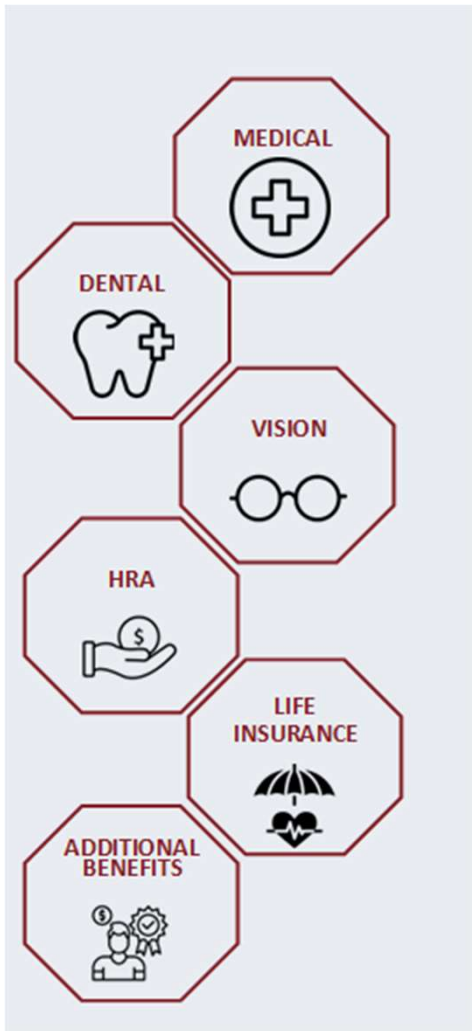


Tampa Firefighters' & Police Officers' Employees' Health Plan



2024 New Hire Benefit Orientation



Benefit Eligibility

- ❖ New Hires
 - ✓ Benefit Eligibility
 - Full time employees working 30 hours or more
 - Dependents of employee or spouse/domestic partner
 - ❖ Spouse or domestic partner
 - ❖ Children to age 26
 - ❖ Children age 26 to 30 living with parent or full-time student
 - ❖ Disabled children over age 26
 - ✓ When to enroll
 - Must enroll prior to your benefits effective date
 - During benefits orientation
 - ✓ Benefits are effective on the 1st of the month following 30 days of full-time status
- ❖ Other opportunities to enroll
 - ✓ Open Enrollment each fall for January 1st effective date
 - ✓ Qualified Life Event within 30 days of the event

Medical Insurance Terminology

Insurance Company – United Healthcare

You're responsible for 100% of your covered health services to the provider before the plan pays.

\$2,000 Deductible

Copayment

A fixed amount you pay for RX, PCP, Specialist, Rehab, Urgent Care and Emergency Room visits without having to meet your deductible first.

10% Coinsurance

The percentage you pay to the provide after the deductible is met.



Medical Plan Option 1

Insurance Company – United Healthcare

Plan: HDHP with HRA Plan for Florida Resident

Network: NHP HMO/POS Access

Primary Care Physician: Required

Referral: Not required



Copayments (*Fixed amount you pay at point of service; deductible does not apply*):

- \$10 Primary Care Physician age 19 & over
- \$0 Primary Care Physician age 0-18
- \$50 Specialist Visit
- \$0 Virtual Visits
- \$0 X-ray and other Diagnostic Lab Testing
- \$50 Urgent Care
- \$10 Rehabilitation, Chiropractor & Outpatient Mental Health per visit
- \$300 Emergency Room
- \$15/\$50/\$90 Prescription Drug

Deductible:

- \$2,000 individual
- \$4,000 family

Out of Pocket:

- \$4,000 individual
- \$8,000 family

Coinsurance after deductible is met:

- In-network plan pays 90% / Member 10%
- Out-of-network plan pays 70% / Member 30%

Medical Plan Option 2

Insurance Company – United Healthcare

Plan: NHP HDHP with HRA **Flex Plan**

Network: NHP HMO/POS Access in FL / **Choice Plus all other states**

Primary Care Physician: Required in FL / **use any PCP in Choice Plus in other states**

Referral: Not required



Copayments (*Fixed amount you pay at point of service; deductible does not apply*):

- \$10 Primary Care Physician age 19 & over
- \$0 Primary Care Physician age 0-18
- \$50 Specialist Visit
- \$0 Virtual Visits
- \$0 X-ray and other Diagnostic Lab Testing
- \$50 Urgent Care
- \$10 Rehabilitation, Chiropractor & Outpatient Mental Health per visit
- \$300 Emergency Room
- \$15/\$50/\$90 Prescription Drug

Deductible:

- \$2,000 individual
- \$4,000 family

Out of Pocket:

- \$4,000 individual
- \$8,000 family

Coinsurance after deductible is met:

- In-network plan pays 90% / Member 10%
- Out-of-network plan pays 70% / Member 30%

Medical Plan Option 3

Insurance Company – United Healthcare

Plan: HDHP with HRA Plan

Network: Choice Plus (National all 50 states)

Primary Care Physician: Any PCP

Referral: Not required



Copayments:

- \$30 Primary Care Physician age 19 & over
- \$30 Primary Care Physician age 0-18
- \$50 Specialist
- \$15 Virtual Visits
- \$0 X-ray and other Diagnostic Lab Testing

Deductible:

- \$2,000 individual
- \$4,000 family

Coinsurance after deductible is met:

- In-network plan pays 90% / Member 10%
- Out-of-network plan pays 70% / Member 30%

- \$50 Urgent Care
- \$30 Rehabilitation, Chiropractor & Outpatient Mental Health per visit
- \$300 Emergency Room
- \$30/\$60/\$90 Prescription Drug

Out of Pocket:

- \$4,000 individual
- \$8,000 family

Medical Plans

NHP HDHP – Option 1 NHP HDHP/Flex – Option 2 Choice Plus – Option 3

United Healthcare	NHP HDHP with HRA	NHP/FLEX HDHP with HRA	CHOICE PLUS HDHP with HRA	HDHP with HRA (same for all plans)
	IN NETWORK (FL Only w ER & Telemedicine all other states)	IN NETWORK FL NHP POS Access, all other States Choice Plus	IN NETWORK (USA National Network)	OUT OF NETWORK
Calendar Year Deductible	Individual deductible	Individual deductible	Individual deductible	Family deductible*
Single/Family	\$2,000/4,000	\$2,000/4,000	\$2,000/4,000	\$4,000/8,000
Health Reimbursement Account (HRA)	Wellness Incentive: PHA, Tobacco Free and Online Program	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	Up to \$1,000	See in-network for details
Spouse or Domestic Partner	Up to \$1,000	Up to \$1,000	Up to \$1,000	See in-network for details
Coinsurance	10%	10%	10%	30%
Calendar Year Out-of-Pocket Max (1)				
Single/Family	\$4,000/8,000	\$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 PCP required	\$10 assign/select PCP required	\$30	30% after deductible
<i>Pediatrician Visits (PCP) to age 19</i>	\$0 assign/select PCP required	\$0 assign/select PCP required	\$30	30% after deductible
Specialist Office Visit (<i>referrals not required</i>)	\$50	\$50	\$50	30% after deductible
Virtual Visit	\$0	\$0	\$15	Not Covered
Urgent Care	\$50	\$50	\$50	30% after deductible
Diagnostic Lab and X-Ray	No charge	No charge	No charge	30% after deductible
Diagnostic Testing(MRI, CAT & PET)	10% after deductible	10% after deductible	10% after deductible	30% after deductible
Preventive Care				
Routine Well Baby Care/Well Child Care	Covered at 100%	Covered at 100%	Covered at 100%	Covered at 100%
Routine Wellness Exam - Adult	Covered at 100%	Covered at 100%	Covered at 100%	Covered at 100%
Inpatient Hospital	10% after deductible	10% after deductible	10% after deductible	30% after deductible
Outpatient Surgery	10% after deductible	10% after deductible	10% after deductible	30% after deductible
Emergency Care				
Ambulance	10% after deductible	10% after deductible	10% after deductible	10% after deductible
Emergency room care	\$300	\$300	\$300	\$300
Other Services				
Physical; Speech & Occupational Rehab	\$10	\$10	\$30	30% after deductible
Chiropractor	\$10	\$10	\$30	30% after deductible
Skilled Nursing/In-Patient Rehabilitation (60 days)	10% after deductible	10% after deductible	10% after deductible	30% after deductible
Mental Health & Substance Abuse				
Office Visit - Outpatient	\$10	\$10	\$30	30% after deductible
Inpatient Services	10% after deductible	10% after deductible	10% after deductible	30% after deductible

Designated Diagnostic Provider (DDP)



Baycare Outpatient Imaging
X-ray and Radiology Facility
711 S Dale Mabry Hwy Ste 101
Tampa, FL 33609
3 Miles Away - Get Directions: 42

- Designated Diagnostic Provider: Imaging
- Free-standing Facility
- Accepting All Patients
- In-network Provider

(855) 269-4332 (toll-free)
711 (toll-free)
Additional Locations (5)

Medical Plan – Additional Coverage

New Coverage under both medical plans

- Cranial Banding Medically necessary- \$1,500 lifetime
- Infertility - \$30,000 medical and \$10,000 Rx lifetime
- Acupuncture – 10 visits per year
- Hearing Aids - \$5,000 per year



Prescription Drug Plan

United Healthcare (Optum RX)	NHP POS ACCESS HDHP with HRA	CHOICE PLUS POS HDHP with HRA	HDHP with HRA
	IN NETWORK (FL Only w ER & Telemedicine all other states)	IN NETWORK (USA National Network)	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.

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.

Medical Plan – Health Reimbursement Account (HRA)

HDHP with HRA plans (FL Resident and Non-FL Resident)

- New Wellness Incentives earned in 2024 and not used in 2024 will roll over to 2025, up to \$1,000 individual / \$2,000 family..
- Maximum roll over amount is \$2,000 individual / \$4,000 family with new incentives.
- HRA is used to cover your medical deductible and coinsurance, reducing your out-of-pocket expenses.
- Medical Claims will be “auto-adjudicated” and the provider will be paid directly.
- You will have the opportunity to earn Wellness Incentives with CareATC in 2024 for 2025 but they will be under a portal for the Tampa Firefighters’ & Police Officers’ Employees’ Health Plan.



Note: *If you enroll in the City Of Tampa’s Flexible Spending Account (FSA) and you have HRA funds, you should use the FSA for Dental and Vision expenses only until your HRA is exhausted to avoid paying twice for the same expense. If you have other coverage, you should contact UHC to turn off the auto-adjudication, to avoid overpayment.*

Medical Plan – HRA Wellness Incentives

Wellness Incentive Activities	Employee Wellness	Spouse or Domestic Partner Wellness	Wellness Incentive Activity Deadline
PHA	\$500	\$500	22-Nov-24
Tobacco Free Certification	\$250	\$250	22-Nov-24
Your Choice of (up to 5):	\$250	\$250	22-Nov-24
Wild on Walking Challenge, including Train with Jane Challenge or ...	✓	N/A	22-Nov-24
>2 Wellness Classes or ...	✓	N/A	22-Nov-24
> 2 Wellness Webinars or...	✓	✓	22-Nov-24
> A combination of 1 Wellness Class and 1 Wellness Webinar	✓	N/A	22-Nov-24
Maximum Incentive Reward	\$1,000	\$1,000	



CareATC Clinics are available to employees, Non-Medicare retirees and their dependents enrolled in the Tampa Firefighters’ & Police Officers’ Employees’ Health Plan. The clinics 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 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>.

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

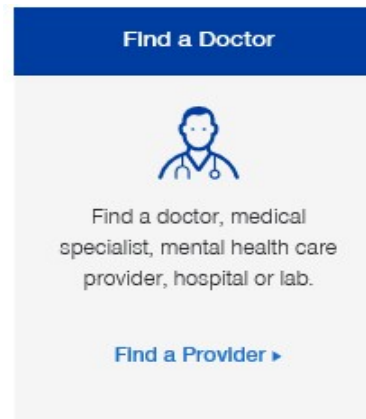
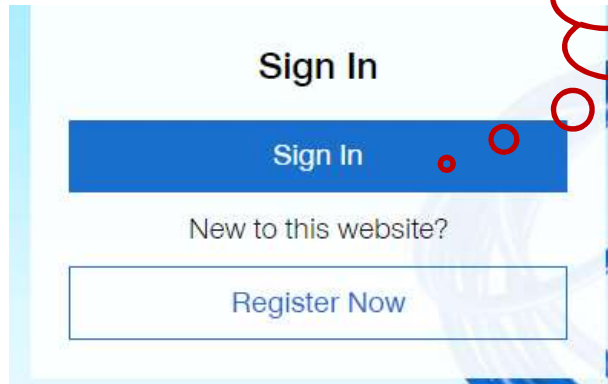
Himes Wellness Center
4107 N. Himes Ave., Suite 101
Tampa, FL 33607
Monday - Wednesday 7:00 am to 7:00 pm
Thursday 7:00 am to 6:30 pm
Friday 7:00 am to 5:00 pm
Saturday 8:00 am to 12:00 pm

Note: CareATC is not part of United Healthcare. While you may utilize them as part of your plan, you still need to designate a PCP with UHC.

Network Review

In-Network Providers - NHP POS Access or Choice Plus: 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 and register if you haven't before. **(after benefits effective date)**



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

FIND HEALTH CARE BY CATEGORY



People
Doctors, medical groups, and other professionals by specialty



Places
Hospitals, clinics, labs, imaging centers, medical suppliers



Services and Treatments
Providers for office visits, tests, treatments, surgeries



Care by Condition
Providers for common concerns



Cost Estimates
Treatment for common conditions

Primary Care Physician

How to select your NHP POS Access Primary Care Physician (PCP): Go to People / enter your zip code and miles from your work or home / select Primary Care Physicians



People

Doctors, medical groups, and other professionals by specialty



Denise K. Edwards, MD
Adolescent Medicine, Internal Medicine, Pediatrics

★★★★★ 2 Reviews

128 S West Shore Blvd Ste C
Tampa, FL 33609

0.1 Miles Away

[View Hours](#) OPEN NOW

Phone

(813) 974-2201 PHONE

Accessibility

Exterior Building
Bathrooms
Parking

SAVE (813) 974-2201

- OVERVIEW
- SERVICES & COSTS
- LOCATIONS
- PATIENT REVIEWS
- ENROLLMENT INFORMATION

This sample provider is accepting all patients and is a Premium Care Physician!

Edwards, Denise Kalil, MD
Adolescent Medicine, Internal Medicine, Pediatrics
★★★★★ 2 Reviews
128 S West Shore Blvd Ste C
Tampa, FL 33609
(813) 974-2201 PHONE
0.1 Miles Away
[View Additional Locations \(2\)](#)
[View Enrollment Information](#)

♥♥ Premium Care Physician
✔ Accepting All Patients

Provider ID required (includes the zeros before and after) for your PCP for members and dependents

✔ IN-NETWORK

SAVE (813) 974-2201

♥♥ Premium Care Physician
✔ Accepting All Patients
Provider ID
00002666021 010

Medical Bi-Weekly Payroll Deductions

United Healthcare Medical	NHP HDHP with HRA	NHP FLEX HDHP with HRA	CHOICE PLUS HDHP with HRA
Network	IN NETWORK (FL Network Only w ER & Telemedicine in all other states)	IN NETWORK FL NHP POS Access, all other States Choice Plus	Choice Plus - USA National Network
Pre-Tax Contribution	Bi-Weekly (26)	Bi-Weekly (26)	Bi-Weekly (26)
Employee Only	\$0.00	\$11.54	\$24.02
Family	\$209.02	\$237.69	\$267.45
Dual City of Tampa Family	\$0.00	\$34.62	\$68.62

PLEASE NOTE THE FOLLOWING REGARDING THE MEDICAL PLANS CONTRIBUTIONS:

- ⑩ Dual City of Tampa Family bi-weekly premiums are for married or domestic partner that both work for the City of Tampa and both are members enrolled in one of the trust’s medical plan. (Spouse/domestic partner cannot be enrolled in any other medical plan).
- ⑩ The NHP Flex HDHP with HRA 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 HDHP with HRA Plan. Annual verification is required.

Dental Plan – DHMO

DHMO Plan – United Healthcare

Network: FL Managed Care – Solstice S100B, S200A, S200B & S200AP

Out of Network Coverage: No

Calendar Year Maximum: Unlimited

Deductible for Basic and Major Services:

➤ none

Scheduled Payments:

Preventive and Diagnostic

➤ No charge

Basic Services

\$40 Routine filling per tooth

\$10 - \$40 Oral Surgery

\$40-\$350 Endodontics

Major Services

\$0 - \$100 Periodontics

\$195 Crowns

\$210 - \$240 Bridges

Orthodontic Services (Braces)

\$1,800 dependent children to age 19

\$2,400 adult



Dental Plan – PPO Plan

PPO Plan – United Healthcare

Network: National Option PPO 30

Out of Network Coverage: Yes

Calendar Year Maximum: Unlimited

Deductible for Basic and Major Services:

- \$50 individual
- \$150 family

Coinsurance:

Preventive, Diagnostic and Basic Services

- Plan pays 100%
- Out-of-network plan pays 80% / Member 20%

Major Services

- Plan pays 60% / Member 40%
- Out-of-network plan pay 50% / Member 50%



Orthodontic Services (Braces)

- Plan pays 50% both in and out of network
- \$2,000 Lifetime Maximum
- For dependent children to age 19

Dental Bi-Weekly Payroll Deductions

United Healthcare Dental	DHMO	PPO Dental
Pre-Tax Contribution	Bi-Weekly (26)	Bi-Weekly (26)
Employee Only	\$5.81	\$14.92
Employee + One	\$11.49	\$28.35
Family	\$20.43	\$46.74

Vision Plan

Insurance – United Healthcare

Network: Spectera

Out of Network Coverage: Yes (reimbursement only)

Benefit Frequency: Once every 12 months

- Eye Exam
- Frames or Contact Lenses
- Eyewear Lenses

In-network Benefit

- \$15 Exam and material copay
- \$150 Frames allowance
- \$150 Contact lenses allowance

Standard Scratch-resistance lenses

- Single, lined bifocal or trifocals 0% after copay
- 20% discount for additional lenses

In-network Contact Lenses

- Disposable Formulary – up to 6 boxes
- Medically Necessary – material copay only



Vision Plan – Additional Advantage

❑ Warby Parker Advantage 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 and Anti-reflective treatments
- Shop for contacts, eyeglasses and sunglasses online at www.warbyparker.com
- Warby Parker stores in the Tampa Area:



Exams & Glasses

University Town Center

140 University Town Center Dr
Sarasota, FL 34243

(941) 213-5764

Mon - Sat 11:00 am to 7:00 pm

Sunday 12:00 to 6:00 pm

Glasses/Frames only

Showroom at Oxford Exchange

420 West Kennedy Boulevard
Tampa, FL 33606

(813) 686-6973

Mon - Sat 9:00 am to 5:30 pm

Exams & Glasses

International Plaza

2223 N West Shore Boulevard
Tampa, FL 33607

(813) 524-5436

Mon - Thurs 11:00 am to 8:00 pm

Fri - Sat 10 am to 8 pm; Sun 10 am to 6 pm

Exams & Glasses

Hyde Park Village

702 S Dakota Avenue
Tampa, FL 33606

(888) 492-7297

Mon - Sat 11:00 am to 7:00 pm

Sunday 12:00 to 6:00 pm

Vision Bi-Weekly Payroll Deductions

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

Supplemental Plan Offerings

Colonial Plans:

- **Accident Insurance:** Provides cash benefits directly to you that help with out-of-pocket expenses - medical and non-medical - associated with treatment in the event of a covered accident.
- **Short Term Disability:** Can help you protect your paycheck, if you find yourself unable to work due to a non-occupational illness or injury.
- **Hospital Indemnity:** 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.
- **Critical Illness:** Provides lump sum cash benefits when an insured person is newly diagnosed with a covered critical illness, with option for Cancer Rider.

Supplemental Plan Offerings

Universal or Term Life Insurance - Colonial

- **Universal life:** The plan provides guaranteed death benefit, guaranteed level premiums for life, guaranteed tax-deferred cash values. The insured can select a to have a paid-up policy at age 70 or age 100. Coverage is also available for a spouse and/or dependent child. Plus, a Built-in terminal illness accelerated death benefit that provides up to 75% of the policy's death benefit (up to \$150,000) if you're diagnosed with a terminal illness. And, you have the flexibility to keep the policy if you change jobs or retire with no change in benefit or costs.
- **Term Life:** Lower cost when compared to whole life insurance. Same benefit payout throughout the duration of the policy, and premiums are guaranteed not to increase for up to 30-years based on issue age. Coverage is also available for a spouse and/or dependent child. Plus, a Built-in terminal illness accelerated death benefit that provides up to 75% of the policy's death benefit (up to \$150,000) if you're diagnosed with a terminal illness. And, you have the flexibility to keep the policy if you change jobs or retire with no change in benefit or costs.

Supplemental Plan Offerings

LawAssure – Colonial

Offered free to all active members to help write a will, make a power of attorney, prepare a health care directive and create a trust. It is a simple way to enhance your benefits packages without affecting your budget when enrolling in one of the colonial plans.

Legal Plan – MetLife

Offers a large network of providers for many legal services. It also includes identity theft restoration, free simple tax return preparation and a free simple will. Legal services are provided at a discounted fee for your entire family.

City of Tampa Benefits

What is not offered by the Tampa Firefighters' & Police Officers' Employees' Health Plan that is offered by the City of Tampa:

Benefits Provided by the City of Tampa:	
◆ Employee Assistance Plan (EAP)	◆ 457(b) Retirement Savings Plan
◆ Basic Term Life and Beneficiary	◆ Flexible Spending Accounts
◆ Long Term Disability Insurance	◆ Roth Retirement Savings

Who to contact

1. The phone numbers for questions about your insurance are listed in the benefits booklet under Contact Information. They will not be able to answer questions regarding claims, providers, or what is covered or not covered, and can only be contacted after your benefits effective date.
2. For Active or COBRA Enrollment questions, or if you need additional assistance that the insurance company was unable to help you with, contact NEBA at the phone number listed under Active and COBRA Administrators. (800-872-1158)
3. Need additional assistance for finding a provider, claims resolutions, navigating myuhc.com or questions regarding your benefits, contact our Benefits Advocate. Juliet De La Hoz, email: juliet.Delahoz@bbrown.com or Phone: (860-665-8470)
4. For questions about the supplemental plans provided by Colonial or MetLife contact NEES for help with enrollment, benefits or claims. (866-294-9783)

Go to: www.tampabenefits.com to obtain the 2024 Benefits Guide and all plan documents.

