



# Shreveport

## 2023 Retiree BENEFITS GUIDE

# Welcome

Your benefits are an important part of your overall compensation. City of Shreveport is pleased to offer a comprehensive array of quality benefits to protect your health, your family and your way of life. This guide is designed to answer some of the basic questions you may have about your benefits. Please read it carefully and if you have any questions contact the Benefit Advocate Center at 844-267-2225 or [cosbac@hubinternational.com](mailto:cosbac@hubinternational.com).

## Table of Contents

Getting Started	Page 3
Employee Resources	Page 4
Medical	Page 5
Blue Advantage Medicare	Page 6
Medical Plans	Page 7
How to Save on Prescription Drugs	Page 8
Where to Go for Care	Page 9
Dental & Vision	Page 10
Voluntary Benefits	Page 11
Contact Information	Page 12

# Getting Started

## Eligibility

You are eligible for benefits at time of retirement by completing and signing the “Continuation of Insurance Election Form.” For more information, contact the Pension Office at 318-673-5426 or 318-673-5413. You may also enroll your eligible family members under certain plans you choose for yourself.

### Eligible family members include:

- Your legally married spouse
- Children: biological, step-children, adopted, legal custody (cannot be temporary custody) up to the age of 26. Disabled children over the maximum age of 26 may continue coverage if meet certain criteria.

## When Coverage Begins

Benefits for retirees will be effective the first day of the month following your date of retirement. For example, when an employee retires on March 3<sup>rd</sup> the effective date of retiree coverage will be April 1<sup>st</sup>.

## Medical Plan Surcharges

The City of Shreveport is dedicated to promoting the value and importance of a healthy lifestyle through both our benefits and wellness programs. Surcharges are implemented according to the City’s Health Care Trust Fund policies. The cost of your medical plan may vary based on the following:

**15% Tobacco Surcharge** – The 15% premium tobacco surcharge may apply to you if you, your spouse or your children use tobacco. To qualify for tobacco free medical premiums, you must complete the Tobacco User Certification within the enrollment system, BenSelect.

**\$100 Working Spouse Surcharge** – The \$100 monthly spousal surcharge may apply to you if your spouse has access to medical coverage with another employer. If your spouse does not have other medical coverage available, you must complete the Spouse Coverage Certification within the enrollment system, BenSelect.

**Wellness Surcharge** – The monthly wellness surcharge

may apply to you if you do not participate in the Wellness Program. Schedule your annual preventive/wellness visit with your primary care provider to avoid the wellness surcharge.

## Qualifying Life Events

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a Qualifying Life Event or a Special Enrollment Event during the year.

A request to make changes in benefit elections as a result of a Qualifying Life Event must take place within 30 days of the event.\* The three broad events are:

1. Life events such as marriage, divorce/legal separation, birth or adoption of a child, and various other employment status changes such as going from full-time to part-time.
2. Cost of coverage change; and/or
3. Other laws/court orders such as medical child support order

If the employee gains access to a premium assistance subsidy under Medicaid or CHIP, it creates a Special Enrollment Event. A request to make an election change as a result of a Special Enrollment Event must take place within 60 days of the event. Failing to elect coverage during the initial enrollment period will result in Late Enrollee limitations under certain benefit plans.

To report a Qualifying Life Event or a Special Enrollment Event, you must contact the Benefit Advocate Center 844-COSBAC5 (844-267-2225) or email [cosbac@hubinternational.com](mailto:cosbac@hubinternational.com) within 30 days or 60 days of the event as outlined.

Be prepared to show documentation of the event such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

\*Failing to elect coverage during the initial enrollment period will result in late enrollee limitations under certain benefit plans.

# Employee Resources

## How to Enroll

Our Benefit Enrollment website is home to all the tools and resources you will need during Annual Enrollment and throughout the year. It is also where you will enroll in your benefits. See below for detailed instructions that will navigate your through the enrollment process with ease.

### Step 1

Log on to: <https://standard.benselect.com/COS> You may use a desktop computer, tablet or any mobile device to complete your enrollment.

### Step 2

At the employee login screen, enter your social security number (username) and your personal identification number (PIN). Your PIN is a combination of the last 4 digits of your social security number and last two (2) digits of your year of birth. For example, if the last 4 digits of your SSN are 3214 and you were born 9/21/68, your PIN would be 321468. If you have trouble logging into the system, contact the Benefit Advocate Center (BAC) at [cosbac@hubinternational.com](mailto:cosbac@hubinternational.com) or 844-267-2225 / 844-COSBAC5.

### What you will need

In addition to your personal information, if you are adding or updating a dependent or beneficiary you will need their names, addresses, birth dates and Social Security Numbers.

## Benefit Advocate Center

The Benefit Advocate Center (BAC) is your one-stop resource to answer all your employee benefit questions. You have a busy life. With so much going on, it can be difficult to slow down and focus on the small details.

Who can you turn to when you need help understanding your employee benefits provided by The City of Shreveport? The BAC is available to answer your questions and address any issues. When you call or email the BAC, a personal advocate will be ready to help you. Contact the BAC, when you have questions regarding:

- Explaining your benefits
- Clarifying benefits eligibility
- Understanding your claims
- Covered services
- Provider availability
- Qualifying life events
- Replacement ID cards
- Pharmacy/prescription problems
- Benefits enrollment

### **City of Shreveport Benefit Advocate Center (BAC)**

Phone: 844-267-2225 or 844-COSBAC5

Email: [cosbac@hubinternational.com](mailto:cosbac@hubinternational.com)

Hours: Monday – Friday, 7:30 a.m. – 6:00 p.m. (CST)



Your medical coverage is provided by Blue Cross and Blue Shield of Louisiana (BCBSLA). You have the choice of two plans – the Base Plan or the High-Deductible Plan.

Both plans provide access to the large PPO network of BCBSLA providers to bring you quality health care when and where you need it.

Use in-network providers to save the most money. In-network providers have agreed to charge a lower fee for their services, which means you keep more money in your pocket.

To find an in-network provider, visit [www.bcbsla.com](http://www.bcbsla.com).

- Tier 1 – BlueConnect EPO network
- Tier 2 – Preferred Care PPO network

## Telehealth

A telehealth (virtual visit) lets you see a doctor via your smartphone, tablet or computer. Doctors can diagnose and treat a wide range of non-emergency medical conditions and even write a prescription. You will have 24/7 access to quality care with no appointment necessary. The City of Shreveport has two Virtual Care benefits available:

### BlueCare Telemedicine

Telehealth and/or Behavioral Health	\$30 Copay
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Visit [www.BlueCareLA.com](http://www.BlueCareLA.com) to enroll or download the BlueCare app at the Apple App or Google Play stores.

### Ochsner Connected Anywhere

Telehealth	\$0 with coupon code BLUECONNECT
Behavioral Health	\$85*

\* Each 45-minute session costs \$85. Schedule recurring virtual appointments with the provider of your choice from 6 a.m. to 10 p.m. CST, seven days a week.

Visit [www.Ochsner.org/anywhere](http://www.Ochsner.org/anywhere) to enroll or download the Ochsner Connected Anywhere app from the Apple App or Google Play store.

#### Copayment Definition

Also called a “copay”, this field is the fixed dollar amount (not a percentage) you will pay for a certain kind of medical service under some plans

#### Deductible Definition

The amount of money you must pay each Plan year before the Plan starts to share in some of your health care expenses.

#### Coinsurance Definition

The percentage of costs of covered health care service you pay (example 20%) after you’ve met your deductible.

#### Out of Pocket Maximum Definition

After you have paid this amount in medical expenses, In-Network claims will be covered at 100% for the rest of the plan year – without cost sharing or additional out of pocket expenses. The deductible is included in the out-of-pocket maximum on all plans.

## What conditions can be treated with a Virtual Care visit?

### Telehealth

Cold, flu and cough	Allergies and sinus issues
Sore Throats / Fever	Stomachaches
Rashes / Allergies	Urinary tract infection (UTI)
Pinkeye	Nausea, vomiting, diarrhea

### Behavioral Health

Addiction	Anxiety	Panic Attacks
ADD / ADHD	Insomnia	Eating disorders
Counseling	Depression	Mood disorders
Postpartum depression		

# Medicare Advantage Plan – BlueCross BlueShield of Louisiana

When you choose the Medicare Advantage Plan, you get Medicare coverage, plus so much more. Our plan combines medical, hospital and prescription drug coverage in one convenient and affordable plan. Members also receive additional benefits and features to help them stay healthy!

## Who can join?

To join the Medicare Advantage Plan (PPO), you must be entitled to Medicare Part A, and be enrolled in Medicare Part B.

### **Flex Card:**

Your Blue Advantage plan comes with our NEW Flex Card, making it easier than ever to use your benefits. Members will receive a \$925 Mastercard Flex Card to pay for out-of-pocket costs, including:

- \$500 for prescription hearing aids
- \$225 to pay for eyewear (eyeglasses & contacts)
- \$50 per quarter (total \$200 per year) for over-the-counter supplies.

**Dental:** The following services are covered when provided by a Blue Advantage dental network provider

Diagnostic & Preventive Services – covered at 100%  
Including two dental cleanings and two exams per year.

Basic Services – covered at 100%

Annual Allowance - \$1,200 per year allowance applies for both Diagnostic & Preventive Services and Basic Services combined.

### **BlueCare Telehealth:**

- Online doctor visits are available to members through BlueCare Telehealth.
- Medical visits have a \$0 copay and behavioral health visits have a \$40 copay.
- BlueCare is available 24/7 in all 50 states to attend to non-emergency conditions.
- BlueCare is also a good option for people who feel too ill to leave home or want to consult with a health care provider without going somewhere in person.

**Vision:** The following services are covered at no cost:

- Annual routine eye exam
- Eye Exams to diagnose and treat eye conditions
- Eyeglasses or contacts after cataract surgery
- Glaucoma screening

Eyewear Allowance – A \$250 eyewear allowance will be available via Flex Card.

**Hearing:** The following services are covered once per year when supplied by a network provider:

- Annual Hearing Exam
- Fitting/Evaluation for Hearing Aid

Hearing Aid Allowance – A \$500 prescription hearing aid allowance will be available via Flex card.

### **Added Features:**

Member Wellness Rewards – receive up to \$50 per year in gift cards from major retailers for completing approved wellness exams and/or screenings.

Fitness Program – No-cost fitness center membership at select premium clubs and many YMCA locations.

24-hour Nurse Help Line – Get help making the right choice in your health care based on your symptoms any time of the day or night.

# Medical Plans BlueCross BlueShield of Louisiana

Following is a high-level overview of the coverage available. Please refer to the Summary of Benefits and Coverage (SBC) and the Summary Plan Description (SPD) for complete coverage details.

Network	Base Plan			High Deductible Plan			Medicare Advantage Plan <sup>4</sup>	
	Tier 1	Tier 2	Tier 3	Tier 1	Tier 2	Tier 3	In-Network	Out-of-Network
	Blue Connect PPO	Preferred Care PPO	Out-of-Network	Blue Connect PPO	Preferred Care PPO	Out-of-Network		
<b>Deductible (per person)</b>								
Individual	\$500	\$750	\$1,500	\$1,250	\$2,000	\$4,000	\$0	\$0
Family	\$1,000	\$1,500	\$3,000	\$2,500	\$4,000	\$8,000	N/A	N/A
<b>Out-of-Pocket Maximum</b>								
Individual	\$4,000		\$8,000	\$6,000		\$12,000	\$1,000 Medical	
Family	\$8,000		\$16,000	\$12,000		\$24,000	N/A	N/A
<b>Telemedicine</b>								
Ochsner Anywhere	\$0 w/code BLUECONNECT		N/A	\$0 w/code BLUECONNECT		N/A	\$0	N/A
BlueCare	\$30			\$30				
<b>Other Covered Services</b>								
Preventive Care	\$0		N/A	\$0		N/A	\$0	\$0
Primary Care Copay	\$25	\$30	50% <sup>1</sup>	\$20	\$30	50% <sup>1</sup>	\$0	\$0
Specialist Copay	\$50	\$60	50% <sup>1</sup>	\$60	\$75	50% <sup>1</sup>	\$0	\$0
Urgent Care Facility	\$50	\$60	50% <sup>1</sup>	\$60	\$75	50% <sup>1</sup>	\$0	\$0
Lab & X-Ray	\$0		50% <sup>1</sup>	\$0		50% <sup>1</sup>	\$0	\$0
Complex Imaging	25% <sup>1</sup>		50% <sup>1</sup>	25% <sup>1</sup>		50% <sup>1</sup>	\$0	\$0
ER Copay	\$300	\$400		25% <sup>1</sup>			\$50	\$50
Inpatient Hospital	25% <sup>1</sup>		50% <sup>1</sup>	25% <sup>1</sup>		50% <sup>1</sup>	\$0	\$0
Outpatient Surgery	25% <sup>1</sup>		50% <sup>1</sup>	25% <sup>1</sup>		50% <sup>1</sup>	\$0	\$0
<b>Prescription Drugs (Generic / Preferred Brand / Non-Preferred Brand / Specialty)</b>								
Retail Pharmacy (30-day supply)	\$10 / \$30 <sup>2</sup> / \$50 <sup>2</sup> / \$100 <sup>2</sup>		N/A	\$10 / \$50 / \$70 / \$100		N/A	\$3 <sup>3</sup> / \$12 / \$45 / \$100 / \$100 Max OOP for Rx is 2500	
Mail Order (90-day supply)	\$25 / \$75 <sup>2</sup> / \$125 <sup>2</sup> / N/A		N/A	\$25 / \$125 / \$175 / N/A		N/A	\$0 <sup>3</sup> / \$0 / \$135 / \$300 / N/A Max OOP for Rx is 2500	

<sup>1</sup> For medical benefits, the amount you pay after meeting the annual deductible.

<sup>2</sup> For pharmacy benefits, the amount you pay after you reach your \$100 deductible for non-generic drugs.

<sup>3</sup> Medicare Advantage Plan pharmacy benefits includes a Preferred Generic drug tier.

<sup>4</sup> Certain medical services (i.e. Inpatient Hospital, Physical Therapy, Mental Health, and Lab work, etc.) may require Prior Authorization. Reference your Summary Plan Description (SPD) for additional information.

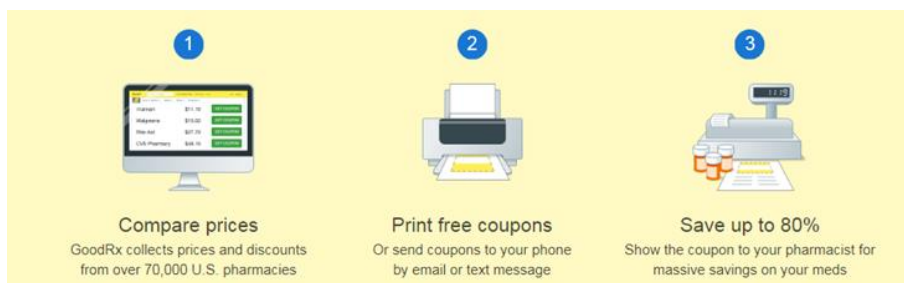
# How To Save On Prescription Drugs

Each medical plan provides prescription drug coverage. You can purchase up to a 30-day supply of prescription drugs at a retail pharmacy or up to a 90-day supply through mail-order pharmacy. We encourage you to research your medication at [www.bcbsla.com/find-adoctor/rx-drug-resources](http://www.bcbsla.com/find-adoctor/rx-drug-resources). In addition, the following are helpful tips on how you can save money on your prescriptions:

## **GoodRx**

GoodRx is a free mobile app and website that helps you save money on prescriptions by finding the lowest prices at your local pharmacies. Use GoodRx's price comparison tool on your mobile app or visit [www.goodrx.com](http://www.goodrx.com) to save up to 80% on many commonly prescribed medications.

### **How can GoodRx help you save money if you are already insured?**



Your insurance plan's co-pay may not be the lowest price. Many insurance plans have high deductibles or limited formularies that don't cover the drugs you need.

You may be surprised to learn that there are many discounts available that will provide lower prices than your co-pay. Some pharmacies have special generic priced medications for \$4 – or even free! – without insurance.

Here are two things to consider when deciding whether to fill your prescription with your insurance or GoodRx:

1. Is this drug covered by your plan? If so, how much will it cost? Insurance companies use "formularies" which list how much they will pay for a specific prescription. For many brand-name drugs, your plan may cover just a percentage of a negotiated price.
2. Have you satisfied your deductibles? Some plans have a high deductible for all of your care before they will pay anything. In these cases, you'll usually still get a discounted rate, but it may not be as low as the prices GoodRx can find.

## **Choose Generic Medications**

Generic medications are FDA-approved with the same high quality, strength and purity as brand-name drugs. However, when it comes to price there can be a big difference. Ask your doctor or pharmacist if a generic medication is right for you.

## **\$4 Generic Drug Program**

When filling generic prescriptions, please keep in mind the \$4 generic drug programs offered by many retail pharmacies including Walmart and Target. You can search online to find local pharmacies that offer the \$4 generic drug program, or you can use GoodRx which includes the \$4 generic drug savings offered by national chain pharmacies.



# Where to go for Care?

## Not sure where to go or need help?

With many options for getting care, how do you choose? **If you are experiencing life-threatening symptoms, call 911 immediately.** If it's not an emergency, comparing care options could help you save time, money and frustration. The chart below can help you understand where to go. Call the number on your medical ID card to speak with a health professional if you need any assistance determining which care option is best for you.

Where to go (Lowest to Highest Cost)	What it is	Type of Care
<b>Telemedicine (Virtual Care)</b>  BlueCare Telemedicine <a href="http://www.BlueCareLA.com">www.BlueCareLA.com</a>  Ochsner Anywhere Care <a href="http://www.Ochsner.org/anywhere">www.Ochsner.org/anywhere</a> \$0 with Coupon Code: BLUECONNECT	With virtual care you receive medical attention by talking to a doctor by phone or video, via your smartphone, tablet or computer. Doctors can diagnose and treat a wide range of non-emergency, common medical conditions and even write a prescription if needed.	<ul style="list-style-type: none"> <li>• Allergies</li> <li>• Bladder Infections</li> <li>• Bronchitis</li> <li>• Cough / Colds</li> <li>• Pink Eye</li> <li>• Rashes</li> <li>• Seasonal flu</li> <li>• Sinus problems</li> <li>• Sore throats</li> </ul>
<b>Convenience Care Clinic</b> ie. CVS MinuteClinic	A convenience care clinic may provide “on-the-go” medical care without an appointment when you can’t see your PCP and can offer treatment for many common symptoms.	<ul style="list-style-type: none"> <li>• Common infections (strep throat)</li> <li>• Skin Allergies / Allergic Reactions</li> <li>• Vaccinations</li> </ul>
<b>Primary Care Physician (PCP)</b>	Your PCP is your family doctor and has access to your historical records and can offer personalized care options and referrals.	<ul style="list-style-type: none"> <li>• Checkups</li> <li>• Preventive services</li> <li>• Vaccinations</li> </ul>
<b>Urgent Care</b>	Urgent care centers are often open evening and weekends and are available for immediate treatment of non-life-threatening injury / illness.	<ul style="list-style-type: none"> <li>• Sprains or Strains</li> <li>• Small cuts (needing few stitches)</li> <li>• Minor burns</li> <li>• Minor infections</li> <li>• Minor broken bones</li> </ul>
<b>Emergency Room (ER)</b>	Emergency rooms are open 24/7 and are most ideal for immediate treatment of life-threatening injury/illness and other critical conditions.	<ul style="list-style-type: none"> <li>• Chest pain</li> <li>• Shortness of breath</li> <li>• Major burns</li> <li>• Severe injury</li> </ul>

## Check

your options for care.



## Choose

your care provider.



## Go

For better health.



# Dental & Vision BlueCross BlueShield of Louisiana

**Dental** exams are an important part of your overall health. To find an in-network dental provider near you, visit [la.ourdentalcoverage.com/find-a-dentist/#/](https://la.ourdentalcoverage.com/find-a-dentist/#/) for the most savings.

	<b>In-Network<sup>1</sup></b> Advantage Plus
Annual Dental Deductible	\$50
Annual Dental Maximum	\$2,500
Preventive Services	0% <sup>2</sup>
Basic Services	20% <sup>2</sup>
Major Services	40% <sup>2</sup>
Orthodontia (Adult & Child)	40% <sup>2</sup>
Orthodontia Lifetime Maximum	\$2,500

## Late Enrollee Limitations

The benefits for the first 12 months of coverage for late enrollees will be limited to Class 1 Dental services.

The Plan will not pay for any treatment that is started or completed during the late enrollee limitation period.

Dependent children can be added up to age 3 with no limitation.

<sup>1</sup> The Dental plan offers out-of-network benefits. If you visit an out-of-network dentist, you may be balance billed. Balance billed is the difference between the amounts the insurance reimburses and the amounts the provider chooses to charge.

<sup>2</sup> The amount you pay after you reach your deductible.

**Vision** exams are an important part of your overall health. To find an in-network vision provider near you, visit: <https://idoc.davisvision.com/members/FindAProvider/Index> .



	<b>In-Network</b>	<b>Out-Of-Network (Reimbursement)</b>
<b>Eye Exam</b> (Once every 12 months)	\$15 copay	Up to \$30
<b>Lenses</b> (Once every 12 months)		
Single	\$25 copay	Up to \$25
Bifocal	\$25 copay	Up to \$35
Trifocal	\$25 copay	Up to \$45
Lenticular	\$25 copay	Up to \$60
<b>Frames</b> (Once every 24 months)	\$180 Allowance + 20% Discount	Up to \$30
<b>Contact Lenses</b> (Once every 12 months)		
Necessary	Covered at 100%	Up to \$225
Elective	\$105 allowance	Up to \$75

# Voluntary Benefits The Standard

**City Term Life** insurance is available at affordable group rates and provides a lump-sum benefit payment to your beneficiaries in the event of your premature death. The city will cover 60% of the cost for employee coverage. If you elect coverage for yourself, you can also add coverage for your spouse and children.

Voluntary Life Insurance Benefit Options:

<b>Employee</b>	1x Annual Earnings up to \$75,000
<b>Spouse</b>	\$5,000
<b>Child</b>	\$2,000

Life insurance coverage includes Travel Assistance, providing security that travels with you at no additional charge when traveling 100 or more miles from home for up to 180 days, whether for business or pleasure. Get help planning a trip, replacing lost or stolen items, translation services and more.



# Contact Information

Coverage	Carrier	Phone/Website/Email
Benefit Advocate Center	HUB International	844-267-2225 <a href="mailto:cosbac@hubinternational.com">cosbac@hubinternational.com</a> M-F 7:30am – 6pm (CST)
<b>Medicare Advantage</b> (Blue Advantage)	BCBSLA	866-508-7145 October – March 8am-8pm CST 7days April – September 8am-8pm M-F <a href="http://www.bcbsla.com/blueadvantage">www.bcbsla.com/blueadvantage</a>
<b>Medical/Rx</b> <b>Dental</b> <b>Vision</b>	BCBSLA	800-363-9150 <a href="http://www.bcbsla.com">www.bcbsla.com</a>
<b>Blue Care Telemedicine / Virtual Care</b>	BCBSLA	<a href="http://www.BlueCareLA.com">www.BlueCareLA.com</a>
<b>Ochsner Anywhere</b> <b>Telemedicine / Virtual Care</b>	Ochsner	<a href="http://www.ochsner.org/anywhere">www.ochsner.org/anywhere</a>
<b>Patient Engage`ment Specialist</b> Dedicated assistance with scheduling, referrals, etc. for COS	Ochsner	318-626-0118
<b>COS Dedicated Patient Assistance</b> Help with locating Physicians, scheduling appointments, etc.	Christus	318-888-3226
<b>On Demand Care / Virtual Care</b> Start your ER visit, complete Health Risk Assessments, etc.	Christus	<a href="http://www.christushealth.org">www.christushealth.org</a>
<b>Term Life Insurance</b>	The Standard	800-628-8600 M-F 7am-7pm (CST) lifebenefits@standard.com <a href="http://www.standard.com">www.standard.com</a>
<b>Travel Assistance (included with Term Life)</b>	The Standard Assist America, Inc.	800-872-1414 <a href="http://www.standard.com">www.standard.com</a> medservices@assistamerica.com
<b>Pension Office</b>		Drucilla Carter 318-6735427 <a href="mailto:Drucilla.Carter@shreveportla.gov">Drucilla.Carter@shreveportla.gov</a> Kelley McKinney 318-673-5426 <a href="mailto:Kelley.McKinney@shreveportla.gov">Kelley.McKinney@shreveportla.gov</a>

**DISCLAIMER:** The material in this benefits brochure is for informational purposes only and is neither an offer of coverage or medical or legal advice. It contains only a partial description of plan or program benefits and does not constitute a contract. Please refer to the Summary Plan Description (SPD) for complete plan details. In case of a conflict between your plan documents and this information, the plan documents will always govern. **Annual Notices:** ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. The city will post all required notices annually.

