



2020 Open Enrollment

Welcome to Open Enrollment!

Trinity EMS strives to keep benefits costs affordable for our employees and their families. With advances in medical technologies and treatments, we are challenged by the continually rising costs of healthcare. We have worked hard with our partners to continue to provide a comprehensive benefits program.

Open enrollment is your opportunity to review and update your benefit elections. A good place to start engaging in your health is by understanding your benefit options and carefully weighing all of your choices.

Our Harvard Pilgrim Health Care group medical plans will remain unchanged, **with no change to payroll contributions!!** Trinity EMS will also continue to fund a portion of deductible expenses through the Health Reimbursement Arrangement (HRA).

Highlights:

- **NEW BENEFITS** – EyeMed vision, Medical Spending and Dependent Care Spending Accounts
- Dental plan benefits will remain unchanged through Principal
- HRC Total Solutions will replace CsOne as our new HRA administrator

Please join us at one the open enrollment meetings for more information!

	Lowell	Haverhill
Wednesday, February 5 th	8:30 AM	Noon
Thursday, February 6 th (Billing)	3:00 PM	
Friday, February 7 th	Noon	8:30 AM
	Chelmsford	Haverhill
Tuesday, February 11 th	5:00 PM	Noon
Wednesday, February 12 th	8:30 AM	3:00 PM
Thursday, February 13 th	Noon	5:00 PM
Friday, February 14 th	3:30 PM	8:30 AM

Next Steps

- Complete a Harvard Pilgrim Health Care enrollment form if you are **making changes or enrolling in a medical plan for the first time.**
- Complete a Principal enrollment form if you are **making changes or enrolling in the dental plan for the first time.**
- Complete an EyeMed enrollment form if you are enrolling in the vision plan
- Employees electing to participation in the Flexible Spending Accounts will need to complete election form

All open enrollment benefit elections must be completed and submitted to Human Resources by Friday, February 21st.

New Plan Year Starts

March 1, 2020

Contacts

Medical Plan

Harvard Pilgrim Health Care

www.harvardpilgrim.org

Dental Plan

Principal

www.principal.com

Vision Plan

EyeMed

www.eyemed.com

Health Reimbursement Arrangement

HRC Total Solutions

www.hrcts.com

Flexible Spending Accounts

HRC Total Solutions

www.hrcts.com

Vision Plan

EyeMed

www.eyemedvisioncare.com

Medical Benefits

Medical insurance is one of the most important benefits Trinity EMS provides. It covers you and your family for a myriad of services.

	Focus Network Tiered Copay HMO		Best Buy Tiered Copay HMO	
Plan Year Deductible				
Single	\$5,000		\$5,000	
Family	\$10,000		\$10,000	
Out-of-Pocket Maximum <i>(Deductible, Office Visit and Emergency Room and Prescription Drug copayments and Coinsurance count toward the Out-of-Pocket Maximum)</i>				
Single	\$6,600		\$6,600	
Family	\$13,200		\$13,200	
Physician Office Services				
Preventive Care	Covered in Full		Covered in Full	
PCP	\$30 Copayment		\$30 Copayment	
Specialist	\$45 Copayment		\$45 Copayment	
Chiropractic	\$30 Copayment		\$30 Copayment	
Hospital Services				
Emergency Room	\$200 Copayment		\$200 Copayment	
Inpatient Services	Deductible/\$1,000		Deductible/\$1,000	
Outpatient Surgery	Deductible/\$750		Deductible/\$750	
MRIs, CT Scans, PET Scans	Deductible/\$0		Deductible/\$0	
Lab Tests	Deductible/\$0		Deductible/\$0	
X-rays	Deductible/\$0		Deductible/\$0	
Prescription Drugs				
Retail Copayments	\$10/\$30/\$50/\$70/20% to \$250*		\$10/\$30/\$50/\$70/20% to \$250*	
Mail Order Copayments	\$20/\$60/\$100/\$140/20% to \$750*		\$20/\$60/\$100/\$140/20% to \$750*	
Weekly Payroll Contributions				
	MA Residents		Non-MA Residents	
Single	\$68.53		\$74.31	
2 Person	\$137.07		\$148.63	
Family	\$204.44		\$221.68	
			MA Residents	
			\$82.23	
			\$164.45	
			\$245.28	

**Prescription coinsurance maximum applies per script or refill*

Medical Benefits

Health Reimbursement Arrangement (HRA)

The Health Reimbursement Arrangement (HRA) is an employer funded account providing reimbursement for deductible eligible medical expenses, as well as the Inpatient Admission and Outpatient Surgery Copayments. Employees enrolled in the Trinity EMS medical plans are automatically enrolled in the HRA, administered by HRC Total Solutions.

Trinity EMS will provide the following deductible funding:

	Total Deductible	Employee Pays First	Trinity EMS Pay Second
Single	\$5,000	\$2,000	\$3,000
2 Person	\$10,000	\$4,000	\$6,000
Family	\$10,000	\$4,000	\$6,000

Inpatient Admission and Outpatient Surgery Copayments:

	Copayment Maximum	Employee Pays First	Trinity EMS Pay Second
Inpatient Admission	\$1,000	50%	50%
Outpatient Surgery	\$750	50%	50%

When you arrive at the doctor’s office or hospital, present your HPHC identification card. The provider will submit claims directly to Harvard Pilgrim Health Care, which will ensure that all network discounts are being applied and that you’ve received proper credit towards your deductible.

HRC Total Solutions will receive claims from the insurance carrier and track your eligible expenses. Once you have paid your portion expenses, HRA funds will be paid directly to you.



Dental Benefits

Dental Benefits

Taking care of your teeth is as important as taking care of the rest of your body. Dental benefits include preventive dental check-ups and additional services needed for your dental health. Oral health is part of overall health!

Our Principal dental plan allows you to receive services from the dentist of your choice. Services received from a Principal PPO network participating dentist will be paid based upon contracted reimbursements and no balance billing. Visit www.principal.com to see if your dentist participates!

Dental PPO		
Calendar Benefit Maximum	\$1,000	
Calendar Year Deductible	Network	Non-Network
	\$25	\$50
Benefits		
Preventive Benefits		
<ul style="list-style-type: none"> Exams Cleanings X-rays 	100%	100%
Basic Benefits		
<ul style="list-style-type: none"> Fillings Extractions Root Canals 	80%	80%
Major Benefits		
<ul style="list-style-type: none"> Bridges Dentures Crowns 	50%	50%
Orthodontics		
Benefit	50%	
Lifetime Benefit Maximum	\$1,000	
Age Limit	Coverage to Age 19	
Weekly Payroll Contributions		
Single	\$2.89	
Employee/Spouse	\$6.22	
Employee/Child(ren)	\$7.30	
Family	\$11.07	

Flexible Spending Accounts

NEW BENEFIT!! Flexible Spending Accounts (FSA)

The Flexible Spending Accounts enable you to deduct money out of your paycheck on a pre-tax basis and directly deposit these funds into an account administered by HRC Total Solutions. These funds can later be withdrawn from these accounts on a tax free basis to pay for eligible uninsured medical, dental or vision expenses for you, your spouse, and eligible children or dependent care expenses. They are a great way to save taxes and reduce your out of pocket expenses.

Participants will be issued a “smart” debit card allowing simple access to Flexible Spending Accounts funds. The card can be swiped to deduct eligible expenses such as prescription drugs, office visit copayments and so much more.

Up to \$500 of unused 2020 Health Care Spending Account funds may be rolled over for use during 2021 plan year.

	Health Care Spending Account	Dependent Care Spending Account
Annual Contribution Limits	Up to \$1,500	Up to \$5,000
Eligible Expenses	<p>You and your eligible dependents’ healthcare expenses that you pay out-of-pocket and are not reimbursed by another source (such as insurance) including:</p> <ul style="list-style-type: none"> • Office visit and prescription drug copayments • Deductible expenses • Dental care • Eyeglasses 	<p>Out-of-pocket costs for licensed daycare centers, babysitters, day camps and after school programs, and caregivers for an elderly dependent.</p> <p>These expenses must be necessary to allow you and, if applicable, your spouse to work, look for work or attend school full-time.</p>
Access to Contributions	As soon as participation begins you have access to your full account election for the current year.	You can be reimbursed for dependent care claims only up to the amount available in your account at the time of submission.



Vision Benefits

NEW BENEFIT!! Vision

Whether it's a day in the life or a day to remember, you're covered. Coverage is available from EyeMed, and with them, you'll get the personalized eye care you deserve. EyeMed will help you see well, stay healthy, and get the most out of life.

EyeMed has a vast network of providers including the "big box" chains like LensCrafters, Pearle Vision and Target Optical. Visit www.eyemedvisioncare.com for a complete listing of participating providers.

	Network	Non-network
Exams	\$10 Copay	Up to \$50 Reimbursement
Standard Lenses		
Single Vision	\$25 Copayment	Up to \$42 Reimbursement
Bifocal	\$25 Copayment	Up to \$78 Reimbursement
Trifocal	\$25 Copayment	Up to \$130 Reimbursement
Standard Progressives	\$75 Copayment	Up to \$196 Reimbursement
Lens Options		
UV Protection	\$15 Copayment	N/A
Tint	\$15 Copayment	N/A
Standard Scratch Coating	\$15 Copayment	N/A
Standard Anti-Reflective Coating	\$45 Copayment	N/A
Contacts		
Conventional	\$130 Allowance (15% off balance over \$130)	Up to \$130 Reimbursement
Disposable	\$130 Allowance (full balance over \$130)	Up to \$130 Reimbursement
Frame (retail allowance)	\$130 Allowance (20% off balance over \$130)	Up to \$104 Reimbursement
Frequency		
Exam	Once every 12 Months	
Lenses	Once every 12 months	
Frames	Once every 24 Months	
Weekly Payroll Contributions		
Single	\$1.59	
Employee/Spouse	\$3.01	
Employee/Child(ren)	\$3.17	
Family	\$4.66	

Ancillary Benefits

Trinity EMS continues to provide ancillary benefits to protect our employees against financial loss in the event of illness, injury or death.

Life and Accidental Death & Dismemberment (AD&D) Insurance

Life and Accidental Death and Dismemberment (AD&D) insurance benefits protect your family from the loss of your income if you die or are seriously injured.

Trinity EMS provides \$35,000 of basic life. Your AD&D coverage is provided at the same benefit level.

In addition, life insurance is included for spouses (\$10,000) and dependent children (\$5,000)

Short Term Disability

Short-Term Disability (STD) benefits are designed to protect your income for a short duration in the event that you become disabled due to an injury or illness.

Following a 7 day elimination period for illness or non-work related injuries, you will receive

- 60% of your weekly earnings to a maximum of \$400 per week
- Maximum benefit period of 13 weeks

Compliance Notices

HIPAA - A copy of our Privacy Practices Notice is available at any time upon request. If you would like to review the Notice, please contact Human Resources.

New Health Insurance Marketplace Coverage Options and Your Health Coverage: A copy of the most recent Marketplace notice, which outlines eligibility, actuarial value and affordability of the medical plan(s) is available from Human Resources.

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.

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 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 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 July 31, 2019. Contact your State for more information on eligibility –

MASSACHUSETTS – Medicaid and CHIP	NEW HAMPSHIRE – Medicaid
Website: http://www.mass.gov/eohhs/gov/departments/masshealth Phone: 800-862-4840	Website: https://www.dhhs.nh.gov/oii/hipp.htm Phone: 603-271-5218 Toll free number for the HIPA program: 1-800-852-3345, ext 5218
MAINE	RHODE ISLAND – Medicaid
Website: http://www.maine.gov/dhhs/ofi/public-assistance/index.html Phone: 800-442-6003 TTY: Maine relay 711	Website: http://www.eohhs.ri.gov/ Phone: 855-697-4347, or 401-462-0311 (Direct Rlte Share Line)

To see if any other states have added a premium assistance program since July 31, 2019, or for more information on special enrollment rights, 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

OMB Control Number 1210-0137 (expires 12/31/2019)

Patient Protection and Affordable Care Act (PPACA):

Harvard Pilgrim Health Care generally requires the designation of a primary care provider. You have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members. For information on how to select a primary care provider, and for a list of the participating primary care providers, contact Harvard Pilgrim Health Care at:

93 Worcester Road
Wellesley, MA 02481
888-333-4742

For children, you may designate a pediatrician as the primary care provider. You do not need prior authorization from Harvard Pilgrim Health Care or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact Harvard Pilgrim Health Care at:

93 Worcester Road
Wellesley, MA 02481
888-333-4742