

County Employee Health Benefits

FY 2019 Maryland County Government Health Benefits Survey							
Allegany							
	Active Employee	s/Pre-65 Retirees	Medicar	e Retirees			
	Active Employees	Pre-65 Retirees	Medicare Eligible	Medicare w/Upgrade			
Annual Deductible (Individual)			N/A	N/A			
In-Network	N/A	N/A	N/A	N/A			
Out-of-Network	300	300	N/A	N/A			
Annual Deductible (Family)			N/A	N/A			
In-Network	N/A	N/A	N/A	N/A			
Out-of-Network	600	600	N/A	N/A			
Office Co-Pays (In-Network)	25	25	N/A	N/A			
ER Copay	100	100	N/A	N/A			
Coinsurance (In-Network)			N/A	N/A			
Coinsurance (Out-of-Network			N/A	N/A			
Out of Pocket Max. (Individual)			N/A	N/A			
In-Network	2000	2000	N/A	N/A			
Out-of-Network	2000	2000	N/A	N/A			
Out of Pocket Max. (Family)			N/A	N/A			
In-Network	4000	4000	N/A	N/A			
Out-of-Network	4000	4000	N/A	N/A			
Rx Plan: Retail Generic	10	10	N/A	N/A			
Brand, Formulary	35	40	N/A	N/A			
Brand, Non-Formulary	50	55	N/A	N/A			
RX Plan: Mail Generic	10	10	N/A	N/A			
Brand, Formulary	35	40	N/A	N/A			
Brand, Non-Formulary	50	55	N/A	N/A			

| Brand, Non-Formulary | 50 | 55 | N/A |
| Notes: All Rx copays after \$100 deductible for pre-65 retirees. Medicare retirees are in a private Medicare Exchange Plan.

	FY 2019 Maryland Coun	ty Government Health Be	nefits Survey	
	2010 maryiana ooun	Allegany		
Person Responding: Brian P. Wes	stfall, SPHR	7 8 1		
		below applicable categor	y, or if "other," please de	escribe.
	Self-insured	State Insurance	Third Party Carrier	Broker
Method Used to Insure	Yes		CareFirst BC/BS	CBIZ
			Other	
How many people does your	Single plans	Family plans	Two-person plans	Retirees
county insure on:	105	143	104	74
Which of the following do you	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance
offer?	Yes	Via Flexible Spending Plan	Yes	No
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance
offer?	No	No	Voluntary	Voluntary
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other
	No	Voluntary	Included	
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?
plans?	Yes	16	600	N
	Are plans	Intend to grandfather	Participate in Early	
Health Care Reform	grandfathered in?	longterm?	Retiree Ins Prog	
	No	No	Yes	
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?	No			
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	CareFirst Blue Cross/Blue Shield			
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	Potentially			
What options have been implemented to reduce retiree health care costs?	Private health care exchange	e for post-65 retirees.		

Anne Arundel

County: Anne Arundel County Government

Person Responding: Douglas Hart

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	Active E	imployee and Pre-65	Retirees	Medicare Retirees
	Triple Option	Blue Choice HMO	CareFirst EPO	Aetna Medicare Advantage
Annual Deductible (Individual)	125/250/500	100	100	0
In-Netwo	ork			
Out-of-Netwo	ork			
Annual Deductible (Family)	250/500/1000	200	200	0
In-Netwo	ork			
Out-of-Netwo	ork			
Office Co-Pays (In-Network)	15/25/70%AB	15	15	10
ER Copay	\$75	\$75	\$75	\$50
Coinsurance (In-Network)	95/5, 85/15, 70/30	100%	100%	100%
Coinsurance (Out-of-Network				
Out of Pocket Max. (Individual)	500/1000/1500	800	1100	2000
In-Netwo	ork			
Out-of-Netwo	ork			
Out of Pocket Max. (Family)	1000/2000/3000	1600	3600	4000
In-Netwo	ork			
Out-of-Netwo	ork			
	_	_		
Rx Plan: Retail Gene	3 3	5	5	5
Brand, Formula		25	25	25
Brand, Non-Formula	-	35	35	35
RX Plan: Mail Gene		10	10	10/ 25 Non-CVS
Brand, Formula		50	50	50/ 65 Non-CVS
Brand, Non-Formula	arv 70	70	70	70/ 85 Non-CVS

FY 2019 N	laryland County (Government Healt	h Benefits Survey	1
	An	ne Arundel		
County: Anne Arundel County Gover	nment			
Person Responding: Douglas Hart				
Additional Insurance	e Questions: Enter 'X' b	elow applicable category	, or if "other," please des	scribe.
	Self-insured	State Insurance	Third Party Carrier	Broker
Method Used to Insure	X			
	Fully-Insured		Other	
	X	All Self -Insured except	Aetna Medicare Advantag	ge which is Fully-Insured
How many people does your county insure on: 7/1/18 FY19	Single plans	Family plans	Two-person plans	Retirees
	1329	1743	600	3550
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance
	X	Full Cost thru 3rd Party	X	
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance
			X	X
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other
	X Effective 1/1/19		X	
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?
plans	Υ	695	498-524-546-750	N
Health Care Reform	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog	
	N	N/A	Y	
Does your current health insurance c premium reductions or other incentiv wellness programs?	•	No		
If your county self-insures, who is you what are the specific and aggregate a your policy?		N/A		
Would your county be interested in a sponsored private health care exchar		Possibly		
What options have been implemented health care costs?	I to reduce retiree	Establishment of OPEB T Medicare Advantage Plan	rust Fund. RX EGWP. Sw	itch to Fully-Insured

FY 2019 Maryland County Government Health Benefits Survey Baltimore City

BALTIMORE CITY

Kamau Makini

Human Resources Specialist

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	Ac	tive Employee	and Pre-65 Retire	es	Medicar	e Retirees
	PPO High	PPO STANDARD	AetnaHMO	Kaiser HMO	CareFirst Medicare Supplemental	Kaiser Medicare Advantage HMO
Annual Deductible (Individual)						
In-Network	N/A	\$250	N/A	N/A	Major Medical	N/A
Out-of-Network	N/A	\$500	N/A	N/A	Major Medical	N/A
Annual Deductible (Family)						
In-Network	N/A	\$500	N/A	N/A	Major Medical	N/A
Out-of-Network	N/A	\$1,000	N/A	N/A	Major Medical	N/A
Office Co-Pays (In-Network)	\$5	N/A	\$5	\$5	Major Medical	\$5
ER Copay	\$50	10%	\$50	\$50	20%	\$50
Coinsurance (In-Network)	N/A	10%	N/A	N/A	N/A	N/A
Coinsurance (Out-of-Network	N/A	30%	N/A	N/A	N/A	N/A
Out of Pocket Max. (Individual)						
In-Network	\$1,000	\$1,000	\$1,100	\$1,100		N/A
Out-of-Network	N/A	\$2,000	N/A	N/A	\$30,000 paid @80% allowed benfit, then 50% allowed benefit	N/A
Out of Pocket Max. (Family)						
In-Network	\$2,000	\$2,000*	\$2,200	\$3,600	\$20,000 ==:d @000/	N/A
Out-of-Network	N/A	\$4,000*	N/A	N/A	\$30,000 paid @80% allowed benfit, then 50% allowed benefit	N/A
	High Opt&Rep	Stand Opt (\$50 Ded)	High Opt/MAPS & Non-Rep		Medicare Prescri	ptin Plan (\$100 Ded)
Rx Plan: Retail Generic	\$10	\$5	\$15			\$5
Brand, Formulary	\$20	\$30	\$30			\$30
Brand, Non-Formulary	\$30	\$50	\$40			\$50
RX Plan: Mail Generic	\$15	\$10	\$20			\$13
Brand, Formulary	\$25	\$60	\$40			\$75
Brand, Non-Formulary	\$35	\$100	\$60		\$	125

^{*}OOP Max for Standard option has salary criteria. The listed amounts are for employees who are <\$45,000 in annual salary.

^{*}OOP Max for employees \$\$45,000 annual salary are \$1,500/\$3,000 (in-network) and \$3,000/\$6,000 (out-of-network)

FY 2019 Ma	ryland County G	Sovernment Health Bei	nefits Survey	1	
	Bal	timore City			
Person Responding: Kamau Makir	ni	-			
Additional Insurance	Questions: Enter 'X' be	low applicable category, or if "		cribe.	
	Self-insured	State Insurance	Third Party Carrier	Broker	
Method Used to Insure					
	Fully-Insured		Other		
	Х		T		
How many people does your county insure on:	Single plans	Family plans	Two-person plans	Retirees	
	4835	3506	2343	14,918	
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance	
	X		Х		
Which of the following do you	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance	
offer?			Х	Х	
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other	
			Х		
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?	
plans	Y	415	\$650 - \$2,500	N	
Health Care Reform	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins		
	Y	Υ		Υ	
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?	We do not offer any prei programs.	mium reductions or other incentiv	es for participation	in wellness	
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?		sured health plans. The City does a reserve to respond to the catas			
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	liability exposue. Retired	o, The Cit will not adopt the private health care exchange for retirees because of the trust ability exposue. Retirees can purchase the coverage directly from the private healthcare xchange at their own will. The City wil not sponosor it.			
What options have been implemented to reduce retiree health care costs?		s (80%), the City portion of Medic een reduced from 100% to 80%, I y 1, 2017.			

FY 2019 Maryland County Government Health Benefits Survey Baltimore County

Person Responding: Shelly Simon

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Fax. 410-007-0710	Ī			1		
	Active Emplo	yee and Pre-65 Re	tirees	Medicare Retirees		
		CIGNA Open Access		Cigna Medicare		
	Plus HMO (OAPIN)	Plus (OAP)	Kaiser HMO	Surround	Kaiser Medicare Plus	
Annual Deductible (Individual)	N/A		None	Not Applicable	None	
In-Network		200				
Out-of-Network		300				
Annual Deductible (Family)	N/A				None	
In-Network		400	None			
Out-of-Network		600				
Office Co-Pays (In-Network)	15	15	10	medicare	5	
ER Copay	50	50	50	medicare	50	
Coinsurance (In-Network)	N/A	15/85	None			
Coinsurance (Out-of-Network		25/75	None			
Out of Pocket Max. (Individual)				\$2,000, \$300,000 lifetime	None	
In-Network	1,100	1,000				
Out-of-Network		1,500	None			
Out of Pocket Max. (Family)						
In-Network	3,600	2,000				
Out-of-Network		3,000	None			
Rx Plan: Retail Generic	12	12	12	Greater of \$10 or 20%	5	
Brand, Formulary	30	30	30	Greater of \$10 or 30%	5	
Brand, Non-Formulary	45	45	45			
RX Plan: Mail Generic	24	24	24	Greater of \$10 or 20%	3	
Brand, Formulary	60	60	60	Greater of \$10 or 30%	3	
Brand, Non-Formulary	90	90	90			

Note: Kaiser Rx plan covers one copay for 60 day supply. Copays listed are for Kaiser Facility pharmacies only. Cigna Rx plans are for one month supply per copay and are covered under Express Scripts. There is a \$75 annual deductible for retiree and each covered family member for Cigna Medicare Surround for Rx drugs.

FY 2019 Mary	land County Gov		Benefits S	Survey
	Baltimo	re County		
	Person Respond	ling: Shelly Sim	on	
		onnel Analyst		
Additional Insurance Qu			or if "other," ple	ase describe.
	Self-insured	State Insurance	Third Party Carrier	Broker
Method Used to Insure	X		Other	
	Fully-Insured Kaiser HMO & Cigna Dental HMO		Other	
How many people does your	Single plans	Family plans	Two-person plans	Retirees
county insure on:	Not available	Not available	Not available	Not available
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance
	Х	Limited through EAP	х	
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance
oner r			х	X
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?
plans	N	_	_	_
Health Care Reform	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog	
Does your current health	IN IN	N/A	Ť	
insurance carrier offer any premium reductions or other incentives for participation in wellness programs?	We offer limited incen funded by our Cigna V		time Wellness	Events that are
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	Cigna provides the sto is \$500,000, No aggre		plans. The spe	ecific attachment point
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	Not sure.			
What options have been implemented to reduce retiree health care costs?	Steps were taken for 2 Medicare Part D plan, restructured for those an even greater reduc Medicare Exchange w contribution/credit bas	but it is not mandato retiring after 7/1/07 a tion in subsidy. Begi as offered on a volur	ry. Retirees sund for those hin nning in 2018, ntary basis with	bsidy was completely red after 7/1/07 have a small private a defined

Calvert

County: Calvert County

Person Responding: David E. Carpenter

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	Act	ive Employee/Pre-65 Ret	iree		Medicare Retirees			
	нмо	Advantage	PPO	нмо	Advantage	PPO	Standard Group	
Annual Deductible (Individual)							·	
In-Network	N/A	N/A	N/A	N/A	N/A	N/A	300	
Out-of-Network	N/A	200	200	N/A	200	200	300	
Annual Deductible (Family)								
In-Network	N/A	N/A	N/A	N/A	N/A	N/A	300 pp	
Out-of-Network	N/A	400	400	N/A	400	400	300 pp	
Office Co-Pays (In-Network)	10	15	20	10	15	20	NA	
ER Copay	25	50	50	25	50	50	N/A	
Coinsurance (In-Network)	100%	100%	100%	100%	100%	100%	N/A	
Coinsurance (Out-of-Network	N/A	80%	80%	N/A	80%	80%	N/A	
Out of Pocket Max. (Individual)								
In-Network	2000	800	800	2000	800	800	1000	
Out-of-Network	N/A	800	800	N/A	800	800	1000	
Out of Pocket Max. (Family)								
In-Network	6000	1600	1600	6000	1600	1600	1000	
Out-of-Network	N/A	1600	1600	N/A	1600	1600	1000	
Rx Plan: Retail Generic	8	10	10	8	10	10	10	
Brand, Formulary	15	20	20	15	20	20	20	
Brand, Non-Formulary	30	35	35	30	35	35	35	
RX Plan: Mail Generic	16	20	20	16	20	20	20	
Brand, Formulary	30	40	40	30	40	40	40	
Brand, Non-Formulary	60	70	70	60	70	70	70	

FY 2019 Maryland County Government Health Benefits Survey

	Ca	lvert			
	Self-insured	State Insurance	Third Party Carrier	Broker	
Method Used to Insure	Χ				
method osed to misure	Fully-Insured		Other		
How many people does your	Single plans	Family plans	Two-person plans	Retirees	
county insure on:	287	275	188	228	
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance	
	X	Voluntary	X		
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance	
ollel :	Voluntary	Voluntary	X	X	
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other	
oller :	Voluntary	Voluntary	X		
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?	
plans	Υ	182	850	N	
Health Care Reform	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog		
	N	N	Υ		
Does your current health insurance premium reductions or other incent wellness programs?		Self insured - trying initiatives	to implement some CareF	irst wellness	
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?		CareFirst \$200,000 specific / No Aggregate			
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?		Don't know			
What options have been implement health care costs?	ed to reduce retiree				

Caroline

County: Caroline County

Person Responding: Sherry Bratton

Title: Assistant Director of Human Resources

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	Active Employee	Medicare Retirees	Pre-65 Retiree	
	EPO/Active	Medicare Supplement	HRA (\$252 monthly reimb)	N/A
Annual Deductible (Individual)			-	-
In-Network		N/A	-	-
Out-of-Network		N/A	-	-
Annual Deductible (Family)		Only individual	-	-
In-Network		N/A	-	-
Out-of-Network		N/A	-	-
Office Co-Pays (In-Network)	15 PRIM/30 SPEC	N/A	-	-
ER Copay	150	N/A	-	-
Coinsurance (In-Network)	None	N/A	-	-
Coinsurance (Out-of-Network	None	N/A	-	-
Out of Pocket Max. (Individual)		N/A	_	ı
In-Network	1500	N/A	-	-
Out-of-Network	3000	N/A	-	•
Out of Pocket Max. (Family)			-	-
In-Network	3000		-	-
Out-of-Network	6000		-	-
			-	-
Rx Plan: Retail Generic	10	N/A	-	-
Brand, Formulary	25	N/A	-	-
Brand, Non-Formulary	40	N/A	-	-
RX Plan: Mail Generic	20	N/A	-	-
Brand, Formulary	50	N/A	-	-
Brand, Non-Formulary	80	N/A	=	-

FY 2019 Maryland County Government Health Benefits Survey Caroline **County: Caroline County** Person Responding: Sherry Bratton Additional Insurance Questions: Enter 'X' below applicable category, or if "other," please describe. Self-insured **State Insurance Third Party Carrier Broker** Χ Method Used to Insure Other **Fully-Insured** Medicare Supplement is Hartford Insurance Retirees Single plans Family plans Two-person plans How many people does your county insure on: 88 38 40 26 Flexible Spending Long-term Disability Life Insurance **Legal Services** Income Insurance Which of the following do you **Accounts** offer? Х **Accident-Only Critical Illness Dental Insurance Vision Insurance** Insurance Insurance Which of the following do you offer? х х Х **Short-term Disability Prescriptions Cancer Insurance** Other Income Insurance Х Х Amount county pays per Opt-out changed in Opt-out offered for employees Opt-out offered? **Number participating** past 2 years? emp. covered by other health insurance plans **VARIES** Υ 15 stopped in 2013 Are plans Intend to grandfather Participate in Early Retiree grandfathered in? longterm? Ins Prog **Health Care Reform** no no no Does your current health insurance carrier offer any no premium reductions or other incentives for participation in wellness programs? If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy? Would your county be interested in adopting a nationally sponsored private health care exchange for retirees? What options have been Hartford Medicare Supplement and HRA for Retirees under 65 implemented to reduce retiree health care costs?

Carroll							
	Active Employ	ee/Pre-65 Retiree	Medicare Retirees				
	Choice	Choice Plus	Medicare Supplemental	N/A			
Annual Deductible (Individual)			200				
In-Network	N/A	N/A					
Out-of-Network	N/A	200					
Annual Deductible (Family)			400				
In-Network	N/A	N/A					
Out-of-Network	N/A	400					
Office Co-Pays (In-Network)	10	15	N/A				
ER Copay	50	50	80/20				
Coinsurance (In-Network)	N/A	N/A	80/20				
Coinsurance (Out-of-Network	N/A	80/20	80/20				
Out of Pocket Max. (Individual)			1,700				
In-Network	N/A	N/A					
Out-of-Network	N/A	1,700					
Out of Pocket Max. (Family)			3,400				
In-Network	N/A	N/A					
Out-of-Network	N/A	3,400					
				-			
Rx Plan: Retail Generic	10	10	10	·			
Brand, Formulary	20	20	20				
Brand, Non-Formulary	30	30	30	·			
RX Plan: Mail Generic	10	10	10				
Brand, Formulary	20	20	20	·			
Brand, Non-Formulary	30	30	30				

	FY 2019 Maryland Coun	ty Government Health Be	nefits Survey		
		Carroll			
Person Responding:					
Additional Insurar	ce Questions: Enter 'X'	below applicable categor	y, or if "other," please de	escribe.	
	Self-insured	State Insurance	Third Party Carrier	Broker	
Method Used to Insure	Χ				
metriod oded to modre	Fully-Insured		Other		
How many people does your	Single plans	Family plans	Two-person plans	Retirees	
county insure on:	349	409ee's/1,583 total	322ee's/644 total	340ee's/490 total	
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance	
oner:	X		X	X	
Which of the following do you	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance	
offer?			Х	X	
Which of the following do you	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other	
offer?	X		X		
Opt-out offered for employees			Amount county pays	Opt-out changed in	
covered by other health insurance	Opt-out offered?	Number participating	per emp.	past 2 years?	
plans	Х	100	\$400-\$1200	no	
-	Are plans	Intend to grandfather	Participate in Early		
Health Care Reform	grandfathered in?	longterm?	Retiree Ins Prog		
	Yes	Yes			
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?		N	0		
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	United Healthcare Insurance Company-BP Stop Loss; Individual SL-\$300,000				
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?		poss	sibly		
What options have been implemented to reduce retiree health care costs?		after 2005 have a higher co requirement to 15 years as			

FY 2019 Maryland County Government Health Benefits Survey								
Cecil								
	Activ	e Employee/Pre-65 Retire	ement	Medicare Retirees				
	Carefirst PPO - High Option	Carefirst PPO - Standard Option	Carefirst High Deductible	Carefirst PPO- Standard Option				
Annual Deductible (Individual)								
In-Network	200	400	1,500	400				
Out-of-Network	200	400	3,000	400				
Annual Deductible (Family)								
In-Network	600	1,200	3,000	1,200				
Out-of-Network	600	1,200	6,000	1,200				
Office Co-Pays (In-Network)	20 / 30	20 / 30	10% after deductible	20 / 30				
	10% of allowed benefit	25% of allowed benefit		25% of allowed benefit				
ER Copay	after deductible	after deductible	10% after deductible	after deductible				
Coinsurance (In-Network)	10% of allowed benefit	25% of allowed benefit	10% after deductible	25% of allowed benefit				
,	25% of allowed benefit	35% of allowed benefit		35% of allowed benefit				
Coinsurance (Out-of-Network	after deductible	after deductible	10% after deductible	after deductible				
Out of Pocket Max. (Individual)								
In-Network	1,500	2,000	3,000	2,000				
Out-of-Network	1,500	2,000	6,000	2,000				
Out of Pocket Max. (Family)	,	,	,	,				
In-Network	4,500	6,000	6,000	6,000				
Out-of-Network	4,500	6,000	12,000	6,000				
	·		·					
Rx Plan: Retail Generic	\$10 copay for 30-day supply	\$10 copay for 30-day supply	10% after deductible	\$10 copay for 30-day supply				
Brand, Formulary	25% copay up-to maximum of \$50 for	25% copay up-to maximum of \$50 for 30-day supply	10% after deductible	25% copay up-to maximum of \$50 for 30-day supply				
Brand, Non-Formulary	25% copay up-to maximum of \$50 for 30-day supply	25% copay up-to maximum of \$50 for 30-day supply	10% after deductible	25% copay up-to maximum of \$50 for 30-day supply				
RX Plan: Mail Generic	\$10 copay for 90-day supply	\$10 copay for 90-day supply	10% after deductible	\$10 copay for 90-day supply				
Brand, Formulary	25% copay up-to maximum of \$75 for 90-day supply	25% copay up-to maximum of \$75 for 90-day supply	10% after deductible	25% copay up-to maximum of \$75 for 90-day supply				
Brand, Non-Formulary	25% copay up-to maximum of \$75 for 90-day supply	25% copay up-to maximum of \$75 for 90-day supply	10% after deductible	25% copay up-to maximum of \$75 for 90-day supply				

	FY 2019 Maryland Coun	ty Government Health Be	enefits Survey		
		Cecil			
Person Responding:					
Additional Insuran	ce Questions: Enter 'X'	below applicable categor	y, or if "other," please de	escribe.	
	Self-insured	State Insurance	Third Party Carrier	Broker	
Method Used to Insure	X				
method osed to msure	Fully-Insured		Other		
How many people does your	Single plans	Family plans	Two-person plans	Retirees	
county insure on:	220	185	109	76	
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance	
	X		X	X	
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance	
oner?	Х	Х	Х	Х	
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other	
		Х	Х		
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?	
plans	N	-	-	-	
	Are plans	Intend to grandfather	Participate in Early		
	grandfathered in?	longterm?	Retiree Ins Prog		
Health Care Reform	N	N	N		
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?		,	Y		
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	Sun Life Assurance Company \$200,000				
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees? What options have been implemented to reduce retiree					
health care costs?					

Charles

County: Charles County

Person Responding: Angel DuBose
Title: Benefits Compliance Administrator

Phone: 301-885-2764

Email: DuboseA@charlescountymd.gov

Fax: 301-396-8862

	Active Employe	e/Pre-65 Retiree	Medicare	Retirees
		CareFirst BlueChoice	CareFirst Standard	HMO Open Access
	Bluechoice Advantage	HMO Open Access	over 65	over 65
Annual Deductible (Individual)				
In-Network	N/A	N/A	N/A	N/A
Out-of-Network	200	N/A	N/A	N/A
Annual Deductible (Family)				
In-Network	N/A	N/A	N/A	N/A
Out-of-Network	400	N/A	N/A	N/A
Office Co-Pays (In-Network)	\$15 PCP/\$20 Spec	\$10 PCP/\$15 Spec	varies	\$10 PCP/\$15 Spec
ER Copay	\$125 /Waived admitted	\$100/Waived admitted	N/A	\$100/Waived admitted
Coinsurance (In-Network)	N/A	N/A	A & B Services - C/F	N/A
,			covers 20% that	
			Medicare does not.	
			Major Medical - C/F	
			covers 80% of the 20%	
			that Medicare does not.	
Coinsurance (Out-of-Network)	80%/20%	N/A	A & B Services - C/F	N/A
Comparation (Cut of Notwork)	0070/2070	14/74	covers 20% that	14/74
			Medicare does not.	
			Major Medical - C/F	
			covers 80% of the 20%	
			that Medicare does not.	
Out of Pocket Max. (Individual)				
In-Network	1,000	2,000	200	2,000
Out-of-Network	1,000	N/A	N/A	N/A
Out of Pocket Max. (Family)	1,000	1,77.		1471
In-Network	2,000	6,000	N/A	6,000
Out-of-Network	,	N/A	N/A	N/A
Out-oi-Network	2,000	IV/A	IV/A	IV/A
Rx Plan: Retail Generic	5	5	5	5
Brand, Formulary	20	20	20	20
Brand, Non-Formulary	35	35	35	35
	Disc with maint meds 2			
	copays for 3 mth supply.			
RX Plan: Mail/CVS Retail Pharmacy Generic		\$5/copay	\$5/copay	\$5/copay
-	Disc with maint meds 2			
	copays for 3 mth supply.			
Brand, Formulary	\$20/copay	\$20/copay	\$20/copay	\$20/copay
,	Disc with maint meds 2			
	copays for 3 mth supply.			
Brand, Non-Formulary	\$35/copay	\$35/copay	\$35/copay	\$35/copay

FY 2019	Maryland County Gover	nment Health Benefits Su	ITVAV	
112013	Charl		ii vey	
County: Charles County				
Person Responding: Angel DuBose				
Additional Insurance Ques	stions: Enter 'X' below ap	plicable category, or if "o	ther," please describe.	
	Self-insured	State Insurance	Third Party Carrier	Broker
Method Used to Insure	X			
Wethod Osed to Insure	Fully-Insured		Other	
			T	T
How many people does your county insure on:	Single plans	Family plans	Two-person plans	Retirees
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance
,	Х	Х	Х	Х
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance
	Х	Х	X	Х
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other
			X	
Opt-out offered for employees covered by other health insurance plans	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?
	N	-	-	-
Health Care Reform	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog	
	Y	Y	Υ	
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?	N			
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	CareFirst, Stop Loss Spe	cific is \$175,000		
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?				
What options have been implemented to reduce retiree health care costs?				

County: Dorchester

Person Responding: Becky Dennis

Title: HR Director
Phone: 410-901-2406

Email: bdennis@docogonet.com

Fax: 410-228-6850

Active Employee, Pre-65 Retirees and Medicare Retirees*

ACIIV	e Employee, i re-c	os ivetirees and wieur	care ivetirees	
	EPO	POS	PPO	N/A
Annual Deductible (Individual)	N/A	N/A	N/A	
In-Network	N/A	N/A	N/A	
Out-of-Network	N/A	N/A	500	
Annual Deductible (Family)	N/A	N/A	1000	
In-Network	N/A	N/A	3000	
Out-of-Network	N/A	N/A	6000	
Office Co-Pays (In-Network)	30	30	15	
ER Copay	100	100	100	
Coinsurance (In-Network)	NA	NA	NA	
Coinsurance (Out-of-Network	NA	NA	NA	
Out of Pocket Max. (Individual)				
In-Network	1300	1300	1500	
Out-of-Network	N/A	N/A		
Out of Pocket Max. (Family)				
In-Network	2600	2600	3000	
Out-of-Network	N/A	N/A	6000	
Rx Plan: Retail Generic	15	15	15	
Brand, Formulary	35	35	35	
Brand, Non-Formulary	60	60	60	
RX Plan: Mail Generic	15	15	15	
Brand, Formulary	35	35	35	
Brand, Non-Formulary	60	60	60	
Note: Use AARP as a Supplement				

FY 20	19 Maryland County	Government Healtl	h Benefits Survey	
		Dorchester		
County: Dorchester				
Person Responding: Becky Denni	S			
Additional Insuran	ce Questions: Enter 'X'	below applicable categor	ry, or if "other," please d	escribe.
	Self-insured	State Insurance	Third Party Carrier	Broker
Method Used to Insure	Х		Х	Х
Method osed to msure	Fully-Insured		Other	
How many people does your	Single plans	Family plans	Two-person plans	Retirees
county insure on:	93	60	68	84
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance
			Х	
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance
Office :			Х	Х
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other
oner:			X	
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?
plans	N	-		-
	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog	
Health Care Reform	Υ	Y	N	
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?	Y			
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?				
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?			N	
What options have been implemented to reduce retiree health care costs?		Over 65 must utiliz	ze Medicare Part D	

	1 1 2013 Mary	land County Government	nearm benefits ourvey			
	Т	Frederick			1	
	Active Employee	and Pre-65 Retiree	Medicare	e Retirees	Active Ees On High Deduct	
	In Network	Point of Service	In-Network	Point of Service (POS)	w/	/HSA
Annual Deductible (Individual) In-Network	0	0	N/A	N/A	1	350
Out-of-Network		300	N/A N/A	300		2700
Annual Deductible (Family)	IV/A	300	IN/A	300		.700
In-Network	0	0	N/A	N/A	2	700
Out-of-Network	N/A	600	N/A	600	5	400
Office Co-Pays (In-Network)	20	20	20	20		n/a
ER Copay	150	150	150	150		n/a
Coinsurance (In-Network)	10%	10%	10%	10%		10%
Coinsurance (Out-of-Network Out of Pocket Max. (Individual)	N/A	20%	N/A	20%		20%
In-Network	1250	1250	1250	1250	2	2500
Out-of-Network		2300	N/A	2300		5000
Out of Pocket Max. (Family)		_300			<u> </u>	
In-Network	2500	2300	2500	2300	5	0000
Out-of-Network	N/A	4600	N/A	4600	_	600
					<u>IN</u>	<u>OON</u>
Rx Plan: Retail Generic	II.	10	10	10	10	20%
Brand, Formulary		30	30	30	30	20%
Brand, Non-Formulary RX Plan: Mail Generic		50 20	50 20	50 20	50 20	20% n/a
Brand, Formulary		60	60	60	60	n/a
Brand, Non-Formulary		100	100	100	100	n/a
	nce Questions: Enter 'X'				100	11/4
	Self-insured	State Insurance	Third Party Carrier	Broker		
Method Used to Insure			•			
method osed to msure	Fully-Insured		Other			
	X			T		
How many people does your	Single plans	Family plans	Two-person plans	Retirees	_	
county insure on:			Flexible Spending	Long-term Disability	_	
Which of the following do you	Life Insurance	Legal Services	Accounts	Income Insurance		
offer?	X	Х	X	moonic madranec	-	
Which of the following do you	Accident-Only	Critical Illness	Daniel Income	Vision Income		
offer?	Insurance	Insurance	Dental Insurance	Vision Insurance		
	X	X	X	X		
Which of the following do you	Short-term Disability	Cancer Insurance	Prescriptions	Other		
offer?	Income Insurance		·		4	
Opt-out offered for employees		X	Х		-	
covered by other health insurance			Amount county pays	Opt-out changed in		
plans	Opt-out offered?	Number participating	per emp.	past 2 years?		
-	N			-	1	
	Are plans	Intend to grandfather	Participate in Early		1	
Health Care Reform	grandfathered in?	longterm?	Retiree Ins Prog]	
	N	N	Υ		4	
Does your current health						
insurance carrier offer any	Yes					
premium reductions or other	162					
incentives for participation in						
					4	
incentives for participation in wellness programs?						
wellness programs? If your county self-insures, who is						
wellness programs? If your county self-insures, who is your stop-loss carrier and what						
wellness programs? If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate						
wellness programs? If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?						
wellness programs? If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy? Would your county be interested						
wellness programs? If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy? Would your county be interested in adopting a nationally sponsored	Not currently					
wellness programs? If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy? Would your county be interested in adopting a nationally sponsored private health care exchange for	Not currently					
wellness programs? If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy? Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	Not currently					
wellness programs? If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy? Would your county be interested	not currently	emiums, offering Medicare	Supplement			

health care costs?

Garrett

County: Garrett County

Person Responding: DaVina Griffith

Title: Director Human Resources

Phone: 301.334.1989

Email: dgriffith@garrettcounty.org

Fax: 301.334.5026

	Active	Employee and	Pre-65 Retirees	Medicare Retirees
	POS	PPO	HSA	January 1, 2017 moved from Group Plan with United Healthcare to Individual HRA Subsidy
Annual Deductible (Individual)				
In-Network	500	0	2,000	N/A
Out-of-Network	500	300	4,000	N/A
Annual Deductible (Family)				
In-Network	1,000	0	4,000	N/A
Out-of-Network	1,000	900	8,000	N/A
Office Co-Pays (In-Network)	30	15	Ded, then 90%	N/A
ER Copay	100	35	Ded, then 90%	N/A
Coinsurance (In-Network)	85%	100%	90%	N/A
Coinsurance (Out-of-Network	50%	80%	50%	N/A
Out of Pocket Max. (Individual)				
In-Network	4,000	3,000	5,000	N/A
Out-of-Network	5,000	3,000	7,000	N/A
Out of Pocket Max. (Family)				
In-Network	8,000	6,000	10,000	N/A
Out-of-Network	10,000	6,000	14,000	N/A
Rx Plan: Retail Generic	10	10	Ded, then 90%	N/A
Brand, Formulary	40	20	Ded, then 90%	N/A
Brand, Non-Formulary	50	35	Ded, then 90%	N/A
RX Plan: Mail Generic	20	20	Ded, then 90%	N/A
Brand, Formulary	60	40	Ded, then 90%	N/A
Brand, Non-Formulary	100	70	Ded, then 90%	N/A

	FY 2019 Ma	aryland County	Government Health Ben	efits Survey	
D	41		Garrett		
Person Responding: DaVina Griffi		nc: Entor 'V' h	olow applicable category	, or if "other," please descrik	<u> </u>
Additional ins	Self-insured	iis: Eliter A D	State Insurance	Third Party Carrier	Broker
	X		State insurance	Third Party Carrier	Diokei
Method Used to Insure	Fully-Insured			Other	
	r uny mourou				
	Single plans		Family plans	Two-person plans	Retirees
How many people does your county insure on:	94		110 FAMILY + 5 PARENT & CHILDREN = 115	77 EMPLOYEE & SPOUSE + 17 PARENT & 1 CHILD = 94	138
Which of the following do you offer?	Life Insurance		Legal Services	Flexible Spending Accounts	
	X			X	
Which of the following do you offer?	Accident- Only Insurance		Critical Illness Insurance	Dental Insurance	Vision Insurance
	X		Х	X	X
Which of the following do you offer?	Short-term Disability Income Insurance		Cancer Insurance	Prescriptions	Other
			X	X	
Opt-out offered for employees covered by other health insurance	Opt-out offered?		Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?
plans	Are plans grandfathered in?		Intend to grandfather long-term?	Participate in Early Retiree Ins Prog	-
Health Care Reform	Λ		X	X	
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?			nium rates will increase \$60 for active emp, covered sp	00 emp / \$300 spouse. Unless ouses and retirees.	completion of both a
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?		•		remium Rate = \$31.24 Individu op Loss – 24/12 (Monthly Pren	
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?					
What options have been implemented to reduce retiree health care costs?			5 retirees to HRA. Subsidy not be offered post-retirem	for individual plans on Medica nent healthcare benefits.	re Exchange. July 1,

County: Harford County Government
Person Responding: Beth A. Griffith
Title: Benefits Program Manager
Phone: 410-638-3202
Email: bagriffith@harfordcountymd.gov
Fax: 410-879-3564

		Active Employee	and Pre-65 Retiree	T	Medicare Retirees		
	HDHP (CDH)	Offered under Triple Option - PPO/Level 2	MPOS	Blue Choice Opt Out Plus - HMO	TRADITIONAL	нмо	
Annual Deductible (Individual)							
In-Network		250		N/A	N/A	N/A	
Out-of-Network		500		300	N/A	300	
Annual Deductible (Family)							
In-Network		500		N/A	N/A	N/A	
Out-of-Network		1,000		600	N/A	600	
Office Co-Pays (In-Network)		30		20 PCP/30 SPEC	20% AFTR MEDICARE	20 PCP/30 SPEC	
ER Copay	PLAN NO LONGER	150	PLAN NO LONGER	150	20% AFTR MEDICARE	150	
Coinsurance (In-Network)	OFFERED	N/A	OFFERED	N/A	20% AFTR MEDICARE	N/A	
Coinsurance (Out-of-Network		20%		20%	20% AFTR MEDICARE	20%	
Out of Pocket Max. (Individual)							
In-Network		N/A		N/A	N/A	N/A	
Out-of-Network		2,000		2,000	N/A	2,000	
Out of Pocket Max. (Family)							
In-Network		N/A		N/A	N/A	N/A	
Out-of-Network		4,000		4,000	N/A	4,000	
Rx Plan: Retail Generic		10		5	20% OF RX COST	5	
Brand, Formulary		35		15	20% OF RX COST	25	
Brand, Non-Formulary		65		35	20% OF RX COST	55	
RX Plan: Mail Generic Brand, Formulary							
Brand, Non-Formulary	2 COPAYS FOR 90 D	AY SUPPLY			\$20 COPAY/90 DAY	2 COPAY/90 DAY	

FY 2019 M	laryland County Gove	ernment Health F	Renefits Survey	
1120131		ford	ochenia ourvey	
County: Harford County Gover	nment			
Person Responding: Beth A. Gri				
Additional Insurance Questi	ons: Enter 'X' below a		ory, or if "other," plea	ase describe.
	Self-insured	State Insurance	Third Party Carrier	Broker
Method Used to Insure	Х			
	Fully-Insured		Other	
How many people does your	Single plans	Family plans	Two-person plans	Retirees
county insure on:	480	700	412	691
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance
	Х	Х	Х	Х
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance
	Х	Х	Х	X
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other
		Х	Х	
Opt-out offered for employees covered by other health	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?
insurance plans	Х	141	1,200	
Health Care Reform	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog	
Does your current health insurance premium reductions or other incerparticipation in wellness programs	ntives for	No		
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?				
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?		Yes		
What options have been implement retiree health care costs?	nted to reduce		PEHP Plan	

					1		
	FY 2019 Maryland County Go	vernment Health Benefits S	urvey				
	Howard						
County: Howard County							
Person Responding: Randy Zamzow	1						
Title: Chief of Benefits							
Phone: (410) 313-3237							
Email: rzamzow@howardcountymd.	gov						
Fax: (410) 313-3237							
	Active Employee, Pre-65 R	etirees, and Medicare Retire	ees				
	Aetna Open Access (actives and pre-65 retirees)	Aetna PPO (actives and pre-65 retirees)	Kaiser HMO (actives and pre-65 retirees)	Kaisre Cost Plus plan (Medicare retirees)	Medicare Advantage 95 plan	Medicare Advantage 10 plan	
Annual Deductible (Individual)			,	,	-	and the second second	
In-Network	N/A	\$250	N/A	n/a	\$300	n/a	
Out-of-Network	N/A	\$500	N/A	Medicare benefits schedule	\$300	n/a	
Annual Deductible (Family)					\$0		
In-Network	N/A	\$500	N/A	n/a	\$300	n/a	
Out-of-Network	N/A	\$1,000	N/A	Medicare benefits schedule	\$300	n/a	
Office Co-Pays (In-Network)	10pcp 20 spec	\$20	10pcp 20 spec	\$10	\$0	\$10.00	
ER Copay Coinsurance (In-Network)	\$100 100%	\$100 90%	\$100 100%	\$50 n/a	\$50 5%	\$50.00 n/a	
Coinsurance (In-Network) Coinsurance (Out-of-Network	N/A	70%	N/A	Medicare benefits schedule	5%	n/a	
Out of Pocket Max. (Individual)	N/A	70%	N/A	Medicare benefits scriedule	5%	nva	
In-Network	N/A	\$1,500	N/A	\$3,400	\$1,000.00	\$6,700,00	
Out-of-Network	N/A N/A	\$4,000	N/A	Medicare benefits schedule	\$1,000.00	\$6,700.00	
Out of Pocket Max. (Family)	14/1	ψ·1,000	1471	medicare perionic concedie	\$0.00	\$0,700.00	
In-Network	N/A	\$3,000	N/A	\$3,400	\$1,000.00	\$6,700.00	
Out-of-Network	N/A	\$8.000	N/A	Medicare benefits schedule	\$1,000.00	\$6,700.00	
Rx Plan: Retail Generic	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00	
Brand, Formulary	\$30.00	\$30.00	\$30.00	\$10.00	\$30.00	\$30.00	
Brand, Non-Formulary	\$50.00	\$50.00	\$50.00	\$10.00	\$50.00	\$50.00	
RX Plan: Mail Generic	\$10.00	\$10.00	\$20.00	\$15.00	\$10.00	\$10.00	
Brand, Formulary	\$30.00	\$30.00	\$60.00	\$15.00	\$30.00	\$30.00	
Brand, Non-Formulary	\$50.00	\$50.00	\$100.00	\$15.00	\$50.00	\$50.00	
	FY 2019 Maryland County Go	overnment Health Benefits S oward	urvey		4		
County: Howard County	н	oward			4		
Person Responding: Randy Zamzow	,				1		
reison kesponding. Kandy Zamzow	Additional Insurance Questions: Enter 'X' below	annliaghla agtagony or if "s	other " please describe		+		
T	Self-insured	State Insurance	Third Party Carrier	Broker	†		
<u></u> ⊢	X	State modrance	mild raity Carrier	DIOREI	†		
Method Used to Insure	Fully-Insured		Other	+	1		
	X				1		
How many people does your	Single plans	Family plans	Two-person plans	Retirees	1		
county insure on:	897	879	625	785	1		
Which of the following do you	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance			
offer?	X	х	x	X	1		
Miliah af tha fallandar da		Critical Illness			1		

Dental Insurance

Prescriptions X

Amount county pays per emp. \$900/year

Participate in Early Retiree Ins Prog Yes, but ERRP has expired

Vision Insurance

Other

Opt-out changed in past 2 years?

Cancer Insurance

Number participating 428 Intend to grandfather longterm? Y

Aetna is stop loss carrier. \$600,000 specific, no aggregate

Implementation of Medicare Advantage plans for medicare-eligible retirees; increase in years of service required for retiree health insurance eligibility; change in algorithm for determining County contribution towards retiree health premium

Which of the following do you offer?

Which of the following do you offer?
Opt-out offered for employees covered by other health insurance plans

Health Care Reform

Does your current health
insurance carrier offer any
premium reductions or other
incentives for participation in
wellness programs?

If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?

Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?
What options have been implemented to reduce retiree health care costs?

Accident-Only Insurance

Short-term Disability Income Insurance

Opt-out offered?

Are plans grandfathered in?

Kent

County:Kent County

Person Responding: S. Martin Hale

Title: HR Director

Phone:410-778-7481

Email:mhale@kentgov.org

Fax:410-778-3749

	Active Employee and Pre-65 Retirees		Medicare Retirees	
	HMO/HRA	N/A	GAP	N/A
Annual Deductible (Individual)		-	Employees participate in	ı
In-Network	1200	-	Medicare and county	ı
Out-of-Network	N/A	-	provides GAP coverage	-
Annual Deductible (Family)		-	for services not fully	-
In-Network	2400	-	covered by Medicare.	ı
Out-of-Network	N/A	-	County pays for benefits	-
Office Co-Pays (In-Network)	15/25	-	for only those retiring	ı
ER Copay	100	-	with 30 years of service.	-
Coinsurance (In-Network)	N/A	-		ı
Coinsurance (Out-of-Network	N/A	-		ı
Out of Pocket Max. (Individual)		-		-
In-Network	2400	-		-
Out-of-Network	N/A	-		-
Out of Pocket Max. (Family)		-		-
In-Network	4800	-		1
Out-of-Network	N/A	-		-
		-		-
Rx Plan: Retail Generic	10	-		-
Brand, Formulary	25	-		-
Brand, Non-Formulary	45	-		-
RX Plan: Mail Generic	20	-		-
Brand, Formulary	50	-		-
Brand, Non-Formulary	90	-		-

Additional Insurar	nce Questions: Enter 'X' I	below applicable categor	y, or if "other," please d	escribe.		
	Self-insured	State Insurance	Third Party Carrier	Broker		
Method Used to Insure	X		X	X		
Method Osed to msure	Fully-Insured		Other			
How many people does your	Single plans	Family plans	Two-person plans	Retirees		
county insure on:	122	51	37	30		
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending	Long-term Disability		
	Life illisurance	Legal Services	Accounts	Income Insurance		
	with pension			X		
Which of the following do you	Accident-Only	Critical Illness	Dental Insurance	Vision Insurance		
offer?	Insurance	Insurance				
			X	X		
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other		
Oller ?	X	X	X			
Opt-out offered for employees			Amount county pays	Opt-out changed in		
covered by other health insurance	Opt-out offered?	Number participating	per emp.	past 2 years?		
plans	N	-	=	=		
	Are plans	Intend to grandfather	Participate in Early			
	grandfathered in?	longterm?	Retiree Ins Prog			
Health Care Reform	N	N	N			
Does your current health				•		
insurance carrier offer any						
premium reductions or other	N					
incentives for participation in						
wellness programs?						
If your county self-insures, who is						
your stop-loss carrier and what						
are the specific and aggregate	Everest Reinsurance Co.,	, 70K specific, 70K aggrega	ate			
attachment points of your policy?						
Would your county be interested						
in adopting a nationally	Possibly					
sponsored private health care	,					
exchange for retirees?						
What options have been						
implemented to reduce retiree	> 65, retirees move to gap	p coverage around Medica	re.			
health care costs?						

Maryland National Capital Park and Planning Commission

County: Montgomery and Prince George's County Maryland

Person Responding: Cynthia Henderson

Title: Principal Benefits Specialist

Phone: 301-454-1685

Email:cynthia.henderson@mncppc.org

Fax:301-454-1687

Fax.301-434-1007						
	Active	Employee and Pre-65 Re	tiree	Medicare Retirees		
	UnitedHealthcare POS	UnitedHealthcare EPO	Kaiser Permanente HMO	*UnitedHealthcare Medicare Complement	UnitedHealthcare EPO	Kaiser Medicare Comp
Annual Deductible (Individual)	N/A	N/A	N/A	N/A	N/A	N/A
In-Network	N/A	N/A	N/A	N/A	N/A	N/A
Out-of-Network	250	N/A	N/A	N/A	N/A	N/A
Annual Deductible (Family)	600	N/A	N/A	N/A	N/A	N/A
In-Network	N/A	N/A	N/A	N/A	N/A	N/A
Out-of-Network	600	N/A	N/A	N/A	N/A	N/A
Office Co-Pays (In-Network)	10	10	10	Supplement to Medicare	10	10
ER Copay	35	25	25	Supplement to Medicare	25	50
Coinsurance (In-Network)	100%	100%	100%	100%	100%	100%
Coinsurance (Out-of-Network	80%	N/A	N/A	100%	N/A	N/A
Out of Pocket Max. (Individual)	600	1,100	1,100	Supplement to Medicare	1,100	3,400
In-Network	600	1,100	1,100	Supplement to Medicare	1,100	3,400
Out-of-Network	600	N/A	N/A	Supplement to Medicare	N/A	N/A
Out of Pocket Max. (Family)	1,800	3,600	3,600	Supplement to Medicare	3,600	N/A
In-Network	1,800	3,600	3,600	Supplement to Medicare	3,600	N/A
Out-of-Network	1,800	N/A	N/A	Supplement to Medicare	N/A	N/A
Rx Plan: Retail Generic	8	8	7	8	8	10
Brand, Formulary	16	16	15	16	16	10
Brand, Non-Formulary	25	25	30	25	25	10
RX Plan: Mail Generic	16	16	14	16	16	5
Brand, Formulary	32	32	30	32	32	5
Brand, Non-Formulary	40	40	60	40	40	5

Note: This plan is a supplement to M	ledicare. It pays the deductible	e and 20% coinsurance of	Medicare Covered service	es.			
Additional Insura	ance Questions: Enter 'X' be	low applicable category	, or if "other," please des	scribe.			
	Self-insured	State Insurance	Third Party Carrier	Broker			
Method Used to Insure	X						
metriod osed to misure	Fully-Insured	Other					
	X						
How many people does your	Single plans	Family plans	Two-person plans	Retirees			
county insure on:	751	704	429	1120			
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance			
	X	X	X	X			
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance			
oller :			X	X			
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other			
ollel :			X				
Opt-out offered for employees			Amount county pays	Opt-out changed in			
covered by other health	Opt-out offered?	Number participating	per emp.	past 2 years?			
insurance plans	N	-		-			
	Are plans grandfathered	Intend to grandfather	Participate in Early				
	in?	longterm?	Retiree Ins Prog				
Health Care Reform	Υ	N	N				
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?		No					
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	400k						
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	No						
What options have been implemented to reduce retiree health care costs?	Add	ed utilization managemen	t programs under Rx plans	5.			

Montgomery

Person Responding: Karen Bass
Title: Health Insurance Team Manager

Phone: 240-777-5054

Email: karen.bass@montgomerycountymd.gov

Fax: 240-777-5131

	Active Employee, Pre-65 Retirees, and Medicare Retirees							
	BCBS CareFirst POS	United Healthcare HMO	Kaiser HMO	Caremark High Option Prescription Plan	Caremark Standard Option Prescription Plan			
Annual Deductible (Individual)								
In-Network	N/A	N/A	N/A	N/A	N/A			
Out-of-Network	\$300	N/A	N/A	N/A	N/A			
Annual Deductible (Family)					\$50			
In-Network	N/A	N/A	N/A	N/A	N/A			
Out-of-Network	\$600	N/A	N/A	N/A	N/A			
Office Co-Pays (In-Network)	\$10	\$5	\$5	N/A	N/A			
	\$25 waived if	\$25 waived if	\$50 waived if					
ER Copay	admitted	admitted	admitted	N/A	N/A			
Coinsurance (In-Network)	N/A	N/A	N/A	N/A	N/A			
Coinsurance (Out-of-Network	20% after deductible is met	N/A	N/A	N/A	N/A			
Out of Pocket Max. (Individual)				N/A	N/A			
In-Network				N/A	N/A			
Out-of-Network				N/A	N/A			
Out of Pocket Max. (Family)				N/A	N/A			
In-Network	\$1,000 per person	\$1,100 per person up		N/A	N/A			
Out-of-Network	plus deductible	to \$3,600 for family	N/A	N/A	N/A			
Rx Plan: Retail Generic	N/A	N/A	N/A	\$4 or \$5	\$10			
Brand, Formulary	N/A	N/A	N/A		\$20			
Brand, Non-Formulary		N/A	N/A	\$8 or \$10	\$35			
RX Plan: Mail Generic	•	N/A	N/A	\$4 or \$5	\$10			
Brand, Formulary		N/A	N/A		\$20			
Brand, Non-Formulary	N/A	N/A	N/A	\$8 or \$10	\$35			

FY 20	119 Marvland County	Government Health B	Benefits Survey				
		lontgomery	· · · · · · · · · · · · · · · · · · ·				
Person Responding: Karen Bass							
Additional Insurance Qu	uestions: Enter 'X' be	low applicable catego		e describe.			
	Self-insured	State Insurance	Third Party Carrier	Broker			
Method Used to Insure	X						
	Fully-Insured		Other				
	X						
How many people does your	Single plans	Family plans	Two-person plans	Retirees			
county insure on:	2913	3479	1933	5174			
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance			
0.101.	X		Х	Х			
Which of the following do you offer?	Accident-Only Insurance	Critical IIIness Insurance	Dental Insurance	Vision Insurance			
Ollel:		Х	Х	X			
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other			
	other		Х				
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?			
plans	N/A	-	-	-			
		Intend to					
	Are plans grandfathered in?	grandfather longterm?	Participate in Early Retiree Ins Prog				
Health Care Reform	Υ	Y	Y				
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?	Carriers all offer Wellness dollars, but not necessarily incentives for participating						
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	Only individual stop loss is offered by carrier CareFirst, \$500,000, UHC \$500,000						
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	No.						
What options have been implemented to reduce retiree	Different cost share based on years of service.						
health care costs?	EGWP plus Wrap for Medicare Eligible retirees and dependents						

Prince George's

County: Prince George's County Government

Person Responding: Julia D. Sanders

Title: Manager, Benefits Administration Division

Phone: (301) 883-6064
Email: jdsanders@co.pg.md.us

Fay.	(301)	883.	6192

	Active Em	ployee and Pre-65 Retire	es	Medicare Retirees		
	Cigna Open Acces In-Network HMO	Kaiser Perm. HMO	Cigna Op. Acc. Plus PPO	Cigna Open Acces In- Network HMO	Cigna Op. Acc.Plus PPO	
Annual Deductible (Individual)						
In-Netwo	rk 50	N/A	50	N/A	N/A	
Out-of-Netwo	rk N/A	N/A	300	N/A	300	
Annual Deductible (Family)						
In-Netwo	rk 50(per family member)	N/A	50 (per family member)	N/A	N/A	
Out-of-Netwo	rk N/A	N/A	550	N/A	550	
Office Co-Pays (In-Network)	30 -PCP, 35-SPEC	15-PCP, 15-SPEC	30-PCP, 35-SPEC	N/A	N/A	
ER Copay	150	50	150	N/A	N/A	
Coinsurance (In-Network)	100%	100%	100%	N/A	100%	
Coinsurance (Out-of-Network	N/A	N/A	20%	N/A	20%	
Out of Pocket Max. (Individual)						
In-Netwo	rk 2,000	3,500	2,000	N/A	N/A	
Out-of-Netwo	rk N/A	N/A	2,000	N/A	2,000	
Out of Pocket Max. (Family)						
In-Netwo	rk 4,000	9,400	4,000	N/A	N/A	
Out-of-Netwo	rk N/A	N/A	4,000	N/A	4,000	
	Carve-out (ESI)	Carve-out (ESI)	Carve-out (ESI)	Carve-out (ESI)	Carve-out (ESI)	
Rx Plan: Retail Gener	ic 10	10	10	10	10	
Brand, Formula	ry 20 or 20%, greater of	20 or 20%, greater of	20 or 20%, greater of	20 or 20%, greater of	20 or 20%, greater of	
Brand, Non-Formula	ry 40 or 30%, greater of	40 or 30%, greater of	40 or 30%, greater of	40 or 30%, greater of	40 or 30%, greater of	
RX Plan: Mail Gene	ic 20	20	20	20	20	
Brand, Formula	ry 40 or 20%, greater of	40 or 20%, greater of	40 or 20%, greater of	40 or 20%, greater of	40 or 20%, greater of	
Brand, Non-Formula	ry 80 or 30%, greater of	80 or 30%, greater of	80 or 30%, greater of	80 or 30%, greater of	80 or 30%, greater of	

Notes: The County's prescription plan is a carve out benefit and is administered by Express-Scripts (ESI). The plan has a mandatory generic and mail order provision. The maximum copayment at retail is \$50 and the maximum copayment for the mail order is \$100.

FY 2019 Maryland County Government Health Benefits Survey Prince George's County: Prince George's County Government Person Responding: Julia D. Sanders Additional Insurance Questions: Enter 'X' below applicable category, or if "other," please describe. Self-insured State Insurance Third Party Carrier Broker Х Method Used to Insure Fully-Insured Other Single plans Family plans Two-person plans Retirees How many people does your county insure on: 2.192 1.892 1.078 3.430 Flexible Spending Long-term Disability Legal Services Life Insurance Income Insurance Accounts Which of the following do you offer? Χ Χ Χ Χ Accident-Only Insurance Critical Illness Insurance Dental Insurance Vision Insurance Which of the following do you offer? Χ Χ Short-term Disability Income Cancer Insurance Prescriptions Other Insurance Which of the following do you offer? Supplemental Dental Χ See below. Χ Amount county pays per Opt-out changed in past Opt-out offered for employees Opt-out offered? Number participating 2 years? emp. covered by other health insurance plans 1914 400 medical/ 200 Rx Ν Intend to grandfather Participate in Early Are plans grandfathered in? Retiree Ins Prog longterm? Health Care Reform Ν Does your current health insurance carrier offer any premium reductions Yes. *See below. or other incentives for participation in wellness programs? If your county self-insures, who is your stop-loss carrier and what are the No Stop Loss Insurance at this time. specific and aggregate attachment points of your policy? Would your county be interested in adopting a nationally sponsored Not at this time private health care exchange for retirees? What options have been implemented to reduce retiree health care Effective January 1, 2017, the County implemented the Employer Group

Notes: The Legal Services, Accident, Critical Illness, Short-term Disability and Supplemental Dental plans are voluntary benefit plans. Coverage for invasive/non invasive cancer is covered under the Critical Illnes Insurance Plan.

Waiver Plan (EGWP) under the prescription plan for Medicare eligibles.

costs?

^{*}Gift cards and wellness items are offered to employees for participation in certain wellness events.

Queen Anne's

County: Queen Anne's County

Person Responding: Beverly Churchill

Title: Director of Human Resources

Phone: 410-758-4406

Email: bchurchill@qac.org

Fax: 410-758-6913

Active Employee, Pre-65 Retirees, and Medicare Retirees

Active Employee, Fre-65 Retirees, and Medicare Retirees						
	PPO	EPO	ВСА	N/A		
Annual Deductible (Individual)				=		
In-Network	N/A	N/A	100	=		
Out-of-Network	200	N/A	500	-		
Annual Deductible (Family)			-	-		
In-Network	N/A	N/A	200	ı		
Out-of-Network	600	N/A	1,000	-		
Office Co-Pays (In-Network)	20	20	20	-		
ER Copay	50	50	100	1		
Coinsurance (In-Network)	N/A	N/A	10%	-		
Coinsurance (Out-of-Network	80/20	N/A	40%	-		
Out of Pocket Max. (Individual)			-	ı		
In-Network	800	6,350	1,500	•		
Out-of-Network	800	12,700	3,000	Ī		
Out of Pocket Max. (Family)			-	-		
In-Network	2,400	N/A	3,000	ı		
Out-of-Network	2,400	N/A	6,000	•		
			-	ı		
Rx Plan: Retail Generic	7	7	8	ı		
Brand, Formulary	24	24	30			
Brand, Non-Formulary	24	24	45	-		
RX Plan: Mail Generic	7	7	16 (90 day supply)	-		
Brand, Formulary	24	24	60 (90 day supply)	•		
Brand, Non-Formulary	24	24	90 (90 day supply)	-		

	EV 2010 Maryland Count	y Government Health Be	anofite Survey	
		Queen Anne's	inchits our vey	
County: Queen Anne's County		Queen Anne 5		
Person Responding: Beverly Chu	rchill			
		pelow applicable categor	ry, or if "other," please d	escribe.
	Self-insured	State Insurance	Third Party Carrier	Broker
Method Used to Insure	X		•	
wethod used to insure	Fully-Insured		Other	
How many people does your	Single plans	Family plans	Two-person plans	Retirees
county insure on:	136	162	113	195
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance
0.101	Χ		Х	Χ
Which of the following do you	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance
offer?	X	Χ	X	Χ
Which of the following do you	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other
offer?	X	Χ	Χ	
Opt-out offered for employees			Amount county pays	Opt-out changed in
covered by other health	Opt-out offered?	Number participating	per emp.	past 2 years?
insurance plans	Υ	75	1,200 annual	N
	Are plans	Intend to grandfather	Participate in Early	
	grandfathered in?	longterm?	Retiree Ins Prog	
Health Care Reform	N	N	Υ	
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?		١	(
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	Careriist, Specific \$150,000			
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	Retiree (65+) carrier change as of 1/1/19 to Medicare Supplemental and Part D plans. No change in benefit design.			
What options have been implemented to reduce retiree health care costs?	See above.			

County: Somerset

Person Responding: Erica Yeager

Title: Human Resources Director

Phone: 410-651-5131

Email: eyeager@somersetmd.us

Fax: 410-651-3559

	Active Employee a	nd Pre-65 Retirees	Medicare Retirees		
	HMO CAREFIRST		INTEGRA/MEDICARE		
	BLUE CHOICE	N/A	PRIMARY/SELF INS.	N/A	
Annual Deductible (Individual)		-			
In-Network		-			
Out-of-Network		-			
Annual Deductible (Family)		-			
In-Network		-			
Out-of-Network		-			
Office Co-Pays (In-Network)	30/PCP- 40 Specialist	-	10		
ER Copay	50	-	10		
Coinsurance (In-Network)		-			
Coinsurance (Out-of-Network		-			
Out of Pocket Max. (Individual)		-			
In-Network	1,300	-			
Out-of-Network		-			
Out of Pocket Max. (Family)		-			
In-Network	2,600	-			
Out-of-Network		-			
		-			
Rx Plan: Retail Generic	15	=	10		
Brand, Formulary	35	=	25		
Brand, Non-Formulary	60	=	50		
RX Plan: Mail Generic	30	=	25		
Brand, Formulary	70	=	60		
Brand, Non-Formulary	120	-	110		

	•	Government Health Somerset	•	
County: Somerset		Odiner Set		
•	•			
		below applicable categor	n, or if "other " please d	ocoribo
Additional insuran	Self-insured	State Insurance	Third Party Carrier	Broker
+	Self-Insured	State insurance	Third Party Carrier	broker
Method Used to Insure	Fully-Insured		Other	
	X			
How many people does your	Single plans	Family plans	Two-person plans	Retirees
county insure on:	98	19	59	40
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance
oner?	Χ			X
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance
offer?			Х	Х
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other
	Х	Х	Х	
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?
plans	N	0	0	=
	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog	
Health Care Reform	N	N	N	
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?		N	0	
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?				
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?				
What options have been implemented to reduce retiree health care costs?				

County: St. Mary's County

Person Responding: Karen Gates

Title: Benefits Coordinator

Phone: 301-475-4200, ext *1104

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Fax: 301-475-4082

	Active Employe	e and Pre-65 Retirees	Medica	re Retirees	
	BlueChoice Advantage	HMO Open Access	BlueChoice Advantage	HMO Open Access	
Annual Deductible (Individual)		-		-	
In-Netwo	rk 250	N/A	250	N/A	
Out-of-Netwo	rk 500	N/A	500	N/A	
Annual Deductible (Family)					
In-Netwo	rk 500	N/A	500	N/A	
Out-of-Netwo	rk 1,000	N/A	1,000	N/A	
Office Co-Pays (In-Network)	20 PCP / 20 Spec	10 PCP / 20 Spec	20 PCP / 20 Spec	10 PCP / 20 Spec	
ER Copay	100	75	100	75	
Coinsurance (In-Network)	100% AB	N/A	100% AB	No charge	
Coinsurance (Out-of-Network	80% AB	N/A	80% AB	N/A	
Out of Pocket Max. (Individual)					
In-Netwo	rk 1,000	2,000	1,000	2,000	
Out-of-Netwo	rk 1,000	N/A	1,000	N/A	
Out of Pocket Max. (Family)					
In-Netwo	rk 2,000	6,000	2,000	6,000	
Out-of-Netwo	rk 2,000	N/A	2,000	N/A	
Rx Plan: Retail Gene	ic 10	10	10	10	
Preferred Bra		20	20	20	
Non-preferred Bra		35	35	35	
RX Plan: Mail Gene		20	20	20	
Preferred Bra	· ·	40	40	40	
Non-preferred Bra		70	70	70	
Preferred Speciality Dru	50% coinsurance up to a max payment of \$75	50% coinsurance up to a max payment of \$75	50% coinsurance up to a max payment of \$75	50% coinsurance up to a max payment of \$75	
Non-preferred Speciality Dru	50% coinsurance up to a	50% coinsurance up to a max payment of \$150	50% coinsurance up to a max payment of \$150	50% coinsurance up to a max payment of \$150	

	FY 2019 Maryland Co	ounty Government Health Ben	efits Survey			
	, , _ , , , , , , , , , , , , , , , , ,	St. Mary's				
County: St. Mary's County						
Person Responding: Karen Gates						
Additional Inst	urance Questions: Enter '	'X' below applicable category,	, or if "other," please describe.			
	Self-insured	State Insurance	Third Party Carrier	Broker		
Method Used to Insure	X					
inclined edge to mound	Fully-Insured		Other			
How many people does your county insure on:	Single plans	Family plans	Two-person plans	Retirees		
	193	252	176	264		
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance		
	Х	х	х	X		
Which of the following do you offer?	Accident-Only Insurance	Vision Insurance				
	X	X	х	X		
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other		
	Х	х	X			
			Amount county pays per	Opt-out changed in past 2		
Opt-out offered for employees covered by	Opt-out offered?	Number participating	emp.	years?		
other health insurance plans	N		VARIES	-		
	Are plans	Intend to grandfather	Participate in Early Retiree			
	grandfathered in?	longterm?	Ins Prog			
Health Care Reform	N	N	Y			
Does your current health insurance carrier						
offer any premium reductions or other	No					
incentives for participation in wellness						
programs? If your county self-insures, who is your stop-						
loss carrier and what are the specific and	CareFirst: \$150 Specific					
aggregate attachment points of your policy?	Caron nat. \$100 Opecinic					
Would your county be interested in adopting a						
nationally sponsored private health care	No					
exchange for retirees?	140					
	Effective 7/1/16 - switched from PPO to BlueChoice Advantage plan, increased emergency room copays, increased HMO prescripton drug copays, added deductible for in-patient hospitalization, added 4th Tier to prescription drug plan, will change drug formulary effective 1/1/17; removed 115% aggregate effective 7/1/17. Effective 7/1/18 - implemented restricted generic substitution program, implemented Maintenance Choice program; added 5th Tier to prescription drug plan.					

FY 2019 Maryland County Government Health Benefits Survey						
Talbot						
	Active Employee and	Active Employee and Pre-65 Retirees Medicare Retirees				
	Integra Administrative Group - PPO	N/A	Medicare Supp Coverage	N/A		
Annual Deductible (Individual)		=		-		
In-Network	N/A	=	N/A	-		
Out-of-Network	300	-	N/A	-		
Annual Deductible (Family)		-	N/A	-		
In-Network	N/A	-		-		
Out-of-Network	600			-		
Office Co-Pays (In-Network)	15	-	N/A	-		
ER Copay	125	=		-		
Coinsurance (In-Network)	N/A	-		-		
Coinsurance (Out-of-Network	80/20			-		
Out of Pocket Max. (Individual)		-	N/A	-		
In-Network	500	-		-		
Out-of-Network	1,000	-				
Out of Pocket Max. (Family)		-	N/A	-		
In-Network	1,000			-		
Out-of-Network	2,000	-		-		
		-				
Rx Plan: Retail Generic	10	-	10	-		
Brand, Formulary	30	-	25	-		
Brand, Non-Formulary	50	-	40	-		
RX Plan: Mail Generic	20	-	25	-		
Brand, Formulary	60	-	50	-		
Brand, Non-Formulary	100	-	88			

Notes:

1) Medicare Supp Coverage - \$15,000 annual maximum for prescripiton drugs

FY 2019 Maryland County Government Health Benefits Survey						
	Talbot					
Person Responding: Cynthia Hado	dawav					
		below applicable categor	y, or if "other," please de	escribe.		
	Self-insured	State Insurance	Third Party Carrier	Broker		
Mathad Haad to Income	X		-			
Method Used to Insure	Fully-Insured		Other			
	-					
How many people does your	Single plans	Family plans	Two-person plans	Retirees		
county insure on:	102	62	98	43		
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance		
Offer:	Χ		Χ	Χ		
Which of the following do you	Accident-Only	Critical Illness	Dental Insurance	Vision Insurance		
offer?	Insurance	Insurance		vision msurance		
oner.	Χ	X	X	X		
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other		
oner:	X	X	X	Aflac		
Opt-out offered for employees			Amount county pays	Opt-out changed in		
covered by other health insurance	Opt-out offered?	Number participating	per emp.	past 2 years?		
plans	Υ	46	2,000	N		
	Are plans	Intend to grandfather	Participate in Early			
	grandfathered in?	longterm?	Retiree Ins Prog			
Health Care Reform	N	N	N			
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?		N	lo			
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	carrier - Unimerica \$90,000 individual \$4,890,000 aggregate					
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	would be interested in information					
What options have been implemented to reduce retiree health care costs?		none at	this time			

Washington

County: Washington County, Maryland

Person Responding: Debra I. Peyton

Title: Director of HR Phone: 240-313-2356

Email: dpeyton@washco-md.net

Fax: 240-313-2351

Active Employee and Pre-65 Retirees

Active Employee and Pre-65 Retirees							
	Low Option Medical (EPO) In-Network only	High Option Medical (PPO) In-Network	N/A	N/A			
Annual Deductible (Individual)			-	-			
In-Network	N/A	N/A	-	-			
Out-of-Network	N/A	250	•	-			
Annual Deductible (Family)			-	-			
In-Network	N/A	N/A	i	-			
Out-of-Network	N/A	750	i	-			
Office Co-Pays (In-Network)	15	20	•	-			
ER Copay	100	100	i	-			
Coinsurance (In-Network)	N/A	N/A	-	-			
Coinsurance (Out-of-Network	N/A	30%	-	-			
Out of Pocket Max. (Individual)			-	-			
In-Network	N/A	N/A	•	-			
Out-of-Network	N/A	1,250	-	-			
Out of Pocket Max. (Family)			-	-			
In-Network	N/A	N/A	-	-			
Out-of-Network	N/A	3,750	1	-			
			•	-			
Rx Plan: Retail Generic	10	10	-	-			
Brand, Formulary		35	-	-			
Brand, Non-Formulary	45	45	i	-			
Allegra D, Nexium, and Prevacid	50	50	-	-			
RX Plan: Mail Generic	20	20	-	-			
Brand, Formulary	40	40	-	-			
Brand, Non-Formulary	70	70	-	-			
Allegra D, Nexium, and Prevacid	100	100	-	-			

Notes: Retirees become ineligible once they meet the age of 65 or attain medicare

FY 2019 M	Maryland County (Sovernment Healt	h Benefits Survey	1		
11201010	Washington					
County: Washington County, Marylan		asimigion				
Person Responding: Debra I. Peyton	· ··					
	e Questions: Enter 'X' be	elow applicable category	, or if "other," please des	scribe.		
	Self-insured	State Insurance	Third Party Carrier	Broker		
Matha III and to be some	X		·			
Method Used to Insure	Fully-Insured		Other			
	-					
How many people does your county	Single plans	Family plans	Two-person plans	Retirees		
insure on:	Х	Х	Х	Х		
Which of the following do you offer?	Life Insurance Legal Services Flexible Spending Long-terr Accounts Income					
	Х		X	Х		
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance		
	Х		Х	Х		
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other		
	X X					
Opt-out offered for employees			Amount county pays	Opt-out changed in		
covered by other health insurance	Opt-out offered?	Number participating	per emp.	past 2 years?		
plans	Y	109	VARIES	N		
	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog			
Health Care Reform	N	Υ	N			
Does your current health insurance						
carrier offer any premium reductions		N	lo			
or other incentives for participation in wellness programs?						
If your county self-insures, who is						
your stop-loss carrier and what are			_			
the specific and aggregate		SunLife \$175,000 Sp	ecific, Non aggregate			
attachment points of your policy?						
Would your county be interested in						
adopting a nationally sponsored	Maybe					
private health care exchange for retirees?	waybe					
What options have been						
implemented to reduce retiree health care costs?		They pay 5	60% of cost			

Wicomico

County: Wicomico

Person Responding: Michele Ennis

Title: Director of Human Resources

Phone: 410-334-3125

Email: mennis@wicomicocounty.org

Fax: 410-334-3111

	Active Employee and Pre-65 Retirees		Medicare Retirees	
	PPO	EPO	Medicare Primary	N/A
Annual Deductible (Individual)				-
In-Network	N/A	N/A	N/A	-
Out-of-Network	200	N/A	N/A	-
Annual Deductible (Family)			N/A	-
In-Network	N/A	N/A	N/A	-
Out-of-Network	600	N/A	N/A	-
Office Co-Pays (In-Network)	15	15	N/A	-
ER Copay	25 phy/ 100 facility	25 phy/ 100 facility	N/A	-
Coinsurance (In-Network)	N/A	N/A	Medicare	-
Coinsurance (Out-of-Network	N/A	N/A	Medicare	-
Out of Pocket Max. (Individual)				-
In-Network	1,200	1,200	N/A	-
Out-of-Network	1,200	1,200	N/A	-
Out of Pocket Max. (Family)			N/A	-
In-Network	3,600	3,600	N/A	-
Out-of-Network	3,600	3,600	N/A	-
				-
Rx Plan: Retail Generic	5	5	5	-
Brand Formulary	30	30	30	-
Brand, Non-Formulary	45	45	45	-
RX Plan:Mail Generic	5	5	5	-
Brand, Formulary	30	30	30	-
Brand, Non-Formulary	45	45	45	-

FY 2019 Maryland County Government Health Benefits Survey				
	V	Vicomico		
County: Wicomico				
Person Responding: Michele Enni				
Additional Insurance Que		ow applicable catego	ry, or if "other," pleas	se describe.
	Self-insured	State Insurance	Third Party Carrier	Broker
Method Used to Insure	X			
metrica coca to mouro	Fully-Insured		Other	
How many people does your	Single plans	Family plans	Two-person plans	Retirees
county insure on:	250	149	128	284
Which of the following do you offer?	Life Insurance	Legal Services	Flexible Spending Accounts	Long-term Disability Income Insurance
	X		X	X
Which of the following do you offer?	Accident-Only Insurance	Critical Illness Insurance	Dental Insurance	Vision Insurance
oner:	X	Χ	X	X
Which of the following do you offer?	Short-term Disability Income Insurance	Cancer Insurance	Prescriptions	Other
	X	Χ	Χ	
Opt-out offered for employees covered by other health insurance	Opt-out offered?	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?
plans	Υ	745	85%emp/75%dep	-
	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog	
Health Care Reform	N	N	N	
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?		I	N	
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	CareFirst of MD, Inc. \$250,000			
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	yes if cost savings to retirees & network coverage			
What options have been implemented to reduce retiree health care costs?		offer to subsidize	other national plans	

FY 2019 Maryland County Government Health Benefits Survey				
	Worcester			
Worcester County Government				
Stacey Norton				
Human Resources Director				
410-632-0090				
eporton@co.worcostor.md.us				

410-632-5614 fax

Notes: Hired before 7/1/15 it is a 90/10 cost sharing; New hires after 7/1/15 it is a 80/20% cost sharing; same coverage for retirees. New Hires after 10/1/17: the employee can stay on the insurance at the same cost share but the dependents have to pay 100% of the deductible to remain on the insurance. Our plan includes Worcester County Government, Worcester County Board of Education, Commission on Aging, and Soil Convervation members and subsribers for active and retires.

	Active Employee and Pre-65 Retirees		Medicare Retirees	
	Traditional	N/A	Traditional	N/A
Annual Deductible (Individual)		-		-
In-Network	0	•	0	
Out-of-Network	\$250	•	\$250	
Annual Deductible (Family)		•		
In-Network	0	•	0	
Out-of-Network	\$500	•	\$500	
Office Co-Pays (In-Network)	\$20	•	\$20	
Specialist Office Co Pay	\$30		\$30	
Urgent Care Center Co Pay	\$20		\$20	
ER Copay	\$200 (waived if admitted)		\$200 (waived if admitted)	-
X-ray Co Pay	\$20		\$20	
Coinsurance (In-Network)	NA	-	NA	-
Coinsurance (Out-of-Network	NA	-	NA	-
Out of Pocket Max. (Individual)				-
In-Network	\$1,000		\$1,000	-
Out-of-Network	\$2,000		\$2,000	-
Out of Pocket Max. (Family)				-
In-Network	\$2,000	-	\$2,000	-
Out-of-Network	\$4,000	-	\$4,000	-
		-		-
x Plan: 34 day supply Retail Preventative Drugs	\$0		\$0	-
Generic Drugs	\$10		\$10	
Preferred Brand Drugs	\$30		\$30	-
Non-Preferred Brand Drugs	\$60	-	\$60	-
Speciality Preferred Brand Drugs	\$30		\$30	
Speciality Non-Preferred Brand Drugs	\$60		\$60	
RX Plan: Mail 90 day supply Generic	\$10	-	\$10	-
Preferred Brand Drugs	\$30	-	\$30	-
Non-Preferred Brand Drugs	\$60	-	\$60	-
Speciality Preferred Brand Drugs	\$30		\$30	
Speciality Non-Preferred Brand Drugs	\$60		\$60	
Retail Pharmacy 90 day supply Generic	\$20		\$20	
Preferred Brand Drugs	\$60		\$60	
Non-Preferred Brand Drugs			\$120	
Speciality Preferred Brand Drugs	\$60		\$60	
Speciality Non-Preferred Brand Drugs	\$120		\$120	

FY 201	9 Maryland County Gove	rnment Health Benefits S	Survey	
	Worce	ester	-	
Worcester County Government				
Stacey Norton				
Human Resources Director				
Additional Insurance Que	stions: Enter 'X' below a	pplicable category, or if '	other," please describe.	i
	Self-insured	State Insurance	Third Party Carrier	Broker
Method Used to Insure	X			
metriou oscu to moure	Fully-Insured		Other	
				1
	Single plans	Family plans	Two-person plans	Retirees
How many people does your county insure on:	551	686	EE + Spouse = 308	Medicare Primary 919
			EE + Child = 101	Pre-65 Retirees 381
	Life Insurance	Legal Services	Flexible Spending	Long-term Disability
Which of the following do you offer?		Legal Oct vices	Accounts	Income Insurance
	X		Х	X
Which of the following do you offer?	Accident-Only	Critical Illness	Dental Insurance	Vision Insurance
	Insurance	Insurance		
	Х	X	X	X
Which of the following do you offer?	Short-term Disability	Cancer Insurance	Prescriptions	Other
	Income Insurance		•	00.
	X	X	X	
0.4	0	Normala an mantiain atima	Amount county pays	Opt-out changed in
Opt-out offered for employees covered by other	Opt-out offered?	Number participating	per emp.	past 2 years?
health insurance plans	Y	lateral to see alfather	0	N
	Are plans	Intend to grandfather	Participate in Early	
	grandfathered in?	longterm?	Retiree Ins Prog	
Health Care Reform	Y	Y	N	
Does your current health insurance carrier offer any premium reductions or other incentives for participation in wellness programs?	CareFirst give us \$25,000	in wellness credits to use	on wellness programs	
If your county self-insures, who is your stop-loss carrier and what are the specific and aggregate attachment points of your policy?	Care First Blue Cross Blu	e Shield Stop Loss of \$250	0,000 for medical and pres	cription
Would your county be interested in adopting a nationally sponsored private health care exchange for retirees?	No			
What options have been implemented to reduce retiree health care costs?	Free carotid artery and bo	ne density screenings; blo	od pressure checks, lifesty	yle balance classes onsite