



WE'VE GOT YOU COVERED 2024

OPEN ENROLLMENT



COBRA Participants

Your 2024 Open Enrollment Period is October 30 to November 13, 2023
Your Period of Coverage is January 1, 2024, to December 31, 2024

What's New for 2024

HEALTH – Two plans will be offered: CDH and HDHP In/Out of Network (OON).

- HDHP IN/OON Annual deductible increased to \$1,600 Single/ \$3,200 Family per IRS requirements.
- Rates increasing for CDH and HDHP OON due to 9.5% increase in cost to County

DENTAL – Two plans offered (Humana DHMO and UHC DPPO). The UHC Dental PPO Plan rates have increased effective January 1, 2024.

VISION – Humana became the vision insurance provider on July 1, 2023. This plan continues with no changes in plan design and no rate increase.

UHC ONSITE HEALTHCARE REPRESENTATIVES/ ADVOCATES

Need assistance with your UHC health, pharmacy, dental PPO coverage, claims or providers? Contact one of the UHC on-site Health Care Advocates:

Neerie Kolehma Ph: 954-357-7191
Email: Neerie_kolehma@uhc.com

Chris Sands Ph: 954-357-7192
Email: Chris_Sands@uhc.com

It is time to review your benefits and make any changes for the coming year!

At Open Enrollment, as a COBRA participant, you may continue, cancel, or decrease current coverage. You may add or drop dependents; however, this will not change the length of your COBRA period. Any changes to your COBRA participant benefits will require your written authorization.

❖ Changes in premium rates will be based on the changes you make. The changes and premiums will be effective January 1, 2024.

❖ *Your current coverage will automatically rollover unless BOI is notified in writing to change or cancel coverage.*

Open Enrollment Checklist

- ✓ Review enrollment materials starting on October 24, 2023, at broward.org/OpenEnrollment
- ✓ Attend a Virtual or live Presentation and Vendor Fair.
- ✓ Make any 2024 benefit changes between October 30 and November 13, 2023. **Current elections will automatically rollover.**
- ✓ If enrolling new dependents, date of birth, Social Security number and proof of relationship must be submitted to BOI by November 13.

2024 OPEN ENROLLMENT VIRTUAL & LIVE PRESENTATIONS and VENDOR FAIRS
Schedules are available
at **Broward.org/Benefits** Select the **EVENTS** tab.

PLAN OPTIONS FOR 2024


HEALTH PLANS

The County offers two types of health plans: a Consumer Driven Health (CDH) Plan and a High Deductible Health Plan (HDHP) through UnitedHealthcare, both with a national network.

Highlights of HDHP OON Plan



HDHP Out of Network (OON) with in- and out-of-network coverage with a national network. The HDHP OON plan has lower monthly premiums but more out-of-pocket at the time of use until the annual deductible is met.

In Network: All health (including prescription) services are subject to a combined annual deductible and coinsurance maximum based on the tier of coverage except for mandated preventive services or designated preventive prescriptions (see Preventive Rx list at Broward.org/OpenEnrollment then select Pharmacy, Preventive Drug List).

- Medical and prescription expenses will be applied toward meeting the annual deductible and coinsurance amount based on the tier of coverage (Member only coverage or Dependent/Family coverage).
- Once the annual deductible is met, you pay 20% coinsurance, and the Plan pays 80% of the eligible discounted plan rates (in-network).
- When you reach the out-of-pocket maximum, the Plan pays 100% of eligible in-network medical and prescription expenses for the remainder of the calendar year.
- Virtual/Telehealth Visits for medical and behavioral health.
- Preventive services and designated preventive prescriptions are covered at 100%.
- 30-day Specialty pharmacy home delivery.
- If you have dependents not living at home or attending college, check UnitedHealthcare's national network to ensure coverage is available to meet your dependent(s) s.

Out of Network: Out-of-network coverage has a higher deductible (\$3,000 Single, \$6,000 Family) and coinsurance (you pay 40% coinsurance, and Plan pays 60%). There are no contracted rates with out-of-network providers and facilities. Prescriptions and Preventive Services are not covered out of network. See UHC's Benefits Guide for additional details.

Highlights of CDH Plan

- Preventive services, when billed by Provider as Preventive, covered 100% in-network.
- Some services received for a copay (Primary, Specialist, Urgent Care, Emergency Room).
- Some services subject to an annual deductible/co-insurance (Outpatient or inpatient services or procedures, ambulance, etc.) Prescriptions have a separate max out-of-pocket.
- Virtual visits for medical services \$40 ay.
- Behavioral Health/Substance Abuse out-patient services first 20 visits covered at no cost, then \$25 copay.
- Diagnostic tests at a participating freestanding facility capped at \$100 per test.
- Prescriptions covered in-network only. Large national network of participating macies.
- 90-day maintenance medication available through retail or mail order.
- Restricted generic policy (generics will be dispensed if available unless the doctor indicates on the prescription "Dispense As Written" (DAW1) due to medical necessity. If drug is not on the Formulary, doctor will be required to submit a Prior Authorization request detailing the medical necessity for the non-formulary drug and that member has tried one formulary drug unsuccessfully. Member will pay a higher copay.
- Some prescriptions require Prior Authorizations and are shown on the Formulary with a PA.
- No Out of Network coverage for health or pharmacy except due to a true medical emergency. See UHC's Benefits Guide for additional details.

HEALTH PLAN COMPARISON-2024

Services	HDHP OON		CDH
	(In-Network)	(Out-of-Network)	(In-Network Only)
Network Name	Choice +	Not Applicable	Choice
Annual Deductible	\$1,600 Single / \$3,200 Family	\$3,000 Single / \$6,000 Family	\$1,300 per member, max \$2,600 per Family
Annual Coinsurance	\$1,825 Single / \$3,650 Family You pay 20%	\$3000 Single / \$6,000 Family You pay 40%	\$1,500 per member, max \$3,000 per Family You pay 20%
Annual Maximum Out of Pocket	\$3,425 Single / \$6,850 Family Medical & Rx combined	\$6,000 Single/ \$12,000 Family Medical & Rx combined	Medical: \$2,800 per member, max \$5,600 Family Rx: \$3,000 per member, max \$6,000 per Family
Pharmacy Benefits	20% after deductible* * Preventive Rx List no cost	No out of network coverage	Fixed copay structure* * Preventive Rx List no cost
Preventative Care	100% coverage	40% after deductible	\$0 copay
Primary Care Visit	20% after deductible	40% after deductible	\$25 copay
Specialists Visit	20% after deductible	40% after deductible	\$50 copay
Virtual Visit	20% after deductible	40% after deductible	\$40 copay
Urgent Care	20% after deductible	40% after deductible	\$50 copay
Diagnostic tests, labs, x-rays at free standing facilities	20% after deductible	40% after deductible	20% or \$100 whichever is less
Emergency Room	20% after deductible	20% after deductible	\$250 copay
Ambulance	20% after deductible	20% after deductible	20% after deductible
Inpatient/Outpatient Hospital Services	20% after deductible	40% after deductible	20% after deductible
Chiropractic ¹	20% after deductible	40% after deductible	\$50 copay
Physical, Occupational, Speech & Cognitive therapy ²	20% after deductible	40% after deductible	\$50 copay
Mental Health-Outpatient Visit	Deductible, then 20 visits at no charge	40% after deductible	First 20 visits – no charge, then \$25 copay
Mental Health-Virtual Visit	20% after deductible	40% after deductible	First 20 visits – no charge combined with Outpatient Visits, then \$40 copay
Durable medical equipment	20% after deductible	40% after deductible	20% after deductible
Basic Dental and Vision Rider Embedded in health coverage	Included—No cost	No out of network coverage	Included—No cost

¹ Maximum 24 visits per calendar year, based on medical necessity.

² Maximum 60 visits combined per calendar year, based on medical necessity.

REMINDER: Always verify your provider is network to receive services at the negotiated plan rates.


Review:

2024 Preventive Drug List, 2024 Formulary and 2024 Formulary Exclusion list at broward.org/OpenEnrollment. Contact your doctor if your prescription needs to be changed for January 1, 2024.

SPECIAL PROGRAMS

Advocate4Me and Nurseline	Assistance with understanding your health plan, claims and estimating costs ahead of time.	Contact Member Services
Bariatric Program	If approved for weight loss surgery, additional, separate \$4,500 deductible applies. No Out of Network coverage.	Contact Member Services before beginning program
Cancer Resource Services	Personal support from an experienced cancer nurse.	Contact Member Services or visit myuhc.phs.com/cancerprogram
Healthy Baby/Pregnancy Support	Resources and tools to stay healthy and manage your health.	Contact Member Services
Neonatal Resource Services (NRS)	Neonatal specialists and nurses to help ensure the right plan of care for your NICU infant.	Contact Member Services
Orthopedic Support Solution	Provides assistance for surgical and non-surgical treatment.	Contact Member Services

ONSITE HEALTHCARE REPRESENTATIVES/ADVOCATES

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Neerie Kolehma Ph: 954-357-7191 Email: Neerie_kolehma@uhc.com
Chris Sands Ph: 954-357-7192 Email: Chris_Sands@uhc.com

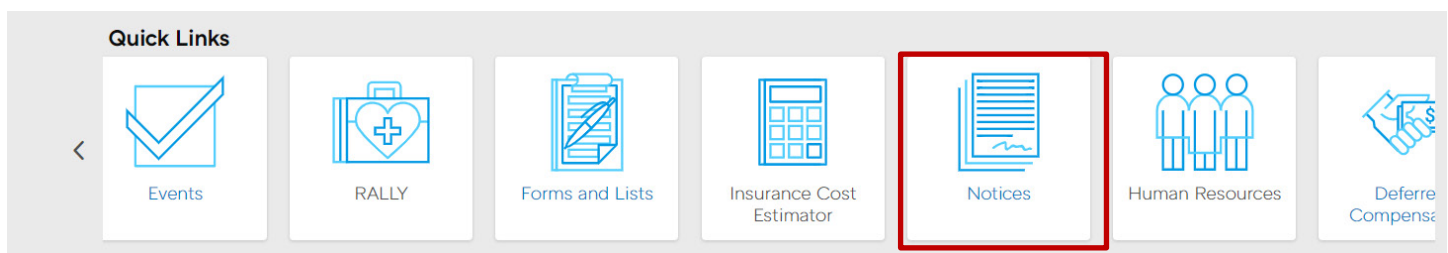
EXCLUSIONS AND LIMITATIONS








All health plans have specific Exclusions and Limitations. Please contact the on-site UnitedHealthcare Advocate for more information.

Plan information can be found at myuhc.com.

Notices such as HIPAA Notice of Privacy Practices, Domestic Partner and Over Age Dependents, Special Enrollment Notice, etc. can be found at [Benefits Notices \(broward.org\)](http://Benefits Notices (broward.org)), Quick Links, Notices

Quick Links





<  Events  RALLY  Forms and Lists  Insurance Cost Estimator  Notices  Human Resources  Deferre Compense

DENTAL PLANS


DHMO NTAL Plan – Humana

HIGHLIGHTS

- 3rd regular cleaning at no cost
- Free oral cancer screening (age 18 and older)
- Pre/Postnatal deep cleaning at no cost
- Implant Rider covering 50% up to a max of \$1,500 per year, \$10,000 per lifetime.
- In-network coverage only, South Florida network
- No referral for  sialty services
- Must select a Primary Care Dentist or Facility
- Covered services based on Fee Schedule, all other services received at a discount
- Orthodontia coverage for children and adults
-  claim forms to file


If moving outside of Humana's South Florida DHMO dental network, dental coverage must be changed to DPPO Plan under UHC. Contact BOI for assistance.

DPPO NTAL PLAN – UnitedHealthcare

- **HIGHLIGHTS**
-  er network in Florida and nationally
- 3rd regular cleaning at no cost
- MaxMultiplier Program
- No waiting periods for major services and orthodontia
- On-site Healthcare Advocates
- In- or out- of network coverage
- Maximum annual benefit of \$1,500 per person in-network, \$1,000 per person out-of-network
- Orthodontia coverage for children only (coverage ends when child turns age 19, regardless of where he/she is in treatment process)
- Some exclusions and limitations

VISION PLAN - HUMANA

HIGHLIGHTS

- In- and out-of-network coverage with a National Network.
- Two comprehensive eye exams per calendar year for diabetics.
- Children's Eye Care Program includes a second eye exam each year for covered child up to age 13
- Exams, Eyeglass Frames,  es, and Contact Lens coverage
- Large network of providers

For more information on plans, go to Broward.org/OpenEnrollment or email benefits@broward.org. When emailing, please let us know you are a Cobra member.

Current 2023 coverages will automatically rollover with an increase in premium. Notify Benefits Outsource Inc. (BOI) of a  changes for 2024 coverage by November 18, 2023.

Dependents

Newly enrolled dependents without the required documentation (marriage certificate, birth certificate, etc.) on file with BOI by November 13, 2023, will be removed from medical, dental, and vision plans and will not be covered for 2024.

If you are enrolling new dependents, please provide the **Social Security number** and date of birth for each enrolled dependent. This is now required due to the annual Health Care Reform reporting.

Over Age Dependents (child aged 26 through end of year when reaches age 30)

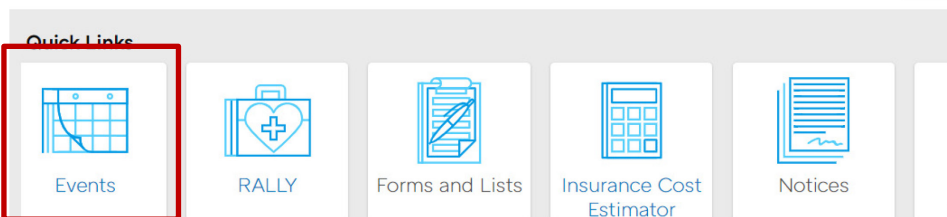
The **\$43.33 monthly surcharge for Over Age Dependents'** health coverage remains the same. Over Age Dependent must meet the following criteria:

- (a) Is unmarried and does not have a dependent of his/her own;
- (b) Is a resident of the State of Florida or a full-time or part-time student; and
- (c) Is not provided/offered coverage as a named subscriber, insured, enrollee, or covered person under any other group, blanket, or franchise health insurance policy or individual health benefits plan, or is not entitled to benefits under Title XVIII of the Social Security Act
- (d) Has been continuously covered by other creditable coverage without a gap in coverage of more than 63 calendar days. (Proof of prior coverage required.)

2024 OPEN ENROLLMENT VIRTUAL & LIVE PRESENTATIONS and VENDOR FAIRS
Schedules are available
at **Broward.org/Benefits**
Select the **EVENTS** tab.



Open Enrollment
Begins October 30th
Ends November 13th
Sign up for The WellBeing BUZZ



Quick Links

- Events
- RALLY
- Forms and Lists
- Insurance Cost Estimator
- Notices

2024 COBRA CONTINUATION INSURANCE MONTHLY RATES

2024 HEALTH RATES	MONTHLY
UHC HDHP Out of Network	
Single	\$684.73
Single + SP/DP	\$1,472.74
Single + CH	\$1,259.36
Single + CH with OAD ¹	\$1,303.50
Single + Fam	\$2,152.81
Single + Fam with OAD ¹	\$2,197.01
UHC CDH	
Single	\$1,112.53
Single + SP/DP	\$2,392.86
Single + CH	\$2,046.03
Single + CH with OAD ¹	2,090.23
Single + Fam	\$3,497.55
Single + Fam with OAD ¹	\$3,541.74

¹ Tiers of coverage with an Over Age Dependent include the \$43.33 monthly surcharge

TIER	DENTAL DHMO-
	Humana
Single	\$11.98
Single + SP/DP	\$21.53
Single + CH	\$23.96
Single + Fam	\$28.73
DENTAL PPO - UHC	
Single	\$36.38
Single + SP/DP	\$72.20
Single + CH	\$84.69
Single + Fam	\$120.51
VISION – HUMANA	
Single	\$9.08
Single + SP/DP	\$18.21
Single + CH	\$17.26
Single + Fam	\$27.14

If you wish to make changes or stop your coverage, contact Benefits Outsource Inc.

Email: benefits@boibenefits.com

Tel: 954-680-7626 | Fax: 877-220-3249

5599 S University Drive, Suite 201, Davie, FL 33328

Stay Safe This Flu Season – get a flu shot.

Flu shots are available at no cost for insured members at the pharmacy, Publix, Walmart, Target, etc. Remember to present your UnitedHealthcare ID card. Flu shots available at Open Enrollment Vendor Fairs – no appointment required.



RESOURCES:

Eligibility, billing, payment or FRS deduction questions or issues:

Contact	Phone	Email	Website
Benefits Outsource, Inc. (BOI)	954-680-7626 888-877-2780	benefits@boibenefits.com	https://boibenefits.wealthcarecobra.com

UnitedHealthcare (UHC), Health, Dental DPPO or HUMANA Vision or Dental HMO assistance, provider assistance, Explanation of Benefits:

Medical and Pharmacy	1-866-873-3903 1-954-357-7191 1-954-357-7192	Customer Service Onsite Healthcare Advocate Onsite Healthcare Advocate	Myuhc.com
Basic Dental Plan embedded in Medical Coverage (Solstice)	1-877-816-3596 1-954-357-7191 1-954-357-7192	Customer Service Onsite Healthcare Advocate Onsite Healthcare Advocate	Myuhc.com
Basic Vision Plan embedded in Medical Coverage	1-888-563-4497 1-954-357-7191 1-954-357-7192	Customer Service Onsite Healthcare Advocate Onsite Healthcare Advocate	Myuhc.com
Behavioral Health Care		Secure messaging through myuhc.com	Myuhc.com
Virtual Visits		Access through Myuhc.com	Myuhc.com
Vision Plan (standalone)	877-398-2980	Customer Service	Myhumana.com
DPPO Dental Plan (standalone)	1-800-445-9090 1-954-357-7191 1-954-357-7192	Customer Service Onsite Healthcare Advocate Onsite Healthcare Advocate	Myuhc.com

Humana DHMO

DHMO Dental Plan	1-800-979-4758	Customer Service	Myhumana.com
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Medicare information

Valery Insurance Agency	1-800-330-8445	Info@valeryagency.com	
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Want to receive information throughout the year? Provide BOI with your email. The County does not maintain your data, we request it from BOI as needed.

Interested in what's happening at Broward County? Stay connected through Facebook, LinkedIn, Twitter, and YouTube social media sites and/or subscribe to many County Publications. Sign up at Broward.org/stayconnected.