



## **Dawson County Board of Commissioners 2022 – 2023 Benefits Enrollment Guide**



Welcome to your new Benefits Enrollment Guide. This guide is your summary of the benefit options that are available to eligible employees of the Dawson County Board of Commissioners. Each benefit is designed to protect your health and well-being as well as provide valuable financial protection.

Each section of the Benefits Enrollment Guide is structured to provide you with plan highlights as well as detailed, descriptive instructions to assist you in navigating through the web-based enrollment portal.

While the Benefits Enrollment Guide is an important component in the benefit communication process, your dedicated NFP service team will provide virtual enrollment meetings in addition to being available for questions and concerns regarding benefits throughout the plan year.

Please review the plans contained in the Benefits Enrollment Guide and see how these plans can work for you and your eligible dependents. Your participation in the plans is voluntary. The benefit plans have been chosen to provide a continuation of protection that complements Dawson County Board of Commissioners' current policies.

*The plan year is in effect from July 1, 2022 to June 30, 2023.*

This Benefits Enrollment Guide is intended for orientation purposes only. It is an abbreviated overview of the plan documents. Please refer to the Certificate Booklet (the contract) available from the plan carriers for complete details. Your Certificate Booklet will provide detailed information regarding co-payments, coinsurance, deductibles, exclusions and other benefits. The certificate booklet will govern should a conflict arise relating to the information contained in this summary. This summary does not establish eligibility to participate in or receive benefits from any benefit plan.

Benefits are available to full time employees working a minimum of 30 hours a week. Benefit coverage begins on the first of the month following 60 days after your date of hire. You are also eligible to cover your spouse and dependent children up to age 26 or disabled children.

Upon termination, your life and disability plans will end on the date of your termination. Your voluntary life plan can be converted to an individual policy through **Standard** if you were enrolled at time of termination and completed the necessary forms. Your medical, dental and vision coverage will end on the last date of the month of termination.

**F**or information on Cobra coverage, please contact NFP at 800-994-7429.

**NOTICE: If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a Federal law gives you more choices about your prescription drug coverage. Please see page 20 for more details.**

# Table of Contents

Topic	Page
New for 2022-2023 and Eligibility	4
Benefits Resource Center	5
Before You Enroll	6
How To Enroll	7
Medical and Prescription Coverage	8-9
Dental	10
Vision	11
Payroll Deductions	12
Basic Life / Voluntary Life	13-14
Short Term Disability	15
Long Term Disability	16
Employee Assistance Program	17
Flexible Spending Account	18
Pet Insurance	19
Disclosure Notices	20-22
Insurance FAQs	23
How to Contact Humana	24
Why Should We Contact the Service Center	25
Contact Information	26

This guide describes the benefit plans available to you as an eligible employee of Dawson County. The details of these plans are contained in the official Plan Documents, including some insurance contracts. This guide is meant to cover only the major points of each plan. It does not contain all of the details that are included in your Summary Plan Descriptions (SPD) (as described by the Employee Retirement Income Security Act).

If there is ever a question about one of these plans, or if there is a conflict between the information in this guide and the formal language of the Plan Documents, the formal wording in the Plan Documents will govern.

Please note the benefits described in this guide may be changed at any time and do not represent a contractual obligation on the part of Dawson County and NFP.

## What's Offered for 2022 - 2023?

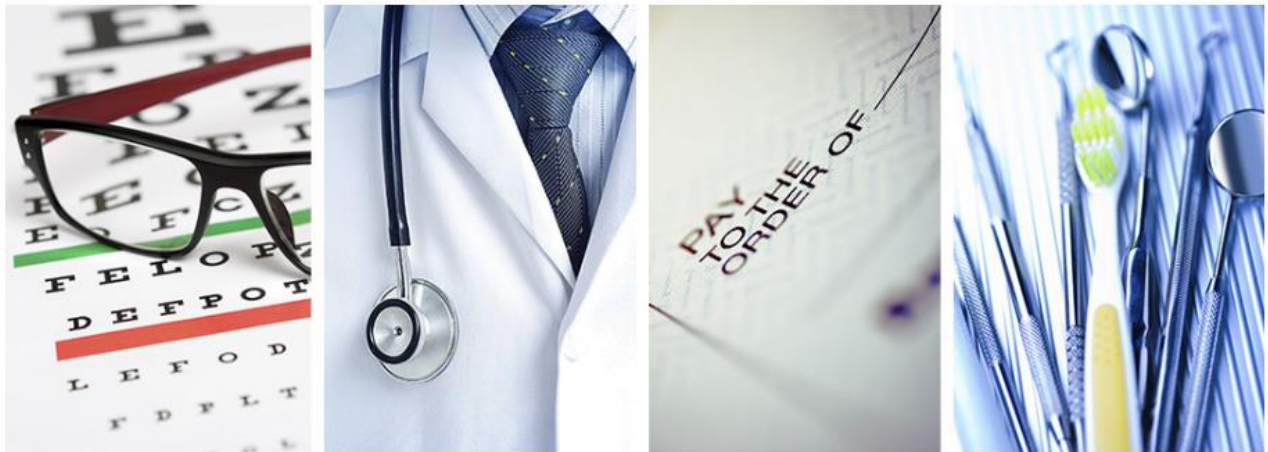
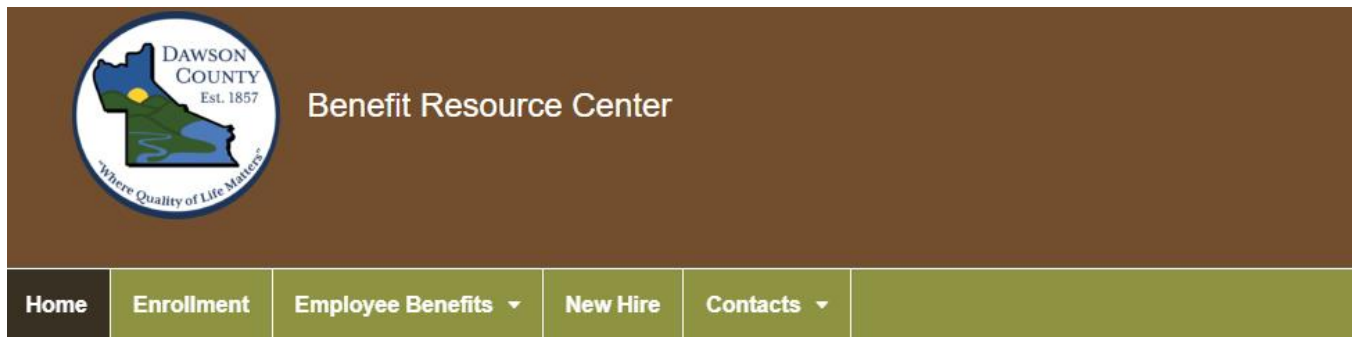
**Below is a brief description of each benefit coverage that is being offered:**

- **Medical:** The medical coverage will now be offered through Humana. You will continue to have two benefit plan options, the Humana HMO Premier (HMO) and the Humana National POS OpenAccess (POS) plan. If you were previously enrolled in the HMO plan, then you will continue enrollment in the Humana HMO plan at the same coverage tier as before. If you were previously enrolled in the POS plan, you will continue your enrollment in the Humana POS plan at the same coverage tier as before, unless you elect to change your coverage or waive coverage.
- **Dental:** Your dental coverage will now be offered through Humana as well. There may be some minor benefit changes, but your payroll deductions will remain the same. If you were previously enrolled, your coverage will continue through Humana unless you actively waive coverage during open enrollment.
- **Vision:** The vision plan will now be offered through Humana as well. There may be some minor benefit changes, but your payroll deductions will remain the same. If you were previously enrolled, your coverage will continue through Humana unless you actively waive coverage during open enrollment.
- **Basic Life:** The basic life coverage will be administered by Standard with benefit amounts remaining the same.
- **Voluntary Life:** The voluntary life for you and your dependents will be offered through Standard. If you previously enrolled in coverage, your coverage amount will remain the same with Standard. If you are newly electing coverage or already have coverage and increasing your coverage, you may need to submit a medical history statement/evidence of insurability (EOI) for carrier approval.
- **Short-Term and Long-Term Disability:** Short-term and long-term disability benefits will continue to be offered through Standard with no change to plan design or cost.
- **Medical / Dependent Care FSA:** FSA will continue through Navia. If you were previously enrolled in this benefit, your benefit elections will **NOT** roll over – **you must re-enroll each year.**
- **Telemedicine:** Telemedicine benefits will continue to be offered through Rightway at no cost to you.
- **Pet Insurance:** Voluntary pet insurance benefits will be continued through Nationwide.

## Benefits Resource Center

NFP provides the Dawson County Board of Commissioners Employees a Benefit Resource Center website that gives you easy access to all the plan details needed to make decisions on your benefit elections. The Benefit Resource Center contains important documents such as plan summaries, enrollment guides, claim forms, contacts, access to the bswift enrollment portal and important links.

Please visit the Benefit Resource Center at <https://shawhankinsbenefits.net/dawsoncounty/> to view important benefit information. If you need assistance or have questions, please contact the **NFP** service center at (800) 994-7429.



Welcome to your **Benefit Resource Center** – the source of information about your benefit options.

## Before You Enroll – Things to Know

You are REQUIRED to **provide the following information and documentation** for all dependents and beneficiaries:

- Name
- Date of Birth
- Social Security number

**The Annual Enrollment period is Friday, June 17, 2022 through Tuesday, June 21, 2022.**

### HOW TO ENROLL

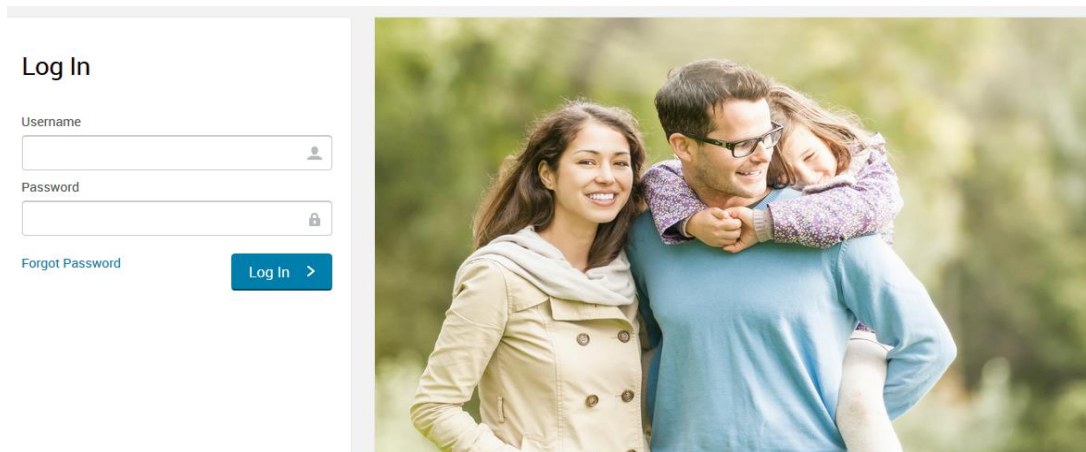
Go to [www.dawsoncounty.bswift.com](http://www.dawsoncounty.bswift.com).

At this time, make sure to disable your pop-up blocker.

At the enrollment website enter your Username and Password.

- Username is the first letter of your first name, your last name, and last 4 digits of your Social Security number (ex. jdoe4567).
- Password is the last 4 digits of your Social Security number (ex. 4567).

You will then be prompted to create a permanent password.

The image shows a screenshot of a web application's login page on the left and a photograph of a family on the right. The login page has a title 'Log In' and two input fields: 'Username' with a person icon and 'Password' with a lock icon. Below the password field is a 'Forgot Password' link and a blue 'Log In >' button. The photograph shows a woman in a tan coat, a man in a blue shirt with glasses, and a child in a purple patterned shirt, all smiling and embracing each other outdoors.

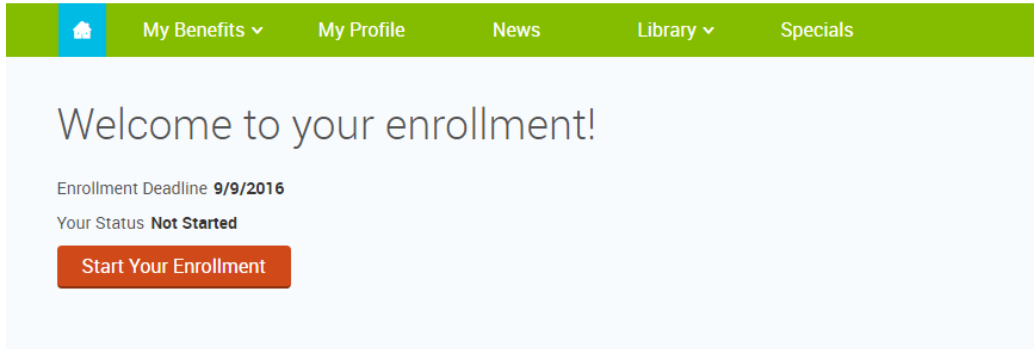
- Please go online and make your elections during the Open Enrollment or New Hire Open Enrollment Period by the deadline provided.
- Please contact NFP at 800-994-7429 to speak with a Benefit Consultant if you need assistance with your enrollment.

**Failure to enroll within the enrollment time period will result in the forfeiture of your eligibility for enrollment until the next annual enrollment period unless you experience an eligible qualifying event.**

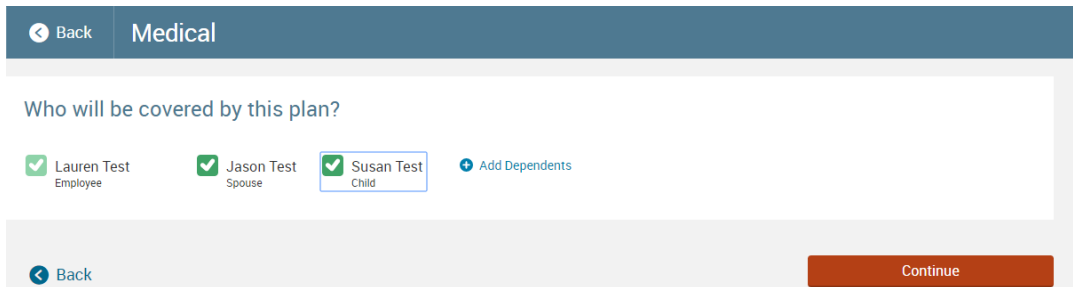
# How To Enroll

To Begin:

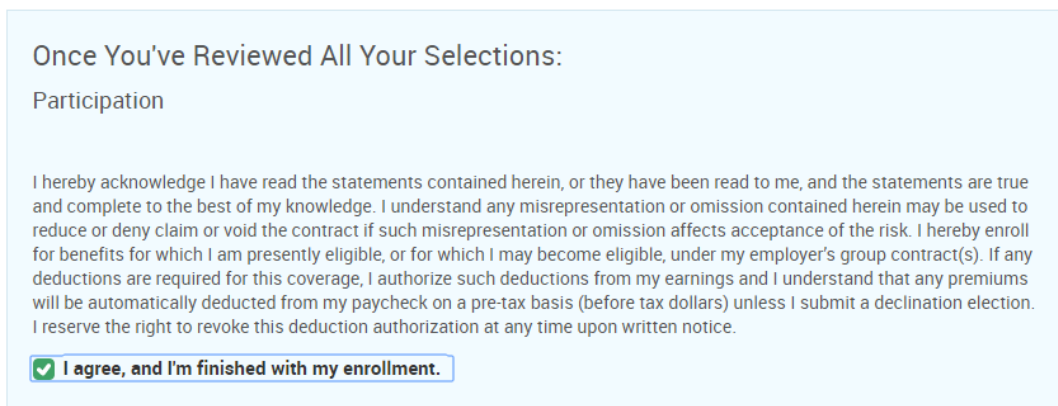
- 1) From the “Home Page” click on the “Enroll Now” link, to begin the election process.
- 2) On the “Personal & Family Page”, verify your information is accurate and “Add” all eligible dependents you wish to cover under any benefits.



- 3) To make a plan selection, select the button beside the newly elected plan. If you are covering dependents, make sure to “Select” them by checking off next to their name under “Select who to cover with this plan.” Then press “Next” at the bottom of the screen.



- 4) Once you have reviewed and completed your enrollment, click on “I Agree and I am finished with my enrollment”, then click on “Save My Enrollment”.



- 5) You will now be taken to the final confirmation page to either print or email.

Note: The enrollment images within this guide are for illustrative purposes only.

## Medical – Humana

Dawson County Board of Commissioners Medical Plans will be administered through Humana for the 2022-2023 plan year. The chart below includes the most utilized coverages. To locate a participating provider, go to [www.humana.com](http://www.humana.com), under member resources, select “Find a doctor” and enter your zip code. Then, click “insurance through your employer” and search for the appropriate network (either HMO Premier or National POS – OpenAccess).

Benefit	Humana HMO Premier (HMO)	Humana National POS OA (POS)	
		Network	Out of Network
In-Network Deductible			
Single	\$1,500	\$2,500	\$7,500
Family	\$3,000	\$5,000	\$15,000
In-network Coinsurance	80%	80%	60%
Out-of-Pocket Limit			
Single	\$4,000	\$7,900	\$23,700
Family	\$8,000	\$15,800	\$47,400
Office Visits			
Primary Care Physician	\$30	\$35	30% coinsurance after deductible
Specialty Care Physician	\$45	\$60	
Inpatient Services: In-network (Facility, physician services, etc.)	20% coinsurance after deductible	20% coinsurance after deductible	40% coinsurance after deductible
Outpatient Services: In-network (Facility, physician services, etc.)	20% after deductible	20% after deductible	40% after deductible
Urgent Care Center	\$75	\$75	30% after deductible
Emergency Room	\$350	\$350	\$350
Prescription Drugs			
Tier 1 - Preferred Generic	\$10		\$10
Tier 2 - Preferred Brand	\$40		\$40
Tier 3 - Non-preferred Brand	\$70		\$70
Tier 4 - Specialty	25% to \$300		25% to \$300



## Medical Plan Information

**Deductible (January 1 - December 31)** – You must pay all of the costs up to the deductible amount before this plan begins to pay for covered services you use. Coinsurance and copayments do not count towards the deductible.

**Coinsurance** – Your share of the cost of a covered service, calculated as a percentage of the allowed amount for the service.

**Allowed Amount** – The amount the plan pays for covered services is based on the allowed amount. If an out of network provider charges more than the allowed amount, you may have to pay the difference.

**Out-of-Pocket Limit** – This is the most you could pay during a coverage period (usually one year) for your share of the cost of covered services. This limit helps you plan for your health care expenses. The out-of-pocket limit is inclusive of the deductible, coinsurance, and all copays.

**Prescription Drugs** – To search for your medications on the new formulary, please review the Humana formulary or contact 800-448-6262.

**Prior Authorizations or Transition of Care** – To inquire about a prior authorization or discuss transition of care for a previously scheduled service, please contact 800-448-6262.

**Locate a Provider** – With Humana, you can choose from a diverse network of Primary Care Physicians (PCP) and other medical providers through their national directory.

To locate a participating provider, go to [www.humana.com](http://www.humana.com), under member resources, select “Find a doctor” and enter your zip code. Then, click “insurance through your employer” and search for the appropriate network (either HMO Premier or National POS – OpenAccess).



## Dental – Humana

The Dawson County Board of Commissioners is pleased to announce Dental coverage for the 2022-2023 plan year will be moving to Humana. Keep in mind that you will pay less if you use a network dentist. For full details on your benefits refer to the Summary Plan Description. To locate a participating provider, go to [www.humana.com](http://www.humana.com) and select the Humana PPO/Traditional Preferred network.

Benefit	In Network (PPO)
Annual Deductible Applies to Type B and C Services	\$50 per Individual / \$150 per Family
Type A: Preventative Services Cleaning: Three every calendar year	100% No Deductible
Type B: Basic Services / Restorative Benefits / Surgical Extractions	80% Subject to Deductible
Type C: Major Services Crowns & Cast / Bridges / Dentures	50% Subject to Deductible
Type D: Orthodontia – Child only to age 19	50%
Annual plan maximum per member	\$1,000
Lifetime Orthodontia Maximum	\$1,000

**Dependent children can be covered to age 26.**

## Vision – Humana

Dawson County Board of Commissioners Vision Coverage will be administered by Humana for the 2022-2023 plan year. Keep in mind that you will pay less if you use an network provider. For full details on your benefits refer to the Summary Plan Description. To locate a participating provider, visit [www.humana.com](http://www.humana.com) and choose “find a doctor” and select vision coverage through an employer, also named Humana Vision/ Humana Extend(Humana Insight Network).

Benefit	Member Cost In Network	Reimbursement Out of Network	Frequency
Vision Exam	\$0 copay	\$30 Allowance	Once every 12 months
Contact Lenses* Conventional/Disposable Medically Necessary	\$130 Allowance Covered in Full	\$104 Allowance \$200 Allowance	Once every 12 months
Standard Plastic or Glass Lenses Single Bifocal Trifocal	\$15 Copay \$15 Copay \$15 Copay	\$25 Allowance \$40 Allowance \$60 Allowance	Once every 12 months
Eyeglass Lens Enhancements Standard Polycarbonate (children under 19 years)	\$0 Copay	No allowances on lens enhancements when obtained out of network	
Frames	\$130 retail allowance	\$65 Allowance	Once every 12 months

**Dependent Children can be covered to age 26.**

**\*Note:** The plan covers either contact lenses or lenses for your glasses once every calendar year. The discounts available on the balance for lenses and frames may not apply at certain locations. Please see summary plan description for further details.

## Payroll Deductions

### Medical Per Pay Period Deduction (24 pay periods)

Coverage Tier	Humana HMO Premier (HMO)	Humana National POS - OpenAccess
Employee Only	\$110.94	\$76.12
Employee and Spouse	\$200.57	\$127.44
Employee and Child(ren)	\$195.35	\$127.44
Employee and Family	\$288.57	\$182.35

### Dental and Vision Per Pay Period Deduction (24 pay periods)

Coverage Tier	Dental - Humana PPO/ Traditional Preferred	Vision - Humana Extend (Insight Network)
Employee Only	\$13.77	\$2.77
Employee + Spouse	\$27.97	\$5.15
Employee and Child(ren)	\$34.51	\$5.42
Employee and Family	\$48.65	\$7.97

## Basic and Voluntary Life Insurance – Standard

Term Life Insurance provides valuable financial protection for your family. Dawson County Board of Commissioners is pleased to offer **\$50,000** of Basic Life and Accidental Death and Dismemberment (AD&D) for all fulltime eligible employees. Enrollment is automatic, but you must select beneficiaries. In addition, your employer provides you with Dependent Life and AD&D insurance in the amount of **\$5,000** for an eligible spouse and **\$2,500** for each eligible child.

Dawson County Board of Commissioners offers Voluntary Life Coverage for employees and their dependents. This additional life insurance is available for you, your spouse and your children. This coverage can provide you financial protection for you and your family. Details of the available coverage are listed in the chart below.

**Open Enrollment:** Employees electing coverage for the first time will be required to complete a Medical History Statement/Evidence of Insurability (EOI) form that is satisfactory to the insurance carrier before the coverage can become effective. Employees and spouses may increase existing coverage by one increment up to the guaranteed issue without EOI.

**Late Entrants:** If you do not elect coverage when initially eligible and later elect coverage, you will be considered a late entrant. Late entrants will be required to complete an Evidence of Insurability (EOI) form that is satisfactory to the insurance carrier before the coverage can become effective.

Benefit	Coverage
Employee Voluntary Life	<p>You can purchase coverage in increments of \$10,000 up to \$500,000. You must elect coverage on yourself to be eligible for coverage on your spouse and/or children.</p> <p><b>New Hires:</b> Newly eligible employees are able to elect up to \$100,000. Elections above these amounts will require a Medical History Statement/Evidence of Insurability Form.</p>
Spouse Voluntary Life	<p>You can purchase coverage in increments of \$5,000 up to a maximum of \$100,000, not to exceed 100% of the employee amount.</p> <p><b>New Hires:</b> Newly eligible employees are able to elect coverage on their spouse up to \$20,000 with no health questions asked.</p>
Child(ren) Voluntary Life	<p>You can purchase coverage of either \$5,000 or \$10,000 for eligible child(ren). Child(ren) are covered from the age of 15 days to age 26.</p>

**Reduction of Coverage:** The Voluntary Life benefits will reduce by 35% of the original amount at age 65, and 50% of the original amount at age 70.

**Portability/Conversion:** You may be able to port or convert your coverage when your employment ends.

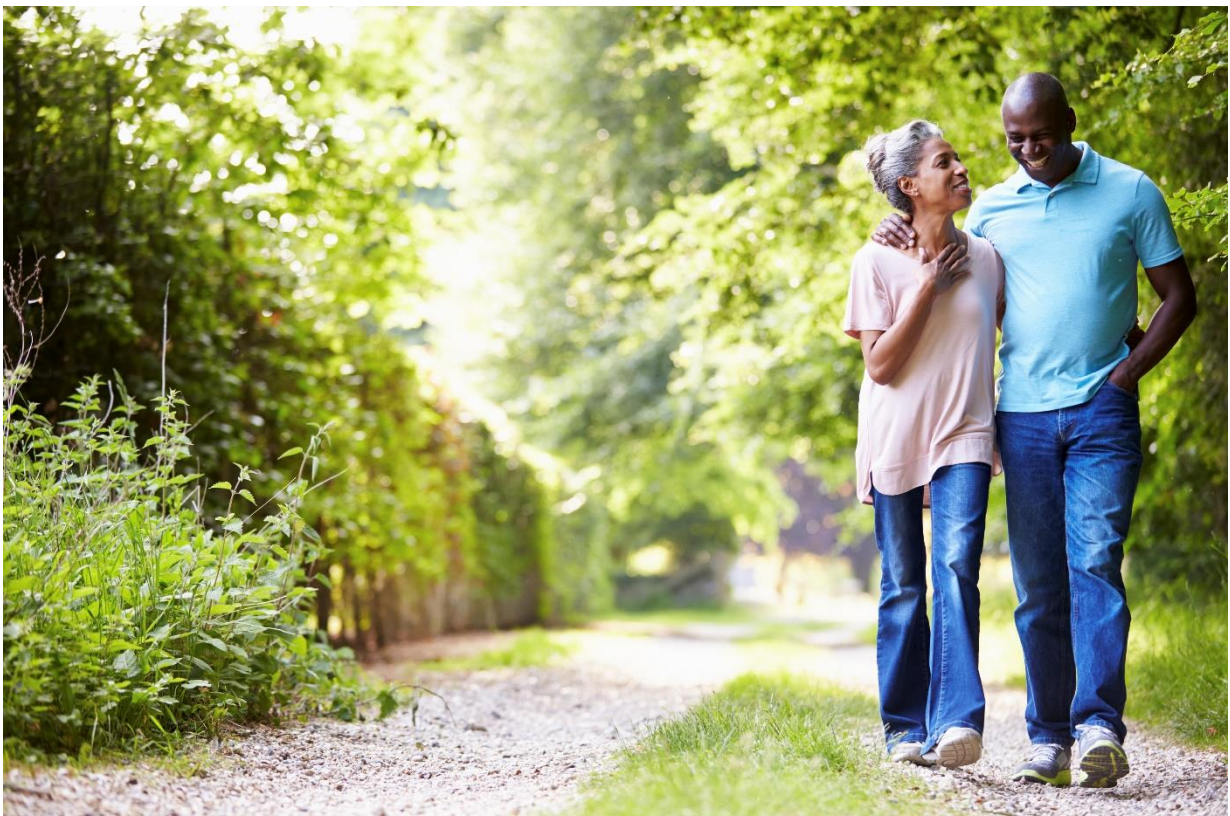
## Voluntary Life (Continued)

Monthly Rate per \$1,000		
Age	EE Rate	Spouse Rate
<20	\$0.080	\$0.080
20-24	\$0.080	\$0.080
25-29	\$0.080	\$0.080
30-34	\$0.080	\$0.080
35-39	\$0.120	\$0.120
40-44	\$0.200	\$0.200
45-49	\$0.280	\$0.280
50-54	\$0.480	\$0.480
55-59	\$0.820	\$0.820
60-64	\$1.290	\$1.290
65-69	\$2.030	\$2.030
70-74	\$3.240	\$3.240
75-99	\$5.740	\$5.740

### Additional Benefits:

**Living Benefit** (accelerated death benefit): You can request up to 75% of your optional life benefits to be paid while you are living if you are terminally ill with less than 12 months to live. If you take a Living Benefit payment, the amount your beneficiary gets after your death will be reduced by the amount you were paid.

Child Life Rate is \$0.20 per \$1,000 (all covered children) per month.



## Short Term Disability – Standard

Dawson County Board of Commissioners offers each full-time, benefits eligible, employee Short Term Disability coverage through Standard.

Short Term Disability is an insurance program that provides you with weekly income if you are unable to work or have a reduced income due to an illness or injury unrelated to your occupation.

Benefit	Coverage
Percentage of Weekly Income	60%
Maximum Weekly Benefit	\$1,150
Elimination Period	0 Days Accident/ 7 Days Sickness
Maximum Benefit Duration	180 days
Late Entrant Waiting Period	Late enrollees will not be required to submit evidence of insurability. They will instead be subject to a 60-day benefit waiting period for sickness or pregnancy during their first 12 months in the plan.

**Elimination Period:** The elimination period is the length of time of continuous disability which must be satisfied before you are eligible to receive benefits.

**Deductible Sources of Income:** Your benefit payments will be reduced by other income you receive or are eligible to receive due to your disability, such as: sick pay; benefits under worker's compensation; disability benefits from any other group insurance or under your employer's retirement plan; benefits under any state disability income benefit law; earnings from work activity while you are disabled, amounts due from third party because of your disability, whether by judgment, settlement or other method.

## Long Term Disability – Standard

Dawson County Board of Commissioners offers all full-time, benefits eligible, employees Long Term Disability Coverage through Standard.

Long Term Disability is an insurance program that provides you with monthly income if you are unable to work or have a reduced income due to an illness or injury unrelated to your occupation.

Benefit	Coverage
Percentage of Monthly Income	60%
Maximum Weekly Benefit	\$5,000
Elimination Period	180 Days
Maximum Benefit Duration	Social Security Normal Retirement Age
Pre-Existing Conditions	3 / 12

**Pre-Existing Condition Exclusions:** Any sickness or injury for which you received medical treatment, consultation, care, or services (including diagnostic measures or the taking of prescribed medications) during the specified months (3 months) prior to your coverage effective date. A disability arising from any such sickness or injury will be covered only if it begins after you have performed your regular occupation on a full-time basis for the specified months (12 months) following the coverage effective date.

**Limitations:** Mental illness and substance treatment is limited to a benefit period of 24 months.

**Exclusions:** Benefits will not be payable for any disability caused by an intentionally self-inflicted injury; an act of war (declared or undeclared); commission of a felony; a pre-existing condition unless you have been covered under the policy for at least 12 months. For a comprehensive list of exclusions, limitations, and any applicable benefit offsets, please refer to the Certificate of Insurance. The Certificate also provides all requirements necessary to be eligible for coverage and benefits.

**Deductible Sources of Income:** Your benefit payments will be reduced by other income you receive or are eligible to receive due to your disability, such as: sick pay; benefits under worker's compensation; social security disability or retirement benefits; disability benefits from any other group insurance or under your employer's retirement plan; benefits under any state disability income benefit law; earnings from work activity while you are disabled, amounts due from third party because of your disability, whether by judgment, settlement or other method.



## Employee Assistance Program – Standard

All Dawson County employees are eligible to take advantage of Standard's Work Health Life EAP program.

There are times in life when you might need a little help coping or figuring out what to do. Take advantage of the Employee Assistance Program (EAP) which includes WorkLife Services and is available to you and your family.

You, and your dependents (including children to age 26) and all household members, can contact master's-degreed clinicians 24/7 by phone, online, live chat, email and text. There's even a mobile EAP app.

Your program includes up to three face-to-face assessment and counseling sessions per issue. EAP services can help with:

- Depression, grief, loss and emotional well-being
- Family, marital and other relationship issues
- Life improvement and goal-setting
- Addictions such as alcohol and drug abuse
- Stress or anxiety with work or family
- Financial and legal concerns
- Identity theft and fraud resolution
- Online will preparation

### WorkLife Services

WorkLife Services are included with the Employee Assistance Program. Get help with referrals for important needs like education, adoption, travel, daily living, and care of your pet, child or elderly loved one.

### Online Resources

Visit [www.workhealthlife.com/Standard3](http://www.workhealthlife.com/Standard3) to explore a wealth of information online, including videos, guides, articles, webinars, resources, self-assessments, and calculators.

Contact EAP  
888-293-6948  
TDD: 800-327-1833  
24 hours a day, seven days a week  
[Workhealthlife.com/Standard3](http://Workhealthlife.com/Standard3)



# Flexible Spending Accounts (FSA) – Navia

Navia FSA increases your take-home pay by reducing your taxable income. A Flexible Spending Account (FSA) allows you to save up to 30% on eligible healthcare and/or dependent care expenses every year by using pretax dollars.

Consider how much you spend on healthcare and/or dependent care expenses for you and your qualified dependents in one year:

- Prescription drugs / medications
- Medical / Dental office visit copays
- Eye Exams and prescription glasses / lenses
- Vaccinations
- Daycare tuition

Why not reduce these expenses by using pre-tax dollars instead of after-tax dollars? With rising costs for these items, *every penny counts!*

By using pre-tax dollars, you are taxed on a lower gross salary, thereby saving money that would otherwise be spent on federal, state and FICA taxes, and thereby you *increase your take home pay!* See the example. -->>

### How does FSA work?

Healthcare FSA is offered through your employer and is administered by Navia. When you choose to enroll in Healthcare FSA and/or Dependent Care FSA, you choose the dollar amount you want to contribute to each account based on your estimated expenses for the upcoming Plan Year. Your Contributions will be deducted in equal amounts from each paycheck, **pre-tax**, throughout the Plan Year. *The more you contribute to these accounts, the more you save by paying less in taxes!*

### Maximum Annual Election

Health Care: \$2,700

Dependent Day Care: \$5,000

### Reimbursements and the FSA debit card:

As you incur eligible expenses, simply request for reimbursement to Navia to receive reimbursement from your FSA account, up to the amount of your annual contribution.

For additional convenience, you will be issued a debit card to directly access your FSA funds when paying for eligible medical and/or dependent care expenses at the point of purchase, which eliminates the need for requesting a reimbursement. The annual amount you select will be loaded on the card and made available to you once the first initial deduction has been received. This card can be used toward deductibles, copays, dental, and vision expenses to name a few.

### Carryover

If you are unable to use \$500 or less, of your Healthcare FSA, you will be able to carry over this amount to the next year (provided you elect to participate).

Pre-Tax Savings Example		
	Without FSA	With FSA
Gross Monthly Pay:	\$3,500	\$3,500
<u>Pre-Tax Contributions</u>		
Medical/Dental Premiums	\$0	-\$125
Medical Expenses	\$0	-\$75
Dependent Care Expenses	\$0	-\$400
TOTAL:	\$0	-\$600
<b>Taxable Monthly Income</b>	<b>\$3,500</b>	<b>\$2,900</b>
Taxes (federal, state, FICA):	-\$968	-\$802
Out-of-pocket Expenses:	-\$600	\$0
<b>Monthly Take-home Pay:</b>	<b>\$1,932</b>	<b>\$2,098</b>
<b>Net Increase in Take-Home Pay = \$166/mo!</b>		
For illustration only. Actual dollar amounts may vary.		

## Pet Insurance – Nationwide



You care about your pets and consider them members of your family. So whether your family includes kids with two feet or kids with four paws—or both—you know what responsibility looks like.

So why not give your pets the best health care available?

The **My Pet Protection**™ suite of pet insurance plans is composed of the only plans specifically designed for employees and gives you superior protection at an unbeatable price, featuring:

- ✓ **90% back on vet bills**<sup>1</sup>
- ✓ **Exclusivity—unavailable to the general public**
- ✓ **One set price, regardless of the pet's age**
- ✓ **The best deal anywhere: an average savings of 40% over similar plans from other pet insurers**<sup>2</sup>
- ✓ **A wellness plan option that includes spay/neuter<sup>3</sup>, preventive dental cleaning and more**

Easy  
enrollment

1 Select the species  
(dog or cat)\*

2 Provide your  
zip code

3 Pick between  
two plans



Sign up multiple pets with individual plans and receive a discount<sup>4</sup> for even more savings.

**vet**helpline<sup>®</sup>

Free service available to all pet insurance members. Unlimited, 24/7 access to a veterinary professional (\$150 value). Only from Nationwide.



My Pet Protection plans are available exclusively through your employer.  
Get a quote today. [PetsNationwide.com](https://www.PetsNationwide.com)

# Disclosure Notice – Prescription Drug and Medicare Notice

## Important Notice from the Dawson County Board of Commissioners About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with the Dawson County Board of Commissioners and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.

2. The Dawson County Board of Commissioners has determined that the prescription drug coverage offered by the Humana HMO and the Humana POS plan is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

### When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th to December 7th. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

### What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current Dawson County Board of Commissioners coverage will not be affected.

If you drop your current prescription drug coverage and enroll in Medicare prescription drug coverage, you may enroll back into the Dawson County Board of Commissioners benefit plan during an open enrollment period under the Dawson County Board of Commissioners benefit plan.

### When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with the Dawson County Board of Commissioners and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

### For More Information About This Notice Or Your Current Prescription Drug Coverage...

Contact the person listed below for further information. NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Dawson County Board of Commissioners changes. You also may request a copy of this notice at any time.

### For More Information About Your Options Under Medicare Prescription Drug Coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

Visit [www.medicare.gov](http://www.medicare.gov)

Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help

Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at [www.socialsecurity.gov](http://www.socialsecurity.gov), or call them at 1-800-772-1213 (TTY 1-800-325-0778).

**Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).**

From: July 1, 2022 to June 30, 2023

Name of Entity/Sender: Dawson County Board of Commissioners

Contact Person: Kristi Finley

# Disclosure Notice – CHIP

## 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](http://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](http://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](http://www.askebsa.dol.gov) or call **1-866-444-EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of January 31, 2020. Contact your State for more information on eligibility –

<b>ALABAMA – Medicaid</b>	<b>COLORADO – Health First Colorado (Colorado’s Medicaid Program) &amp; Child Health Plan Plus (CHP+)</b>
Website: <a href="http://myalhipp.com/">http://myalhipp.com/</a> Phone: 1-855-692-5447	Health First Colorado Website: <a href="https://www.healthfirstcolorado.com/">https://www.healthfirstcolorado.com/</a> Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711 CHP+: <a href="https://www.colorado.gov/pacific/hcpf/child-health-plan-plus">https://www.colorado.gov/pacific/hcpf/child-health-plan-plus</a> CHP+ Customer Service: 1-800-359-1991/ State Relay 711
<b>ALASKA – Medicaid</b>	<b>FLORIDA – Medicaid</b>
The AK Health Insurance Premium Payment Program Website: <a href="http://myakhipp.com/">http://myakhipp.com/</a> Phone: 1-866-251-4861 Email: <a href="mailto:CustomerService@MyAKHIP.com">CustomerService@MyAKHIP.com</a> Medicaid Eligibility: <a href="http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx">http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx</a>	Website: <a href="http://flmedicaidprecovery.com/hipp/">http://flmedicaidprecovery.com/hipp/</a> Phone: 1-877-357-3268
<b>ARKANSAS – Medicaid</b>	<b>GEORGIA – Medicaid</b>
Website: <a href="http://myarhipp.com/">http://myarhipp.com/</a> Phone: 1-855-MyARHIPP (855-692-7447)	Website: <a href="https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp">https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp</a> Phone: 678-564-1162 ext 2131
<b>CALIFORNIA – Medicaid</b>	<b>INDIANA – Medicaid</b>
Website: <a href="https://www.dhcs.ca.gov/services/Pages/TPLRD_CAU_co nt.aspx">https://www.dhcs.ca.gov/services/Pages/TPLRD_CAU_co nt.aspx</a> Phone: 1-800-541-5555	Healthy Indiana Plan for low-income adults 19-64 Website: <a href="http://www.in.gov/fssa/hip/">http://www.in.gov/fssa/hip/</a> Phone: 1-877-438-4479 All other Medicaid Website: <a href="http://www.indianamedicaid.com">http://www.indianamedicaid.com</a> Phone 1-800-403-0864
<b>IOWA – Medicaid and CHIP (Hawki)</b>	<b>NEBRASKA – Medicaid</b>
Medicaid Website: <a href="https://dhs.iowa.gov/ime/members">https://dhs.iowa.gov/ime/members</a> Medicaid Phone: 1-800-338-8366 Hawki Website: <a href="http://dhs.iowa.gov/Hawki">http://dhs.iowa.gov/Hawki</a> Hawki Phone: 1-800-257-8563	Website: <a href="http://www.ACCESSNebraska.ne.gov">http://www.ACCESSNebraska.ne.gov</a> Phone: 1-855-632-7633 Lincoln: 402-473-7000 Omaha: 402-595-1178
<b>KANSAS – Medicaid</b>	<b>NEVADA – Medicaid</b>
Website: <a href="http://www.kdheks.gov/hcf/default.htm">http://www.kdheks.gov/hcf/default.htm</a> Phone: 1-800-792-4884	Medicaid Website: <a href="http://dhcfnv.gov">http://dhcfnv.gov</a> Medicaid Phone: 1-800-992-0900

# Disclosure Notice - CHIP

<p><b>KENTUCKY – Medicaid</b></p> <p>Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP)            Website: <a href="https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx">https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx</a>            Phone: 1-855-459-6328            Email: <a href="mailto:KIHIPPPROGRAM@ky.gov">KIHIPPPROGRAM@ky.gov</a>            KCHIP Website: <a href="https://kidshealth.ky.gov/Pages/index.aspx">https://kidshealth.ky.gov/Pages/index.aspx</a>            Phone: 1-877-524-4718            Kentucky Medicaid Website: <a href="https://chfs.ky.gov">https://chfs.ky.gov</a></p>	<p><b>NEW HAMPSHIRE – Medicaid</b></p> <p>Website: <a href="https://www.dhhs.nh.gov/oii/hipp.htm">https://www.dhhs.nh.gov/oii/hipp.htm</a> Phone: 603-271-5218            Toll free number for the HIPP program: 1-800-852-3345, ext 5218</p>
<p><b>LOUISIANA – Medicaid</b></p> <p>Website: <a href="http://www.medicaid.la.gov">www.medicaid.la.gov</a> or <a href="http://www.ldh.la.gov/lahipp">www.ldh.la.gov/lahipp</a> Phone: 1-888-342-6207 (Medicaid hotline) or 1-855-618-5488 (LaHIPP)</p>	<p><b>NEW JERSEY – Medicaid and CHIP</b></p> <p>Medicaid Website: <a href="http://www.state.nj.us/humanservices/dmahs/clients/medicaid/">http://www.state.nj.us/humanservices/dmahs/clients/medicaid/</a>            Medicaid Phone: 609-631-2392            CHIP Website: <a href="http://www.njfamilycare.org/index.html">http://www.njfamilycare.org/index.html</a>            CHIP Phone: 1-800-701-0710</p>
<p><b>MAINE – Medicaid</b></p> <p>Website: <a href="http://www.maine.gov/dhhs/ofi/public_assistance/index.html">http://www.maine.gov/dhhs/ofi/public_assistance/index.html</a>            Phone: 1-800-442-6003 TTY: Maine relay 711</p>	<p><b>NEW YORK – Medicaid</b></p> <p>Website: <a href="https://www.health.ny.gov/health_care/medicaid/">https://www.health.ny.gov/health_care/medicaid/</a>            Phone: 1-800-541-2831</p>
<p><b>MASSACHUSETTS – Medicaid and CHIP</b></p> <p>Website: <a href="http://www.mass.gov/eohhs/gov/departments/masshealth/">http://www.mass.gov/eohhs/gov/departments/masshealth/</a> Phone: 1-800-862-4840</p>	<p><b>NORTH CAROLINA – Medicaid</b></p> <p>Website: <a href="https://medicaid.ncdhhs.gov/">https://medicaid.ncdhhs.gov/</a> Phone: 919-855-4100</p>
<p><b>MINNESOTA – Medicaid</b></p> <p>Website: <a href="https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs-programs-and-services/medical-assistance.jsp">https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs-programs-and-services/medical-assistance.jsp</a> [Under ELIGIBILITY tab, see “what if I have other health insurance?”]            Phone: 1-800-657-3739</p>	<p><b>NORTH DAKOTA – Medicaid</b></p> <p>Website: <a href="http://www.nd.gov/dhs/services/medicalsev/medicaid/">http://www.nd.gov/dhs/services/medicalsev/medicaid/</a> Phone: 1-844-854-4825</p>
<p><b>MISSOURI – Medicaid</b></p> <p>Website: <a href="http://www.dss.mo.gov/mhd/participants/pages/hipp.htm">http://www.dss.mo.gov/mhd/participants/pages/hipp.htm</a> Phone: 573-751-2005</p>	<p><b>OKLAHOMA – Medicaid and CHIP</b></p> <p>Website: <a href="http://www.insureoklahoma.org">http://www.insureoklahoma.org</a> Phone: 1-888-365-3742</p>
<p><b>MONTANA – Medicaid</b></p> <p>Website: <a href="http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP">http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP</a> Phone: 1-800-694-3084</p>	<p><b>OREGON – Medicaid</b></p> <p>Website: <a href="http://healthcare.oregon.gov/Pages/index.aspx">http://healthcare.oregon.gov/Pages/index.aspx</a>  <a href="http://www.oregonhealthcare.gov/index-es.html">http://www.oregonhealthcare.gov/index-es.html</a> Phone: 1-800-699-9075</p>
<p><b>PENNSYLVANIA – Medicaid</b></p> <p>Website: <a href="https://www.dhs.pa.gov/providers/Providers/Pages/Medical/HIPP-Program.aspx">https://www.dhs.pa.gov/providers/Providers/Pages/Medical/HIPP-Program.aspx</a> Phone: 1-800-692-7462</p>	<p><b>RHODE ISLAND – Medicaid and CHIP</b></p> <p>Website: <a href="http://www.eohhs.ri.gov/">http://www.eohhs.ri.gov/</a>            Phone: 1-855-697-4347, or 401-462-0311 (Direct Rite Share Line)</p>
<p><b>SOUTH CAROLINA – Medicaid</b></p> <p>Website: <a href="https://www.scdhhs.gov">https://www.scdhhs.gov</a>            Phone: 1-888-549-0820</p>	<p><b>VIRGINIA – Medicaid and CHIP</b></p> <p>Website: <a href="https://www.coverva.org/hipp/">https://www.coverva.org/hipp/</a>            Medicaid Phone: 1-800-432-5924 CHIP Phone: 1-855-242-8282</p>
<p><b>SOUTH DAKOTA - Medicaid</b></p> <p>Website: <a href="http://dss.sd.gov">http://dss.sd.gov</a> Phone: 1-888-828-0059</p>	<p><b>WASHINGTON – Medicaid</b></p> <p>Website: <a href="https://www.hca.wa.gov/">https://www.hca.wa.gov/</a> Phone: 1-800-562-3022</p>
<p><b>TEXAS – Medicaid</b></p> <p>Website: <a href="http://gethipptexas.com/">http://gethipptexas.com/</a> Phone: 1-800-440-0493</p>	<p><b>WEST VIRGINIA – Medicaid</b></p> <p>Website: <a href="http://mywvhipp.com/">http://mywvhipp.com/</a>            Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447)</p>
<p><b>UTAH – Medicaid and CHIP</b></p> <p>Medicaid Website: <a href="https://medicaid.utah.gov/">https://medicaid.utah.gov/</a>            CHIP Website: <a href="http://health.utah.gov/chip">http://health.utah.gov/chip</a> Phone: 1-877-543-7669</p>	<p><b>WISCONSIN – Medicaid and CHIP</b></p> <p>Website: <a href="https://www.dhs.wisconsin.gov/publications/p1/p10095.pdf">https://www.dhs.wisconsin.gov/publications/p1/p10095.pdf</a>            Phone: 1-800-362-3002</p>
<p><b>VERMONT– Medicaid</b></p> <p>Website: <a href="http://www.greenmountaincare.org/">http://www.greenmountaincare.org/</a> Phone: 1-800-250-8427</p>	<p><b>WYOMING – Medicaid</b></p> <p>Website: <a href="https://wyequalitycare.acs-inc.com/">https://wyequalitycare.acs-inc.com/</a> Phone: 307-777-7531</p>

## Insurance FAQs – Open Enrollment & Beyond

### **If I do not actively participate in Open Enrollment, what will happen to my coverage?**

*If you do not log into the Bswift enrollment portal and actively re-elect your plans, all plans will remain the same with the exception of your Healthcare FSA and Dependent Care FSA. These benefits will automatically waive for the plan year, as you must re-enroll in FSA coverage each year that you plan to participate.*

### **When should I inform my providers that my coverage is switching to a new carrier?**

*You may begin discussing a carrier change with your providers right away to ensure there is no lapse in treatment. They will be able to confirm if they accept your new insurance and once you have your new insurance information, they can put it on file so that your claims continue to be processed accurately.*

### **When switching to a new carrier, are there any preventive measures I should take if I am undergoing treatment or taking medication to ensure there are no gaps in care or medication?**

*If you are currently working through a treatment plan with your provider, please communicate the carrier change with them immediately. They will work with the carriers to ensure a smooth transition of care. If you are taking medication, please ensure that you have more than enough supply to last you through the active date of coverage so that you will not risk running out of medication before the new carrier begins processing your pharmacy claims. Your provider(s) will also work with the carrier(s) for any Prior Authorizations (PA) that are needed, and these must be requested before certain services and/or medications are given.*

*If for any reason you experience issues, please contact NFP or Humana.*

### **What resources are available to me if I have questions, concerns, or experience issues with my coverage?**

*Employees have access to NFP Customer Service, Humana Customer Service, Human Resources, and the Benefit Resource Center. All contact information can be found on the last page of the Benefit Enrollment Guide.*

### **What if my provider(s) is out of network?**

*If your provider(s) is out of network, you may contact NFP, and we will work diligently with Humana to try to get your provider in contract.*

# How do I contact Humana?

Main Website: [www.humana.com](http://www.humana.com)

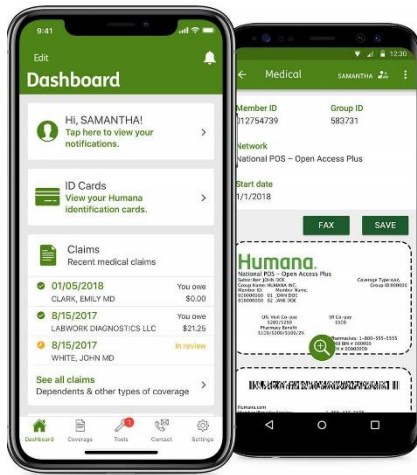
Humana Go365: <https://www.go365.com/>

Customer Service: 1-800-448-6262, Monday – Friday, 8 a.m. – 9 p.m.

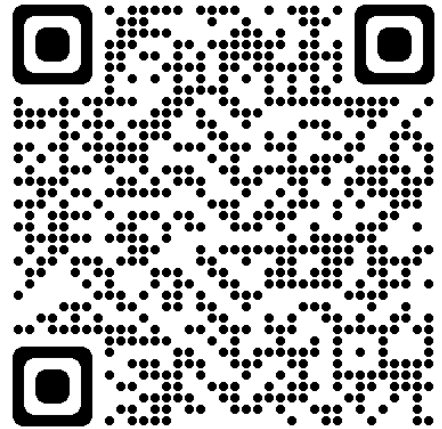
Dental/Vision Customer Service: 1-877-877-1051, Monday – Friday, 8 a.m. to 8 p.m.



Download the MyHumana and the Go365 Apps on your mobile device!



Scan this code with your mobile camera to get access to Humana's Online Resources!



## Chat with us

Our online chat feature gives you:

- Easy access to information
- Live help from a Humana representative
- A faster way to get answers

We look forward to chatting with you. Access is based on hours of operation, representative availability, and member eligibility.

[Yes, I want to chat →](#)

## Check out the Humana Support Community

If you are on a plan through your employer, you can use the Humana Support Community to ask questions and find helpful resources about using your insurance and topics for staying healthy.

[Join the conversation →](#)

## Seek social support

We're on Twitter 7 days a week from 6 a.m. to 8 p.m., for simple questions and straight talk.

[Tweet @HumanaHelp →](#)



## Why Would I Contact the NFP Service Center?

**Order ID Cards:** We can contact the insurance carrier directly and have your replacement card in ten to fifteen business days.

**Claim Resolution and Research:** We can help you understand your Explanation of Benefits (EOB) as well as contact the insurance carriers on your behalf. We can assist in appealing a denied claim or help you request a Prior Authorization (PA) from your physician as may be required by your medical carrier. We can also help you file out-of-network claims and assist with reimbursement if you require medical assistance while traveling outside of the United States.

**Locate In-Network Providers:** Staying in network saves everyone money. Our Service Center can help you locate In-Network Providers for medical, dental and vision coverage whether you are at home or away.

**Request Copies of Any Necessary Forms:** Medical claim forms, out-of-network claim forms, evidence of insurability forms, short- and long-term disability claim forms and any other applicable forms are always available if the need should arise.

**Understanding Your Benefits:** We can assist you with questions regarding deductibles, copayments and coinsurance. We can explain waiting periods, elimination periods and eligibility rules.

**Explain Qualifying Events:** Most benefit plans require that you have a Qualifying Event (like marriage, birth of a child or other life event) to make a change in your election anytime other than during open enrollment. We work with your employer to ensure that your change follows the rules of the plan, that your request is allowed within the appropriate timeframes, and that you give proper documentation of the event.

**Annual Enrollment Information:** We can provide details about when open enrollment begins and ends and if your plan designs or payroll deductions are changing.

**Enrollment Assistance:** The Service Center Representative can walk you through every step of the enrollment process. Whether it's an online enrollment or paper enrollment form, your Service Center Representative is available to help.

**Confirmation Statements:** We can provide copies of your online enrollment confirmation statement or a copy of your paper enrollment form at any time.

*The Service Center is available from 8:30 a.m. to 5:00 p.m. Monday through Friday to assist you. We have an after-hours voice mailbox, and your call will be returned the next business day.*

800-994-7429

[NFPseCustomerService@nfp.com](mailto:NFPseCustomerService@nfp.com)

## Contact Information

Plan	Administrator	Website	Phone Number
Benefit / Enrollment Questions	NFP	<a href="mailto:NFPseCustomerService@NFP.com">NFPseCustomerService@NFP.com</a>	(800) 994-7429
Medical	Humana	<a href="http://www.humana.com">www.humana.com</a>	(800) 448-6262
Dental	Humana	<a href="http://www.humana.com">www.humana.com</a>	(800) 448-6262
Vision	Humana	<a href="http://www.humana.com">www.humana.com</a>	(800) 448-6262
Basic Life/Voluntary Life	Standard	<a href="http://www.standard.com">www.standard.com</a>	(800) 628-8600
Short Term/Long Term Disability	Standard	<a href="http://www.standard.com">www.standard.com</a>	(800) 628-8600
Employee Assistance Program	Standard	<a href="http://www.workhealthlife.com/Standard3">www.workhealthlife.com/Standard3</a>	(888) 293-6948
Telemedicine	Rightway	<a href="http://www.rightwayhealthcare.com">www.rightwayhealthcare.com</a>	(305) 851-7310
Flexible Spending Account	Navia	<a href="http://www.naviabenefits.com">www.naviabenefits.com</a>	(800) 669-3539
Pet Insurance	Nationwide	<a href="http://www.PetsNationwide.com">www.PetsNationwide.com</a>	(877) 738-7874

