

TAMPA FIREFIGHTERS' AND POLICE OFFICERS' EMPLOYEES' HEALTH PLAN



**Trust Fund Benefits
Guide 2022
Active Members**

Welcome

Tampa Firefighters' and Police Officers' Employees' Health Plan offers eligible members a comprehensive benefit package that provides both financial stability and protection. Our offering provides flexibility for members to design a package to meet their unique needs. Enclosed you will find highlights of the benefits offered by the Health Plan for 2022 plan year.





After the enrollment for 2022, you will receive additional information in the mail from the insurance carriers. Please use this booklet as a guide to your benefits and review all carrier documents for the most comprehensive descriptions for your offered coverage.

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Every effort has been made to ensure the accuracy of the information in this Benefit Guide. Plan provisions summarized in this overview contain only highlights. If there is a discrepancy between this overview and the plan documents, the plan documents will govern. The following descriptions of available benefit elections options are purely informational and have been provided to you for illustrative purposes only.

Benefits Plans Overview

Go to: www.tampabenefits.com to obtain the 2022 Benefits Guide and all plan documents.

Coverage	Carrier	Brief Description
Medical/RX 	United Healthcare	<p>One medical plan with HRA with a second plan for those retirees or members that have dependents that live outside of Florida:</p> <ul style="list-style-type: none"> ◆ Florida Residents Plan: NHP POS Access High Deductible Health Plan (HDHP) with Health Reimbursement Account (HRA) has a \$2,000 deductible and provides you an opportunity to earn wellness incentives for you and your spouse/domestic partner. Lower copays for PCP and \$15 Tier 1 and \$50 Tier 2 copay for prescriptions. ◆ Out of State Plan: Choice Plus High Deductible Health Plan (HDHP) with Health Reimbursement Account (HRA) has a \$2,000 deductible and provides you an opportunity to earn wellness incentives for you and your spouse/domestic partner. There is a \$30 copay for going to a designated “Premium Care Physicians” (see page 11).
Dental 	United Healthcare	<p>Two voluntary dental plan options:</p> <ul style="list-style-type: none"> ◆ Dental Health Maintenance Organization (DHMO) is an in-network only fixed copay plan for all covered dental services. ◆ Dental Preferred Provider Organization (PPO) has both in and out of network benefits where you pay a percentage of the covered cost for services.
Vision 	United Healthcare	<p>The voluntary vision plan allows you to obtain your routine eye exam, obtain frames with lenses or contact lenses once every 12 month. The frames and contact lenses allowance is up to \$150 with additional discounts above the allowance.</p>
Voluntary Plans 	Colonial TransAmerica MetLife	<p>Other coverage you may purchase that pays you directly:</p> <p>Colonial:</p> <ul style="list-style-type: none"> ◆ Short Term Disability ◆ Cancer and Critical Illness ◆ Accident ◆ Hospital Indemnity <p>TransAmerica - Universal and Term Life insurance MetLife - Legal Plan</p>

Please note you will continue to receive the following benefits from the City of Tampa :

- ◆ Current Supplemental Plans (Grandfathered)
- ◆ Employee Assistance Plan (EAP)
- ◆ Basic Term Life and Beneficiary
- ◆ Long Term Disability Insurance
- ◆ 457(b) Retirement Savings Plan
- ◆ Flexible Spending Accounts
- ◆ Roth Retirement Savings

Eligibility

If you are a full time active member regularly scheduled to work 30 hours, you and your qualified dependents are eligible to enroll in the benefits within this guide. There are three times during the year that you may be eligible to enroll in your benefits as outlined below:

As a New Hire

You must enroll within the first 30 days as a new hire or full time status change effective date. Your elected benefits will be effective the 1st of the month following 30 days from your date of hire or full time status effective date.

During Open Enrollment

Open enrollment is from **October 18 through November 16, 2021**. This is the one time of year that you may enroll, add dependents or make changes to your benefit elections without a qualifying life event.

Qualifying Life Event

Generally, you may only enroll in the benefits for you and your dependents when you are first eligible as a new hire or during open enrollment. However, you may make changes/enroll during the plan year if you experience a qualifying life event. To make changes or new elections as a qualifying life event you must submit your elections to NEBA **within 30 days** of the date of the event or you will be considered a late enrollee and have to wait until open enrollment. Examples of a qualifying event:

- ◆ You get married or divorced
- ◆ You have a baby, adopt a child or guardianship
- ◆ Loss or gain of coverage due to an employment change
- ◆ Death
- ◆ Electing coverage under another group health plan
- ◆ Newly eligible for Medicare

Whom can you add to your plan?

- ◆ Spouse or Domestic Partner (marriage certificate or Domestic Partner Affidavit required)
- ◆ You or your spouse's children up to age 26 regardless of their living situation or their employment, student or marital status. Coverage lasts until the last day of the month they attain age 26 (birth certificate, adoption papers or guardianship papers required)
- ◆ Your covered dependent child's newborn child for first 18 months
- ◆ You or your spouse's unmarried children ages 26 to 30 living with a parent or full time student and is not offered coverage under any other health insurance policy. Coverage lasts until the last day of the month they attain age 30 (annual recertification required)
- ◆ You or your spouse's unmarried adult child aged 26 or older whom became mentally or physically disabled before age 26 is eligible for coverage under the Plan if the child is primarily supported by you or is incapable of self-sustaining employment. (documentation required)

What do I need to supply for dependent verification?

You must provide NEBA with copies of all dependent documents to verify their eligibility for coverage. You have 60 days to provide the birth certificate for children, marriage certificate and domestic partner verification.

How and Where to Enroll

Open Enrollment is from October 18 to November 16, 2021 for a January 1, 2022 effective date.

Tampa Firefighters' And Police Officers' Employees' Health Plan offers you and your eligible dependents medical, dental, vision and supplemental plans.

Please note: All currently enrolled members and their dependents enrolled in the Tampa Fire Fighters' and Police Officers' Employee Benefits Plans as of October 15th, do not need to re-enroll for 2022. Your current coverage below will roll over into 2022:

Medical: HDHP with HRA NHP POS Access Network
HDHP with HRA Choice Plus Network FL

Dental: UHC PPO Dental
UHC DHMO

Vision: UHC Vision

Colonial Plans: Short Term Disability; Hospital Indemnity; Critical Illness and/or Accident

Voluntary Life Insurance: Transamerica Whole Life or Term Life insurance

Legal Plan: MetLife Legal Plan

If you want to make changes or remove or add a dependent to your 2021 benefits for 2022 go to: www.employeenavigator.com

To register for the first time the Company Identifier is: **Tampa Fire & Police**

City of Tampa will still offer you the opportunity to enroll and update your beneficiary for your life insurance and enroll in the Flexible Spending Account (*you must re-enroll each year as the IRS doesn't allow this to automatically roll over to the next year*). Please go to www.tampagov.net/benefits for more information. *Please note: Open Enrollment for City of Tampa begins September 30th and ends October 13, 2021. Note the different dates: If enrolling in the Flexible Spending, you must enroll by the October 13, 2021*

What to do after enrolling?

Provide NEBA with copies of all dependent documents to verify their eligibility for coverage for newly added dependents on or after January 1, 2022. You have 60 days to provide the birth certificate, adoption, or guardianship papers for children, marriage certificate and domestic partner verification.

You are responsible to ensure that your payroll deductions reflect the benefits you enrolled. It is important to check your pay records the first pay period after your benefits effective date to ensure your deductions reflect all the benefits you enrolled in.

Medical Plans

Tampa Firefighters' and Police Officers' Employees' Health Plan is providing you and your eligible dependents two medical plan. The **NHP Access POS HDHP with HRA** plan provides a lower copayment for your Primary Care Doctor (PCP), pediatrician (PCP) sickness or injury office visits at \$0 copay, Virtual Visits at \$0 copay and lower RX copays for tier 1 and tier 2 prescriptions.

The **UHC Choice Plus POS HDHP with HRA** plan uses the national network of providers. The plan is for those members that live in Florida Full time, but have dependents that live outside of Florida or you want providers outside of FL other than for emergencies only.

Both plans include a Health Reimbursement Account (HRA) using your wellness incentives earned in 2021. The NHP Access POS HDHP does require you to select a Primary Care Physician or one will be assigned to you. The Choice Plus POS HDHP doesn't require an assigned PCP, however **both plans are open access and you do NOT need a referral to see a specialist.**

United Healthcare	NHP POS ACCESS HDHP with HRA	CHOICE PLUS POS HDHP with HRA	HDHP with HRA (same for both plans)
	IN NETWORK (FL Residence)	IN NETWORK (Non-FL Residence)	OUT OF NETWORK
Calendar Year Deductible Single/Family	Individual deductible \$2,000/4,000	Individual deductible \$2,000/4,000	Family deductible* \$4,000/8,000
Health Reimbursement Account (HRA)	Wellness Incentive: PHA, Tobacco Free and Online Program	Wellness Incentive: PHA, Tobacco Free and Online Program	
Member	Up to \$1,000	Up to \$1,000	See in-network for details
Spouse or Domestic Partner	Up to \$1,000	Up to \$1,000	See in-network for details
Coinsurance	10%	10%	30%
Calendar Year Out-of-Pocket Max (1) Single/Family	\$4,000/8,000	\$4,000/8,000	\$8,000/16,000
Outpatient Services (illness or injury)			
Primary Care Physician Office Visit	\$10 assign/select required	\$30	30% after deductible
<i>Pediatrician Visits (PCP) to age 19</i>	\$0	\$30	30% after deductible
<i>Premium Care Physician Designation</i>	\$10 PCP / \$50 Specialist	\$30	N/A
Specialist Office Visit (<i>referrals not required</i>)	\$50	\$50	30% after deductible
Virtual Visit	\$0	\$15	Not Covered
Urgent Care	\$50	\$50	30% after deductible
Diagnostic Lab and X-Ray (MRI, CAT & PET)	10% after deductible 10% after deductible	10% after deductible 10% after deductible	30% after deductible 30% after deductible
Preventive Care			
Routine Well Baby Care/Well Child Care	Covered at 100%	Covered at 100%	Covered at 100%
Routine Wellness Exam - Adult	Covered at 100%	Covered at 100%	Covered at 100%
Inpatient Hospital	10% after deductible	10% after deductible	30% after deductible
Outpatient Surgery	10% after deductible	10% after deductible	30% after deductible
Emergency Care			
Ambulance	10% after deductible	10% after deductible	10% after deductible
Emergency room care	\$300	\$300	\$300
Other Services			
Durable Medical Equipment	10% after deductible	10% after deductible	30% after deductible
Physical; Speech & Occupational Rehab	\$10	\$30	30% after deductible
Chiropractor	\$10	\$30	30% after deductible
Skilled Nursing/In-Patient Rehabilitation (60 days)	10% after deductible	10% after deductible	30% after deductible
Mental Health & Substance Abuse			
Office Visit - Outpatient	\$10	\$30	30% after deductible
Inpatient Services	10% after deductible	10% after deductible	30% after deductible

(1) What is included: Deductible, copays, coinsurance are included in the out of pocket maximum. Penalties for not obtaining Pre-Certification, premiums, balance billing and services that are not covered under the plan are not included in the Out of Pocket maximum.

Medical Plans

Limitations to Covered Services:

Limited Services (check the plan document for a complete list of excluded services)

- Acupuncture (10 per year)
- Hearing aids (\$2,500 lifetime)
- Infertility up to \$30,000 Medical & \$10,000 RX (lifetime)
- Cranial Banding (\$1,500 lifetime)

Excluded Services:

Services your plan generally does NOT cover (check the plan document for a complete list of excluded services)

- Bariatric Surgery
- Long term care
- Cosmetic Surgery
- Private Duty Nursing
- Routine Foot Care
- Weight Loss Programs
- Dental care (Adult & Children)
- Non-emergency care when traveling outside of the US
- Glasses and Routine Eye Care (Adult/Child)

Bi-Weekly Payroll Contributions:

United Healthcare Medical	NHP HDHP with HRA	CHOICE PLUS HDHP with HRA FL
Network	NHP POS Access - FL Residence	Choice Plus - FL Residence with dependent out of state
Pre-Tax Contribution	Bi-Weekly (26)	Bi-Weekly (26)
Employee Only	\$0.00	\$20.99
Family	\$178.10	\$233.79
Dual City of Tampa Family	\$0.00	\$59.99

PLEASE NOTE THE FOLLOWING REGARDING THE MEDICAL PLANS CONTRIBUTIONS:

- ◆ Dual City of Tampa Family bi-weekly premiums are for married or domestic partner that both work for the City of Tampa and/or a members enrolled in one of the trust’s medical plan. (Spouse/domestic partner cannot be enrolled in any other medical plan)
- ◆ The UHC Choice Plus HDHP with HRA plan FL Residence plan is provided for members with dependents that reside outside of Florida. If your covered dependent child is a full-time student at an accredited college or university, you will pay the same premiums as the NHP Plan. Annual verification is required.

Prescription Drug Plan

The two medical plans offered by Tampa Firefighters' and Police Officers' Employees' Health Plan has a New Advantage 4-Tier prescription drug list. The Florida NHP POS Access HDHP plan has lower RX copayments for Tier 1 and 2.

United Healthcare (Optum RX)	NEW TRUST HDHP with HRA	CITY OF TAMPA SIMPLY WELL & HRA	HDHP with HRA
	IN NETWORK (FL residence)	IN NETWORK (non-FL residence)	OUT OF NETWORK (1)
Prescriptions - Retail (30 days)	Deductible waived	Deductible waived	Deductible waived
Tier 1 - Lowest Cost	\$15	\$30	\$30
Tier 2 - Mid-Range Cost	\$50	\$60	\$60
Tier 3 - Higher Cost	\$90	\$90	\$90
Tier 4 - Highest Cost	25%	25%	25%
Prescriptions - Mail Order (90 days)	Deductible waived	Deductible waived	
Tier 1 - Lowest Cost	\$30	\$60	Not Available
Tier 2 - Mid-Range Cost	\$100	\$120	Not Available
Tier 3 - Higher Cost	\$180	\$180	Not Available
Tier 4 - Highest Cost	25%	25%	Not Available

(1) The copay and percentages for out of network pharmacies is based on Reasonable and Customary (R&C). If the cost is more than the R&C, you will pay the difference plus the copayment or percentage on the R&C allowed amount.

Tier information. Using lower-tier medications can help you pay the lowest out-of-pocket cost. Your tier chart below indicates the overall value, medications' effectiveness and safety, cost, and the availability of alternative medications to treat the same or similar medical condition(s).

Drug Tier	Includes	Helpful Tips
Tier 1	Lower-cost Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	Mid-range cost Medications that provide good overall value. A mix of brand-name and generic drugs	Use Tier 2 drugs, instead of Tier 3 or 4, to help reduce your out-of-pocket costs.
Tier 3	Higher-cost medications that provide good overall value at a higher cost than Tier 2. Mostly brand-name drugs where there is another preferred brand or generic drug that is more cost effective.	Ask your doctor if a Tier 1 or Tier 2 option could work for you.
Tier 4	Highest-cost medications that provide the lowest overall value. Mostly brand-name drugs, as well as some generics.	Many Tier 4 drugs have lower-cost options in Tiers 1, 2 or 3. Ask your doctor if they could work for you.

Employee Assistance Program (EAP)

Our medical plans offered by Tampa Firefighters' and Police Officers' Employees' Health Plan includes an Employee Assistance Program (EAP) for enrolled members and their dependents.

From time to time many of us will face problems at work or at home that we are not sure how to solve. These can range from emotional problems to marital problems or even substance abuse. While you can still access the City of Tampa's EAP administered by Wood & Associates, you also have access to the UHC plan through our Health Plan.

It's good to know you're not alone. Reaching out to an EAP consultant is a good first step and with UHC you are guaranteed privacy and confidentiality.

They're trained to understand your concerns so they can connect you with the counselor or services best able to help you, such as:

- ◆ Depression
- ◆ Anxiety
- ◆ Substance Abuse Issues
- ◆ Managing stress
- ◆ Working through emotional issues or grief
- ◆ Assistance with Legal and financial concerns
- ◆ Up to 3 in person visit as determined by your counselor
- ◆ Unlimited services by phone
- ◆ Available to you and your dependents that live in your household, regardless if they are covered under your health plan or not



One call puts you in touch with a clinician, counselor, mediator, lawyer or financial adviser who could help change your life for the better.



Call the member phone number on your health plan ID card and ask to speak to an EAP Consultant during normal business hours!

Or, contact EAP directly 24 hours a day, 7 days at week at 1-888-887-4114.

City of Tampa EAP

Wood & Associates

In Hillsborough: (813) 870-0392

In Pinellas: (727) 576-5164

Out-of-Area (800) 343-4670

www.woodassociates.net

Tampa Firefighters' and Police Officers'

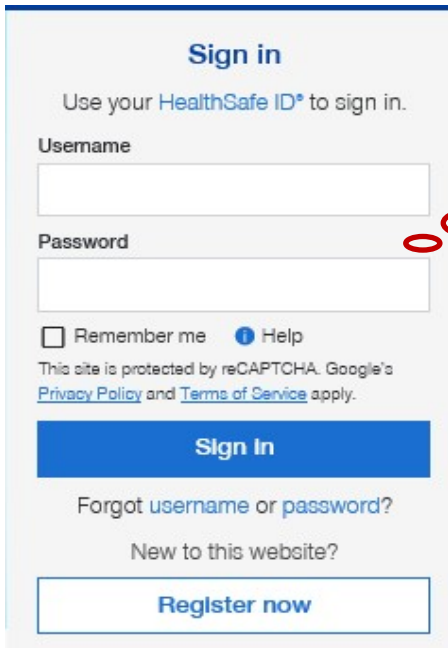
Employees' Health Plan EAP

UnitedHealthcare

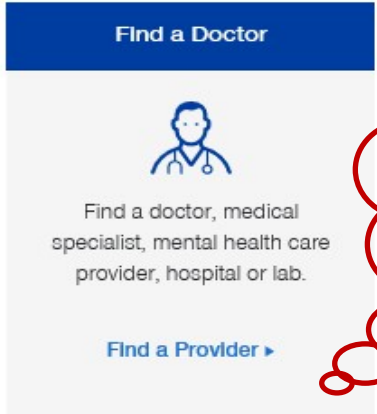
(888) 887-4114

How to Find an In-Network Provider!

In-Network Providers: It is easy to find an in-network provider by logging onto www.myuhc.com. Below are some easy instructions to follow:



Sign in to www.myuhc.com or register on or after January 1, 2022 for new members.



Or scroll down below the sign-in and "Find a Provider" and then click the Medical Directory to search by your zip code.

Select **NHP HMO/POS Access** for **NHP POS Access HDHP with HRA** and **Choice Plus** for the **Choice Plus POS HDHP with HRA**. (Please note you cannot change plans during the year, except during Open Enrollment).

Select the type of provider you are looking for, see below:

FIND HEALTH CARE BY CATEGORY

 <p>People Doctors, medical groups, and other professionals by specialty</p>	 <p>Places Hospitals, clinics, labs, imaging centers, medical suppliers</p>	 <p>Services and Treatments Providers for office visits, tests, treatments, surgeries</p>	 <p>Care by Condition Providers for common concerns</p>	 <p>Cost Estimates Treatment for common conditions</p>
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This sample provider is accepting all patients and is a Premium Care Physician! See the next page for details on this type of physician.







Choose smart. Look for Blue Hearts...

Choosing a doctor is one of the most important health decisions you'll make. The UnitedHealth Premium program can help you find doctors who are right for you and your family.

Choose with confidence:

The UnitedHealth Premium program evaluates physicians in various specialties using evidence-based medicine and national standardized measures to help you locate quality and cost-efficient doctors. It's easy to find a UnitedHealth "Premium Care Physician." Just go to myuhc.com > **Find a Provider**. Look for the two blue hearts for the "Premium Care Physician."

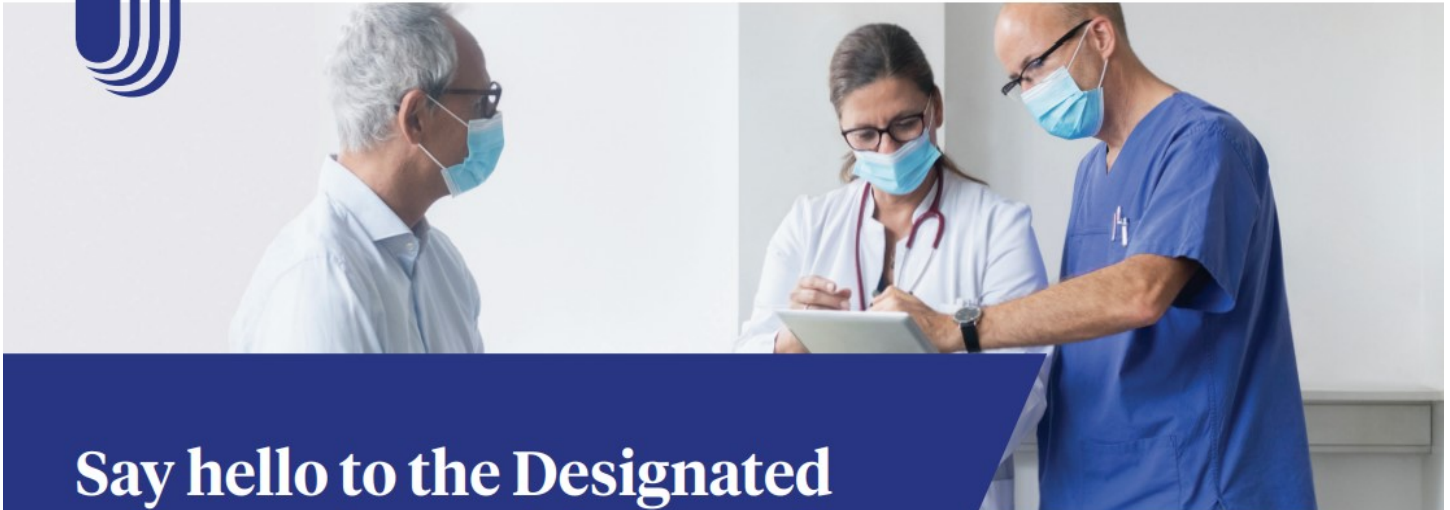
 <p>Premium Care Physician</p> <p>The physician meets the UnitedHealth Premium program quality and cost-efficient care criteria.</p>	 <p>Quality Care Physician</p> <p>This physician meets the UnitedHealth Premium program quality care criteria but does not meet the program's cost-efficient care criteria or is not evaluated for cost-efficient care.</p>	 <p>Does Not Meet Premium Quality Criteria</p> <p>The physician does not meet the UnitedHealth Premium program quality criteria so the physician is not eligible for a Premium designation.</p>	 <p>Not Evaluated for Premium Care</p> <p>The physician's specialty is not evaluated in the UnitedHealth Premium program, the physician does not have enough claims data for program evaluation or the physician's program evaluation is in process.</p>
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Below are the providers that may have a Premium Care Physician designation:

Designated UnitedHealth Premium Care Physicians:		
<p>Allergy</p> <ul style="list-style-type: none"> Allergy Allergy & Immunology <p>Cardiology</p> <ul style="list-style-type: none"> Cardiac Diagnostic Cardiology Cardiovascular Disease Clinical Cardiac Electrophysiology Interventional Cardiology <p>Ear, Nose and Throat</p> <ul style="list-style-type: none"> Head and Neck Surgery Laryngology Otolaryngology Otology Pediatric Otolaryngology Rhinology <p>Endocrinology</p> <ul style="list-style-type: none"> Endocrinology and Diabetes Metabolism 	<p>Family Medicine</p> <ul style="list-style-type: none"> Family Practice General Practice Preventive Medicine <p>Gastroenterology</p> <ul style="list-style-type: none"> Digestive Diseases Endoscopy Gastroenterology Hepatology (Liver Disease) <p>General & Orthopedics & Spine Surgery</p> <ul style="list-style-type: none"> Abdominal Colon & Rectal Proctology Back & Spine Hand, Shoulder & Knee Orthopedic <p>Internal Medicine</p> <ul style="list-style-type: none"> Internal Medicine Pediatric Internal Medicine 	<p>Nephrology</p> <ul style="list-style-type: none"> Nephrology <p>Neurology</p> <ul style="list-style-type: none"> Neurology Neurology & Psychiatry Neuromuscular Disease <p>Obstetrics & Gynecology</p> <ul style="list-style-type: none"> Gynecology Obstetrics Obstetrics & Gynecology <p>Pediatrics</p> <ul style="list-style-type: none"> Adolescent Medicine Pediatric Adolescent Pediatrics <p>Pulmonology</p> <ul style="list-style-type: none"> Pulmonary Medicine <p>Rheumatology</p> <ul style="list-style-type: none"> Rheumatology <p>Urology</p> <ul style="list-style-type: none"> Urology

Choose smart. Look for Labs with

UnitedHealthcare | Designated Diagnostic Provider




Say hello to the Designated Diagnostic Provider benefit

More value for you, more savings for our members:

Designated Diagnostic Providers (DDP) are freestanding and hospital lab providers who meet requirements for providing quality and efficient services. When your employees choose a DDP for their outpatient lab services they'll receive the highest level of benefit from their health plan. This means more value for lab services—and more value for our members and dependents.

Look for the green check:

Participating labs will be designated in the provider search on myuhc.com. Look for this icon beginning in late June 2021: 

What is a DDP?

DDPs are labs committed to improving access, quality and service at a lower cost.

Participating labs include:

- AmeriPath/DermPath
- BioReference
- GeneDx
- Invitae
- LabCorp & Subsidiaries
- Mayo Clinic Laboratories*
- Millennium Health
- Quest Diagnostics
- Hospital and freestanding labs meeting quality and efficiency requirements

Note: Participating DDP providers are subject to change upon annual review process and contracting work is ongoing and will expand DDP to include additional facilities.



ABC Laboratory

Laboratory

1234 Any Street
Any City, State 12345

(123) 456-7890 PHONE

5.9 Miles Away | [Get Directions](#)



Designated Diagnostic Provider

Maximize Your Benefits and Savings!

How to determine the most cost effective care for your situation:

Choosing the appropriate place of care ensures prompt medical attention and lower costs.

More than 10% of all emergency room visits could have been better addressed in either an urgent care facility, doctor's office or virtual visit. If you're suddenly faced with symptoms of an illness or injury, how can you determine which facility is most appropriate for your condition?

\$ - Wellness Centers

The Wellness Centers are managed by physicians and staff who provide easy and cost-free access to the highest quality medical services. Come to the Wellness Center for your Primary Healthcare needs free of charge. Services, locations and contact information to schedule a visit are located on page 13 of this guide.

\$ - Virtual Visit or Telemedicine

You may access telemedicine provider from www.myuhc.com app anywhere - home, work, or on the road - and its available **24/7/365**. Telemedicine doctors can diagnose non-emergency medical problems, recommend treatment, and can even call in a prescription to your pharmacy of choice, when necessary. Telemedicine is a \$0 copay on NHP Access and \$15 on Choice Plus vs. your primary care of \$10 or \$30 copay respectively and significantly less than an ER or Urgent Care visit.

\$\$ - Primary Care Office

Many primary care offices keep space open for patients with minor medical conditions such as ear infections, colds, flu, sore throats, minor cuts or burns, fever or infections. The wait time is usually less than an urgent care facility with a cost of \$10 for the NHP Access and \$30 per visit for Choice Plus.

\$\$\$ - Urgent Care

Urgent care centers are usually located in clinics or hospitals, and, like emergency rooms, offer after-hours care. Unlike emergency rooms, they are not equipped to handle life-threatening situations. Rather, they handle conditions that require immediate attention—those where delaying treatment could cause serious problems or discomfort. Some examples of conditions that require urgent care are these:

- ◆ Ear infections
- ◆ Vomiting
- ◆ Minor cuts, burns and abrasions
- ◆ Sprains
- ◆ High fever
- ◆ Urinary tract infections

Urgent care centers are more cost-effective than ERs for these conditions. In addition, the waiting time in urgent care centers is usually much shorter.

\$\$\$\$ - The Emergency Room (ER)

Emergency rooms are equipped to handle life-threatening injuries and illnesses and other serious medical conditions. An emergency is a condition that may cause loss of life or permanent or severe disability if not treated **immediately**. You should go directly to the nearest emergency room if you experience any of the following sudden onsite of conditions, such as:

- ◆ Chest pain or Shortness of breath
- ◆ Severe abdominal pain following an injury
- ◆ Uncontrollable bleeding
- ◆ Confusion or loss of consciousness, especially after a head injury
- ◆ Poisoning or suspected poisoning
- ◆ Serious burns, cuts or infections
- ◆ Inability to swallow
- ◆ Seizures
- ◆ Paralysis
- ◆ Broken bones

Patients at the emergency room are sorted, or triaged, according to the seriousness of their condition. For example, a patient with severe injuries from a car accident would be seen before a child with an ear infection, even if the child was brought in first.

Tampa Firefighters' and Police Officers' Employees' Health Plan Wellness Centers



Tampa Firefighters' and Police Officers' Employees' Health Plan Wellness Centers, operated by CareATC, are available to employees, Non-Medicare retirees and their dependents enrolled in the Tampa Firefighters' and Police Officers' Employees' Health Plan. The centers are managed by physicians and staff who provide easy and cost-free access to the highest quality medical services. Come to the Wellness Center for your Primary Healthcare needs including:

- | | | | | |
|-----------|------------|------------------|------------|---------------------|
| Allergies | Asthma | Cold & Sinus | Headache | Sore Throat |
| Ear Pain | Congestion | High Cholesterol | Congestion | High Blood Pressure |
| Flu | Diabetes | Physicals | Lab Work | Tobacco Cessation |

How to Schedule an Appointment:

To schedule your appointment call (800) 993-8244 or visit CareATC's patient portal at <https://www.careatc.com/patients>.

The first time that you log into the system at the CareATC website, you will be asked to complete the registration process and assign your own unique password. **Follow the prompts to schedule your appointment.**

Please note: You can also schedule an appointment through the CareATC mobile app. You will use the same user name and password that you use for the patient portal.

Brandon Wellness Center

413 W. Robertson St., Suite A
Brandon, FL 33511

Monday - Friday 8:00 am to 5:00 pm
Saturday 8:00 am to 12:00 pm

Himes Wellness Center

4107 N. Himes Ave., Suite 101
Tampa, FL 33607

Monday - Wednesday 7:00 am to 7:00 pm
Thursday 7:00 am to 6:30 pm
Friday 7:00 am to 5:00 pm
Saturday 8:00 am to 12:00 pm

Tampa Fire Fighters' and Police Officers' Employees' Medical Plans with UHC provides all enrolled members and their dependents access to CareATC Clinics Services regardless of your designated PCP on your UHC ID card.

The Wellness Centers are free of charge to our covered members for treatment and RX through CareATC.

Tampa Firefighters' and Police Officers' Employees' Health Plan Wellness Portal

The Tampa Firefighters' and Police Officers' Employees' Health Plan has a New and improved dedicated wellness portal for employees, spouses or domestic partners covered by the Health Plans.

HealthPassport is part of the CareATC patient portal, ensuring that your wellness activities and incentive tracking remain confidential (with the exception of optional team challenges). With a new look and feel this year, accessing your information is both easy and convenient online via the CareATC mobile app or a personal computer.

Log on today!

Wellness Incentives

- Personal Health Assessment (PHA)
- Tobacco Free Certification
- Wellness Webinars and Classes
- Wild on Walking and Train with Jane Challenges

CHALLENGES

- Team and Individual Challenges
- Create your own, or join an existing challenge
- Pick Your Healthy Behavior for the Challenge

EVENTS

- Calendar of all City of Tampa Wellness Classes
- Class Details
- Easy "Point" & Click Registration

RESOURCES

- **Health Feed** health education library
- Food and Nutrition, Exercise and Fitness
- Stress Reduction, Emotional Wellness
- Web Pages, Videos, Podcasts and Other Resource

Wellness Incentive - HRA

Health Reimbursement Arrangement (HRA)

A Health Reimbursement Arrangement (HRA) is an account funded by the Tampa Fire Fighters' and Police Officers' Employees' Health Plan that is designed to reimburse members for qualified medical expenses that are paid for out of your out-of-pocket medical deductible and coinsurance expenses. The amount in your HRA is an incentive earned through participation in the wellness program in 2022 and is placed in your HRA account in 2023. All unused HRA balances at the end of the year will roll over to the following year up to your \$2,000 deductible for single coverage and \$4,000 for employee and dependents.

Members can earn up to \$1,000 each year and your spouse or domestic partner may also earn \$1,000 for the following year. Below is a chart on how to earn your HRA incentives and the activity deadline:

Wellness Incentive Activities	Employee Wellness	Spouse or Domestic Partner Wellness	Wellness Incentive Activity Deadline
PHA	\$500	\$500	17-Sep-22
Tobacco Free Certification	\$250	\$250	12-Nov-22
Your Choice of (up to 5):	\$250	\$250	12-Nov-22
Wild on Walking Challenge, including Train with Jane Challenge or ...	<input checked="" type="checkbox"/>	N/A	12-Nov-22
>2 Wellness Classes or ...	<input checked="" type="checkbox"/>	N/A	12-Nov-22
> 2 Wellness Webinars or...	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12-Nov-22
> A combination of 1 Wellness Class and 1 Wellness Webinar	<input checked="" type="checkbox"/>	N/A	12-Nov-22
Maximum Incentive Reward	\$1,000	\$1,000	

Qualified Medical Expenses

Qualified medical claims expenses are those specified in the Plan that would generally qualify as medical expenses. You can use your HRA funds for you and your dependents' medical and prescription drug expense subject to your deductible and coinsurance.

Qualified medical and prescription drug claims will be processed by UHC automatically to the provider, provided you have HRA funds in your account. You are not allowed to direct which claims are paid or not.

What if I terminate my employment during the Plan Year?

If you cease to be an Eligible Employee (i.e., you die, retire or terminate employment), your participation in the HRA Plan will end unless you elect COBRA continuation coverage. You will be reimbursed for any medical care expenses incurred prior to your termination date, up to your account balance in the HRA, provided that you comply with the Plan reimbursement request procedures required under the Plan. Any unused portions will be unavailable after termination of employment. However, you or your spouse/domestic partner may not participate in the wellness plan for the following year.

Dental Plan

Tampa Firefighters' and Police Officers' Employees' Health Plan offers you and your eligible dependents the opportunity to enroll in one of two voluntary dental options. The United Healthcare Dental Health Maintenance Organization (DHMO) or the Dental Preferred Provider Organization (PPO) plan. The DHMO gives you a fixed cost at point of service, while the PPO gives you more flexibility in choosing your dental provider and has unlimited maximum benefit to you and your dependents.

United Healthcare Dental	NEW TRUST DHMO		NEW TRUST DPPO Plan	
	IN NETWORK ONLY	IN NETWORK	OUT OF NETWORK	
Calendar Year Deductible				
Single/Family	Not applicable		\$50 / \$150	
Calendar Year Maximum Benefit	Unlimited		Unlimited	
Preventive & Diagnostic Services	You Pay	You Pay	You Pay	
Oral Evaluations & Cleaning (2 per 12 months)	No Charge	0%	20%	
Bite-Wing X-rays (1 per 12 months)	No Charge	0%	20%	
Full Mouth X-rays (1 per 36 months)	No Charge	0%	20%	
Fluoride - Child (2 x per 12 months, under 16 yrs old)	No Charge	0%	20%	
Sealant - Child (1 per 1st & 2nd molar, under 16 yrs old)	No Charge	0%	20%	
Space Maintainers (1 per 60 months, under 16 yrs old)	No Charge	0%	20%	
Basic Services		after deductible	after deductible	
Restorative - Fillings	\$40	0%	40%	
Emergency Treatment / General Services	No Charge	0%	40%	
Oral Surgery (including extractions)	\$10 - \$40	0%	40%	
Major Services		after deductible	after deductible	
Endodontics	\$40 - \$350	40%	50%	
Periodontics	\$0 - \$100	40%	50%	
Partial Inlays / Onlays / Veneers	\$195	40%	50%	
Crowns	\$195	40%	50%	
Dentures and Removable Prosthetics	\$210	40%	50%	
Fixed Partial Dentures (Bridges)	\$210 - \$240	40%	50%	
Orthodontic Services (Braces)				
Lifetime Maximum Benefit	Not applicable		\$2,000	
Adolescent to age 19 - Braces	\$1,800		50%	
Adult - Braces	\$2,400		Not covered	

Bi-Weekly Payroll Contributions:

United Healthcare Dental	DHMO	PPO Dental
Pre-Tax Contribution	Bi-Weekly (26)	Bi-Weekly (26)
Employee Only	\$5.53	\$14.21
Employee + One	\$10.94	\$27.00
Family	\$19.46	\$44.52

Why choose an in-network provider?

The United Healthcare PPO dental providers have a contract with UHC and can't charge you more than the allowed amount. While the out of network dentist can balance bill you over the allowed amount that UHC indicates is reasonable and customary (R&C), the percentage you owe out of network is based on the R & C, which means you could owe the balance.

Vision Plan

Tampa Firefighters' and Police Officers' Employees' Health Plan offers you and your eligible dependents the opportunity to enroll in the voluntary vision plan with improved benefits to include Warby Parker with UHC.

United Healthcare		NEW TRUST Vision Plan	
	IN NETWORK	OUT OF NETWORK	
Benefit Frequency			
Comprehensive Exam		Once every 12 months	
Eyeglass Lenses		Once every 12 months	
Frames		Once every 12 months	
Contact Lenses instead of Eyeglasses		Once every 12 months	
Discount for additional pair of glasses or contacts	20%	not applicable	
Copayments		You Pay	Reimbursement
Routine Exam	0%	up to \$40	
Eyeglasses (lenses and frames)	\$15	see below	
Contact Lenses instead of Eyeglasses	\$15	see below	
Frames Benefit		After copay	Reimbursement
Allowance	up to \$150	up to \$45	
Discount after allowance	30%	not applicable	
Eyeglass Lenses		After copay	Reimbursement
Single Standard Scratch-resistant	\$0	up to \$40	
Lined Bifocal	\$0	up to \$60	
Lined Trifocal	\$0	up to \$80	
Polycarbonate for children to age 19	\$0	up to \$40	
Polycarbonate for Adults	20% discount	not applicable	
Progressive Lenses	20% discount	up to \$60	
Other types of lenses not listed	20% discount	not applicable	
Contact Lenses		After copay	
Disposable Formulary	up to 6 boxes	not applicable	
Non-Formulary	up to \$150 allowance	Up to \$150	
Medically Necessary	0%	up to \$210	
Laser vision		After copay	
UnitedHealthcare has partnered with QualSight LASIK, the largest LASIK manager in the United States, to provide our members with access to discounted laser vision correction providers. Member savings represent up to 35% off the national average price of Traditional LASIK. Contracted prices start at \$945 per eye for Traditional LASIK and \$1,395 per eye for Custom LASIK. Discounts are also provided on newer technologies such as Custom Bladeless (all laser) LASIK. For more information, visit myuhcvision.com.			not applicable

Bi-Weekly Payroll Contributions:

United Healthcare Vision	Vision
Pre-Tax Contribution	Bi-Weekly (26)
Employee Only	\$3.78
Employee + One	\$7.57
Family	\$12.65

Why choose an in-network provider?

If you go out of network, you must file a claim with United Healthcare and will only be reimbursed for a small portion of the actual cost. UHC Spectera has a large selection of in-network providers, both private practice and retail where you have a small copayment and a discount for items that are not standardly covered under the plan. This includes Warby Parker on-line services with additional advantages.

Vision Plan - Warby Parker Advantage

You and your covered dependents on your UHC vision plan may shop for glasses at Warby Parker online and at their retail locations nationwide! It's part of the UHC vision network. It's convenient to shop and save on your eye glasses and contacts online with Warby Parker!

Advantages of Warby Parker with your vision plan

- ◆ Warby Parker's frames are designed in-house from top material
- ◆ Order online and pick 5 frames to test out for 5 days free (no shipping cost to you)!
- ◆ No additional cost to you after your \$15 material copay for:
 - ◇ Scratch-resistance
 - ◇ Smudge-resistance
 - ◇ Anti-reflective treatments
- ◆ Blue light glasses - They filter more blue light than standard polycarbonate or high-index options, making them perfect for screen-heavy days. Add them to any frame with or without a prescription for \$50
- ◆ Charity - for every pair purchased through Warby Parker a pair is distributed to someone in need, who otherwise wouldn't be able to see clearly.
- ◆ Shop for contacts, eyeglasses and sunglasses online at www.warbyparker.com



Need to contact Warby Parker?

Call: (855) 550-0743

Email: insurance@warbyparker.com

Check myuhcvision.com to:

- ◆ Confirm your enrollment in our vision plan and your eyeglasses benefit
- ◆ Find out what your plan may cover after your \$15 material copay
- ◆ Find out how often you may purchase contacts or eyeglasses

Warby Parker stores in the Tampa Area:

Glasses/Frames only

Showroom at Oxford Exchange

420 West Kennedy Boulevard
Tampa, FL 33606

(813) 981-5100

Monday - Friday 9:00 am to 5:30 pm

Exams & Glasses

International Plaza

2223 N West Shore Boulevard
Tampa, FL 33607

(813) 524-5436

Monday - Saturday 11:00 am to 7:00 pm

Sunday 12:00 pm to 6:00 pm

Supplemental Plans

Disability Insurance - Colonial

Member: If you find yourself unable to work due to injury or sickness, short term disability can help you protect your paycheck by providing a tax-free income benefit (up to 60% of income not to exceed \$6,500 per month). Benefits are paid in addition to other insurance and income sources, and on/off job coverage is available. Please note that there is a pre-existing condition limitation included with this plan for the first 12 months of the coverage effective date.

Spouse: If your family relies on dual wages, spousal disability insurance is available as a rider under the Accident Insurance program. Spousal disability benefits provide a tax-free income benefit (up to 50% of income not to exceed \$2,500 per month). Please note, that there is a pre-existing condition limitation included with this plan for the first 12 months of the coverage effective date.

Accident Coverage - Colonial

The **Accident plan** provides cash benefits directly to you (unless otherwise assigned) that help with out-of-pocket expenses - medical and non-medical - associated with treatment in the event of a covered accident. Provides 24 hour coverage and is available for you, your spouse and child(ren). You select the coverage that best protects you and your family. Option of Off-Job Only or On/Off-Job Accident Disability Income Rider:

- ◆ Employee or spouse
- ◆ \$400–\$2,500 Off-Job monthly benefit. On-job amount is 50% of Off-Job benefit.
- ◆ Up to 50% of income for employee or spouse
- ◆ Guaranteed Renewable to age 75
- ◆ 0, 7, 14 or 30 day elimination period
- ◆ 6 or 12 month benefit
- ◆ A 12/12 pre-existing condition limitation

Critical Illness and Cancer Insurance - Colonial

The **Critical Illness Insurance** provides cash benefits when an insured person is diagnosed with a covered critical illness-and these benefits are paid directly to you (unless otherwise assigned). The plan provides a lump-sum benefit to help with out-of-pocket medical expenses and the living expenses that can accompany a covered critical illness. Guaranteed issue amounts up to \$20,000 for you and your spouse.

Cancer insurance is a type of supplemental health **insurance** that is meant to manage the risks associated with the **cancer** disease and its numerous manifestations. It is meant to mitigate the costs of **cancer** treatment and provide policyholders with a degree of financial support for the type of cancer treatment received.

Hospital Indemnity Insurance - Colonial

The Hospital Indemnity Plan provides cash benefits directly to you (unless otherwise assigned) that help pay for some of the costs - medical and non-medical - associated with a covered hospital stay due to a sickness or accidental injury.

Universal or Term Life Insurance - Transamerica

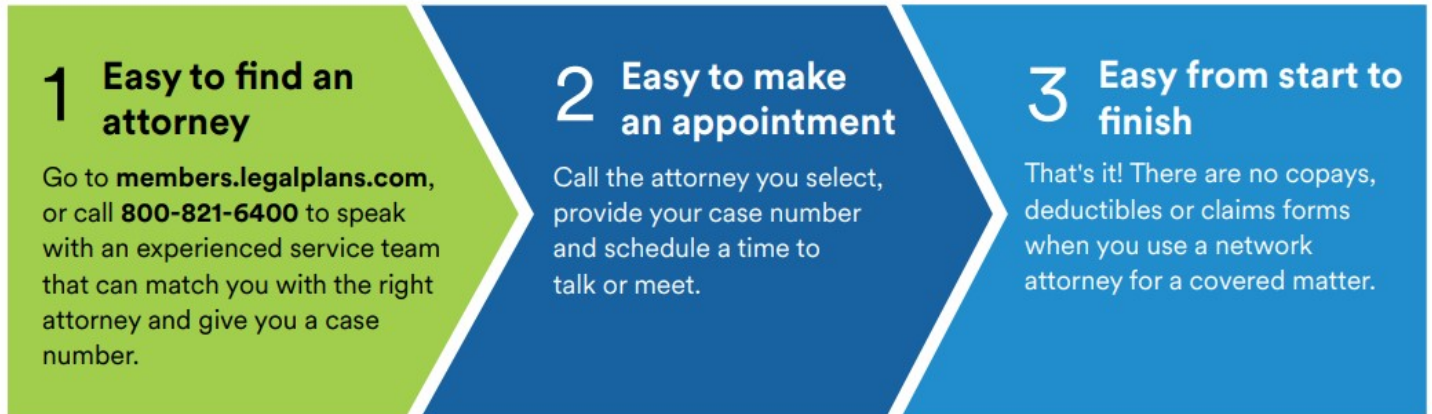
Universal life insurance is a type of permanent life insurance that provides coverage for life insurance, as long as premiums are paid. It's made up of two parts: a guaranteed death benefit, which is money left to your loved ones, and a cash value component. The cash value earnings grow tax-deferred, meaning no tax will be due until they are withdrawn. It's flexibility on your terms.

Term insurance is a type of **life insurance** policy that provides coverage for a certain period of time or a specified "**term**" of years. If the **insured** dies during the time period specified in the policy and the policy is active, or in force, a death benefit will be paid to your beneficiary.

Legal Plan

Legal Plan - MetLife

MetLife Legal Plans provides you with access to experienced attorneys and reduces effort on your end. It's a smart, simple, affordable way to get the legal help you need. It also includes identity theft restoration, free simple tax return preparation and a free simple will.



The legal plan covers the employee, their spouse and dependents. Telephone and office consultations are available for an unlimited number of personal legal matters with an attorney of their choice.

Services for everyone

Navigating life's milestones is easier with MetLife Legal Plans. We provide legal assistance for a wide range of personal legal matters, and that's with:

- ◆ unlimited use of legal services covered by your plan
- ◆ no waiting periods, claim forms, deductibles, or copays to worry about when using a Network Attorney

Money Matters	<ul style="list-style-type: none"> • Debt Collection Defense • Financial Education Workshops³ • Identity Management Services⁴ 	<ul style="list-style-type: none"> • Identity Theft Defense • Negotiations with Creditors • Personal Bankruptcy 	<ul style="list-style-type: none"> • Promissory Notes • Tax Audit Representation • Tax Collection Defense
Home & Real Estate	<ul style="list-style-type: none"> • Boundary & Title Disputes • Deeds • Eviction Defense • Foreclosure 	<ul style="list-style-type: none"> • Mortgages • Property Tax Assessments • Refinancing & Home Equity Loan • Sale or Purchase of Home 	<ul style="list-style-type: none"> • Security Deposit Assistance • Tenant Negotiations • Zoning Applications
Estate Planning	<ul style="list-style-type: none"> • Codicils • Complex Wills • Healthcare Proxies 	<ul style="list-style-type: none"> • Living Wills • Powers of Attorney (Healthcare, Financial, Childcare, Immigration) 	<ul style="list-style-type: none"> • Revocable & Irrevocable Trusts • Simple Wills
Family & Personal	<ul style="list-style-type: none"> • Adoption • Affidavits • Conservatorship • Demand Letters • Garnishment Defense • Guardianship 	<ul style="list-style-type: none"> • Immigration Assistance • Juvenile Court Defense, Including Criminal Matters • Name Change • Parental Responsibility Matters • Personal Property Issues 	<ul style="list-style-type: none"> • Prenuptial Agreement • Protection from Domestic Violence • Review of ANY Personal Legal Document • School Hearings
Civil Lawsuits	<ul style="list-style-type: none"> • Administrative Hearings • Civil Litigation Defense 	<ul style="list-style-type: none"> • Disputes Over Consumer Goods & Services • Incompetency Defense 	<ul style="list-style-type: none"> • Pet Liabilities • Small Claims Assistance
Elder-Care Issues	<ul style="list-style-type: none"> • Consultation & Document Review for Issues Related to Your Parents: <ul style="list-style-type: none"> • Deeds • Leases 	<ul style="list-style-type: none"> • Medicaid • Medicare • Notes • Nursing Home Agreements 	<ul style="list-style-type: none"> • Powers of Attorney • Prescription Plans • Wills
Vehicle & Driving	<ul style="list-style-type: none"> • Defense of Traffic Tickets⁵ • Driving Privileges Restoration 	<ul style="list-style-type: none"> • License Suspension Due to DUI 	<ul style="list-style-type: none"> • Repossession

Our network of attorneys is here to make your lives easier!

- Getting married**
- Buying or selling a home**
- Starting a family**
- Dealing with identity theft**
- Sending kids off to college**
- Caring for aging parents**

Carrier Contacts

Often time members are unsure whom to contact and when. Outlined below is your first point of contact in order and for what purpose:

1. Insurance matters by coverage are listed in the contact grid below, they will not be able to answer questions until after your benefits effective date.
2. Active, Retirees or COBRA Enrollment questions, you will contact NEBA under Active and COBRA Administrators below.
3. When you have already contacted UHC or NEBA and still need assistance call our Member Advocate: Diana Kemelek (email: dkemelek@bbofct.com or phone: (860) 665-8495
4. For enrollment or claims issues with the supplemental plans offered by Colonial, MetLife, and TransAmerica, please contact NEES as listed below.

CONTACTS				
Coverage	Carrier	Phone Number	Network	Website
Medical and Pharmacy NHP HDHP	United Healthcare	866-230-2507	NHP POS Access	www.myuhc.com
Medical and Pharmacy Choice + HDHP	United Healthcare	866-230-2507	Choice Plus	www.myuhc.com
Employee Assistance Program (EAP)	United Healthcare	888-887-4114	Not Applicable	www.myuhc.com
Dental PPO	United Healthcare	877-816-3596	National Option PPO 30	www.myuhc.com
Dental DHMO	United Healthcare	800-955-4137	National Select Managed Care Network	www.myuhc.com
Vision	United Healthcare	800-638-3120	Spectera	myuhcvision.com
Health Reimbursement Account (HRA)	United Healthcare	844-651-3833	Not Applicable	myuhc.com
Legal Plan	MetLife	800-821-6400	Not Applicable	legalplans.com
Supplemental Plans Below for enrollment and claims issues:	NEES	866-294-9783	Not Applicable	Not Applicable
Supplemental Life Insurance Claims	TransAmerica	800-251-7254	Email: TEBclaimsscanning@transamerica.com	
Supplemental Plans: Disability, Hospital Indemnity, Accident and Cancer with Critical Illness	Colonial	800-884-0689, X803	Not Applicable	Not Applicable
Enrollment and COBRA Administrators	NEBA	800-872-1158	Email: TampaFandP@neba-fl.com	



EMPLOYEE BENEFITS