



**Health * Prescription Drug * Dental * Life
Flexible Spending * Voluntary Benefits**

OPEN ENROLLMENT 2019

**January 2, 2019 – February 1, 2019
(Effective March 1, 2019)**

The Board of Lucas County Commissioners

Pete Gerken, President
Tina Skeldon Wozniak
Carol Contrada

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**Board of County
Commissioners**
Pete Gerken
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Carol Contrada

January 2019

Dear Lucas County Employee:

The New Year has just begun and that means that we are officially in our health care benefits open enrollment period, which runs from January 2, 2019, and ends February 1, 2019.

As you know, we carefully monitor our health care reserve fund and are in the midst of weathering a significant financial impact to the fund due to a large increase in medical costs. We appreciate the hard work and creative ideas put forth by the County's Health Care Cost Containment team. It is in large part because of that work that we are able to continue to offer a comprehensive benefits package to employees and dependents in 2019.

We hope you will take advantage of the many opportunities offered to you as part of our health care package including our dynamic wellness program and the new TeleMed services which allow you to seek care after hours. Please check out the "Where to Go" page in this packet for more information about this innovative option.

Finally, please take a few minutes to read the entire open enrollment packet. It contains all the information needed to make your care selections. The online benefits enrollment system will be used to make any of your changes during this year's open enrollment period. This system is available from your home or work computer, smart phone, or through a certified benefits enrollment specialist who will be onsite at your work location during the open enrollment period. You may access the step-by-step instructions on the Lucas County Employee Benefits website at <http://co.lucas.oh.us/3090/Online-Benefits-Enrollment-Instructions>.

Thank you for your continued service to Lucas County and its citizens. Should you have any questions, please do not hesitate to contact the Employee Benefits Department at 419-213-4211.

Sincerely,

Megan Vahey Casiere
County Administrator





2019 Open Enrollment Checklist

OPEN ENROLLMENT is January 2, 2019 - February 1, 2019

- Read all Open Enrollment information contained in this booklet. Keep the booklet in a place that you can easily access it throughout the plan year.
- This is a NOT a mandatory re-enrollment year. While we encourage all employees to review their current benefit elections on the on-line benefits enrollment system, only employees who wish to make a change are required to log in to make those changes.
- Employees who are currently enrolled in the Paramount Patient Centered Medical Home Program who did not complete **both** their annual physical and Partnership Agreement by December 31, 2018, are required to log in and choose one of the remaining two health plan options. Any employee that does not choose one of the remaining two health plans will be automatically defaulted to the Paramount HMO Plan and will remain in that plan until the next open enrollment period. Employees who fall into this category, will be eligible to re-enroll in the Patient Centered Medical Home Program during the next open enrollment period.
- Review directions (page 14) regarding on-line benefits enrollment and/or schedule a meeting with a certified benefits enroller if needed.
- If you are married, and want to cover your spouse as secondary, please make sure your spouse is enrolled in a qualified health plan that provides a minimum bronze level of coverage as designated by the Affordable Care Act. (Spouses who are both Lucas County employees, and who are both eligible for health coverage through their Lucas County employer, are exempt from this rule).
- Important Reminder: In order for Lucas County to pay any claims as secondary for your spouse, your spouse must utilize providers that participate in **both** networks.
- If you have questions or need assistance after reviewing the information provided in this booklet, please call the Employee Benefits Department at 419-213-4211 and one of the benefit staff members will be happy to assist you. You are also welcome to attend any of the question & answer sessions scheduled for your convenience. The various insurance carriers will also be available at these meetings to answer questions about their plans. A calendar of dates and times for these sessions is included in this mailing.

What's New?

- **NEW:** In order to reduce the number of unnecessary, costly emergency room visits for common illnesses, **effective March 1, 2019 the Emergency Room co-pay for all plans will increase from \$100 to \$200.** The co-pay will continue to be waived if admitted to the hospital as an inpatient. Additionally, any covered member who utilizes an urgent care facility first and is then sent to the emergency room by the urgent care facility may appeal the additional \$100 co-payment amount. If documentation of your urgent care visit is included with the appeal request, the additional \$100 co-pay will be waived for that visit. A list of urgent care facilities is provided for your convenience on pages 21 & 22.
- **NEW: TeleMed services are now available to all Lucas County enrollees.** Paramount offers the TeleMed program through ProMedica OnDemand. OnDemand allows you electronic access to immediate care for common illnesses through a healthcare provider with no office visit co-pay, on your schedule, from any location, 24 hours a day, every day of the year. See page 20 for additional information. FrontPath enrollees may access similar services through MyChart at <https://www.mercy.com/patient-resources/mychart>. These on-line services for common illnesses may save members a visit to the Emergency Room and/or Urgent Care facility, as well as saving the member co-pays associated with those facilities. **NEW:** A ProMedica “KNOW WHERE TO GO” brochure on page 19 provides a helpful guide of the appropriate facility of care for various medical conditions.
- **NEW: Effective March 1, 2019, any employee who does not complete their annual health risk assessment by February 29, 2020, will be subject to a \$500 annual health plan deductible for plan year 2020.** (Note: Employees will still have until February 28, 2019 to complete their annual health risk assessment for the up-coming plan year).
- **NEW:** The Standard is replacing Sun Life as the employee term life insurance carrier effective March 1, 2019. Employees are not required to change anything in order to roll over to the new carrier. We do encourage employees to review their current life insurance beneficiaries to verify that the beneficiaries you have previously designated continue to be the individuals you would like to receive your life insurance benefits in the event of your death.
- Lucas County will increase the Medical Flexible Spending Account annual maximum from \$2,650 to \$2,700 consistent with the 2018 IRS contribution limits.

The Medical Flexible Spending Account Run-Out Period will be 45 days in 2019.

If you have a claim between March 1, 2018 – February 28, 2019 and you would like to submit for reimbursement, you will have 45 days (April 14, 2019) to submit that claim.

On-Line Benefits Enrollment

Again this year, all employees will be utilizing our on-line benefits enrollment system for open enrollment. It is accessible from your home computer, your smart phone or through a certified benefits enroller. The certified benefits enrollers will again be available at designated times at all Lucas County worksites to provide any assistance necessary to help you complete the open enrollment requirements. Please find the benefit enrollers complete schedule on the Employee Benefits website. If you require assistance and are not available to meet with an enroller during the times designated at your department, please call Strategic Enrollment Services at 419-930-5977 to schedule a meeting.

Step by step on-line enrollment instructions are also available on the Lucas County Employee Benefits website at: <http://www.co.lucas.oh.us/3090/Online-Benefits-Enrollment-Instructions>. Please take the time to utilize these tools for assistance in accessing your on-line enrollment. If you have additional questions after viewing the instructions on the website, please contact the Employee Benefits Department staff at 419-213-4211 or SES Enrollment Services at 419-930-5977.

Flexible Spending/Voluntary Benefits

Strategic Enrollment Services (SES) will continue to be the County's plan administrator for the flexible and voluntary benefit plans. Employees who are currently enrolled in any flexible benefit plan MUST enroll in a new plan offered during this year's open enrollment period in order to have coverage effective 3/1/2019. A summary of the new voluntary benefits and changes to the flexible spending benefits is included in this booklet. A more detailed description is available online at <http://co.lucas.oh.us/DocumentCenter/View/60588>.

For your convenience, certified benefit enrollers will be on site at every county department to assist all employees with benefit questions and enrollment in not only the flexible spending and voluntary programs, but the health, dental, prescription drug and life coverage options all at the same time! Employees are also welcome to call SES at 419-930-5977. We recommend that you review these benefits prior to meeting with a benefit counselor.



Health Plan Options for 2019

Lucas County will continue to offer the same three medical plan options at the same co-insurance rates with the same out of pocket maximums for all eligible employees and eligible dependents as follows:

1. The Patient Centered Medical Home (PCMH) Plan through Paramount, with a 90/10 in-network level of benefits and an in-network annual out-of-pocket maximum of \$1,000 per individual or \$2,000 per family. There is NO coverage for out-of-network services unless rendered on an emergency basis. Employees must comply with PCMH plan requirements. Only those employees currently enrolled in the PCMH Plan who completed the PCMH requirements by December 31, 2018 will be allowed to re-enroll in this plan. If you are currently enrolled in the PCMH Plan and did not complete the requirements of the plan by December 31, 2018, you must select one of the plans below for the 2019 benefit plan year. If you do not log into the benefit enrollment system and choose one of the plans below, you will automatically be defaulted to the Paramount HMO Plan effective March 1, 2019. Employees currently enrolled in the Paramount HMO Plan or Lucas County Plan through FrontPath who enroll in the Paramount PCMH Plan for the 2019 benefit plan year will be granted until December 31, 2019 to comply with all requirements of the PCMH Plan.
2. The HMO coverage through Paramount Health Care, with a 75/25 in-network level of benefits, and an in-network out-of-pocket maximum of \$1,500 per individual and \$3,000 per family. There is NO coverage for out-of-network services unless rendered on an emergency basis.
3. The Lucas County Plan through FrontPath, with a 70/30 in-network level of benefits and a 50/50 out-of-network level of benefits. The in-network annual out-of-pocket maximum will remain at \$2,000 per individual or \$4,000 per family. The out-of-network benefit has no out-of-pocket maximum.

Office visit co-payments, for services other than preventative care identified under PPACA rules, will remain the same for all three health plans: \$10 for primary care physician and \$15 for specialists. Emergency room co-payments will increase to \$200, unless admitted within 24 hours or first access an urgent care facility. Urgent care co-payments will remain at \$15 per visit. The new TeleMed/OnDemand services are available to Paramount enrollees with no co-pay effective March 1, 2019. FrontPath enrollees may access Mercy/MyChart at <https://www.mercy.com/patient-resources/mychart> to register for Mercy's online tools.

It is highly recommended that you do not rely on any medical provider to inform you if they are in-network. Please verify with the network you are enrolled in prior to obtaining any medical service to determine if a medical provider participates.

This year is not a mandatory re-enrollment year. You are only required to log into the on-line enrollment system or meet with an enrollment specialist if you wish to make a change to your current selections or re-enroll in the flexible spending account for the 2019/20 plan year.

For detailed information regarding coverage under each of these health plans, please go to <http://www.co.lucas.oh.us/236/Health-Insurance>.

REQUIRED DOCUMENTATION

You will not be required to provide documentation previously submitted to the Employee Benefits Department. However, if you are adding or dropping a spouse or a dependent this open enrollment period, any required documentation may either be uploaded during your on-line enrollment, or by sending the documentation by fax, email, interoffice or regular mail to the Lucas County Employee Benefits Department.

REMINDER ABOUT SPOUSES: Spouses are not eligible to be covered by Lucas County medical plans as their first level—or primary—insurance. However, your spouse will be eligible for secondary coverage so long as he or she is enrolled in a qualified health plan that provides a minimum bronze level of coverage as determined by the Affordable Care Act. All remaining eligible expenses may be billed to the Lucas County Health Benefits plan as secondary and will be paid up to the Lucas County level of benefits currently provided to your spouse.

- **IMPORTANT:** Make sure your spouse’s primary network is compatible with your primary network. None of the employee group health care plans sponsored by Lucas County will pay for any non-emergency medical claims incurred by spouses who enroll in a plan then seek non-emergency medical care outside the network of the plan they are enrolled in as primary.

Dental Plan Options

The following dental plans will continue to be offered at the current level of benefits:

Traditional Dental Plan (Administered by NFPBA)

- No network
- \$25/\$75 Deductible
- \$1,000 Annual Maximum Benefit

The Standard Dental PPO Plan (Utilizes the Ameritas Network)

- Must utilize Ameritas providers
- \$25/\$75 Deductible
- \$1,500 Annual Maximum Benefit
- \$1,000 Ortho Lifetime Max (up to age 19)
- Additional \$150 Vision Benefit

Corner Dental Plan (Administered by NFPBA)

- Must utilize Corner Dental Providers
- \$25/\$75 Deductible
- \$1,000 Annual Maximum Benefit

For detailed information regarding coverage under each of these dental plans, please go to <http://co.lucas.oh.us/DocumentCenter/View/4870>

Prescription Drug Plan

The prescription drug plan will remain the same this year through Navitus Health Solutions.

REMINDER: There are two different coinsurance amounts based on whether or not you are participating in the Prescription Drug Use Review Program (DUR). Please see below for exact co-insurance amounts for each of these options:

NON-PARTICIPATING DUR MEMBERS:

1. The coinsurance payment for Tier I generic medication will continue to be 20% but with a minimum per script charge of \$5 (unless the total cost of the prescription is less than \$5) and a maximum of \$20.
2. The coinsurance payment for Tier II preferred brand name medication will be 20% with a minimum per script charge of \$40 (unless the total cost of the prescription is less than \$40) and a maximum of \$100.
3. The coinsurance payment for Tier III non-preferred brand name medications will continue to be 20% with no cap.
4. Consistent with the current benefit, use of a non-participating pharmacy will result in eligible expenses being reimbursed at a reduced level.

PARTICIPATING DUR MEMBERS - The following are the prescription benefits provided for those members that enroll in and remain compliant with the DUR Program:

1. Up to a 90-day supply of Tier I medications with a 20% co-pay up to \$8 per script.
2. Up to a 90-day supply of Tier II medications with a \$25 co-pay per script.
3. Up to a 30-day supply of Tier III medications with a 20% co-pay or \$40, whichever is greater.
4. Each enrollee who completes the program may receive up to \$50 worth of coupons toward their Tier II prescription drug co-payments at the participating pharmacy.
5. Enrollees who complete the program will have their annual out-of-pocket maximum for Tier II brand name medications limited to \$350/year and a \$500/year out-of-pocket maximum for Tier III medications.
6. For patients with diabetes, free test strips and lancets are provided for each month and your blood sugar readings are reviewed and recorded. Results may be forwarded to your physician at your request.
7. Patients currently using the mail order program may benefit from routine access to a pharmacist and other medical professionals. Note: While enrolled in the Drug Use Review Program, the mail order program is suspended.

What is the Prescription Drug Use Review Program?

The Prescription Drug Use Review Program provides for private and confidential sessions between the patient and a participating pharmacist. These sessions are designed to educate the participant on the proper usage of their medication. While the pharmacist cannot alter the physician's prescribing wishes, these sessions assist the physician in monitoring for negative interaction and unwanted side effects with other prescription medications, supplements and over the counter products, many of which previously required a prescription. This program is not only very popular with enrollees but has resulted in improved patient outcomes.

The DUR Program is free and completely confidential. Employees, spouses, and dependent children enrolled in the Lucas County employee prescription drug plan are eligible to participate. The program duration is twelve months from March 1st of each year. Enrollees who complete the program are welcome to re-enroll in order to continue to enjoy the incentives to participate.

No pharmacists can alter or override a prescription. Only your physician can change your medication. This process is not intended as a substitution for the professional judgment of the prescribing physician or any other health care professional providing services to you.

Some county elected officials have agreed to allow up to an hour of work release time for the initial Drug Use Review session. If you use work release time for the initial session, you must show documentation of attendance from the participating pharmacy. Please check with your elected official for their participation regarding work release time.

Questions about the program may be directed to the participating pharmacies listed, or the Employee Benefits staff at (419) 213-4211.



Helpful Tips to Reduce your Prescription Drug Costs:

1. Ask your physician for samples;
2. Enroll now in the Drug Use Review Program.

List of Participating DUR Pharmacies:

Anson Pharmacy Monday-Friday 8:30am-6:30pm Saturday 9:00am-2:00pm	25684 Dixie Hwy Perrysburg, OH 43551	419.874.8878
Erie Drug Monday-Friday 9:00am-7:00pm Saturday 9:00am-2:00pm; Sunday 10:00am-2:00pm	4502 Lewis Ave Toledo, OH 43612	419.476.4322
Holland Discount Pharmacy Monday-Friday 9:00am-7:00pm Saturday 9:00am-4:00pm; Sunday 10:00-4:00pm	909 S. McCord Rd., Suite 1 Holland, OH 43528	419.865.7777
Kahler Pharmacy Monday-Friday 9:00am-6:00pm Saturday & Sunday 9:00am-1:00pm	1941 Airport Highway Toledo, OH 43614	419.382.2911
Maumee Discount Pharmacy Monday-Friday 9:00am-7:00pm Saturday 9:00am-2:00pm	1398 Conant St., Suite 3 Maumee, OH 43537	419.887.0101
Mercy Family Care Center Monday-Friday 9:30am-5:00pm Saturday 10:00am-4:00pm	2213 Franklin Ave. Toledo, OH 43614	419.251.4522
Mercy St. Anne Monday-Friday 9:00am-5:00pm Saturday 10:00am-4:00pm	3404 W. Sylvania Ave. Toledo, OH 43623	419.251.4522
Mercy St. Charles Monday-Friday 9:00am-5:30pm Saturday 10:00am-2:00pm	2600 Navarre Ave. Oregon, OH 43616	419.251.4522
Mercy St. Vincent Monday-Friday 8:00am-8:00pm Saturday & Sunday 9:30am-6:00pm	2213 Cherry St. Toledo, OH 43608	419.251.4522
Monroe Pharmacy Monday-Saturday 9:00am-8:00pm Sunday & Holidays 9:00am-5:00pm	4122 Monroe St. Toledo, OH 43606	419.473.1531 Contact: Richard Grubb
Promedica (Meetings only)	2100 W. Central Ave. Toledo, OH 43606	419.291.6767 to schedule a meeting time
Ryan Pharmacy Monday-Friday 9:00am-6:00pm Saturday 9:00am-1:00pm	3340 Dorr St. Toledo, OH 43607	419.531.2836
Toledo Family Pharmacy Monday-Friday 9:30am-7:00pm Saturday 10:00am-3:00pm	324 Main St Toledo, OH 43605	419.930.5830
Toledo Hospital Pharmacy Monday-Friday 8:00am-5:30pm Saturday & Sunday 11:00am-3:00pm	2142 N. Cove Blvd. Toledo, OH 43606	419.291.5418
Westgate Family Pharmacy Monday-Friday 9:45am-7:00pm Saturday 9:45am-3:00pm	3147 W. Central Ave. Toledo, OH 43606	419.531.0000
Lifecare Pharmacy Monday-Friday 9:00am-7:00pm Saturday 10:00am-4:00pm	6730 N. Summit St. Toledo, OH 43611	419.720.0055
Junction HealthMart Pharmacy Monday-Friday 9:00am-6:00pm Saturday 9:00am-2:00pm	1339 Dorr St. Toledo, OH 43607	419.216.2910

2019 Flexible Benefits

Section 125 Cafeteria Plans

- Medical Reimbursement – Pre-tax dollars to pay medical, dental, vision and prescription expenses. Debit cards are available for claim payment of eligible expenses.
- ***NEW*** Annual maximum will increase from \$2,650 to \$2,700 and plan includes up to a \$500 annual carryover.
- Dependent Care – Pre-tax dollars to pay qualified dependent care expenses. Eligible expenses include daycare cost, before / after school programs for dependents under age 13 and pre-school fees. Debit card for claim payment.

You may access your account online at www.tasconline.com or call 1-800-422-4661.

Frequently Asked Questions

Q. Will I receive a new card this year?

A. No, you will only receive a card if you are a first time participant.

Q. What is the run-out period to submit claims from the prior plan year?

A. *NEW* The run-out period for the plan year 3/1/18 – 2/28/19 will be **45** days or April 14, 2019. The run-out period for the plan year 3/1/19 – 2/29/2020 will be **45** days or April 14, 2020.

Q. When can I access my carry-over funds?

A. The funds will automatically move over on April 14, 2019. If you do not have any more claims on the prior plan year then you can move your funds sooner. Log into your MyTasc account, select prior Plan Year and click *Carryover Funds Now*. You may also call 1-800-422-4661.

Q. I have questions about my account. Who do I call?

A. Reaching out to TASC is easy. You can either log in via My Service Center at www.tasconline.com or you may call toll free at 800-422-4661.

- When interacting with TASC, it is very important that you reference your 12 digit TASC ID. It comes in a form of 1234-5678-9012 and is found on letters and emails you received from TASC.
- Your TASC ID is the number printed below your name on the front of the card. It is NOT the card number.

Q. My card is being declined at a retail location. What do I do now?

A. Your TASC card is designed to work at specific locations depending upon the type of transaction that is being requested. TASC must ensure that all transactions are acceptable to the IRS. So from time to time, some retail locations may not have the technology required to process the transaction or they are having system issues that prevent the transaction from being processed properly and therefore you may receive a decline. Here is what you do:

1. Ensure that you have funds remaining in your account by calling the number on the back of the card, checking your balance on line, or by checking on the mobile app.
2. If you have funds available, check to ensure that the transaction is a valid transaction per the IRS publication 502. Some transactions require additional information to process and therefore may not work with the card or may require that you provide that information after the fact. For example, over the counter medication may require a prescription. Vitamins and supplements require a Letter of Medical Necessity from your physician.
3. If there are enough funds and the expense is valid, please reach out to TASC as described in the previous question. Be sure to explain to the TASC Customer Service Representative the approximate date and time of the transaction.

2019 Voluntary Benefit Offering

NEW Colonial Short-Term Disability

- Guaranteed Issue up to 60% of income to \$4,000 per month maximum
- Ability to increase benefit annually
- Waiver of preexisting condition for current short-term disability participants
- Lower premium than prior carrier for same coverage

NEW Colonial Whole Life

- Permanent life policy that is portable, builds cash value and pay up options at age 65 or 95
- **2019 UNDERWRITING OFFER**
- Guaranteed issue for employee: Lesser of \$44 per pay up to a maximum of \$100,000 face amount
- Long Term Care rider for all employees with guarantee issue, no health questions
- Spouse: Simplified issue \$12 per pay up to a maximum of \$25,000 face amount with two health questions required

Allstate Hospital – Admission and daily confinement benefit

- Hi/Lo plan offered to best meet your individual needs
- Guaranteed issue with waiver of pre-existing condition on all employees

Trustmark Critical Health Events

- Lump sum benefits paid directly to insured for diagnosis of vascular disease, coronary artery disease and cancer
- Coverage amounts are available in amounts of \$10,000, \$20,000 and \$30,000
- **2019 UNDERWRITING OFFER FOR NON-PARTICIPANTS**
- \$10,000 Employee Coverage
- Pre-existing condition clause is applicable on all new policies in 2019
- Benefit amounts are reset each year on January 1st – regardless if benefits have been used
- Healthy Living Rider: \$50 includes biometrics/genetic tests

NOTE: New policies are modified guaranteed issue for those employees (and dependents) who previously applied for coverage which has been not taken, declined, cancelled, withdrawn, lapsed or surrendered and those with current Trustmark coverage.

NOTE: Non-participant underwriting offer is for employees who did not elect coverage in 2018.

Trustmark Accident

- On/Off job coverage
- \$100 wellness benefit
- Includes benefits for dislocations, fractures, stitches, hospital/ICU stay

One America Voluntary Term Life – Coverage options for employee, spouse, and children.

One America Long Term Disability - 60% of your monthly income with 2-year benefit duration.

Financial Lock Identity Theft Protection

- \$1,000,000 ID Theft Insurance
- 24/7 USA Based Fraud Resolution Team
- SSN & High-Risk Activity Monitoring

Strategic Enrollment Services – 419-930-5977 – Lucascountyservice@strategicenroll.com

LUCAS COUNTY 2019 ONLINE BENEFIT ENROLLMENT

INSTRUCTIONS HOW TO ENROLL ONLINE

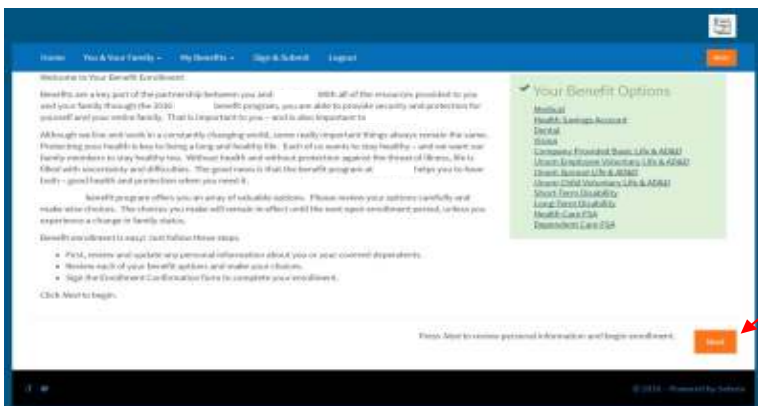
Your Lucas County medical, prescription drug, dental, life, flexible spending and voluntary benefits enrollment will continue to be completed on-line in one system. During the month of January 2019, certified benefit counselors will be available to all Lucas County employees who wish to receive information on the flex/voluntary programs and to provide assistance with the on-line benefit enrollment process. Employees who do not wish to meet with a benefits counselor, may follow the self-enrollment steps below to complete their enrollment documents. Access to the enrollment site will begin January 2, 2019.

Step 1 - Connect to the Website through your web browser at <https://trustmark.benselect.com/Enroll> You may use your desktop computer or any mobile device to complete your enrollment.

Step 2 - At the “Employee Login” screen, enter your **Employee ID** and your personal identification number (PIN). Your PIN is a combination of the last 4 digits of your Social Security Number and the 2-digit year of your birth. *For example, if the last 4 digits of your SSN are 3214 and you were born on September 21, 1968, your Pin would be “321468”.* If you are having trouble logging on the system, contact the Employee Benefits Department at 419-213-4211.



Step 3 - When the Welcome Page appears on your screen that means you are in! Follow the onscreen instructions to enroll in your benefits, find answers to your questions, download forms and more. Click Next to move to the next page.



LUCAS COUNTY 2019 ONLINE BENEFIT ENROLLMENT

INSTRUCTIONS HOW TO ENROLL ONLINE

Click You and Your Family to verify and update personal information on yourself, your dependents or beneficiaries

You can move from plan to plan by clicking next or clicking review.

The forms icon will bring you to the forms library where all of your benefit plan documents are kept.

Below is a list of your current benefit elections. Click "Review" for benefit information and to select or decline coverage.

Benefit	Cost
<input type="checkbox"/> Medical	\$0.00
<input checked="" type="checkbox"/> Health Savings Account	\$0.00
<input type="checkbox"/> Dental	\$0.00
<input type="checkbox"/> Vision	\$0.00
<input checked="" type="checkbox"/> Company Provided Basic Life & AD&D	\$0.00
<input type="checkbox"/> Union Employee Voluntary Life & AD&D	\$0.00
<input checked="" type="checkbox"/> Union Spouse Life & AD&D	\$0.00
<input checked="" type="checkbox"/> Union Child Voluntary Life & AD&D	\$0.00
<input type="checkbox"/> Short-Term Disability	\$0.00
<input type="checkbox"/> Long-Term Disability	\$0.00
<input type="checkbox"/> Health Care FSA	\$0.00
<input type="checkbox"/> Dependent Care FSA	\$0.00

Pre-tax cost: \$0.00
Post-tax cost: \$0.00
Total Cost: \$0.00
Per Pay Period

When you have finished making your selections, **make sure to click sign and submit** to review & sign your enrollment form.

To sign and submit your enrollment form you will need to enter your PIN and click sign form.

Please enter your PIN below and click on "SIGN FORM" to complete your enrollment and submit your elections. By entering your PIN, you are electronically signing the Benefit Verification/Deduction Confirmation Form above. Please review it carefully before entering your PIN.

PIN:

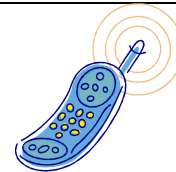
Make sure to log back into the enrollment site to verify you submitted your enrollment form and print the confirmation of benefits.

SUMMARIES OF BENEFITS AND COVERAGE ARE AVAILABLE ON-LINE

Choosing a medical plan is an important decision, and Lucas County offers a range of plans and coverage options. Each of the medical plans are available online in a Summary of Benefits and Coverage (SBC), which provides important information about that plan’s coverage in a standard format so that you can easily compare plans. You may access the SBCs and all Lucas County benefit/wellness information at www.co.lucas.oh.us/index.aspx?nid=236.

Complete health, prescription drug and dental plan documents and Wellness Plan information is also available on-line on the Employee Benefits/Wellness website at <http://www.co.lucas.oh.us/index.aspx?nid=235>.

IT IS YOUR RESPONSIBILITY TO COMPLY WITH ALL RULES, REGULATIONS AND TIMELY NOTIFICATIONS OF THE VARIOUS PLANS AVAILABLE TO YOU AS A LUCAS COUNTY EMPLOYEE AND/OR FAMILY MEMBER.



Helpful Contact Information

NFP Benefit Alliance (for claims information regarding the FrontPath, Traditional Dental and Corner Dental Plans)	419-244-0135
FrontPath – Network Questions	419-891-5206
Paramount – All Questions	419-887-2525
Navitus Health Care – All Prescription Drug Questions	866-333-2757
The Standard Dental Plan – All Questions	800-547-9515

Any other benefit related questions should be directed to the Lucas County Employee Benefits Department:

Lucy Dixon	419-213-4211
Colleen Abbott	419-213-4189
Judy Nichpor	419-213-4031
Diane Ducey	419-213-4531



COMPLETE YOUR HEALTH RISK ASSESSMENT TODAY

Every employee must complete a HEALTH RISK ASSESSMENT no later than February 28, 2019 in order to avoid a \$100 deductible being added to your 2019 health benefit plan.

TOP 3 REASONS TO COMPLETE YOUR HRA NOW:

1. Invest in your health. Learning your health status and risks allows you to take control of your health so you can live a longer, healthier life.
2. Access to a CONFIDENTIAL personal nurse coach to answer your health questions and assist you in establishing and obtaining your health goals.
3. SAVINGS! Completing the Health Risk Assessment means you won't have a \$100 HRA deductible in 2019.

You may access your HRA through the following sites:

Paramount Enrollees: www.paramounthealthcare.com/myaccount

FrontPath Enrollees: www.assethealth.com/lucascounty (New portal for Lucas County).

Additional information regarding the Health Risk Assessment by plan is available by calling one of the numbers listed below:

Paramount Enrollees: Questions– please call 800-462-3589, press Option 1, then Option 6.

FrontPath Enrollees: Questions– please call 855-444-1255 between 8:00 AM-8:00 PM, M-F, or e-mail www.support@assethealth.com

(Spouses and dependents are encouraged, but not required to complete a Health Risk Assessment).

HRA'S must be completed no later than February 28, 2019 to avoid a \$100 deductible in 2019.

Assistance completing your HRA may be also be obtained by contacting a Lucas County Health Coach at (419) 213-2088 or 213-2089.



KNOW WHERE TO GO

Convenient, Quality Care For The Right Cost

promedica.org/knowwheretogo



<p>PRIMARY CARE</p> <p>PROMEDICA PHYSICIANS</p> <p>1 \$</p> <p>Routine and non-emergency services such as:</p> <ul style="list-style-type: none"> Chronic illness (diabetes, heart disease management) Physicals, annual exams, immunizations Asthma and allergy management Pain management (back pain) Prescription and drug management <p>Available by appointment. 800-PPG-DOCS promedica.org/doctors</p>	<p>ONLINE DOCTOR VISITS</p> <p>PROMEDICA ONDEMAND</p> <p>2 \$</p> <p>Treats common, low-level conditions through our mobile app or website, 24/7.</p> <ul style="list-style-type: none"> Affordable, fast and convenient care Your choice of U.S. board-certified providers Care for children Prescriptions to your pharmacy if needed 24/7/365 access Private and secure technology <p>To learn more, sign up, or download the mobile app visit: promedica.org/ondemand.</p>	<p>FOR A MINOR EMERGENCY</p> <p>PROMEDICA URGENT CARE</p> <p>3 \$\$</p> <p>Urgent Care services for minor emergencies such as:</p> <ul style="list-style-type: none"> Sprains or broken bones Minor cuts and burns Fever that spikes Respiratory symptoms Urination changes Migraines Work injury <p>10 a.m. - 10 p.m., 365 days a year For locations and additional information visit: promedica.org/urgentcare.</p>	<p>ABSOLUTE EMERGENCIES ONLY</p> <p>PROMEDICA EMERGENCY CENTERS</p> <p>4 \$\$\$\$</p> <p>Advanced emergency services and hospital services such as:</p> <ul style="list-style-type: none"> Chest pain Numbness in the face, arm, or leg (stroke symptoms) Head injuries Pregnancy complications Uncontrollable bleeding <p>24 hours a day, 7 days a week, 365 days a year. For locations and additional information visit: promedica.org/EITlocations.</p>
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ON AVERAGE AN ER VISIT COSTS APPROXIMATELY **\$1,000***

OF THE 136 MILLION EMERGENCY ROOM VISITS ANNUALLY, **MORE THAN 65% ARE NOT EMERGENCIES.****



WRONG REASONS TO GO TO THE ER

- Minor Cuts
- Sprains
- Minor Headaches
- Sun Burns or Minor Burns
- Rash or Poison Ivy
- Fevers
- Ear Aches

*Promerx Claims paid through 10/1/19
**Cover Health Analytics 4/25/19

This guide is intended for informational purposes only and should not be used in place of a consultation with a healthcare professional. The guide is an example of services provided at the listed types of care locations, but does not represent the exclusive list of conditions that may be treated there. The subscriber's need of medical care is specific to his or her judgment in selecting the appropriate Promedica service or facility, and the selection may be inconsistent with the location of the individual at the time of the need for services as well as the severity of the condition. Promedica is not responsible for any, omission or inaccuracies with respect to the information herein and is not liable in any way for interpretations of this information by the reader or any consequences thereof.



You can now **see a provider 24/7**

Live video visits from your phone, tablet or computer.
Prescriptions are sent to your pharmacy if necessary.



Be seen in minutes for common illnesses such as:

- Allergies
- Cold and flu symptoms
- Diarrhea
- Ear infection
- Fever
- Pinkeye
- Rash
- Respiratory infection
- Sinus infection
- Sore throat
- Stomach issues

NEW! Enhanced benefit effective 3/1/19:
\$10 co-pay waived for Lucas County members.

Download the ProMedica OnDemand app
or visit promedica.org/OnDemand today!



Affiliate of ProMedica

Paramount Urgent Care Centers

<p>Greater Toledo Urgent Care Provider ID:07266 928 N Dixie Hwy. Ste. 2 Rossford, OH 43460 419-517-0146</p>	<p>ProMedica Urgent Care - Oregon Provider ID:12106 3316 Navarre Ave. Ste. F Oregon, OH 43616 419-291-1420</p>	<p>ProMedica Urgent Care - Secor Road Provider ID: 12972 3430 Secor Road Ste. 425 Toledo, OH 43606 567-585-0225</p>	<p>Urgent Care of Wauseon LLC Provider ID:05876 190 N Shoop Avenue Wauseon, OH 43567 419-335-4600</p>
<p>Greater Toledo Urgent Care Provider ID: 07266 3626 S. Detroit Avenue Toledo, OH 43614 419-517-0146</p>	<p>Greater Toledo Urgent Care Provider ID:07266 2627 Tremainsville Road Toledo, OH 43613 419-214-0790</p>	<p>Greater Toledo Urgent Care Provider ID:07266 505 N. Reynolds Road Toledo, OH 43615 419-517-0146</p>	<p>Fastrack Urgent Care Provider ID:05508 135 W Perry Street Port Clinton, OH 43452 419-732-7800</p>
<p>ProMedica Urgent Care - Sylvania Provider ID:1730544511 5700 Monroe St., Ste 111 Sylvania, OH 43560 578-585-0005</p>	<p>Aspen Urgent Care Center LTD Provider ID:04855 7581 Secor Road Lambertville, MI 48144 734-854-1800</p>	<p>ProMedica Urgent Care - Maumee Provider ID: 1285168450 217 Golden Gate Plaza Maumee, OH 43537 567-585-0210</p>	<p>Physicians Plus Provider ID:06804 3949 N Main Street Findlay, OH 45840 419-423-3888</p>
<p>Northwest Ohio Urgent Care Inc. Provider ID:06850 1015 Conant Street Maumee, OH 43537 419-891-0525</p>	<p>Greater Toledo Urgent Care Provider ID:07266 4405 N. Holland Sylvania Rd. Ste. 101 Toledo, OH 43623 419-517-0146</p>	<p>ProMedica Urgent Care - Holland Provider ID: 12341 6711 Airport Highway Holland, OH 43528 567-585-0071</p>	<p>Firelands Physician Group Urgent Care Provider ID: 09185 2500 W. Strub Road, Ste. 120 Sandusky, OH 44870 419-557-6490</p>
<p>ProMedica Urgent Care - Toledo Provider ID:1043673700 6755 W Central Avenue Toledo, OH 43617 567-585-7105</p>	<p>ProMedica Urgent Care - Perrysburg Provider ID:12218 25950 N Dixie Highway Perrysburg, OH 43551 567-585-0010</p>	<p>Greater Toledo Urgent Care Provider ID: 07266 7224 Dutch Road Ste.100 Waterville, OH 43566 419-517-0146</p>	<p>Firelands Physician Group Urgent Care Provider ID: 09185 1470 McPherson Highway Clyde, OH 43410 419-557-6490</p>
<p>Michigan Urgent Care Provider ID:04965 100 Powell Drive, Ste. 8 Dundee, MI 48131 734-823-5900</p>	<p>Monroe Urgent Care Inc. Provider ID:05347 337 Stewart Road Monroe, MI 48162 734-243-3200</p>	<p>Adrian Urgent Care Provider ID:1003204769 715 N Main Street Adrian, MI 49221 517-577-6150</p>	<p>Ya Tro Urgent Care Provider ID:1730620626 21090 Allen Road, Ste. B Woodhaven, MI 48183 734-692-1900</p>

FrontPath Urgent Care Centers

Urgent Care Name	County	Address	City	State	Zip
East Side Urgent Care Center	Allen	967 Bellefontaine Avenue	Lima	OH	45804
WestSide-Luke Urgent Care	Allen	2195 Allentown Road	Lima	OH	45805
Mercy Defiance Clinic Urgent Care Center	Defiance	1400 E. Second Street	Defiance	OH	43512
Express Care at ProMedica Defiance Regional Medical Center	Defiance	1200 Ralston Avenue	Defiance	OH	43512
Firelands Physician Group Urgent Care Center	Erie	2500 W. Strub Road, Suite 210	Sandusky	OH	44870
Firelands Physician Group Urgent Care Center	Erie	1605 State Route 60	Vermilion	OH	44089
NOMS NOW Urgent Care	Erie	2500 W. Strub Road, Suite 120	Sandusky	OH	44870
The Little Clinic of Ohio, LLC	Erie	226 E. Perkins Avenue	Sandusky	OH	44870
Urgent Care of Wauseon, LLC	Fulton	1190 N. Shoop Avenue	Wauseon	OH	43567
NWO Health Partners LLC	Hancock	15054 State Route 224 E	Findlay	OH	45840
Physician's Plus Urgent Care	Hancock	3949 N. Main Street 1050 Isaac Streets Drive, Suite	Findlay	OH	45840
Oregon Urgent Care	Lucas	143	Oregon	OH	43616
The Toledo Clinic Urgent Care at Holland	Lucas	6819 Springvalley Drive	Holland	OH	43528
ProMedica Urgent Care	Lucas	6755 W. Central Avenue	Toledo	OH	43617
ProMedica Urgent Care Health & Wellness	Lucas	5700 Monroe Street	Sylvania	OH	43560
ProMedica Urgent Care	Lucas	3316 Navarre Avenue, Suite F	Oregon	OH	43616
Bay Park Urgent Care Center	Lucas	2801 Bay Park Drive	Oregon	OH	43616
The Toledo Hospital Urgent Care	Lucas	2142 N. Cove Boulevard	Toledo	OH	43606
The Little Clinic of Ohio, LLC	Lucas	8730 Waterville-Swanton Road	Waterville	OH	43566
The Little Clinic of Ohio, LLC	Lucas	7059 Orchard Centre	Holland	OH	43528
The Little Clinic of Ohio, LLC	Lucas	4925 Jackman Road	Toledo	OH	43613
Maumee Walk-in Family Medicine	Lucas	111 Clinton Street	Maumee	OH	43537
FASTrack Urgent Care	Ottawa	135 W. Perry Street	Port Clinton	OH	43452
Firelands Physician Group Urgent Care Center	Sandusky	1470 W. McPherson Highway	Clyde	OH	43410
Walk-in Urgent Care	Sandusky	2180 Sean Drive, Suite 6B	Fremont	OH	43420
Walk-in Urgent Care	Seneca	2562 W. Market Street	Tiffin	OH	44883
Van Wert North Walk In Clinic	Van Wert	214 Towne Center Boulevard	Van Wert	OH	45891
ProMedica Urgent Care - Perrysburg	Wood	25950 N. Dixie Highway	Perrysburg	OH	43551
Walk-in Urgent Care	Wood	10677 Fremont Pike, Unit C	Perrysburg	OH	43551
Walk-in Urgent Care	Wood	1107 S. Main Street	Bowling Green	OH	43402
Great Lakes Urgent Care	Wood	25660 Dixie Highway	Perrysburg	OH	43551
The Little Clinic of Ohio, LLC	Wood	1094 N. Main Street	Bowling Green	OH	43402
The Little Clinic of Ohio, LLC	Wood	27386 Carronade Drive	Perrysburg	OH	43551
ProMedica After Hours	Wood	1601 Brigham Drive, Suite 150	Perrysburg	OH	43551

NOTE: For additional providers please contact FrontPath Health Coalition at 419-891-5206 opt. 5 , or toll free at 888-232-5800 or visit our website at www.frontpathcoalition.com

What Can Health Coaches Do For You?



The Lucas County Wellness Program provides health coaches to assist employees identify personal health goals and develop a plan to achieve those goals. A health coach is not a personal trainer, but will meet with you to conduct a personal, **CONFIDENTIAL** health assessment and provide you with on-going motivation and support. Health coaches are provided to you at no cost. Call your Lucas County health coaches today to schedule an appointment!

Health Services

- Personalized Health Assessments
- Bi-weekly emails with healthy lifestyle suggestions (Staying Healthy on a Budget)
- Monthly wellness newsletter (Wise & Well)
- Reimbursement program for approved gym memberships, fitness classes, Weight Watchers, medical weight loss, smoking cessation and cardiac rehab
- Free on-site exercise classes
- Free cholesterol, blood glucose & blood pressure screenings
- Free on-going phone support
- Annual walking program, fitness expo, health fair and The Great American Smoke Out
- Health Risk Assessment guidance for employees
- Lucas County Drug Use Review Program
- And much more!

Who is Eligible To Participate?

All employees, spouses and dependent children ages 13 and older who are eligible or enrolled in the Lucas County health benefits may participate in this **FREE** program.

Contact a Health Coach by:

Phone: 419-213-2088

Email: hcoach@co.lucas.oh.us

Like our Facebook page: Lucas County Wellness Program



Open Enrollment January 2019



Question & Answer Sessions

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1 Deadline to enroll online is FEBRUARY 1, 2019. NO LATE ENROLLMENTS WILL BE ACCEPTED.	2	3	4	5
6	7 Conference & Learning Center 711 Adams St. 10:00 am - 2:00 pm	8 Job & Family Services 3210 Monroe St. Toledo Room 10:00 am - 2:00 pm	9	10 Sheriff 1622 Spiezhauch 1:00 pm - 4:00 pm	11	12
13	14	15 BDD 1155 Larc Lane Family First Zone 10:00 am - 2:00 pm	16 EMS Training Center 2127 Jefferson 4:00 pm - 6:00 pm	17 Sanitary Engineer 1111 S. McCord 2:00 pm - 4:00 pm	18	19
20	21 MARTIN LUTHER KING DAY	22	23 One Government Center 1st Floor Conf. Room 10:00 am - 2:00 pm	24	25	26
27	28	29	30	3 All changes made during this open enrollment period will be effective March 1, 2019		

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

The Lucas County Health Plan (LCHP) may use or disclose your protected health information without your authorization for the following purposes:

Treatment – Your health information may be used by staff members or disclosed to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions, and providing treatment. For example, results of your vitals and medical history taken at the time of your transport, may be provided to the hospital upon your arrival at the emergency room.

Payment – Your health information may be used to seek payment from your health plan or from other sources of coverage such as an automobile insurer. For example, your health plan may request and receive information on dates of service, the services provided, and the medical condition being treated.

Health Care Operations – Your health information may be used as necessary to support the day-to-day activities and management of the LCHP. For example, information on the services you received may be used to support budgeting and financial reporting, and activities to evaluate and promote quality.

Law Enforcement – Your health information may be disclosed to public health agencies to support government audits and inspections, to facilitate law enforcement investigations, to comply with

government investigations, and to comply with government mandated reporting.

Public Health Reporting – Your health information may be disclosed to public health agencies as required by law. For example, we are required to report certain communicable diseases to the state's public health department.

Other uses and disclosures other than those listed above require your authorization.

Individual Rights – You have certain rights as a patient under HIPAA regulations, these include:

- The right to request restrictions on the use and disclosure of your protected health information
- The right to receive confidential communications concerning your medical treatment
- The right to inspect and copy your protected health information*
- The right to receive a printed copy of this notice
- The right to receive an accounting of how and to whom your protected health information had been disclosed
- The right to amend protected health information

*You may generally inspect or copy the protected health information that we maintain. As permitted by federal regulation, we require that requests to inspect or copy protected health information be submitted in writing. You may obtain a form to request access to your records by contacting the HIPAA Privacy Officer. Your request will be reviewed and will generally be approved unless there are legal or medical reasons to deny the request.

Our Duties – We are required by law to maintain the privacy of your health information and to provide you with this notice of privacy practices. We are also required to abide by the privacy policies and practices that are outlined in this notice and inform you of any breach of unsecured information.

Right to Revise Policy Practices – As permitted by law, we reserve the right to amend or modify our privacy policies and practices. Upon request, we will provide you with the most recently revised notice. The revised policies and practices will be applied to all protected health information we maintain.

Complaints – If you would like to submit a comment or complaint about our privacy practices, or if you feel your rights have been violated, please address your concerns to: HIPAA Privacy Officer, One Government Center, Suite 800, Toledo, Ohio 43604. You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20203, calling 1-877-696-8775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/. LCHP will not retaliate against anyone who submits a complaint or reports a suspected violation.

This notice is effective on or after May 12, 2015.

LCHP is committed to safeguarding the privacy of your personal information. We limit the use of customer information to what is necessary to service customer accounts and conduct the business of Lucas County. LCHP does not disclose, share, sell, transfer, or rent your sensitive personal and financial information to nonaffiliated third parties, except and only to the extent we are required to furnish such information in response to a subpoena, court order, levy, attachment, or other legal process.