



# Retiree Benefits Briefing

A Newsletter about 2024 Benefits for FCPS Retirees

Open Enrollment: October 16 - November 3, 2023

## Open Enrollment Begins Soon!

Welcome to the 2024 Benefits Open Enrollment season!

**Open enrollment will start on Monday, October 16, and continue through Friday, November 3, 2023.**

Open enrollment is your annual opportunity to make changes to your medical and dental coverage.

**Elections made during this time will become effective January 1, 2024.**



## Benefit Announcements for 2024:

- **Aetna Medicare Advantage Plan** (see page 2 for more details):
  - Expanded availability for continuous glucose monitors.
  - Addition of emergency transportation benefits when travelling overseas.
  - Members will be receiving a new ID card from Aetna.
- **Kaiser Permanente Medicare Advantage Plan** (see page 2 for more details):
  - LIBERTY Dental will replace Dominion National for preventive dental coverage.
- **Beginning in January, the following benefits will change with the Cigna plan** (available to retirees/dependents not eligible for Medicare):
  - Copays are reduced to \$20 for mental health treatment received through one of Cigna's virtual providers (MDLive, TalkSpace, Ginger, etc).
  - Mental health treatment received at an in-network outpatient facility will be covered at 100%.
  - Out-of-network benefits will continue at 10% coinsurance (retiree share).
  - Infertility benefits will be managed by WINFertility, a third-party vendor that specializes in infertility management. Expanded benefits will provide certain benefits to families of all types.

Medicare retirees and covered dependents will remain enrolled in the same plans for 2024 unless they request to change or cancel coverage. Retirees who wish to make a change should follow the instructions on page 3. Contact the Office of Benefit Services by email at [FCPSBenefitsDocumentation@fcps.edu](mailto:FCPSBenefitsDocumentation@fcps.edu) or call 571-423-3200, option 3, option 2.

**No action is required during open enrollment unless requesting a change to coverage.**

2024 Plans & Premium Changes	
<u>Medical*</u>	
<u>Medicare-eligible retirees/dependents</u>	
Aetna Medicare Advantage	+ 0%
Kaiser Permanente Medicare	+ 5.7%
<u>Non-Medicare-eligible retirees/dependents</u>	
Cigna Open Access Plus	+ 14.8%
Kaiser Permanente HMO	+ 11.3%
<u>Dental</u>	
<u>All retirees</u>	
Aetna DPPO	+ 0%
Aetna DNO	- 3.6%

\*Medical plan increases calculated do not include a monthly subsidy. Actual % varies according to tier and subsidy level.

# Plan Updates for 2024

## Aetna Medicare Advantage Members:

- All participants will receive a new ID card for 2024.  
Due to an administrative update with Centers for Medicare and Medicaid Services (CMS), new ID cards will be issued. **This change will not impact coverage.** Be sure to share your new card with your doctor, hospital and all treating providers, beginning January 1, 2024.
- Glucose monitors available at participating DME providers.  
Beginning January 1, 2024, you can get a Dexcom or FreeStyle Libre brand continuous glucose monitor and supplies at a participating Durable Medical Equipment (DME) OR a participating pharmacy location. If you choose any other brand, you can only use a participating DME provider. You will need a prescription to get your monitor and supplies. (You may find participating DME providers and pharmacy locations online at [www.fcps.AetnaMedicare.com](http://www.fcps.AetnaMedicare.com). Select "Find a Doctor or Provider" or call the number on your ID card.)
- Worldwide emergency transportation will be covered beginning January 1, 2024.  
If you are out of the country and need emergency transportation, you pay a \$0 copay for each service. Please keep in mind that you may still be responsible for other costs associated with receiving urgent and emergency services while traveling, and transportation back to the United States from another country is not covered. In all cases, retirees travelling overseas should consider purchasing travel insurance to supplement their coverage, as only emergency services are covered under the plan.

## Kaiser Permanente Medicare Advantage Members:

### LIBERTY Dental replacing Dominion National for preventive dental coverage:

Kaiser Permanente Medicare Advantage (KPMA) members automatically receive coverage for preventive dental services under the plan. Effective January 1, 2024, LIBERTY Dental will replace Dominion National as the Kaiser Permanente preventive dental plan provider for KPMA participants. Expect additional communications from Kaiser Permanente regarding this change in the coming weeks. You will also receive a LIBERTY Dental Plan ID in the mail prior to January 1.

Please note: The FCPS Aetna Dental Plan and the LIBERTY Dental Plan are two different plans. The LIBERTY Dental Plan has a limited network of providers and is included with your KPMA plan. Retirees who are enrolled in the Aetna dental DPPO or DNO plan may choose to use either Aetna or LIBERTY for coverage.

With LIBERTY, you pay a \$30 copayment for each preventive care office visit, which includes:

- Oral exams, up to two per year
- Cleanings, up to two per year
- Bitewing X-rays, up to two per year

More extensive care (fillings, crowns, dentures, root canals, periodontal treatment, oral surgery, etc.) is provided at a discounted cost. [View covered dental services on the KP website.](#)

For a list of participating dentists, information about a particular dentist, or questions about covered services, visit [www.LibertyDentalPlan.com/kaiserdentists](http://www.LibertyDentalPlan.com/kaiserdentists) or call LIBERTY Dental Plan Member Services at 1-888-650-1859 (TTY 711), Monday through Friday, 8 a.m. to 8 p.m. Please note that under the Liberty Dental plan you must receive services from a participating provider; services received from non-participating dentists are not covered.

# Your Open Enrollment Resources

There are many available resources to answer your benefits questions, as well as provide the information you need to make important decisions during open enrollment. Resources include the FCPS and vendor websites, member service centers, and open houses where you can speak with both FCPS staff and benefits vendors.

## Open Houses

The Office of Benefit Services (OBS) will be hosting open houses to discuss 2024 benefits. Chat with benefit vendors, including Cigna and Kaiser Permanente representatives, and OBS staff to get answers to your questions.

- **Thursday, October 19**  
4–7 p.m.  
Hayfield Secondary School Cafeteria  
7630 Telegraph Road, Alexandria
- **Tuesday, October 24**  
4–7 p.m.  
Chantilly High School Cafeteria  
4201 Stringfellow Road, Chantilly

## Your Open Enrollment Checklist

### **Before** Open Enrollment:

If you will be requesting coverage for your spouse and/or dependent children who are not currently covered under an FCPS plan, begin gathering legal documentation required to add them to your plan. **Due by 4:30 p.m. on Friday, Nov. 3.**

If you are a direct bill participant (i.e. paying premiums to Optum), look for updated mailings from Optum. If you are paying premiums using your bank's bill pay service, make sure to update your premiums before January.

### **During** Open Enrollment:

Review your Benefits Briefing carefully as you consider your plan choices. Take advantage of the many open enrollment resources available to you.

If you wish to change your plan or covered dependent(s), complete Form HR-461 and return to the Office of Benefit Services no later than November 3. The form can be found online at [www.fcps.edu](http://www.fcps.edu), search keywords "Retiree benefits forms".

**Unless you are making changes, you do not need to do anything!**

### **After** Open Enrollment:

Aetna Medicare Advantage members, look for new ID cards in late December. If you enrolled/changed plans, you will also receive new ID cards in the mail.

FCPS must request your spouse/dependent child(ren)'s SSN for reporting health plan enrollment to the IRS.

If you are requesting coverage for your spouse and/or dependent children, you must provide documentation to support eligibility for coverage. View the [Dependent Eligibility Chart](#) for the list of acceptable documents. You may scan and email your documents to [FCPSBenefitsDocumentation@fcps.edu](mailto:FCPSBenefitsDocumentation@fcps.edu) or fax your documents to 571-423-5000.

**Your dependent's coverage cannot be made effective until the Office of Benefit Services receives appropriate legal documentation.**

[View the Dependent Eligibility Chart!](#)



## 2024 Dental Rates for ERFC and FCERS Retirees

Aetna DPPO		Aetna DNO	
Coverage Level	Monthly Total Rate	Coverage Level	Monthly Total Rate
Individual	\$55.22	Individual	\$20.48
Retiree + 1	\$93.88	Retiree + 1	\$34.83
Family	\$133.11	Family	\$49.29

## 2024 Medical Rates<sup>1</sup> for ERFC Retirees

(Subsidy applies to age 55 and older)

Medical Plan	Monthly Total Rate	ERFC Subsidy Applies to Age 55 & Older	Monthly Total Rate Minus Subsidy
<b>Cigna Open Access Plus (OAP)</b> (Available to retirees not eligible for Medicare)			
Individual	\$784.06	\$100.00	\$684.06
Retiree + 1 (no Medicare)	\$1,568.13	\$100.00	\$1,468.13
Family	\$1,960.19	\$100.00	\$1,860.19
<b>Aetna Group Medicare Advantage PPO</b> (Medicare-eligible retirees)			
Medicare Individual	\$410.71	\$100.00	\$310.71
Double Medicare	\$821.42	\$100.00	\$721.42
<b>Cigna Open Access Plus (OAP) + Aetna Group Medicare Advantage PPO</b> (Medicare + Non-Medicare-eligible participants)			
1 Medicare + 1 Individual	\$1,194.77	\$100.00	\$1,094.77
1 Medicare + 2 Individuals	\$1,960.19	\$100.00	\$1,860.19
Double Medicare + 1 Individual	\$1,605.48	\$100.00	\$1,505.48
Medicare + Family	\$1,960.19	\$100.00	\$1,860.19
Double Medicare + Family	\$1,960.19	\$100.00	\$1,860.19
<b>Kaiser Permanente HMO</b> (Non-Medicare retirees who live in the local KP HMO service area)			
<b>Kaiser Permanente Medicare Advantage</b> (Medicare retirees who live in the local KPMA service area)			
Individual	\$795.83	\$100.00	\$695.83
Retiree + 1 (no Medicare)	\$1,591.66	\$100.00	\$1,491.66
Family	\$1,989.58	\$100.00	\$1,889.58
Medicare Individual	\$265.59	\$100.00	\$165.59
Double Medicare	\$531.18	\$100.00	\$431.18
1 Medicare + 1 Individual	\$1,061.42	\$100.00	\$961.42
1 Medicare + 2 Individuals	\$1,857.25	\$100.00	\$1,757.25
Double Medicare + 1 Individual	\$1,327.01	\$100.00	\$1,227.01
Medicare + Family	\$1,989.58	\$100.00	\$1,889.58
Double Medicare + Family	\$1,989.58	\$100.00	\$1,889.58

<sup>1</sup>FCPS requires all Medicare-eligible retirees to elect Medicare Parts A and B when first eligible. This includes retirees/spouses/dependents eligible due to disability. Refer to [www.Medicare.gov](http://www.Medicare.gov) for premiums/surcharges applicable to Medicare coverage.

# 2024 Medical Rates<sup>1</sup> for FCERS Retirees

(Subsidy applies to age 55 and older)

Your medical rate will be the monthly total rate for your plan and coverage MINUS a subsidy based on your years of service (see *Retiree Benefits Handbook*).

Medical Plan	Monthly Total Rate	\$ 15 Subsidy	\$ 25 Subsidy	\$ 50 Subsidy	\$ 100 Subsidy	\$ 125 Subsidy	\$ 150 Subsidy	\$ 175 Subsidy
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## Cigna Open Access Plus (OAP)

(Available to retirees not eligible for Medicare)

Individual	\$784.06	\$769.06	\$759.06	\$734.06	\$684.06	\$659.06	\$634.06	\$609.06
Retiree+1 (no Medicare)	\$1,568.13	\$1,553.13	\$1,543.13	\$1,518.13	\$1,468.13	\$1,443.13	\$1,418.13	\$1,393.13
Family	\$1,960.19	\$1,945.19	\$1,935.19	\$1,910.19	\$1,860.19	\$1,835.19	\$1,810.19	\$1,785.19

## Aetna Group Medicare Advantage PPO

(Medicare-eligible retirees)

Medicare Individual	\$410.71	\$395.71	\$385.71	\$360.71	\$310.71	\$285.71	\$260.71	\$235.71
Double Medicare	\$821.42	\$806.42	\$796.42	\$771.42	\$721.42	\$696.42	\$671.42	\$646.42

## Cigna Open Access Plus (OAP) + Aetna Group Medicare Advantage PPO

(Medicare + Non-Medicare-eligible participants)

1 Medicare + 1 Ind.	\$1,194.77	\$1,179.77	\$1,169.77	\$1,144.77	\$1,094.77	\$1,069.77	\$1,044.77	\$1,019.77
1 Medicare + 2 Ind.	\$1,960.19	\$1,945.19	\$1,935.19	\$1,910.19	\$1,860.19	\$1,835.19	\$1,810.19	\$1,785.19
Double Med. + 1 Ind.	\$1,605.48	\$1,590.48	\$1,580.48	\$1,555.48	\$1,505.48	\$1,480.48	\$1,455.48	\$1,430.48
Medicare + Family	\$1,960.19	\$1,945.19	\$1,935.19	\$1,910.19	\$1,860.19	\$1,835.19	\$1,810.19	\$1,785.19
Double Med. + Family	\$1,960.19	\$1,945.19	\$1,935.19	\$1,910.19	\$1,860.19	\$1,835.19	\$1,810.19	\$1,785.19

## Kaiser Permanente HMO (Non-Medicare retirees who live in the local KP HMO service area)

## Kaiser Permanente Medicare Advantage (Medicare retirees who live in the local KPMA service area)

Individual	\$795.83	\$780.83	\$770.83	\$745.83	\$695.83	\$670.83	\$645.83	\$620.83
Retiree+1 (no Medicare)	\$1,591.66	\$1,576.66	\$1,566.66	\$1,541.66	\$1,491.66	\$1,466.66	\$1,441.66	\$1,416.66
Family	\$1,989.58	\$1,974.58	\$1,964.58	\$1,939.58	\$1,889.58	\$1,864.58	\$1,839.58	\$1,814.58
Medicare Individual	\$265.59	\$250.59	\$240.59	\$215.59	\$165.59	\$140.59	\$115.59	\$90.59
Double Medicare	\$531.18	\$516.18	\$506.18	\$481.18	\$431.18	\$406.18	\$381.18	\$356.18
1 Medicare + 1 Ind.	\$1,061.42	\$1,046.42	\$1,036.42	\$1,011.42	\$961.42	\$936.42	\$911.42	\$886.42
1 Medicare + 2 Ind.	\$1,857.25	\$1,842.25	\$1,832.25	\$1,807.25	\$1,757.25	\$1,732.25	\$1,707.25	\$1,682.25
Double Med. + 1 Ind.	\$1,327.01	\$1,312.01	\$1,302.01	\$1,277.01	\$1,227.01	\$1,202.01	\$1,177.01	\$1,152.01
Medicare + Family	\$1,989.58	\$1,974.58	\$1,964.58	\$1,939.58	\$1,889.58	\$1,864.58	\$1,839.58	\$1,814.58
Double Med. + Family	\$1,989.58	\$1,974.58	\$1,964.58	\$1,939.58	\$1,889.58	\$1,864.58	\$1,839.58	\$1,814.58

### Key to Coverage Level Rates

<b>Individual:</b> You (the individual)	<b>1 Medicare + 1 Individual:</b> You + 1 dependent. One individual has Medicare and one individual does not.
<b>Retiree + 1 (no Medicare):</b> You + 1 dependent; no one has Medicare coverage.	<b>1 Medicare + 2 Individuals:</b> You + 2 dependents. One individual has Medicare and two individuals do not.
<b>Family (Retiree + 2 or more):</b> You + 2 or more dependents; no one has Medicare	<b>Double Medicare + 1 Individual:</b> You + 2 Dependents. Two individuals have Medicare and one individual does not.
<b>Medicare Individual:</b> You (the individual) have Medicare coverage.	<b>Medicare + Family:</b> One individual has Medicare and 3 or more individuals do not.
<b>Double Medicare:</b> You + 1 dependent. Both you and your dependent have Medicare.	<b>Double Medicare + Family:</b> Two individuals have Medicare and 3 or more individuals do not.

<sup>1</sup>FCPS requires all Medicare-eligible retirees to elect Medicare Parts A and B when first eligible. This includes retirees/spouses/dependents eligible due to disability. Refer to [www.Medicare.gov](http://www.Medicare.gov) for premiums/surcharges applicable to Medicare coverage.

## 2024 Health Plan Options for Medicare-Covered Retirees/Dependents

When choosing a medical plan, it's important that you understand and compare your options. Below is a high-level overview of Aetna Medicare Advantage and Kaiser Permanente Medicare Advantage, the plan options for Medicare-eligible retirees/dependents. We encourage you to review the plan documents for more complete information. In case of a discrepancy, plan documents prevail. Plan documents can be found on the websites shown.

	Aetna Medicare Advantage	Kaiser Permanente Medicare Advantage
<b>BASIC INFO</b>		
Who You're Covering	Refer to the Key to Coverage Level Rates on page 5.	
Premium Amount	Refer to the 2024 Benefit Premium Chart on pages 4-5.	
<b>DEDUCTIBLE AND MAXIMUMS</b>		
Deductible (Individual/Family)	No deductible	No deductible
Out-of-pocket Maximum (Individual/Family)	\$200 per individual	\$3,400
<b>IN-NETWORK COPAYS/COINSURANCE LEVELS</b> <i>(all amounts are after deductibles are met, unless otherwise specified)</i>		
Preventive Care	Covered in full	Fully covered
Primary Care Physician Visits	Covered in full	You pay a \$20 copay
Specialist Visits	Covered in full	You pay a \$20 copay
Emergency Room Visits	You pay a \$100 copay	You pay a \$50 copay
Urgent Care	Covered in full	You pay a \$20 copay
In-patient Care (hospitalization)	Covered in full	You pay a \$100 copay
Telemedicine	Covered in full	You pay a \$0 copay
<b>PRESCRIPTION BENEFIT COVERAGE</b> <i>(included with your medical plan; no additional premium cost)</i>		
Benefit Provided Through	SilverScript 30-day supply, you pay: Generic: \$7 copay Brand, including Specialty: 20% coinsurance, \$75 max.	Kaiser Permanente Pharmacy Up to 60-day supply, you pay: Generic: \$15 copay Brand, Preferred: \$15 copay Brand, Non-Preferred: \$15 copay
<b>VISION BENEFITS</b> <i>(included with your medical plan; no additional premium cost)</i>		
Benefit Provided Through	Aetna Vision	Kaiser Permanente
<b>ADDITIONAL PLAN DETAILS</b>		
Website	<a href="http://fcps.aetnamedicare.com">http://fcps.aetnamedicare.com</a>	<a href="https://my.kp.org/fcps">https://my.kp.org/fcps</a>
Phone Number	855-524-6027	800-777-7902



## 2024 Health Plan Options for Non-Medicare-Covered Retirees/Dependents

When choosing a medical plan, it's important that you understand and compare your options. Below is a high-level overview of Cigna and Kaiser Permanente, the plan options for non-Medicare-eligible retirees and their dependents. We encourage you to review the plan documents for more complete information. In case of a discrepancy, plan documents prevail. Plan documents can be found on the websites shown.

	Cigna Open Access Plus	Kaiser Permanente Signature HMO
<b>BASIC INFO</b>		
Who You're Covering	Individual = You; Retiree + 1 = You + 1; Family = You + 2 or more	
Premium Amount	Refer to the 2024 Benefit Premium Chart on pages 4-5.	
<b>DEDUCTIBLE AND MAXIMUMS</b>		
Deductible (Individual/Family)	\$300 (Individual)/\$600 (Family) Both in-network and out-of-network	No deductible
Out-of-pocket Maximum (Individual/Family)	\$2,500 (Individual)/\$5,000 (Family) Both in-network and out-of-network	\$2,000/\$4,000
<b>IN-NETWORK COPAYS/COINSURANCE* LEVELS</b> <i>(all amounts are after deductibles are met, unless otherwise specified)</i>		
Preventive Care	Fully covered - no deductible	Fully covered
Primary Care Physician Visits	You pay a \$20 copay	You pay a \$20 copay
Specialist Visits	You pay a \$40 copay	You pay a \$40 copay
Emergency Room Visits	You pay a \$250 copay, then 10% of covered charges	You pay a \$250 copay
Urgent Care	You pay 10% - no deductible	You pay a \$20 copay
In-patient Care (hospitalization)	You pay a \$150 copay, then 10% of covered charges	You pay a \$150 copay
Telemedicine	You pay a \$20 copay	You pay a \$0 copay
<b>PRESCRIPTION BENEFIT COVERAGE</b> <i>(included with your medical plan; no additional premium cost)</i>		
Benefit Provided Through	CVS Caremark Per 30-day supply, you pay: Generic: \$7 copay Brand, including Specialty: 20% coinsurance, \$75 max.	Kaiser Permanente Pharmacy Up to 60-day supply, you pay: Generic: \$10 copay Brand, Preferred: \$20 copay Brand, Non-Preferred: \$35 copay
<b>VISION BENEFITS</b> <i>(included with your medical plan; no additional premium cost)</i>		
Benefit Provided Through	Cigna Vision	Kaiser Permanente
<b>ADDITIONAL PLAN DETAILS</b>		
Website	<a href="https://cigna.com/fcps">https://cigna.com/fcps</a>	<a href="https://my.kp.org/fcps">https://my.kp.org/fcps</a>
Phone Number	877-501-7992	800-777-7902

\*Copays/coinsurance apply after deductible is met.

### Don't forget!

Retirees/dependents who are eligible for Medicare must elect Medicare Parts A and B when first eligible.

# Know Before You Go

When you need medical care, you have choices! If your family doctor's office is closed and you need care for a non-life-threatening illness or injury, consider using a participating walk-in clinic or an urgent care center. You are typically seen more quickly, and it can cost you less money than an Emergency Room (ER) visit.



Call or see your Primary Care Physician (PCP) for your regular medical care or most urgent needs.

- Check-ups or physicals
- Flu shots and other vaccines
- Common illnesses, like colds, sore throats, and ear infections
- Common injuries, like muscle spasms and sprains
- Health advice
- Routine tests
- Referral to a specialist
- Your regular medical care



Go to Urgent Care for common things that need to be treated soon, but your PCP is unavailable (like after hours or on a weekend). Urgent Care Centers cost more than walk-in clinics, but much less than the ER. These facilities are staffed by doctors, nurse practitioners, and physician assistants.

- Allergic reactions that are not life-threatening
- Animal or insect bites
- Bad cold or flu symptoms
- Cuts requiring stitches
- Eye infections or irritation
- Minor burns
- Sprains or strains
- Urinary tract infections

*Note: there is no deductible under the Cigna plan for services received at a participating convenience clinic or an urgent care center.*



Go to the Emergency Room for serious life or limb threatening conditions.

- Broken bones
- Chest pain
- Head or eye injury
- Poisoning or overdose
- Severe burns
- Sign of stroke, like difficulty speaking or numbness/weakness of limbs
- Sudden loss of consciousness
- Trouble breathing
- Uncontrolled bleeding



# Staying Healthy in the New Year

## Don't forget your seasonal immunizations!

As colder weather approaches and we stay indoors more often, it's a good idea to consider getting your seasonal vaccines, such as the flu shot or shingles vaccine. These immunizations play a crucial role in keeping you and your family healthy. See how to get yours below:

- **Aetna Medicare Advantage members** want to present their AMA card to their provider when receiving a flu, Pneumococcal, Hep B, or Covid-19 immunization. For shingles, zoster, rabies, and RSV shots, members will need to present their SilverScript card to a participating pharmacy. There is no charge for these immunizations.
- **Kaiser Permanente/KP Medicare Advantage members** will want to visit a KP facility to receive a no-cost immunization. Please be sure to bring your photo ID and your KP/KPMA card.
- **Cigna members** can receive no-cost preventive vaccines, such as shingles, flu, or tetanus, at their doctor's office, or through Cigna's network of retail pharmacy providers, such as Walgreens, Walmart, Giant, or Safeway. Please present your Cigna card.

Seasonal vaccines, such as the flu shot or COVID-19 booster, can also be obtained at no-cost through your CVS Caremark pharmacy benefit. You will want to go to a CVS retail pharmacy or participating non- CVS retail pharmacy, such as Walgreens or Rite-Aid. You will need to use your CVS Caremark card.

## Mental Health Resources

FCPS provides a variety of comprehensive behavioral health resources. Whether you're looking for counseling services, webinars on stress management, or ways to enhance your emotional well-being, these resources are designed to support you on your journey toward a healthier and more balanced life. Please view the chart below for resources available to you based on your health plan enrollment:

	Aetna Medicare Advantage	Kaiser Permanente/ Kaiser Medicare Advantage	Cigna
<b>Finding Face-to-Face Support</b>	<ul style="list-style-type: none"> <li>• Register or log in to your account: <a href="https://FCPS.AetnaMedicare.com">https://FCPS.AetnaMedicare.com</a>.</li> <li>• Click on the "Find Doctor or Provider" menu option to search for a provider or service by type.</li> <li>• Use the search bar to find a provider or information about type of service you need.</li> </ul> Cost: \$0	<ul style="list-style-type: none"> <li>• Register or sign on through My Health Manager: <a href="https://my.kp.org/fcps">https://my.kp.org/fcps</a>.</li> <li>• Under the "Essentials" menu at the bottom-right of the page, click on "Find a Doctor".</li> <li>• Use the search bar to find a provider or information about type of service you need.</li> </ul> Cost: \$10 copay for group therapy; \$20 copay for all other office visits.	<ul style="list-style-type: none"> <li>• Log into your MyCigna account: <a href="https://mycigna.com">https://mycigna.com</a>.</li> <li>• Click on the "Find Care &amp; Costs" menu option to search for a provider or service by type.</li> <li>• Use the search bar to find a provider or information about type of service you need.</li> </ul> Cost (after deductible): In-network: \$40 copay (behavioral health providers are considered specialists). Out-of-network: 10% coinsurance.
<b>Virtual Resources Available</b>	Virtual visits by phone or video through the MDLive behavioral health program.  Cost: \$0	Log into your KP My Health Manager account to view available options. Virtual providers can be accessed through the following apps: <ul style="list-style-type: none"> <li>• <i>Ginger, Calm, myStrength</i> (Not available for Kaiser Medicare Advantage)</li> </ul> Cost: \$0 copay	Log into your MyCigna account to discover options available based on your needs. Virtual providers can be accessed through the following apps: <ul style="list-style-type: none"> <li>• <i>MDLIVE, Happify, Talkspace, Ginger</i> Full list available through your myCigna account.</li> </ul> Cost (after deductible): \$20 copay

## FCPS Plans Comply with Non-Discrimination Provisions of the Affordable Care Act

FCPS health plans comply with applicable Federal civil rights laws, including Section 1557 of the Affordable Care Act (Nondiscrimination in Health Programs and Activities). In compliance with the Act, FCPS health plans do not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

FCPS health plans also prohibit denial of health care or health coverage based on an individual's sex, including discrimination based on pregnancy, gender identity, and sex stereotyping.

The Plan also provides important protections for individuals with disabilities and enhances language assistance for people with limited English proficiency. Each tagline listed below reads, "If you speak [native language], language assistance services, free of charge, are available to you. Call 571-423-3200."

AMHARIC (አማርኛ)

ትኩረት፡- አማርኛ የምትናገር ከሆነ፣ የቋንቋ እርዳታ አገልግሎት፣ በነፃ፣ ለእርስዎ ቀርቧል። 571-423-3200 ይደውሉ።

ARABIC (العربية)

انتباه: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية، مجاناً، متاحة لك. اتصل على 571-423-3200.

BENGALI (বাংলা)

দৃষ্টি আকর্ষণ: আপনি বাংলা, ভাষা সহায়তা সেবা, নিখরচা কথা বলতে পারেন, আপনার জন্য উপলব্ধ। 571-423-3200 কল।

CHINESE (繁體中文)

注意: 如果你说中文, 语言援助服务是免费的, 你可以。致电571-423-3200。

FRENCH (Français)

ATTENTION: Si vous parlez Français, des services d'assistance linguistique, gratuits, sont à votre disposition. Composez le 571-423-3200.

GERMAN (Deutsch)

ACHTUNG: Wenn Sie Deutschsprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Rufen Sie 571-423-3200 an.

HINDI (हिंदी)

ध्यान दें: यदि आप हिंदीबोलते हैं, भाषा सहायता सेवाएं, नि: शुल्क, आप के लिए उपलब्ध हैं। कॉल 571-423-3200।

IBO (Igbo asusu)

Ntị : Ọ bụrụ na ị na-ekwu okwu n'ala Igbo, asụsụ aka ọrụ, n'efu, dị ka gị. Akpọ 571-423-3200.

KOREAN (한국어)

주의: 한국어를 구사하는 경우, 무료로 언어 지원 서비스를 이용할 수 있습니다. 571-423-3200으로 전화하십시오.

KRU (Bàsòò-wùdù-po-nyò)

Dè dẹ nià kẹ dyédé gbo: Ọ jù ké m̀ Bàsòò-wùdù-po-nyò jù ní, níí, à wuḍu kà kò dọ̀ po-poò b́éìn m̀ gbo kpáa. Ọ́á 571-423-3200.

PERSIAN FARSI (فارسی)

توجه: اگر شما به زبان فارسی صحبت می‌کنند، خدمات کمک به زبان، رایگان، در دسترس شما هستند. با شماره 571-423-3200 تماس بگیرید.

RUSSIAN (Русский)

ВНИМАНИЕ: Если вы говорите по-русски, вам доступны бесплатные услуги языковой помощи. Звоните 571-423-3200.

SPANISH (Español)

ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame a 571-423-3200.

TAGALOG (Tagalog)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 571-423-3200.

URDU (اُردُو)

توجه: اگر آپ اردو بولتے ہیں تو زبان کی معاونت کی خدمات، مفت، آپ کو دستیاب ہیں۔ 571-423-3200 پر کال کریں۔

VIETNAMESE (Tiếng Việt)

Chú ý: Nếu bạn nói tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ, miễn phí, có sẵn cho bạn. Gọi 571-423-3200.

YORUBA (èdè Yorùbá)

AKIYESI: Bí o ba nṣọ èdè Yorùbú ọfẹ̀ ní iranlọwọ̀ lori èdè wa fun yin o. Ẹ pe ẹrọ-ibanisọrọ yi 571-423-3200.

# Your Benefits and the Law

## Medicare Prescription Drug (Medicare D) Plan

All FCPS medical plans include prescription drug coverage that is currently more comprehensive than the Medicare prescription drug plan. For more information, see “Important Notice from Fairfax County Public Schools about Your Prescription Drug Coverage and Medicare” in the Retiree Benefits Handbook.

## Summary of Benefits and Coverage

An updated Summary of Benefits and Coverage or Evidence of Coverage for each medical plan is available on each medical vendor’s website.

You can find these documents here:

- Cigna Open Access Plus:  
<https://cigna.com/fcps>
- Aetna Medicare Advantage:  
[www.aetnamedicare.com/fcps/en/index.html](http://www.aetnamedicare.com/fcps/en/index.html)
- Kaiser Permanente and KP Medicare:  
[my.kp.org/fcps](http://my.kp.org/fcps)

## Women’s Health and Cancer Rights Act

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women’s Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided (in a manner determined in consultation with the attending physician and the patient) for:

- All stages of reconstruction of the breast on which the mastectomy was performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prosthesis
- Treatment of physical complications of the mastectomy, including lymphedema

These benefits are subject to the same deductible and coinsurance applicable to other medical and surgical benefits provided under the plan. Refer to the summary plan documents available on each vendor’s website for more information.

## Medicaid & the Children’s Health Insurance Program (CHIP) Offer Premium Assistance for Health Coverage for Children and Families

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](http://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](http://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: [www.askebsa.dol.gov](http://www.askebsa.dol.gov) or call 1-866-444-EBSA (3272).

Website:

- <https://www.coverva.org/en/famis-select>
- <https://www.coverva.org/en/hipp>

Medicaid Phone: 1-800-432-5924

CHIP Phone: 1-800-432-5924

**Department of Financial Services**

Office of Benefit Services

Gatehouse Administration Center, Suite 2700





8115 Gatehouse Road, Falls Church, Virginia, 22042-1203

## FCPS Retiree Open Enrollment Information

**PLEASE READ --**

**Important information about your FCPS benefits inside!**

Please read thoroughly to learn more about:

-  Benefit plan updates for 2024;
-  Ways to better use your plan and save money;
-  2024 medical and dental premiums; and
-  Open house dates and times.



**Visit the Retiree  
Open Enrollment webpage**



Scan me!

**To reach the Office of Benefit Services:**

- Call 571-423-3200
- Email [FCPSBenefitsDocumentation@fcps.edu](mailto:FCPSBenefitsDocumentation@fcps.edu)

**Open Enrollment: Monday, October 16 - Friday, November 3, 2023**