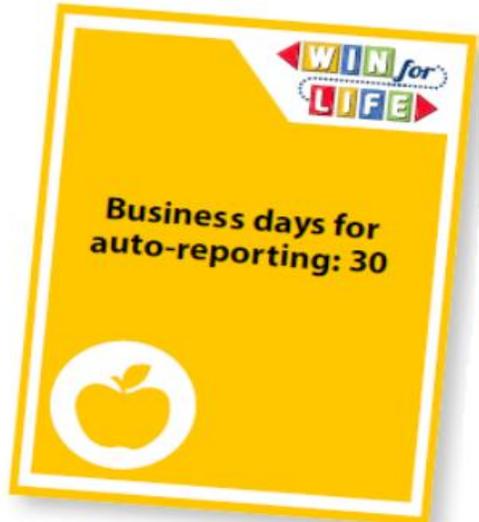
Option C: Virtual Health Education Programs

May 1, 2020 – March 12, 2021

Worth 80% of the total for the discount.

Attend or participate in a City of Houston facilitated onsite or virtual program.

- Department Challenges/Programs
- Chronic Disease and Lifestyle Management Programs
- City Fit Virtual Exercise Program
- Fitbit Challenges Program





Wellness Engagement

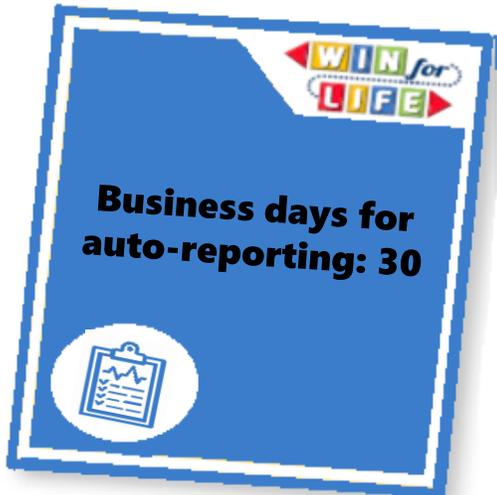
Option D: Achieve Health Goals

February 1, 2020 – January 31, 2021

Worth 80% of the total for the discount.

Use the laboratory values obtained at your annual physical to qualify for Wellness Credit based on your health. Three values must fall within the guidelines below:

- **Fasting blood sugar:** <100 OR Non-fasting blood sugar: <140
- **Total Cholesterol:** <200 mg/dl
- **LDL Cholesterol:** <129mg/dl



Report labs via Physician Fax Form available on MyCigna.com





Wellness Engagement

Option E: Tobacco Cessation Program

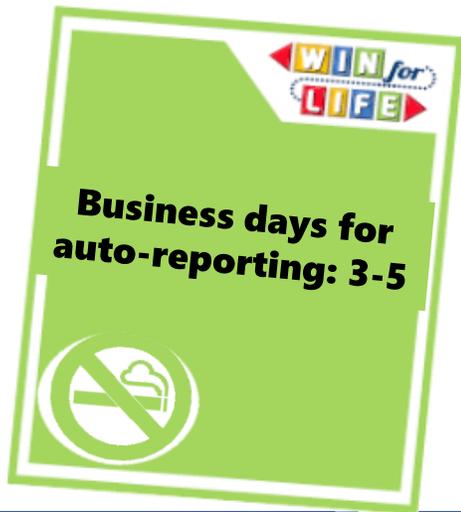
May 1, 2020 – March 12, 2021

Worth **80%** of the total for the discount.

"Living Tobacco-Free Program"

An 8-week small virtual group class* of 10 employees led by a Cigna Health Coach that focuses on a step-by-step plan for quitting tobacco and transitioning to a tobacco-free lifestyle. FREE Nicotine gum and patches provided.

** One-on-one tobacco coaching is only available telephonically*



Additional Wellness Resources



SEE A DOCTOR ON YOUR SCHEDULE.

Convenient, 24/7 care.



Cigna Telehealth Connection
Signing up is easy!

- › Set up and create an account with one or both Amwell and MDLIVE
- › Complete a medical history using their "virtual clipboard"
- › Download vendor apps to your smartphone/mobile device. Visit the website or call to register.

Register for one or both today so you'll be ready to use a telehealth service when and where you need it.

AmwellforCigna.com,* 855.667.9722
MDLIVEforCigna.com,* 888.726.3171

The cost savings are clear.



* Availability may vary by location and plan type and is subject to change. See vendor sites for details.

A photograph of a smiling woman wearing a headset, representing a Cigna telehealth representative. Overlaid on the photo is a white box with the text "800.Cigna24" and "Cigna 24-hour Health Information Line". Below the photo is the Cigna logo and the text "Call a nurse anytime day or night. Just call 800.Cigna24 or the toll-free number on your Cigna ID card: 800-997-1406".

Exclusively for KelseyCare Members!

KelseyCare | **TELEMEDICINE SERVICES**

It's Efficient. It's Convenient. It's Kelsey-Seybold Quality.

KelseyCare Telemedicine Services means you, or your child, can get convenient medical care for a number of conditions when and where you need it. With E-visits or Video Visits, your care is delivered by a Kelsey-Seybold board-certified provider who can access your medical record and send prescriptions to the pharmacy of your choice.

Go to kelsey-seybold.com/telemedicine for the latest information. If you don't have a MyKelseyOnline account, call the MKO Help Line at 713-442-6565.

**Video Visits are a covered benefit for many health plans and will accumulate to your MOOP. Check with your health plan for more details. Please note that controlled substances and narcotic pain medications cannot be prescribed.*



Cigna Onsite Customer Service Advocates
611 Walker St., 4th floor

Call us for access to care and escalated claim and eligibility concerns.
If the first letter of your last name begins with:

- (A - F) 832.393.6305
- (G - M) 832.393.6193
- (N - Z) 832.393.6191



Additional Wellness Resources



Contact us: 832-393-6000 or wconnection@houstontx.gov

Use Cigna Home Delivery Pharmacy.

- › Free standard delivery to your home or work address within the United States.
- › Fill up to a 90-day supply at one time, so you fill less often.
- › Free refill reminders by email to help make sure you don't miss a dose.
- › Refill your medication and track your orders on the myCigna app or website.
- › 24/7 access to licensed pharmacists.



Benefits of automatic refill

- › Helps maintain timely access to important maintenance medications
- › Increases customer convenience
- › Helps ensure customers stay on track with their medication therapy

Contact today: 800-285-4812



Are you missing out on free prescriptions?

DID YOU KNOW? You could be getting your prescriptions and many medical supplies for free? Cigna Home Delivery makes taking care of yourself much more convenient and affordable.

Call Cigna Home Delivery Pharmacy at 1-800-285-4812 to get a three-month supply of these drugs delivered to your home for \$0 copay:

<ul style="list-style-type: none"> ● Generic and brand name asthma drugs ● Generic cardiovascular and high blood pressure drugs ● Preferred-brand diabetic test strips 	<ul style="list-style-type: none"> ● Brand name insulin (\$25 Retail for 30-day supply) ● Generic cholesterol medications ● Generic diabetic medications 	<div style="display: flex; justify-content: space-around; margin-bottom: 10px;">    </div> <ul style="list-style-type: none"> ● Generic Preventive Meds ● City health plan members not enrolled in Medicare are eligible for \$0 copay diabetic blood glucose meters
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In accordance with the Affordable Care Act, the following medications are also available for \$0 copay:

- Tobacco cessation prescriptions and over-the-counter drugs
- Generic prescription contraceptives, over-the-counter female contraceptives with a prescription from a physician, and contraception counseling. Visit mycigna.com to view all \$0 copay contraception and generic preventive medication options being offered.

Additional Wellness Resources



HEALTHY OPTIONS—
AT YOUR FINGERTIPS



Visit [myCigna.com](https://mycigna.com) for health services and savings!

Use the [myCigna® App](#) or website.

24/7 access to all you need to know about your coverage.

- › Find out how much your medication costs
- › See which medications your plan covers
- › Find an in-network pharmacy
- › Ask a pharmacist a question
- › See your pharmacy claims and coverage details
- › Track your Cigna Home Delivery PharmacySM orders and request refills.¹
- › Connect to your Accredo online account to manage your specialty medications¹





Navigating MyCigna.com

Coronavirus (COVID-19) Update: Log in for important information and to assess your COVID-19 risk.

Login to MyCigna.com

Customer Login

Username [Forgot Username?](#)

Password [Forgot Password?](#) [Show](#)

[Log In](#)

[Haven't created an account yet?](#)

[Register](#)

[Registrarse en Español](#)

Your online account gives you a



Find Care and Costs

Search for in-network providers, procedures, cost estimates, and more.



View Claims

See a list of your most recent claims, their status, and reimbursements.



Manage Spending Accounts

Review your spending account balances, contributions, and withdrawals, all in one place.



Update Your Profile

Make sure your contact information is up-to-date so you don't miss out on important notifications about your plan.

Forgot Username

[Back](#)

Check your email

We sent an email to your email address with a temporary PIN. Enter your PIN to retrieve your username.

Temporary PIN

Didn't get a PIN? You can request a new one in 56 seconds.

Do not close this page!

[Didn't receive the email?](#)

[Answer your security questions instead.](#)

[Next](#)

Forgot Password

[Back](#)

Check your email

We sent an email to your email address with a temporary PIN. Enter your PIN to reset your password.

Temporary PIN

Didn't get a PIN? You can request a new one in 57 seconds.

Do not close this page!

[Next](#)



ID Cards Hi

- Home
- Find Care & Costs
- Coverage
- Claims
- Spending Accounts
- Prescriptions
- Wellness

Home Screen

Medical Coverage Status for: Sean ▾

In-Network Deductible Remaining **\$1,750⁰⁰** **deductible**

When you visit a provider, you pay costs for covered services until the deductible is met. Eligible in-network preventive care is covered 100% by your plan.

[View coverage details](#)

Spending Accounts

Health Reimbursement Account (HRA)
\$1,500⁰⁰ as of 6/12/19

Healthy Awards Health Reimbursement Account (HAHRA)
\$0⁰⁰ as of 6/12/19

Family Incentives

Premium Reductions earned: **0%** out of 180%

Client Administered earned: **0%** out of 30%

You haven't earned any incentives yet.

[Start earning](#)

Latest Updates

- All (3)** Prescriptions Claims **Messages (3)**
- Cigna Telehealth Connection. Convenient access to care through phone or video. A message from your health plan | [See details](#)
- Welcome To Your Cigna Plan. A message from your health plan | [See details](#)
- Win for Life From your employer | [See details](#)

Talk to a doctor or nurse 24/7 using your phone, tablet, or computer

[Connect now](#)

My Health

91/100 **My Wellness Score**
Last taken Nov 26, 2018

[Take your health assessment](#)

Know Your Numbers

Looks like you're on track. You can always retake your health assessment to update your biometric numbers.

Feedback



Doing "My Health Assessment"

Wellness

Please make sure you take your new Cigna ID card with

Welcome, Name !

Assess Your Coronavirus (COVID-19)

Check your symptoms and risk for COVID-19 and see what you can do to stay healthy.

Learn more

Tools

My Health Assessment

Apps & Activities

Personal Health Record

My Health Assistant - Online Coaching Program

Rewards & Programs

Win for Life

Healthy Rewards - Discount Programs

Resources

Health Encyclopedia

Personal Health Team

Health Topics & Resources

My Health Dashboard

Health Information Line

WebMD Health Manager

Medical Coverage Status for: Ashley

In-Network Deductible Remaining

\$1,750⁰⁰

You pay the deductible

When you visit a provider, you pay costs for covered services until the deductible is met. Eligible in-network preventive care is covered 100% by your plan.

View coverage details

Spending Accounts

Health Reimbursement Account (HRA)

\$500⁰⁰ as of 5/13/20

Healthy Awards Health Reimbursement Account (HAHRA)

\$65⁰⁰ as of 5/13/20

Win for Life

Premium Reductions earned:

0% out of 90%

Client Administered earned:

0% out of 20%

You haven't earned any incentives yet.

Start earning

Doing "My Health Assessment"

Cigna

NAME's Wellness

YOUR SCORE: 94
PEER SCORE: 90

Assessment Date	Score
05-13-20	94
08-27-19	96
02-18-19	91
08-04-17	98
10-26-16	98

Hi NAME ,
Congratulations on completing your health assessment. This is your wellness report that contains quick tips to help you on your path to better health.

[PRINT REPORT](#) [EMAIL CONFIRMATION #](#)

ESPAÑOL
TRADITIONAL
HELP
SAVE & EXIT

[MORE](#)

Checking Your Progress



Welcome, NAME !

Assess Your Coronavirus (COVID-19)

Check your symptoms and risk for COVID-19 and see what you can do to stay healthy.

[Learn more](#)

Tools

[My Health Assessment](#)

[Apps & Activities](#)

[Personal Health Record](#)

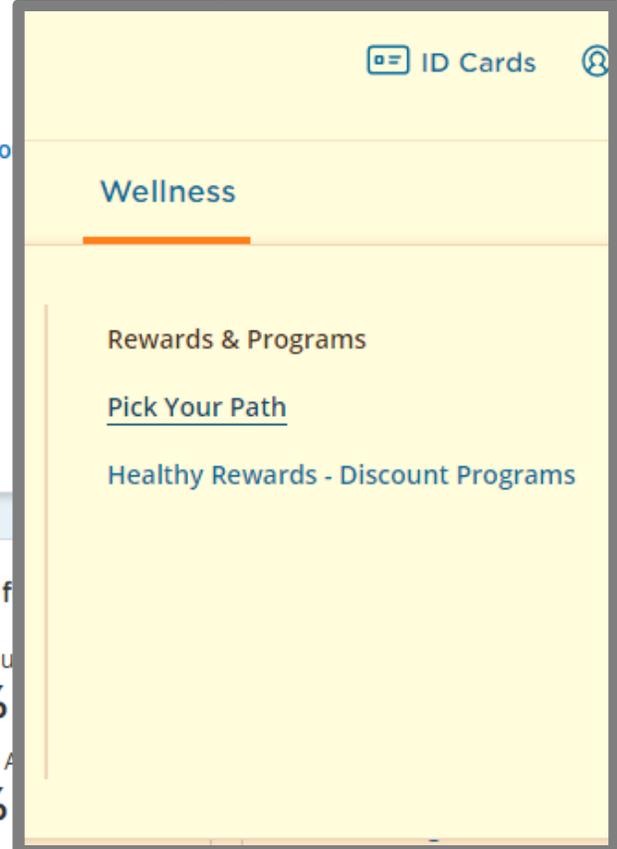
[My Health Assistant - Online Coaching Program](#)



Rewards & Programs

[Win for Life](#)

[Healthy Rewards - Discounts](#)



Medical Coverage Status for: Ashley

In-Network Deductible Remaining

\$1,750⁰⁰

[View coverage details](#)

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When you visit a provider, you pay costs for covered services until the deductible is met. Eligible in-network preventive care is covered 100% by your plan.

Spending Accounts

[Health Reimbursement Account \(HRA\)](#)

\$500⁰⁰ as of 5/13/20

[Healthy Awards Health Reimbursement Account \(HAHRA\)](#)

\$65⁰⁰ as of 5/13/20

Win for Life

Premium

0%

Client A

0%

You haven't earned any incentives yet.

[Start earning](#)

Win for Life

PROGRAM PERIOD **Current**

If you think you might be unable to meet a standard for a reward under this wellness program, or if you have a disability that prevents you from doing so, you might qualify for an opportunity to earn the same reward by different means. For more info, contact us at [800-244-6224](tel:800-244-6224).

OVERVIEW GOALS

Save, earn or score toward your 2021 awards

Your 2020 - 2021 Wellness Program: As in previous years, employees begin by completing the online health assessment and choosing your own path to wellness.

Receive your annual physical

- A. Preventive Care Activities
- B. Telephonic Coaching, Po
- C. City of Houston Onsite P
- D. Achieve Health Goals -
- E. Smoking Cessation Prog

To confirm that you have c towards your goal. For each Box B (Extra goals) lists 10 each member's information separately.

***Note: Females will show an "Extra goal" of 20% in the box on the left. Only 10% is required to complete the wellness program (Annual Physical or Well Woman/OBGYN Exam are 10% each).**

*Note: Females will show an "Extra goal" of 20% in the box on the left. Only 10% is required to complete the wellness program (Annual Physical or Well Woman/OBGYN Exam are 10% each).

Don't wait until the last minute to complete your wellness options. Some options takes longer than others to complete.

Box A - My Family Maximum

MotivateMe Core Goals

90%

Premium Reduction*

Extra goals

20%

Premium Reduction*

[View all goals](#)

Box B - Awards Earned

MotivateMe Core Goals

0%

Premium Reduction*

Extra goals

0%

Premium Reduction*

0%

90%

0%

20%

No goals yet completed. [Start now](#)

My Recent Activity

There is no recent activity to report. Have you started any goals?

[Start now](#)

How it Works

1. Receive your Annual Physical

Go to your doctor for your Annual Physical and receive your biometric numbers. The annual physical or annual OBGYN visit must be

NEED HELP

- For help finding something on the site please call 1-800-853-2713
- For help with plan and coverage information please call 1-800-997-1406
- Note:** For TTY/TDD service for hard of hearing and deaf callers, call 711 for Telecommunications Relay Service.

[VIEW MORE](#)

RELATED LINKS

- [More information](#)
- [Wellness personality quiz](#)
- [FAQs](#)

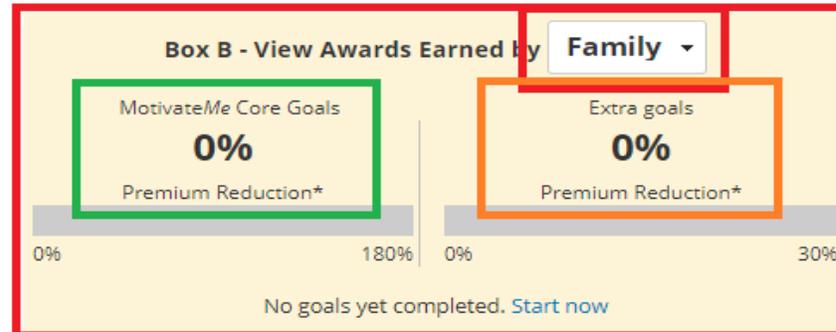
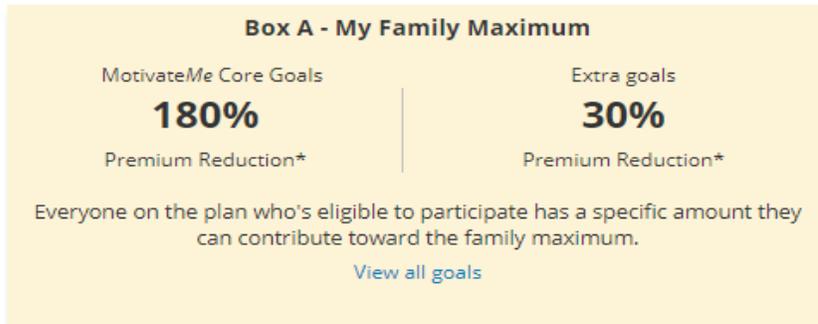
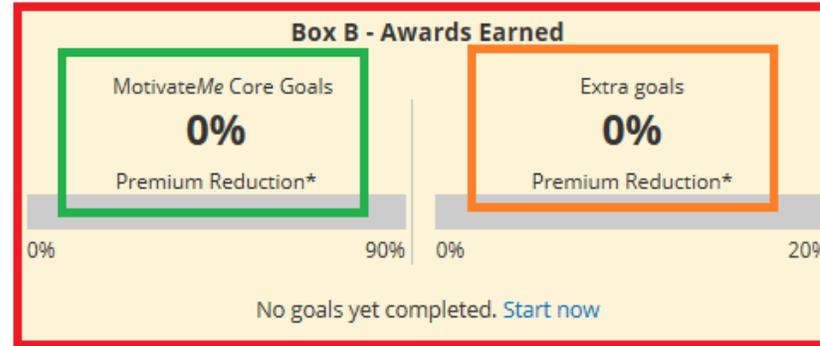
[VIEW MORE](#)



FILLING OUT AN INCENTIVES FORM?

Easily submit your completed form(s) electronically and track the status. [Get started!](#)

Checking Your Progress



If a spouse is on the plan, the maximum score will be 210%.

Goals Page: What do I need to do to receive credit?

PROGRAM PERIOD: Current

If you think you might be unable to meet a standard for a reward under this wellness program, or if you have a disability that prevents you from doing so, you might qualify for an opportunity to earn the same reward by different means. For more info, contact us at [800-244-6224](tel:800-244-6224).

OVERVIEW

GOALS

Extra

Earn an additional 10% credit by completing one of these two goals

Take advantage of the following extra goal(s) to earn even more awards--over and above the program maximums shown. Complete them at any time after completion of Step 1 goals.



10%
PREMIUM
REDUCTION*

Complete an annual physical (preventive exam)

Available: 02/01/2020 - 01/31/2021

You must complete your annual physical with your doctor between February 1, 2020 and January 31, 2021 to earn the remaining 10% towards your annual medical rate discount.

Get your physical. You will be credited when your claim is processed.



10%
PREMIUM
REDUCTION*

Schedule and complete an annual OB/GYN exam (preventive exam)

Available: 02/01/2020 - 01/31/2021

An exam that can identify early ovarian and cervical cancers, HPV (human papillomavirus), etc. for females 18+

Get your exam. You will be credited when your claim is processed.

✓ Completed on 03/22/2019

- NEED HELP?**
- For help finding something on the site please call 1-800-853-2713
 - For help with plan and coverage information please call 1-800-997-1406
 - Note:** For TTY/TDD service for hard of hearing and deaf callers, call 711 for Telecommunications Relay Service.

[VIEW MORE](#)

RELATED LINKS

- [More information](#)
- [Wellness personality quiz](#)
- [FAQs](#)

[VIEW MORE](#)



FILLING OUT AN INCENTIVES FORM?

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Self Reporting Your Activities



40% PREMIUM REDUCTION*

Option A. Schedule and complete an annual dental exam

Available: 02/01/2020 - 01/31/2021

Report your annual dental visit or annual vision exam to earn rewards.

[Report my goal activity](#)

40% PREMIUM REDUCTION*

Option A. Schedule an annual vision exam

Available: 02/01/2020 - 01/31/2021

Report your annual vision exam to earn rewards.

[Report my goal activity](#)

40% PREMIUM REDUCTION*

Option A. Receive a COVID-19 B vaccination

Available: 02/01/2020 - 01/31/2021

Report your COVID-19 B vaccination to earn rewards.

[Report my goal activity](#)

Self report completion of a goal [X]

To self-report the completion of a goal, simply choose the date of the activity, check the certification box and submit.

Date of Activity

Month [v] Day [v]

Year [v]

I certify that this information is true to the best of my knowledge.

SUBMIT Cancel



**Don't Delay, Schedule your
Physical TODAY!**

Kelsey-Seybold 713-442-0000

Renaissance Physician Organization 713-437-3060

Cigna 800-997-1406





REMEMBER!

3 Easy Steps to Earn Your Medical Rate Discount

STEP 1: Complete your annual physical = **10%**

(February 1, 2020 – January 31, 2021)

STEP 2: Health Assessment = **10%**

(May 1, 2020 – March 12, 2021)

STEP 3: Wellness Engagement Option = **80%**

(February 1, 2020 – March 12, 2021)*

Earn 100% to earn your medical rate discount!



**Deadlines vary by specific Wellness Engagement Option*



Reminder! Exemptions

- New Hires with medical benefits beginning September 1, 2020 or later
- FMLA, Worker's Comp, Military Leave for 2 or more months of the year
- Pregnant Employees and Spouses



Employee Assistance Program Overview

PRESENTED BY HR HEALTH BENEFITS DIVISION – EMPLOYEE ASSISTANCE TEAM



What is the EAP?



The Employee Assistance Program (EAP) is a free benefit provided by the City of Houston to employees and their family members.

EAP Counselors work in a consultative roll with managers and supervisors to address employee and organizational challenges.

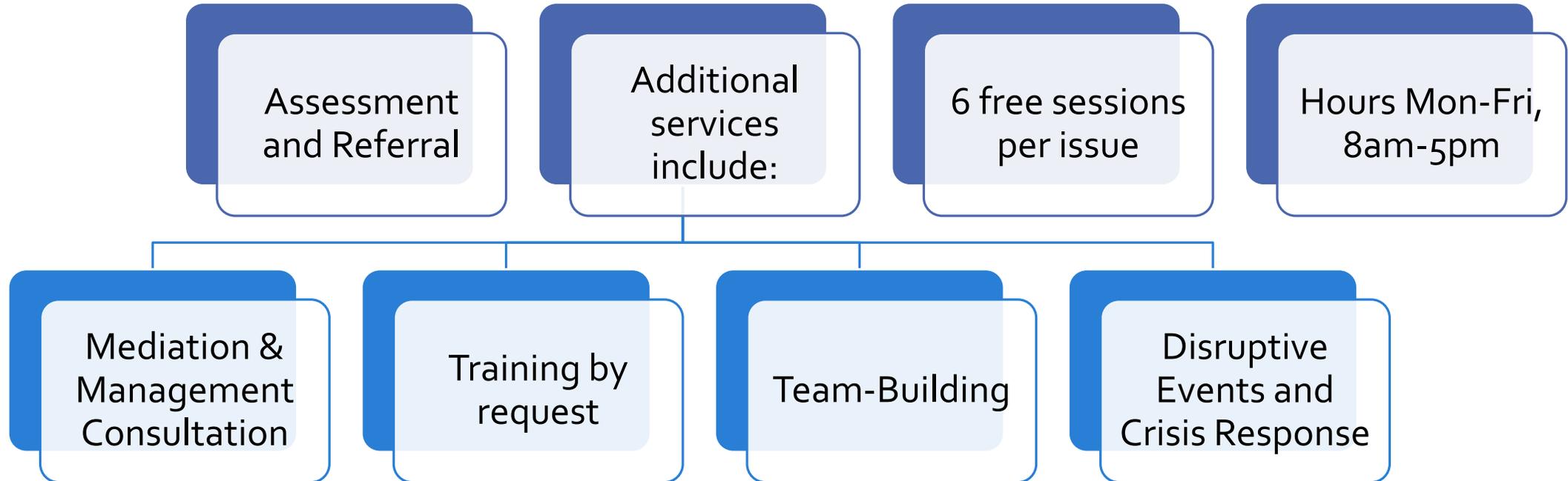
The City of Houston uses a hybrid model: both Internal and External EAP



City of Houston EAP

(832)393-6510 | **611 Walker – Garden Level**

Confidential Counseling & Coaching for Work-Related Concerns





City of Houston EAP - **Guidance Resources**

855-378-7485 | Confidential Emotional Support (Personal & Family Concerns)



Work-Life Solutions



Legal Guidance



Financial Resources



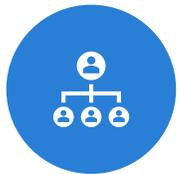
Online Support



Healthy Pregnancy



6 free sessions per situation



Available to all employees and immediate family



Available 24/7 – 365 days a year



Types of Referrals

Self Referral- employee or immediate family contacts EAP on their own (no information given to supervisor without consent)

Informal Supervisor-Referral- when a supervisor observes an employee may be experiencing emotional or behavioural difficulties that affect job performance

Soft Referral- a suggestion is made by an employee's supervisor to contact EAP (no information given to supervisor without consent)



City of Houston Employee Assistance Program (EAP)



CALL: 832.393.6510
855.378.7485



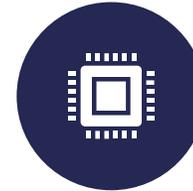
TTY: 711



APP:
GUIDANCENOW



ONLINE:
GUIDANCERESOURCES.COM



WEB ID:
HOUSTONEAP



ANNETTA VAUGHN
EAP MANAGER



Contact us

Internal EAP
832.393.6510

External EAP
1.855.378.7485

Wellness
Connection
832.393.6000



Questions

On Demand at cityofhoustonbenefits.org  NEW HIRES

Benefits (832)393-6000 Email: benefits@houstontx.gov
Wellness(832)393-6000 Email: wconnection@houstontx.gov
EAP (832)393-6510 Email: employeeassistanceprogram@houstontx.gov