

CITY OF LAREDO HEALTH & BENEFITS DIVISION 2024 BENEFIT ENROLLMENT PREPARATION

**BE INFORMED.
STAY CONNECTED.
ENROLL FOR COVERAGE.**

Explanation of Medical Plan Options



Contents

- Medical Plan Options
- ZERO co-pay for Primary Care Physician Visits
- ZERO co-pay for **Preventive** Eye Exam
- Dependent Eligibility Audits
- Medical Plan Summary (Deductibles, Co-pays)
- CDHP Participants - HSA Employer Incentive
- Prescription Drug Coverage/Express Scripts
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- ZERO co-pay Nuestra Salud Family Urgent Care Clinic
- Importance of Local In-Network Care
(Emergency Room & Urgent Care)
- Dental & Vision Coverage / mobile apps
- Benefit Carriers Contact Information
- Beneficiary Designation
- Benefit Enrollment Period



Health & Benefits Division Mission Statement

Our mission is to provide comprehensive benefits & services to eligible employees, retirees, and their dependents through the City's partially self-funded health benefit program while maintaining cost effective controls through managed care programs.

The City of Laredo has carefully selected health plans as one of the benefits to your employment. These plans are offered to all regular full-time employees with benefits. The benefits provided are intended to assist you with many of your health care services, supplies and/or expenses.



City Hall Annex, 2nd floor
1102 Bob Bullock
(956) 727-6460

LAUREL 

INSURANCE AGENCY & ASSOCIATES, INC.

4519 San Bernardo
(956) 724-9083



Have You Recently Moved or Changed Your Phone Number?

IT MAY BE TIME TO UPDATE YOUR EMPLOYEE PROFILE



UPDATE YOUR PROFILE TODAY:

- Print out a "Demographic Form" from the Public Folder or contact your department's payroll assistant for a form
- Fill out the areas that need to be updated
- Submit the completed signed form to Human Resources located at:

▶ City Hall, 1st floor, Recruitment & HRIS Division



DON'T RISK MISSING IMPORTANT UPDATES ABOUT YOUR BENEFITS



 HRIS (956)791-7483

Lets stay connected!

 HR Benefits (956)727-6460

Dependent Eligibility

Who is eligible to be on my health plan?

- SPOUSE
- CHILD(REN)/STEP CHILDREN, UP TO AGE 26

REQUIRED DOCUMENTS NEED TO BE SUBMITTED TO THE BENEFITS DIVISION BEFORE THE BENEFIT EFFECTIVE DATE. **THIS INCLUDES ONE OR MORE OF THE FOLLOWING:**



Marriage or
Common Law
Certificate



Valid Social
Security
Number



Birth
Certificate



Court,
Guardianship,
Adoption Orders



Medical Support
Order

IF DOCUMENTS ARE NOT RECEIVED BY THE END OF THE ENROLLMENT PERIOD, BENEFITS FOR SAID DEPENDENT(S) WILL BE CANCELLED.

DOCUMENTS CAN BE EMAILED TO HRINSBENEFITS@CI.LAREDO.TX.US OR IN PERSON AT CITY HALL ANNEX: 1102 BOB BULLOCK LOOP, 2ND FLOOR



BlueCross BlueShield
of Texas

Medical Plan Options FY 2024/2025

THE CITY OF LAREDO OFFERS 3 MEDICAL PLAN OPTIONS:

- Traditional PPO
- Blue Essentials HMO
- Consumer Driven Health Plan (CDHP)

WHAT IS OFFERED ON ALL 3 PLANS?

- Same Provider Network - Blue Cross Blue Shield of Texas
- In-Network Preventive Care Screening covered at 100%
- Prescription Drug Coverage
- Free 24/7 Nurseline **1-800-581-0368**



Traditional PPO Medical Plan*



BlueCross BlueShield
of Texas

FY 24/25* Bi-Weekly Payroll Deduction

Deductible - \$1,000 (\$2,000 Family)

Out of Pocket Max - \$8,150 (\$16,300 Family)

Nationwide Network Coverage

OUT-OF-NETWORK coverage is permitted, but at a higher deductible rate

Zero copay for *Primary Care Physician Visit

Prescribed medication is covered with a copay

Specialist Coverage available without a referral, however some specialists may require a referral

Primary Care Physician is Not Required, but is highly recommended

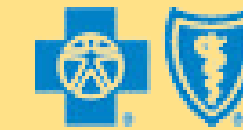
Virtual visits by MDLIVE are included

Receive one (1) Preventive Medical Eye exam with zero (0) copay per plan year

	Civilian Employees
	Traditional Core PPO
Employee Only	\$40.00
Spouse additional	\$169.53*
Child(ren) additional	\$113.01*
Family additional	\$334.04*
	FireFighter & Police Officers
	Traditional PPO Core
FF/PO Only	\$40.00
FF/PO Spouse additional	\$159.84*
FF/PO Child(ren) additional	\$106.56*
FF/PO Family additional	\$314.96*



Blue Essential HMO - Texas Only



BlueCross BlueShield
of Texas

FY 24/25* Bi-Weekly Payroll Deduction

Deductible - \$1,200 (\$2,400 Family)

Out of Pocket Max - \$8,150 (\$16,300 Family)

Statewide Network Coverage - Texas Only

OUT-OF-NETWORK coverage is not available

Zero copay for *Primary Care Physician Visit

Prescribed medication is covered with a copay

Referral from your primary care physician (PCP) is required for a Specialist visit

PCP is Required and must be selected during your enrollment. PCP may be replaced monthly

Receive one (1) Preventive Medical Eye exam with zero (0) copay per plan year

VIRTUAL VISITS BY MDLIVE ARE INCLUDED



	Civilian Employees
	Blue Essential HMO
Employee Only	\$30.00
Spouse additional	\$156.67*
Child(ren) additional	\$104.45*
Family additional	\$308.70*
	FireFighter & Police Officers
	Blue Essential HMO
FF/PO Only	\$30.00
FF/PO Spouse additional	\$151.23*
FF/PO Child(ren) additional	\$100.80*
FF/PO Family additional	\$297.99*



CDHP (Consumer Driven Health Plan)



BlueCross BlueShield of Texas

The Consumer Driven Health Plan is a High Deductible Medical Plan in which you have to meet your deductible and out-of-pocket expenses before the insurance starts paying 100% for all eligible expenses.

When you enroll in a High Deductible Plan, you could be eligible for a Health Savings Account through HSA Bank.

NOT ELIGIBLE TO ENROLL IN A CDHP IF:

- You're enrolled in Medicaid, Medicare (part A or B), or TRICARE
- You're claimed as a dependent on someone else's tax return
- You or your spouse are enrolled in a medical flexible spending arrangement (FSA), even if you are not covering your spouse on your health plan

FY 24/25* **Bi-Weekly Payroll Deduction**

	Civilian Employees
	CDHP
Employee Only	\$0.00
Spouse additional	\$140.84*
Child(ren) additional	\$93.90*
Family additional	\$277.52*
	FireFighter & Police Officers
	CDHP
FF/PO Only	\$0.00
FF/PO Spouse additional	\$140.84*
FF/PO Child(ren) additional	\$93.90*
FF/PO Family additional	\$277.52*

DEDUCTIBLE - \$3,200 (\$6,400 FAMILY)

OUT OF POCKET MAX - \$3,200 (\$6,400 FAMILY)

NATIONWIDE NETWORK COVERAGE

OUT-OF-NETWORK COVERAGE IS PERMITTED, BUT AT A HIGHER DEDUCTIBLE RATE

SPECIALIST COVERAGE AVAILABLE WITHOUT A REFERRAL, HOWEVER SOME SPECIALISTS MAY REQUIRE A REFERRAL

PCP IS NOT REQUIRED, BUT IS HIGHLY RECOMMENDED

VIRTUAL VISITS BY MDLIVE ARE INCLUDED

RECEIVE ONE (1) PREVENTIVE MEDICAL EYE EXAM WITH ZERO (0) COPAY PER PLAN YEAR



Health Savings Account

hsabank.
own your health™

*Subject to Mayor & City Council approval

FY 2024/2025

City of Laredo Employer Contribution Incentive: \$750.00* (currently \$600.00)

WITH AN HSA YOU CAN:

- Pay for IRS qualified healthcare expenses - deductibles, coinsurance or save for future medical expenses
- You own the HSA, your funds roll over year-to-year.
- You can contribute pre-tax dollars to your HSA Account directly from your payroll check

EXAMPLES OF ELIGIBLE EXPENSES INCLUDE:

- Acupuncture
- Ambulance
- Blood Pressure Monitoring Device
- Chiropractic Care
- Dental Treatment
- Prescription Drugs
- Eye Examination/Glasses
- Flu Shot/Immunizations
- Hearing Aids
- Hospital Services/X-rays
- Surgery
- Over the Counter Treatments: cold treatments, ointments, pain reliever, stomach remedies, bandages, wraps, thermometer, etc.

Complete list of eligible expenses available on The Benefits HUB Website & the City of Laredo web page, Human Resources

2024 CONTRIBUTION LIMITS

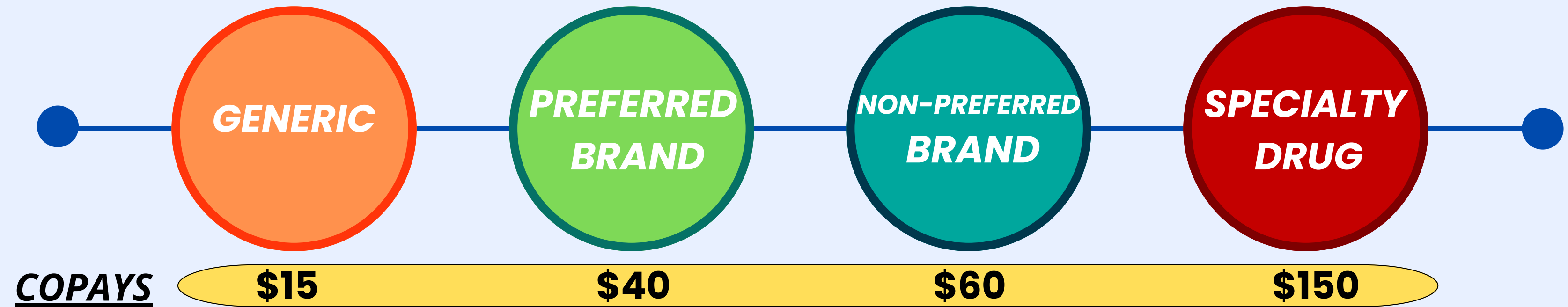
SELF	\$4,150	(INCLUDES THE EMPR. INC.)
FAMILY	\$8,300	(INCLUDES THE EMPR. INC.)



**Contact the
Health & Benefits Division
for more information at
(956)727-6460**

Prescription Drug Coverage FY 2024/2025

TRADITIONAL PPO & BLUE ESSENTIALS HMO MEDICAL PLANS



CONSUMER DRIVEN HEALTH PLAN (CDHP)

- ▶ Member pays 100% of their RX expenses until the \$3,200 deductible has been met
- ▶ Certain non *ACA RX are covered with a copay of \$15, \$40, \$60
- ▶ Certain preventive RX & supplies are also covered with a copay



Mail Order Pharmacy for Maintenance Medication by:



RECEIVE 90 DAYS OF YOUR MAINTENANCE MEDICATION FOR THE COST OF ONE (1) COPAY.



EXPRESS SCRIPTS®
HOME DELIVERY



Express Scripts Contact #:
1-833-715-0942



Register and create your profile at:
EXPRESS-SCRIPTS.COM/RX



Physician fax instructions #:
1-800-327-9791

- HIGH CHOLESTEROL
- ASTHMA
- ULCER DISEASE
- HIGH BLOOD PRESSURE
- BIRTH CONTROL
- DIABETES

accredo®

SPECIALTY MEDICATIONS



Accredo Contact #:
1-833-721-1619



Website: accredo.com

- CANCER
- BLOOD DISORDERS
- SICKLE CELL DISEASE
- CROHNS DISEASE
- METABOLIC DISORDERS
- HEPATITIS

Employee Health & Wellness Clinic

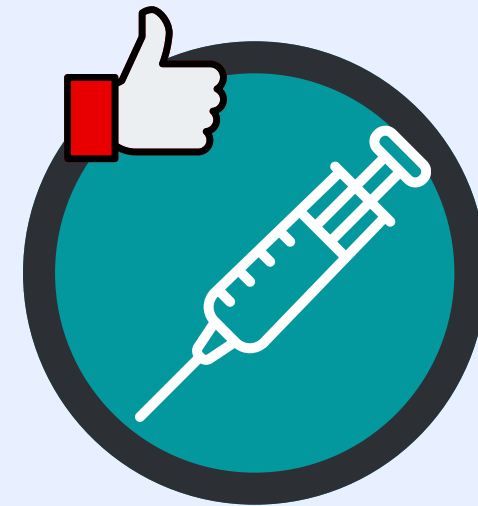
Free medical services for all regular full-time employees & their covered dependents (those covered under the City of Laredo medical plan)



**1102 Bob Bullock
(956)727-6470**



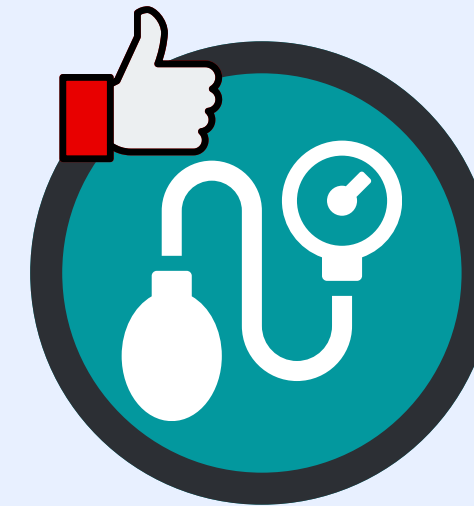
First Aid



Vaccines (call for availability)



***In Body/ Buena Vida**



10 Blood Pressure Health Stations



Covid 19 Test



OTC Medication



Physician Consultations w/ Prescription Services



DR. D CRUZ
WEDNESDAYS
8:00 AM - 12:00 PM
MELISSA GONZALEZ, FNP
MONDAY- FRIDAY
9:00 AM - 11:00 AM
2:00 PM - 4:00 PM

Contact Employee Health & Wellness for information on services provided.



NUESTRA SALUD FAMILY HEALTH CLINIC

802 E. Saunders Suite A

Ph: 956-568-5013



CITY OF LAREDO EMPLOYEES AND THEIR DEPENDENTS ARE ELIGIBLE TO RECEIVE **FREE AFTER-HOURS** HEALTH SERVICES.

(EMPLOYEE AND DEPENDENT MUST BE ENROLLED IN A CITY OF LAREDO MEDICAL PLAN)

In-Person Consultations

Monday- Friday
5:00pm - 9:00pm

Saturday - Sunday:
9:00am - 7:00pm

Virtual Consultations

Call for Appointment
(956) 568-5013

Monday- Friday
10:00am - 4:00pm

- Acute Care
- Flu Test
- Strep Test
- Urine analysis
- Vaccines & more



Local IN-NETWORK Urgent Care Clinics

WHEN TO USE AN URGENT CARE CLINIC

- ✔ Non emergency care when your doctor's office is closed
- ✔ Many have online or telephone check in before your arrival.
- ✔ Generally opened during the evenings, weekends & holidays
- ✔ You can get treated for:
 - sprains
 - strains
 - mild headache
 - cough/sore throat
 - fever
 - ear ache
 - rashes

- **Urgent Care on Delmar**
 - 2344 Laguna Delmar Ste 201
 - (956) 462-5029
- **Vitalmed Urgent Care North**
 - 5711 Mcpherson Rd Ste 103
 - (956) 602-8595
- **Vitalmed Urgent Care South**
 - 3120 La Pita Mangana Ste 100
 - (956) 568-1350
- **Doc Aid North**
 - 2438 Monarch Dr Ste A375
 - (956) 523-0966
- **Doc Aid Saunders**
 - 2310 E. Saunders Ste 2A
 - (956) 750-4898

Co-pay

Traditional PPO \$60
Blue Essentials HMO \$40



Local IN-NETWORK Emergency Rooms

Avoid The High Costs of a Free Standing ER

- Free Standing ER's are Out-Of-Network
- You will receive a bill for each doctor you see at an Out-Of-NetWork cost
- Free Standing ER's look like Urgent Care Clinics but costs are much higher for the same care
- Free Standing ER's are not affiliated with any local hospital

WHEN TO USE AN EMERGENCY ROOM

- ✔ Life-threatening or disabling conditions
- ✔ Sudden or unexplained loss of consciousness
- ✔ Severe shortness of breath, chest pain, numbness in face, arm or leg
- ✔ Coughing/ vomiting blood, broken bones, wounds that do not stop bleeding

- **Laredo Medical Center**
 - 1700 E. Saunders
 - (956) 796-5000
- **LMC-North Central ER**
 - 9811 Mcpherson Rd
 - (956) 796-3900
- **Doctors Hospital of Laredo**
 - 10700 Mcpherson Rd
 - (956) 523-2000
- **Doctors Hospital ER Saunders**
 - 1300 E. Saunders
 - (956) 815-4500

Co-pay: \$300 + co-insurance

Traditional PPO
Blue Essentials HMO

- **Doctors Hospital ER South**
 - 2901 Jaime Zapata HWY
 - (956) 718-9000

Dental & Vision, Who Are The Providers?



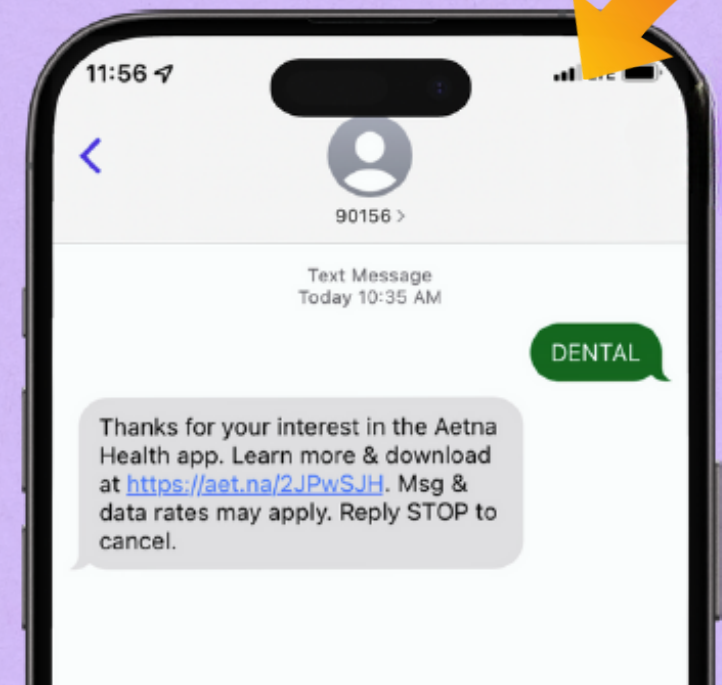
*DENTAL GROUP # 143061

With The Aetna Health App You Can:

- ✓ ACCESS YOUR DIGITAL ID CARD
- ✓ SEARCH FOR IN-NETWORK DENTISTS
- ✓ VIEW YOUR DENTAL PLAN SUMMARY
- ✓ VIEW CLAIM DETAILS

Text DENTAL to 90156 for a link to download the Aetna Health app!

Notice - Aetna Dental plan is NOT the dental provider for police officers.



Civilian FY 2024-2025	Bi-weekly Employee Payroll Contribution	
	Employee Only	Employee & Family
Dental Plan 1 Core	\$ -	\$ 21.54
Dental Plan 2 Deluxe	\$ 9.49	\$ 51.64

Firefighters FY 2024-2025	Bi-weekly Firefighter Payroll Contribution	
	FF Employee Only	FF Emp. & Family
Dental Plan 1 Core	\$ -	\$ 10.77
Dental Plan 2 Deluxe	\$ 9.49	\$ 40.87

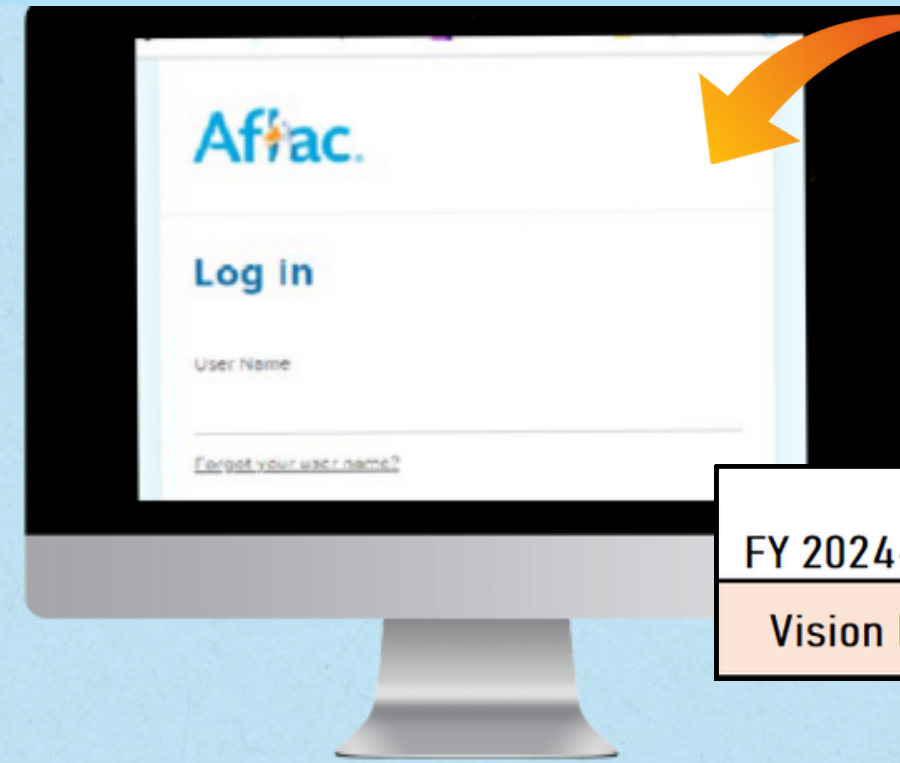


VISION GROUP #AFCA2230241

With The Aflac Vision Member Portal You Can:

- ✓ ACCESS YOUR DIGITAL ID CARD
- ✓ IN-NETWORK PROVIDER SEARCH
- ✓ VIEW SUMMARY OF CLAIMS AND STATUS
- ✓ DOWNLOAD YOUR EXPLANATION OF BENEFITS

Register your account at aflac.com/login to access the new group vision insurance member portal!



FY 2024-2025	Bi-weekly Employee Payroll Contribution	
	Employee Only	Employee & Family
Vision Plan	\$ 3.06	\$ 7.68

Benefit Carriers

FY 2024/2025



EFFECTIVE 10/1/2024



MEDICAL

Provider: BlueCross BlueShield of Texas
 Phone: 1-800-521-2227
 24/7 Nurseline: 1-800-581-0368



GROUP ACCIDENT/CANCER/ CRITICAL ILLNESS

Provider: Colonial
 Phone: 1-800-325-4368



RX 90 DAY MAIL ORDER

Provider: BlueCross BlueShield of Texas
 Express Scripts Pharmacy
 Phone: 1-833-715-0942



DISABILITY

Provider: BlueCross BlueShield of Texas
 Phone: 1-877-442-4207
 AncillaryQuestionsTX@bcbstx.com



DENTAL

Provider: Aetna Dental - Group# 143061
 Phone: 1-877-238-6200
 www.aetna.com



BASIC , SUPPLEMENTAL & VOLUNTARY LIFE INSURANCE

Provider: BlueCross BlueShield of Texas
 Phone: 1-877-442-4207



VISION

Provider: Aflac Network: Davis Vision
 Phone: 1-800-999-5431
 www.aflac.com/VisionNetwork



AIR EVAC (Air Ambulance)

Provider: AirMedCareNetwork
 Phone: 1-800-793-0010
 www.airmedcarenetwork.com

Beneficiary Designation

YOUR ENROLLMENT IS COMPLETE ONCE YOU REVIEW AND DESIGNATE YOUR BENEFICIARIES



WHAT IS A BENEFICIARY?

A beneficiary is the natural person or legal entity you name in a life insurance policy to receive the insurance benefit

- A "primary beneficiary" is the person, trust, or estate you designate to receive the plan benefits in the event of the insured's death
- A "contingent beneficiary" is a different person, trust, or estate you designate to receive your plan benefits in the event your primary beneficiaries are deceased

Beneficiary information may be updated at anytime.

MANDATORY BENEFIT ENROLLMENT



Play Ball!
2024



CITY OF LAREDO ONLINE BENEFIT ENROLLMENT JULY 22 - AUGUST 9, 2024

SAVE THE DATE

THE BENEFITS HUB
WILL **OPEN** THE
ONLINE PORTAL ON
JULY 22, 2024.
THE ONLINE PORTAL
WILL **CLOSE** ON
AUGUST 9, 2024

ON-SITE ENROLLMENT ASSISTANCE



Public Works
5512 Thomas Ave
July 22 - August 2, 2024
8:30AM - 4:30PM
City Hall Annex Training Room
1102 Bob Bullock Loop
August 5 - 9, 2024
8:30AM - 4:30PM

3 MEDICAL PLAN OPTIONS

*EMPLOYEE ONLY CONTRIBUTIONS

- TRADITIONAL PPO \$40
- BLUE ESSENTIALS HMO \$30
- CONSUMER DRIVEN HEALTH PLAN (CDHP) \$0

IMPORTANT REMINDERS

FAILURE TO LOG IN
AND MAKE YOUR
BENEFIT SELECTIONS
WILL DEFAULT YOUR
MEDICAL PLAN TO
**BLUE ESSENTIALS
HMO**
(IN-NETWORK, TEXAS
ONLY COVERAGE)

NO EXCEPTIONS!

**DON'T MISS OUT ON A
GREAT OPPORTUNITY TO
EARN 1 WELLNESS CREDIT
FOR FY 24-25!**

**SIMPLY COMPLETE YOUR
ENROLLMENT
IN THE FIRST WEEK,
JULY 22- JULY 28, 2024**

**ACT FAST AND TAKE
ADVANTAGE OF THIS
AMAZING OFFER!**

YOUR ENROLLMENT IS COMPLETED
WHEN YOUR BENEFICIARIES ARE
DESIGNATED AND YOU
RECEIVE THE MESSAGE:
**"CONGRATULATIONS, YOU HAVE
COMPLETED YOUR ENROLLMENT"**

**Your benefit selections will be
effective October 1, 2024.**

WWW.MYBENEFITSHUB.COM/CITYOFLAREDO

(956)727-6460

hrinsbenefits@ci.laredo.tx.us

SIGN UP www.mybenefitshub.com/cityoflaredo

Employee Online Benefits Portal

ENROLLMENT BEGINS JULY 22, 2024

WWW.MYBENEFITSHUB.COM/CITYOFLAREDO

The screenshot displays the City of Laredo Employee Benefits Portal interface, divided into three numbered steps:

- Step 1:** The top navigation bar includes the City of Laredo logo, the text "City of Laredo Employee Benefits Portal", a red circle with the number "1", a red arrow pointing right, and a "Login" button. Below this is a large photograph of a family (a man, a woman, and a child) walking on a path in a park.
- Step 2:** The "THEbenefitsHUB Login" screen. It features a dropdown menu for "Employee", a "Last Name" input field, and three input fields for "Birth MM", "Birth DD", and "Birth YYYY". Below these is a "Last Four Digits of SSN" input field with a visibility toggle icon. A blue "Login" button is at the bottom.
- Step 3:** The "Additional Security Verification" screen. It asks the user to select a method to receive their security code. A dropdown menu is currently set to "Text Security Code", with a list of options: "Text Security Code", "Email Security Code", "Call me with Security Code", "Text ***-***-0111", and "Text ***-***-6463". A blue "Send Code" button is at the bottom, and a "Back" link is at the very bottom.

Once logged in you can begin your enrollment. All plan information is listed on each page as you navigate through the Employee Benefits Portal.

The Health & Benefits team can not recommend a plan for you. Every situation is unique and you must decide what is the best option for your needs.



Complete plan summaries can be found on www.mybenefitshub.com/cityoflaredo

If you need additional assistance regarding medical benefits, please contact the Health & Benefits Team at 956-727-6460 or Laurel Insurance & Associates at 956-724-9083.

Thank You