

# 2010 Milwaukee County Retiree Benefits Booklet



- Medical Plans & Rates
- Basic Life Insurance Plan

**DEPARTMENT of ADMINISTRATIVE SERVICES**  
**DIVISION of EMPLOYEE BENEFITS**

## October 2009

Dear Milwaukee County Retiree:

Health and Life insurance are a large part of your retirement benefits from Milwaukee County and offer critical financial protection for you and your spouse. However, understanding your benefit choices requires effort on your part. Retiree benefit options have become increasingly more complex, so please review this booklet carefully. Open Enrollment will be November 2, 2009 through November 13, 2009. **Like last year, if you are not changing your current elections, you do not need to take any action. If you are in the PPO comparable plan for 2009 and do nothing, you will be in the PPO comparable plan for 2010; if you are in the HMO comparable plan, you will remain in the HMO comparable plan.**

### Plan Selection Options

The following benefit plan elections/changes can be made during this open enrollment:

#### Medical Plan:

- Administered by **UnitedHealthCare**
- Choice Plan (HMO Comparable)
- Choice Plus Plan (PPO Comparable)

#### Basic Life:

- Milwaukee County Retirees are eligible to continue their Basic Life insurance coverage for up to 1 times their final annual salary. Note: an age-benefit reduction schedule applies beginning at age 65

#### Prescription Drug Coverage:

- Administered by **Medco**

### Benefits Informational Meetings:

To assist you with any open enrollment questions you may have, retiree benefits information meetings are listed below. Flu shots will be available to Milwaukee County Retirees and their covered dependents at no cost. Retirees are welcome to attend any of the meetings listed below, however, attendance is optional.

Sincerely,



David Arena  
*Director of Employee Benefits*

### Benefits Informational Meeting Schedule:

**Tuesday, November 3**

**Wilson Park Senior Center – Main Hall**

2601 W. Howard Avenue

1:00 p.m. – 4:00 p.m.

**Friday, November 6**

**Washington Park Senior Center - Main Hall**

4420 W. Vliet Street

1:00 p.m. – 4:00 p.m.

**Monday, November 9**

**Clinton Rose Senior Center**

3045 N. Martin Luther King Dr.

1:00 – 4:00 p.m.

**Friday, November 13**

**Wilson Park Senior Center – Main Hall**

2601 W. Howard Avenue

1:00 p.m. – 4:00 p.m.

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## Retiree Enrollment Reminders and Tips



1. **This year, retirees are not required to re-enroll for benefits for 2010. If you do not wish to make changes to your current elections, no action is required.**
2. **Details regarding the retiree medical plans, prescription drug coverage, and basic life insurance are included in this booklet.**
3. **For additional assistance, representatives from UnitedHealthcare and Medco will be available to answer questions during the Open Enrollment meetings (A schedule of these meetings is included in the letter on the previous page). Representatives from REMCO (*Retired Employees of Milwaukee County*) will also be in attendance.**
4. **Traditional flu shots will be available to Milwaukee County Retirees and their covered dependents at Open Enrollment meetings at no cost. While the County will not be directly providing the H1N1 vaccines at Open Enrollment meetings, our health plans will cover the vaccine if obtained through your physician.**
5. **For your convenience, a medical insurance change form has been included with this packet. However, keep in mind that you need to complete it only if you want to change plans or eligible covered dependents.**

# Milwaukee County Employee Medical Plans

## Benefit Comparison *At-A-Glance*

Benefit	Choice Plus Plan (PPO Comparable)			Choice Plan (HMO Comparable)		
<b>Lifetime Maximum Benefit</b>	Unlimited			Unlimited		
		<b>Preferred providers:</b>	<b>All other providers:</b>		<b>Preferred providers:</b>	<b>All other providers:</b>
<b>Annual Deductible</b>	<b>Single</b>	\$150	\$400	<b>Single</b>	Not applicable	Not applicable
	<b>Family</b>	\$450	\$1,200	<b>Family</b>		
<b>Annual Out-Of-Pocket Limit</b> (Includes deductible and coinsurance)	<b>Single</b>	\$1,500	\$3,000	<b>Single</b>	Not applicable	Not applicable
	<b>Family</b>	\$2,500	\$5,000	<b>Family</b>		
		<b>Preferred providers:</b>	<b>All other providers:</b>	<b>Preferred providers:</b>	<b>All other providers:</b>	
<b>Coinsurance</b> (unless otherwise stated)	90%		80%		100%	
<b>Inpatient Services<sup>(1)</sup></b>	90% after deductible		80% after deductible		100% after \$100 copay	
<b>Outpatient Services</b>	90% after deductible		80% after deductible		100%	
<b>Maternity Services<sup>(2)</sup></b>	90% after deductible <sup>(6)</sup>		80% after deductible		100%	
<b>X-Ray and Lab Tests</b>	90% after deductible		80% after deductible		100%	
<b>Emergency Room<sup>(3)</sup></b>	100% after \$50 copay (waived if admitted)		100% after \$50 copay (waived if admitted)		100% after \$50 copay (waived if admitted)	
<b>Physician Office Visits</b>	100% after \$20 copay		100% after \$40 copay		100% after \$10 copay	
<b>Routine Physical Exams (Physician Charges)</b>	100% <sup>(7)</sup>		Not Covered		100%	
<b>Well-Baby Care</b>	100%		Not Covered		100%	
<b>Immunizations</b>	100%		100% <sup>(4)</sup>		100%	
<b>Routine Vision &amp; Hearing Exams<sup>(5)</sup></b>	100%		Not Covered		100%	
<b>Chiropractic Care</b>	100% after \$20 copay		100% after \$40 copay		100% after \$10 copay	
<b>Mental Health / Substance Abuse</b>	See Summary Plan Description			See Summary Plan Description		
<b>Physical, Occupational, Speech, &amp; Respiratory Therapy</b>	90% after deductible		80% after deductible		Hospital: 100% Office: 100% (60 office visit limit)	
<b>Durable Medical Equipment</b>	90% after deductible		80% after deductible		50% up to a maximum of \$50 per item. 100% thereafter	
<b>Prescription Drugs</b>	Generic: \$5 Copay Preferred Brand: \$20 Copayment Non-Preferred Brand: \$40 Copayment Diabetic Covered Supplies \$20 Copay Limited to 30-day supply at retail pharmacy			Generic: \$5 Copay Preferred Brand: \$20 Copayment Non-Preferred Brand: \$40 Copayment Diabetic Covered Supplies \$20 Copay Limited to 30-day supply at retail pharmacy		

**Notes: This at-a-glance guide is intended as a summary only. For specific terms, provisions, conditions, limitations, or exclusions, please refer to your Summary Plan Description.**

(1) Inpatient coverage limited to 365 days per confinement

(2) Includes coverage for dependent daughters

(3) Ancillary services in ER subject to deductible & coinsurance

(4) Immunizations covered up to age 6

(5) Frames, lenses, contact lenses, contact lenses fittings, and hearing aids are not covered

(6) physician services for maternity covered at 100%

(7) Limited to one exam / year for patients 18 and older

## Milwaukee County 2010 Health Benefits At-A-Glance

### Milwaukee County Choice Plan (HMO comparable)

This plan offers the following benefits as long as you stay in your provider network. Highlights of the plan include:

- Physician office visit \$10 co-pay
- Paid-in-full immunizations and injections
- Paid-in-full well-baby care
- \$100 wellness credit for health/fitness membership
- All benefits provided by in-network providers only

### Milwaukee County Choice Plus Plan (PPO comparable)

This plan features comprehensive benefits with deductibles and coinsurance at both in- and out-of-network providers. Highlights of the plan include:

- \$150 per person, per year deductible (\$450 per family)
- In-network physician office visit \$20 co-pay
- Paid-in-full well-baby care
- In-network and out-of-network benefits

### Finding a UnitedHealthCare Network Provider

To confirm if your physician, hospital, or other provider is included in the UnitedHealthCare network, or to find a network physician, please contact UnitedHealthCare at the customer service number provided on the back cover of this booklet, or confirm online using the following steps:

1. Go to [www.myuhc.com](http://www.myuhc.com) and select the "Find Physician or Facility" link located under the links and tools heading in the upper right corner.
2. Select the type of provider that you are looking for (e.g., physician, hospital, facility, or medical equipment supplier) and click on "continue".
3. Select the search criteria that you want to use (e.g., name, location, and specialty).
4. Under the "Select a Plan" field, choose the "UnitedHealthCare Choice" option for the HMO comparable plan, or the "UnitedHealthCare Choice Plus" option for the PPO comparable plan.
5. You can narrow the search by entering the provider's name, but this step is optional
6. Indicate the location where you would like to find providers (e.g., your address), and the distance from that location that you are willing to travel
7. You may also narrow your search by gender, languages spoken by the provider or staff
8. When you are finished entering your search criteria, click continue, and indicate if you are searching for a specific specialty on the next screen.
9. Click "Continue" to view the results

## QUESTIONS AND ANSWERS ABOUT MEDICAL BENEFITS

Answers to the most commonly asked questions about medical benefits are listed below to assist you in making a decision about which medical plan is best for you and your family.

**Q.** Have my health benefits changed?

**A.** *No, You still have the choice of a PPO Comparable plan and a HMO comparable plan design. The benefit levels under each plan have not changed.*

**Q.** Has the health insurance company changed?

**A.** *No. UnitedHealthCare will administer your health plan for 2010. Medco will be the administrator for prescription drug coverage.*

**Q.** Have my provider options changed?

**A.** *UnitedHealthCare offers a nationwide network of providers that is particularly strong in Southeast Wisconsin. The overwhelming majority of physicians and facilities that were available for 2009 are available for 2010. While it is very likely that the providers you utilized in 2009 will be in the network for 2010, the only way to be absolutely certain is to confirm with UnitedHealthCare. Instructions are provided on the prior page.*

**Q.** Will I receive new ID cards?

**A.** *If you make changes during the Open Enrollment period (change from the PPO to the HMO, add/delete dependents, etc.) you will receive new medical ID cards prior to January 1, 2010. .*

**Q.** If I choose the Milwaukee County Choice Plan (HMO comparable), will I have to go to an in-network physician for all of my health care needs?

**A.** *Yes, in order to have your health care costs covered, you must use network providers.*

**Q.** If I change to a different medical plan, when will the new coverage start?

**A.** *Your new medical plan will take effect January 1, 2010. There will be no lapse in coverage as your current plan will be in effect through December 31, 2009. Your commitment to the plan you choose is for one calendar year. If you change health plans for 2010 and later decide you would like to return to your former plan or enroll in a different plan, you may do so only during next year's open enrollment*

**Q.** How is emergency care handled in and out of the Milwaukee area?

**A.** *Emergency care may be obtained anywhere without prior authorization, subject to notification of the plan within 24 hours of receiving emergency services requiring inpatient hospitalization. (Review your summary plan description for specific procedures you must follow to obtain emergency and follow-up health care coverage.)*

# Milwaukee County Life Insurance Plans

MetLife is the current administrator for all of Milwaukee County's life insurance plans.

## Basic Life Insurance:

Milwaukee County Retirees are eligible to continue their Basic Life insurance coverage for up to 1 times their final annual salary.

## Pre-age 65 Retirees Hired Before 1/1/1994

Milwaukee County provides the first \$25,000 (\$20,000 for select bargaining units) of that coverage. If basic life is elected, retirees are responsible for the remainder of the coverage, at a rate of \$0.34 per thousand dollars of covered income.

## Post-age 65 Retirees Hired Before 1/1/1994

Upon reaching age 65, Milwaukee County pays the full premium cost of your life insurance coverage

**Retirees Hired after 1/1/1994 typically pay the full cost of life insurance coverage (currently \$0.58 per thousand dollars of covered income). However, requirements vary based on bargaining units.**

Note: The following benefit reduction schedule begins at age 65 for basic life coverage. The schedule for reduction may vary by bargaining unit.

Age	Percentage of original benefit
65 but less than 66	92%
66 but less than 67	84%
67 but less than 68	76%
68 but less than 69	68%
69 but less than 70	60%
70 and older	25%



## Important Considerations

- This is "Term" insurance only. You may not borrow against it and no cash value accrues.
- Life insurance beneficiaries may be changed at anytime. Please be sure to keep your beneficiary information up to date.
- Deferred retirees do not have life insurance, and will not be eligible to enroll in life insurance at the time of retirement or during open enrollment.
- If you choose to decline basic life insurance coverage, you will not be eligible to re-enroll at a later date.
- Age reduction schedules, coverage amounts, and hire dates for county-paid coverage may vary for retirees from bargaining units.

## Milwaukee County Retiree Monthly Health Plan Rates as of 1/1/2010

	<b>Milwaukee County Choice Plus Plan (PPO Comparable)</b>	<b>Milwaukee County Choice Plan (HMO Comparable)</b>
<b>Single person not on Medicare</b>	<b>\$1106.92</b>	<b>\$909.17</b>
<b>Family not on Medicare</b>	<b>\$1835.84</b>	<b>\$2545.21</b>
<b>One person on Medicare</b>	<b>\$442.67</b>	<b>\$436.93</b>
<b>Two persons on Medicare</b>	<b>\$885.37</b>	<b>\$873.84</b>
<b>One person on Medicare and one person without Medicare</b>	<b>\$1546.59</b>	<b>\$1346.10</b>
<b>One person on Medicare and one person without Medicare plus dependent child(ren)</b>	<b>\$1549.59</b>	<b>\$1346.10</b>
<b>Two persons on Medicare plus dependent child(ren)</b>	<b>\$1549.59</b>	<b>\$1346.10</b>

**Upon becoming Medicare-eligible (regardless of age) you must enroll in Medicare parts A and B, and provide proof of enrollment to the Employee Benefits Division. You are not required to enroll in Medicare part D.**

### **Notes:**

Employees hired before 1/1/1994 who retire with at least 15 years of pension credit service are generally eligible for County-paid coverage (This provision may vary for former bargaining unit employees). Additionally, Milwaukee County will reimburse these retirees for the cost of Medicare Part B premiums. Please be advised, if you are required to pay more than the standard Medicare Part B premium (\$96.40 per person per month for 2010), and you are eligible for reimbursement of those premiums, it is your responsibility to notify the Division of Employee Benefits.

Eligibility Update – Dependent Child(ren) are defined as:

- Your or your Spouse's unmarried child who is under age 27, including a natural child, stepchild, a legally adopted child, a child placed for adoption or a child for whom you or your Spouse are the legal guardian;
- An unmarried child of any age who is or becomes disabled and dependent upon you; or
- Your unmarried child over age 27 who is:
  - a Full-time Student, as defined in the Summary Plan Description;
  - not regularly employed on a full-time basis; and
  - primarily dependent on you for support and maintenance.

To be eligible for coverage under the Plan, a Dependent must reside within the United States.



## **Important Notice From Milwaukee County 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 Milwaukee County 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. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

**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. Cambridge Advisory Group, on behalf of Milwaukee County, has determined that the prescription drug coverage offered by Milwaukee County is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is considered Creditable Coverage.**

**Because the prescription drug coverage offered by Milwaukee County is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is considered Creditable Coverage. It is not necessary for you to join a Medicare prescription drug plan at this time.**

**Your existing coverage is, on average, at least as good as standard Medicare prescription drug coverage. You can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.**

You can join a Medicare drug plan when you first become eligible for Medicare and each year from November 15th through December 31st. This may mean that you may have to wait to join a Medicare drug plan and that you may pay a higher premium (a penalty) if you join later. You may pay that higher premium (a penalty) as long as you have Medicare prescription drug coverage. However, if you lose creditable prescription drug coverage, through no fault of your own, you will be eligible for a sixty (60) day Special Enrollment Period (SEP) because you lost creditable coverage to join a Part D plan. In addition, if you lose or decide to leave employer/union sponsored coverage; you will be eligible to join a Part D plan at that time using an Employer Group Special Enrollment Period. 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.

**If you decide to join a Medicare drug plan, your Milwaukee County coverage will not be affected. See below for more information about what happens to your current coverage if you join a Medicare drug plan.**

Your current coverage pays for other health expenses in addition to prescription drugs. If you enroll in a Medicare prescription drug plan, you and your eligible dependents will still be eligible to receive all of your current health and prescription drug benefits and the Medicare prescription drug plan will coordinate benefits with your Milwaukee County prescription drug coverage.

**If you do decide to join a Medicare drug plan and drop your Milwaukee County prescription drug coverage, be aware that you and your dependents may not be able to get this coverage back.**

**-- CONTINUED ON NEXT PAGE --**

You should also know that if you drop or lose your coverage with Milwaukee County and do not 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 prescription drug coverage that's at least as good as Medicare's prescription drug coverage, your monthly premium may go up by at least 1% of the base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without coverage, your premium may consistently be at least 19% higher than the 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 November 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 Milwaukee County changes. You also may request a copy.

**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 whether or not you are required to pay a higher premium (a penalty).**

Date:	November 1, 2009
Name of Entity/Sender:	Milwaukee County
Contact--Position/Office:	Marco Gruchalski, Benefits Specialist
Address:	901 N. 9th Street, Room 210, Milwaukee, WI 53233
Phone Number:	414-278-4198



## ***Notice to Enrollees in a Self-Funded Nonfederal Governmental Group Health Plan***

Under a Federal law known as the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, as amended, group health plans must generally comply with the requirement listed below. However, the law also permits State and local government employers that sponsor health plans to elect to exempt a plan from these requirements for part of the plan that is "self-funded" by the employer, rather than provided through a health insurance policy. Milwaukee County has elected to exempt the Milwaukee County Choice Plan and the Milwaukee County Choice Plus Plan from the following requirement:

### **Parity in the application of certain limits to mental health benefits.**

Group health plans (of employers that employ more than 50 employees) that provide both medical and surgical benefits and mental health or substance use disorder benefits must ensure that financial requirements and treatment limitations applicable to mental health or substance abuse benefits are no more restrictive than the predominant financial requirements and treatment limitations applicable to substantially all medical and surgical benefits covered by the plan.

The exemption from this Federal requirement will be in effect for the 2010 plan year beginning January 1, 2010 and ending December 31, 2010. The election may be renewed for subsequent plan years.

HIPAA also requires the Plan to provide covered employees and dependents with a "certificate of creditable coverage" when they cease to be covered under the Plan. There is no exemption from this requirement. The certificate provides evidence that you were covered under this Plan, because if you can establish your prior coverage, you may be entitled to certain rights to reduce or eliminate a preexisting condition exclusion if you join another employer's health plan, or if you wish to purchase an individual health insurance policy.

Inquiries regarding this notice can be directed to the **Milwaukee County Division of Employee Benefits, Courthouse Rm. 210, 901 N. 9<sup>th</sup> St., Milwaukee, WI 53233.**

## FOR ADDITIONAL INFORMATION

### Medical Plans – *administered by UnitedHealthCare*

- MILWAUKEE COUNTY CHOICE PLAN (HMO Comparable)
- MILWAUKEE COUNTY CHOICE *PLUS* PLAN (PPO Comparable)

UnitedHealthCare Customer Service Center ..... 1-800-603-3941

(Information regarding providers, benefit levels, and claims processing)

UnitedHealthCare Customer Service Hours: 7:00 a.m. to 7:00 p.m. Monday through Friday

### Prescription Drug Coverage – *administered by Medco*

Medco Customer Service Center ..... 1-866-544-2989

(Information regarding covered medications, benefit levels, and claims processing)

Medco Customer Service Hours: 24 hours/day, 7 days per week.

### Mental Health/Substance Abuse Coverage

**MHN HEALTH MANAGEMENT CENTER** (Access to Service)

- Mental Health/Substance Abuse for participants of the Milwaukee County Choice Plus Plan (PPO Comparable) ..... 1-800-472-4992

**Note: Mental Health / Substance Abuse coverage for the Milwaukee County Choice Plan (HMO Comparable) is accessed directly through United HealthCare. If you are enrolled in this plan, please use the customer service number for the Medical Plan listed above.**

**THIS BROCHURE DESCRIBES THE MEDICAL BENEFIT PROGRAMS IN GENERAL TERMS ONLY AS OF THE DATE OF THIS PRINTING. IT IS NOT INTENDED TO BE A COMPLETE DESCRIPTION OF COVERAGE AND ANY STATEMENTS IN THIS BROCHURE ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE MASTER CONTRACT OF EACH PLAN AND THE RELEVANT COUNTY ORDINANCES AND BARGAINING UNIT AGREEMENTS.**