



## COUNTY OF ONONDAGA • DEPARTMENT OF PERSONNEL

John H. Mulroy Civic Center  
421 Montgomery Street, 15th Floor  
Syracuse, New York 13202-2959

EMPLOYEE BENEFITS DIVISION

• (315) 435-3498 • Fax 435-2869 • e-mail – EmployeeBenefits@ongov.net • web address – www.ongov.net

### THE 2020 OPEN ENROLLMENT PERIOD HAS GONE VIRTUAL....

[www.ongov.net/ebenefits](http://www.ongov.net/ebenefits)

The 2020 Open Enrollment period is scheduled for November 2 – November 20, 2020. All changes will become effective January 1, 2021.

**If you wish to make a change to your current health plan enrollment, you must submit your request no later than November 20, 2020. No action is required if you are not making any changes to your current health plan.**

Actions you **must** take during open enrollment:

- You must complete and return the enclosed Spouse Medical Plan Questionnaire to Employee Benefits. \*

Actions you can take during open enrollment:

- Enroll in a different medical plan. You may remain on your current health plan or switch to the MVP HMO plan.
- Add or remove dependents from your policy. Your dependents may include your spouse or dependent children that remain eligible for the plan.

**Flu Shots** – Members who are interested in having a Flu Shot are encouraged to contact your local Kinney Drug store in advance to set up an appointment to receive the flu shot. Please be sure to bring your OnPoint ID card so that you will not be charged a fee.

*\*Any spouse on your plan that is currently eligible for coverage through their employer, must enroll in that employers coverage in order to remain eligible to remain on the OnPoint plan.*

## **Health Insurance: There are two (2) health plan options.**

- **OnPoint administered by Excellus BlueCross BlueShield** is the County's self-insured Point of Service Health and Wellness Plan. This program includes benefits for retail and mail order prescription drug coverage through ProAct and vision care through Davis Vision. For a complete list of participating Excellus Blue Cross BlueShield health care professionals, contact OnPoint at 1-800-796-6747 or visit their website at [www.ExcellusBCBS.com](http://www.ExcellusBCBS.com).
- **MVP IS A Health Maintenance Organization (HMO).** MVP offers a wide range of benefits for enrollees. As an HMO, the plan is insured by MVP and available benefits are outlined in their policy summary, which will be available during Open Enrollment. You can review a comparison of these benefits, download forms and obtain additional information from the Employee Benefits Department website at [www.ongov.net/ebenefits](http://www.ongov.net/ebenefits)

*\*Please note: any retiree and/or dependent is required to enroll in Medicare Part A and B when eligible either by age (65) or disability. When an OnPoint retiree and/or dependent becomes Medicare eligible he or she will be moved from the OnPoint Retiree Plan to the County's Medicare Advantage plan. Advance notice will be sent to eligible members. If you or any of your dependents become eligible for Medicare sooner than age 65 due to disability, please contact the Employee Benefits Department immediately.*

**2021 Retiree Monthly Health Plan Contributions:** Lifetime Benefit Solutions (LBS) will continue to serve as our Retiree Billing administrator.

If you are in a plan that requires monthly premium payments, you can:

- Pay LBS by check or credit card
- Enroll in Automatic Payment (ACH) with LBS
- Have your monthly premium payments automatically deducted from your New York State retirement pension check.

**Note: Failure to make timely payments can negatively affect your benefits.** Therefore, it is recommended that you enroll in ACH or Pension Deduction. If you would like to take advantage of the Pension Deduction program, please contact our office to obtain a copy of the Pension Deduction Authorization form or download the form from our website at [www.ongov.net/ebenefits](http://www.ongov.net/ebenefits) to start the process. For an ACH form, please reach out to LBS at 1-877-359-7840.

*Please remember to contact Employee Benefits any time there is a change to your permanent or mailing address. Failure to update your address can result in you not receiving important documents such as vendor changes announcements, billings, and ID cards, some of which cannot be forwarded.*

# REQUIRED NOTICES

## **Cancer Screenings:**

Onondaga County, in collaboration with the American Cancer Society, wants to remind you that early detection is the key to successful cancer treatment and survival. The American Cancer Society recommends routine cancer screenings and OnPoint can help. OnPoint provides benefits for:

- **Prostate Cancer Screening** – Contact your health care provider to determine your personal screening needs. Employees are entitled to paid leave for up to four hours per calendar year for prostate cancer screening. Documentation from the appropriate medical provider is required in order to utilize this leave benefit
- **Breast Cancer Screening** – Annual mammography screening typically begins at age 40 years old for women. OnPoint allows benefits for this screening for both the radiology and physician services. Administrative leave is also available for breast cancer screening up to 4 hours per calendar year. Do you know that your plan, as required by the **Women’s Health and Cancer Rights Act of 1998**, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema. Call OnPoint Customer Service at 1-800-796-6747 for more information.
- **Colorectal Cancer Screening** – easily detected and often neglected, colon cancer is often preventable. Screening usually begins at 50 years old for both men and women. Contact your health care provider to determine your specific cancer screening needs. For more information about cancer screening guidelines visit: [www.cancer.org](http://www.cancer.org).

**Adult Physical Examinations:** OnPoint provides benefits for one (1) wellness exam from your primary care physician each calendar year. Please refer to your plan summary for your specific benefit ([www.ongov.net/ebenefits/index.html](http://www.ongov.net/ebenefits/index.html)). It is during this visit that you should discuss additional screenings with your physician such as screenings for cholesterol, blood pressure, and diabetes. **Please contact OnPoint Customer Service at 1-800-796-6747 should you have any questions regarding the benefits available to you.**

**Summary of Benefits and Coverage (SBC):** As part of the Health Care Reform Act insurers are required to produce and make available to all members a document outlining the health services provided in a set format. As part of the Health Care Reform Act insurers are required to produce and make available to all members a document outlining the health services provided in a set format. This document is located on the Onondaga County website at <http://www.ongov.net/ebenefits>. If you would like to request a paper copy of this document please contact Employee Benefits at 435-3498.

**Note for OnPoint 25 members only:** OnPoint25 is a non-grandfathered health plan which includes all the consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing.

## **Non-Discrimination Statement**

Onondaga County complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Onondaga County does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. Onondaga County provides free aids and services to people with disabilities to communicate effectively with us such as:

Qualified sign language interpreters, written information in other formats (large print, audio, accessible electronic formats, other formats). Onondaga County provides free language services to people whose primary language is not English, such as: Qualified interpreters, information written in different languages. If you need these services, contact the Onondaga County Department of Personnel. If you believe that Onondaga County has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: The Onondaga County Department of Personnel, 421 Montgomery Street, 13<sup>th</sup> Floor, Syracuse NY 13202. Phone: 315-435-3537, Fax: 315-435-8272. Email: <http://www.ongov.net/employment/contact.html> . You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Onondaga County Personnel Department is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U. S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 1-800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

### **REMINDER NOTICE OF PRIVACY PRACTICES For Onondaga County**

**This reminder notice is required by federal law. No action is required on your part.**

The Notice of Privacy Practices describes how protected health information may be used or disclosed by your Group Health Plan to carry out payment, health care operations, and for purposes that are permitted or required by law. This Notice also sets out legal obligations of Onondaga County concerning your protected health information (PHI), and describes your rights to access and control your protected health information. You have a right to a paper copy of this Notice. To obtain a copy, or if you have any questions or want additional information about the notice or the policy and procedures described in the Notice, please contact the Employee Benefits Department at 421 Montgomery St. 15<sup>th</sup> Floor Civic Center, Syracuse NY 13202.

#### **Medicaid and the Children's Health Insurance Program (CHIP):**

**CHIP offers free or low-cost health coverage to children and families.** If you are eligible for health coverage from your employer, but are unable to afford the premiums, some States have premium assistance programs that can help pay for coverage. These States use funds from their Medicaid or CHIP programs to help people who are eligible for employer-sponsored health coverage, but need assistance in paying their health premiums. 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, you can contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or **ww.insurekidsnow.gov** to find out how to apply. If you qualify, you can ask the State if it has a program that might help you pay the premiums for an employer-sponsored plan. ***You may be eligible for assistance paying your employer health plan premiums. You should contact New York State for further information on eligibility.***

<b>NEW YORK – Medicaid</b>
<b>Website: <a href="http://www.health.ny.gov/health_care/medicaid/">http://www.health.ny.gov/health_care/medicaid/</a> Phone: 1-800-541-2831</b>

Other states also have premium assistance programs. For more information on special enrollment rights, you can contact either:

U.S. Department of Labor  
Employee Benefits Security Administration  
www.dol.gov/agencies/ebsa  
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services  
Centers for Medicare & Medicaid Services  
www.cms.hhs.gov  
1-877-267-2323, menu option 4, Ext. 61565

## **New Health Insurance Marketplace Coverage Options and Your Health Coverage**

### **General Information**

When key parts of the health care law took effect in 2014, there were new ways to buy health insurance: the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment based health coverage offered by your employer.

**What is the Health Insurance Marketplace?** The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in November 2020 for coverage starting as early as January 1, 2021.

**Can I Save Money on my Health Insurance Premiums in the Marketplace?** You may qualify to save money and lower your monthly premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

**Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?** Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in your employer's health plan. However, you may be eligible for a tax credit that lowers your monthly premium or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or if the coverage your employer provides does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit.\* Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution -as well as your employee contribution to employer-offered coverage- is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

### **How Can I Get More Information?**

For more information about your coverage offered by your employer, please check your summary plan description or contact **ONONDAGA COUNTY EMPLOYEE BENEFITS OFFICE 315-435-3498** or [WWW.ONGOV.NET](http://WWW.ONGOV.NET). The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit [HealthCare.gov](http://HealthCare.gov) for more information, including an online application for health insurance coverage or call 1-855-355-5777 (TTY 1-800-662-1220) for information on the Health Insurance Marketplace in your area.

## CERTIFICATE OF CREDITABLE COVERAGE

### Important Notice from Onondaga 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 Onondaga 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. 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.



### What 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. Onondaga County has determined that the prescription drug coverage offered by the Onondaga County Employee Benefit Program 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.
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#### **Q. When Can I Join A Medicare Drug Plan?**

**A.** 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.

#### **Q. What Happens To My Current Coverage If I Decide To Join A Medicare Drug Plan?**

**A.** If you decide to join a Medicare drug plan, your current Onondaga County coverage will be affected. If you do decide to join a Medicare drug plan and drop your current Onondaga County coverage, be aware that you and your dependents will not be able to get this coverage back.

#### **Q. When Will I Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?**

**A.** You should also know that if you drop or lose your current coverage with Onondaga County 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 Onondaga County Employee Benefits at 315-435-3498 for further information.

**NOTE:** *You will 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 Onondaga County changes. You also may request a copy of this notice at any time.*

**Q. I am not Medicare eligible, why did I receive this notice?**

**A.** In order to not overlook anyone that may become Medicare eligible (members and dependents) we are required to send this notice annually with our Open Enrollment documents to every policyholder in our retiree plans.

**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) or 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.

You may also 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).

Date: October 16, 2020

Contact: Onondaga County Employee Benefits Division

Address: 421 Montgomery Street, 15<sup>th</sup> Floor, Syracuse, NY 13202

Phone Number: 315-435-3498



COUNTY OF ONONDAGA  
EMPLOYEE BENEFITS  
421 Montgomery Street, 15<sup>th</sup> Floor  
Syracuse, NY 13202-2959

## INSURANCE VERIFICATION QUESTIONNAIRE

To be completed by all retirees and/or spouse enrolled in Onondaga County sponsored benefits.

Retiree Name & SSN: \_\_\_\_\_

Spouse's Name \_\_\_\_\_

1. Other than Medicare, are you or your spouse eligible for any other coverage?
  - Yes, \_\_\_\_\_
  - No, (skip questions 2 & 3. Sign, date and return to Employee Benefits.)
  
2. **Employment status:**
  - A. Is your spouse employed?
    - Yes my spouse is employed,
      - Place of Employment & Address: \_\_\_\_\_
    - No (Skip to question 3)
  
  - B. Is your spouse eligible to receive medical insurance offered by their current employer?
    - Yes
    - No
  
  - C. Is your spouse enrolled spouse's employer offers medical insurance?
    - Yes
      - Name of Carrier: \_\_\_\_\_
      - Subscriber ID Number \_\_\_\_\_
      - Mailing Address: \_\_\_\_\_
    - No: Please explain \_\_\_\_\_  
\_\_\_\_\_
    - N/A

*I certify that the information provided on this form is a true and correct representation. I understand that a deliberate misrepresentation of the facts on this affidavit may result in the termination of this dependent's medical coverage.*

Retiree Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return this form to Employee Benefits.  
421 Montgomery Street 15<sup>th</sup> floor  
Syracuse, NY 13202  
Or by email at Employee Benefits@ongov.net**