

2017 Benefits Updates & Reminders



UHC ID Cards

- All employees enrolled in a United Healthcare medical plan were sent new ID cards in the mail, except those staying on the Consumer Driven Health Plan with HSA - with no changes.



Healthcare FSA

- If you elected a healthcare flexible spending account (FSA), the funds are available for use on January 1, 2017.
- If enrolling for the first time, you will receive a debit card issued by WageWorks. If you had an account previously you will get a debit card only if yours is expired; otherwise, the 2017 monies will be loaded to your current card.
- For current participants, you may carry over up to \$500 of unused funds. There is a 90-day run-out period for 2016 expenses to be submitted for reimbursement so the 2016 carryover funds may be used for 2017 expenses as of April 1.



Biweekly Premiums

- 2017 health premiums and FSA elections will be deducted starting on the January 13th paycheck.
- To check your elections and premiums, log into OPUS, select Employee Self Service, Benefits, and select *01-Jan-2017 and later* from the pull-down menu at the top: *Please show me the benefits as of.*

Biweekly Health Premiums*		
Coverage	Increase from 2016	2017 Premium
Employee Only	\$.62	\$8.36
Employee and Spouse	\$7.98	\$107.69
Employee and Child(ren)	\$6.79	\$91.64
Family	\$13.43	\$181.29

* The same premiums apply both health plans (Consumer Driven with HSA and Point of Service). The premium includes medical care, prescription coverage, Employee Assistance Program (EAP), managed mental health, and vision care.



Vision Plan

- Davis Vision is the vision plan administrator as of January 1, 2017 (replacing EyeMed).
- You will get a new member kit in early January including an ID card, Plan Summary, and a Provider Directory for the area surrounding your home zip code.
- You may use your vision benefit as of January 1, 2017. There is no carryover from EyeMed on the anniversary date of service; therefore, there is no need to wait a full 365 days from your last visit.



Dental HMO

- Cigna is the dental HMO administrator as of January 1, 2017 (replacing MetLife).
- Check to be sure that your dental provider is in the Cigna network prior to obtaining services as the HMO has network benefits only. You will be responsible for 100% of the costs if you use a non-network provider.



Copays

- Copays for the Point of Service (POS) health plan are increasing as of January 1, 2017 as shown:

POS Health Plan Copays		
In-Network Benefit	2016 Copay	2017 Copay
Virtual Doctor Visit	\$15	\$15
Primary Care Physician/ Urgent Care Visit	\$20	\$25
Specialist	\$30	\$35
Emergency Room	\$100	\$250

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