



Orange County Sheriff's Office

Retiree Open Enrollment
2024-2025

Welcome to Open Enrollment

- ❑ Welcome to Open Enrollment Retiree Kick-off
- ❑ This is the time of year for all retirees and their dependents to make changes to their benefit elections offered through the Orange County Sheriff's Office
- ❑ The new plan year will be effective October 1, 2025, and go through September 30, 2026

Open Enrollment Highlights

- ❑ Medical and EAP plans will continue with Cigna
- ❑ Dental and Vision Plans will continue with Humana
- ❑ All Plan Summaries and supporting documents on the benefits have been added to www.ocso.com/retiree
- ❑ For pre-enrollment questions, the Cigna One Guide Pre-Enrollment line will be open call us at 888.806.5042

Open Enrollment Highlights

Changes for 2025-2026 plan year:

- Minimal monthly increase in rates
- No changes in plan design
- Gold Plan deductible to increase to \$1,650/\$3,300 due to IRS requirements
- Cigna RX will no longer cover weight loss medications
- No changes to dental or vision

Open Enrollment Highlights

- ❑ This year's open enrollment is **passive**, meaning that your current benefit elections will rollover and continue
- ❑ If you would like to make any changes to your current coverage the Open Enrollment Change Form needs to be completed and returned to P & A by **August 15, 2025**
- ❑ If you are adding any new dependents to your coverage, their Date of Birth and Social Security number are required

Qualifying Event

- ❑ To comply with IRS regulations, you cannot change your elections for the next 12 months unless you experience a Qualifying Event such as:
 - Marriage
 - Divorce
 - Birth, adoption or legal custody of a child

- ❑ Human Resources must be notified within **30 days** of an event in order to change your coverage

- ❑ **Documentation supporting a QE is required**



Your Medical Plan Options

Plan year: 10/1/2025-9/30/2026

Offered by Cigna Health and Life Insurance Company or its affiliates
In Utah, plans are offered by Cigna Health and Life Insurance Company.

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Planning for your medical costs

	Green Plan		Gold Plan (Health Savings Account)	
	In Network	Out of Network	In Network	Out of Network
Deductible (Individual/Family)	\$2,000/\$4,000	\$4,200/\$8,400	\$1,650/\$3,300	\$3,000/\$6,000
Out-of-pocket maximum¹	\$4,000/\$8,000	\$8,400/\$16,800	\$3,000/\$6,000	\$6,000/\$12,000
Coinsurance	20%	50%	20%	50%
Preventive Care	\$0, Covered at 100%	50% AD	\$0, Covered at 100%	50% AD
Primary Care (PCP)	\$25 Copay	50% AD	20% AD	50% AD
Specialist	\$50 Copay	50% AD	20% AD	50% AD
Virtual Urgent Care	\$25 Copay	Not Covered	20% AD	Not Covered
Urgent Care	\$50 Copay	\$50 Copay	20% AD	20% AD
Emergency Room	1 st visit: \$250; 2 nd visit: \$350; 3+ visits: \$500	1 st visit: \$250; 2 nd visit: \$350; 3+ visits: \$500	20% AD	20% AD
Inpatient	20% AD	50% AD	20% AD	50% AD
Outpatient	20% AD	50% AD	20% AD	50% AD

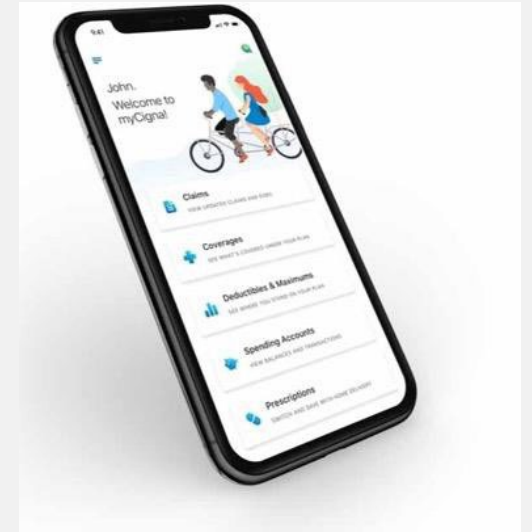
If you choose to receive care outside of your plan's network, only covered expenses will be applied to your deductible – subject to your plan's Maximum Reimbursable Charge provisions. **All plans have exclusions and limitations.** See your enrollment materials for more information about costs and details about covered and non-covered services, including plan exclusions and limitations.

1. This is the most a family (employees plus covered family members) will pay for in-network, out-of-pocket expenses. It's important to note that each individual family member's out-of-pocket costs are capped at \$8,700 for 2022 health plans, and overall family in-network costs are capped by the IRS at \$17,400. The out-of-pocket costs for people with individual coverage are capped at \$7,050 for 2022. To see examples of how this works, please visit www.InformedOnReform.com > Federal Regulations > Cost Sharing Limits, or Cigna.com/health-care-reform/embedded-ooop-customer-impacts.



Your online home for assessment tools, plan management, medical updates and much more:

- Find in-network doctors, dentists and medical services
- View, print and email ID cards
- Review your coverage
- Manage and track claims, account balances and deductibles
- Compare cost and quality information for doctors and hospitals
- Access a variety of health and wellness tools and resources
- Receive alerts when new plan documents are available
- Manage your home delivery prescription orders² or talk with a pharmacist
- Use the Price a Medication feature to explore medication costs³



 Download the **myCigna®** app and access your account.¹

For illustrative purposes only.

1. App/online store terms and mobile phone carrier/data charges apply. Actual myCigna® features may vary depending on your plan and individual security profile.
2. Not all plans include home delivery as a covered pharmacy option. Please log in to the myCigna® app or website, or check your plan materials, to learn more about the pharmacies in your plan's network.
3. Prices shown on myCigna® are not guaranteed and coverage is subject to your plan terms and conditions. Visit myCigna® for more information.

Virtual care¹



Cigna Healthcare has partnered with MDLIVE® to offer a comprehensive suite of convenient virtual care options — available by phone or video whenever it works for you.

Primary Care

Preventive care, routine care and specialist referrals

- Preventive care checkups/ wellness screenings available at no additional cost²
- Prescriptions available through home delivery or at local pharmacies, if appropriate
- Receive orders for biometrics, blood work and screenings at local facilities³

Behavioral Care

Talk therapy and psychiatry from the privacy of home

- Access to psychiatrists and therapists
- Schedule an appointment that works for you
- Option to select the same provider for every session
- Care for issues such as anxiety, stress, grief and depression

Urgent Care

On-demand care for minor medical conditions

- On-demand 24/7/365, including holidays
- Care for hundreds of minor medical conditions
- A convenient and affordable alternative to urgent care centers and the ER
- Prescriptions available, if appropriate

Dermatology⁴

Fast, customized care for skin, hair and nail conditions — no appointment required

- Board-certified dermatologists review pictures and symptoms
- Care for common skin, hair and nail conditions including acne, eczema, psoriasis, rosacea, suspicious spots and more
- Diagnosis and customized treatment plan, usually within 24 hours

1. Cigna Healthcare provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. Not all preventive care services are covered, refer to plan documents for complete description of virtual care services and costs. Virtual primary care through MDLIVE is only available for Cigna Healthcare medical members aged 18 and older.
2. For customers who have a non-zero preventive care benefit, MDLIVE virtual wellness screenings will not cost \$0 and will follow their preventive benefit.
3. Limited to labs contracted with MDLIVE for virtual wellness screenings.
4. Virtual dermatological visits through MDLIVE are completed via asynchronous messaging. Diagnoses requiring testing cannot be confirmed. Customers will be referred to seek in-person care. Treatment plans will be completed within a maximum of 3 business days, but usually within 24 hours.



Take control of your health and your health costs

Here are a few easy ways to save on out-of-pocket health care expenses:



Stay with in-network
providers and facilities



Visit an urgent care center
instead of the ER for
non-life-threatening health
concerns



Use a convenience care
clinic (inside supermarkets,
pharmacies and other retail
stores) for routine care



Access virtual care¹ through
MDLIVE® 24/7 for a range of
minor conditions

1. Cigna Healthcare provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. Refer to plan documents for complete description of virtual care services and costs. Virtual primary care through MDLIVE is only available for Cigna Healthcare medical members aged 18 and older.

This information is for educational purposes only. It is not medical advice. Always consult your doctor for examinations, treatment, testing and care recommendations. In an emergency, dial 911 or visit the nearest emergency room.

Take control of your health and your health costs

Additional ways to save



In-network providers

Visit **myCigna.com**[®] and use the “Find Care & Costs” tool to locate in-network providers and facilities



Lower-cost labs

Stay with lower-cost national labs like Quest Diagnostics[®] or LabCorp[®]



MRIs and CT scans

Choose independent radiology centers (versus hospital-based radiology) for MRIs and CT scans



Outpatient centers

Select an in-network, freestanding outpatient surgery center for procedures like colonoscopy, endoscopy or arthroscopy

This information is for educational purposes only. It is not medical advice. Always consult your doctor for examinations, treatment, testing and care recommendations. In an emergency, dial 911 or visit the nearest emergency room.

Behavioral health support



Confide Employee Assistance Program (EAP)

Cigna Healthcare's Confide EAP can connect you with a range of services, including emotional support, financial assistance, home/life support, and legal assistance.¹

- Connect to a Confide Behavioral Health Navigator over the phone or through live chat, and receive a referral to licensed clinicians and consultants
- Provides **8** sessions to connect with licensed clinicians in our EAP network
- Meet with counselors virtually on your phone, tablet or home computer
- Unlimited 20–30-minute telephonic consultations with a licensed clinician
- Live, on-demand EAP webcasts
- 100% confidential
- Available to anyone in your household, related or not. Use **ocsofl** to access.
- No additional cost to you

1. Employee assistance program services are in addition to, not instead of, your health plan benefits. These services are separate from your health plan benefits and do not provide reimbursement for financial losses. Customers are required to pay the entire discounted charge for any discounted legal and/or financial services. Legal consultations related to employment matters are excluded. Additional restrictions may apply. Program availability may vary by plan type and location and are not available where prohibited by law.



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Confide Employee Assistance Program (EAP) *cont.*

24/7/365 crisis and emergency support

Happify™ offered through Cigna

Increase resilience through games, guided meditations, and other activities. This digital self-guidance tool reduces stress while encouraging confidence²

iPrevail offered through Cigna

On-demand peer coaching and personalized learning to help boost your mood and improve mental health care³

Work Life Resources

- Legal and financial consultations
- Family resources including child, elder, and pet care
- Convenience services
- Education consultations and referrals

myCigna.com® guided navigation

Our digital portal includes guided navigation that provides you with customized, convenient care options (digital, coaching, virtual and in person).

Large, national network

Includes national virtual network that includes Talkspace, MDLIVE, Ginger, and more. Online scheduling and text messaging. Fast Access network guarantees appointment scheduling in 5 business days.³ Appointment scheduling assistance provided.

Coaching & Support

Dedicated support for a broad range of conditions including autism, eating disorders, intensive behavioral case management, substance use and opioid and pain management, and parents and families.

1. All Cigna Healthcare products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Evernorth Care Solutions, Inc., and Evernorth Behavioral Health, Inc. Use and distribution limited solely to authorized personnel.

2. Program services are provided by independent companies/entities and not by Cigna Healthcare. Programs and services are subject to all applicable program terms and conditions. Program availability is subject to change.

3. Per our agreement with contracted providers. Within 5 business days for first time appointment with non-prescriber; 15 business days for prescriber.



Virtual behavioral care¹



Now you don't have to wait — or travel — for behavioral care. Cigna Healthcare has partnered with MDLIVE® so you can connect by video or phone to licensed therapists and psychiatrists, all from the privacy of home. Non-emergency behavioral/mental health conditions treated include:



- Addiction
- Bipolar disorder
- Child/adolescent issues
- Depression
- Eating issues
- Grief/loss
- Life changes
- Men's issues
- Postpartum depression
- Panic disorders
- Relationship and marriage issues
- Stress
- Parenting issues

1. This is not a full list and is subject to change. Cigna Healthcare provides access to virtual care through participating in-network providers. Not all providers have virtual capabilities. Cigna Healthcare also provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. All health care providers are solely responsible for the treatment provided to their patients; providers are not agents of Cigna Healthcare. Not all preventive care services are covered, refer to plan documents for complete description of virtual care services and costs.

Health & well-being support

Omada® for Cigna Healthcare®¹

Omada is a digital lifestyle change program focused on building healthy, long-lasting habits.

- Designed to help you lose weight, gain energy and reduce the risks of type 1 and type 2 diabetes as well as heart disease (hypertension)
- Surrounds you with the tools and support you need to make lasting, meaningful changes to the way you eat, move, sleep and manage stress — one small step at a time
- Teaches healthy habits — guided by interactive online lessons and support groups, professional health coaching and a digitally connected scale
- Receive the program at no additional cost if you or your covered adult dependents are enrolled in the company medical plan and have been diagnosed with type 1 or type 2 diabetes or hypertension and/or are at risk for developing type 2 diabetes or heart disease
- Apply by visiting omadahealth.com/ocso

1. The Omada® program is administered by Omada Health, Inc., an independent third-party service provider. Cigna Healthcare does not endorse or guarantee the products or services of any third parties and assumes no liability with respect to any such products or services.



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Pathwell Bone & JointSM

A new standard in musculoskeletal care that combines designated providers, clinical expertise, coordinated support, and intuitive digital tools to empower you to take charge of your health.

- Guidance to the care you need
- Dedicated support – Work one-on-one with a Cigna Healthcare Care Advocate with expertise in MSK issues
- Intuitive digital experience – Personalized activities, expert content, and digital communication at your fingertips
- Surgery benefit – When surgery is the optimal option, choose from a selection of designated in-network surgeons who deliver affordable care and meet Cigna Healthcare rigorous quality criteria, with zero or low-cost surgery, pre and post-surgery support and a travel benefit. ¹
- Included in your plan at no additional cost!



Visit CignaPathwellBoneandJoint.com or call 877.505.5875 to learn more.



1. When program participation requirements are met the Pathwell Bone & Joint Surgery benefit applies to certain spine, hip, knee and shoulder surgeries. For non-HSA plans, the employer's plan pays 100% of eligible expenses. For HSA plans, plan pays 100% after deductible is met.

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Additional Benefits Include

- ❑ **Cigna One Guide**
- ❑ **Health Information Line**
- ❑ **Cigna Healthcare Lifestyle Management Programs**
- ❑ **Cigna Health Advisor**
- ❑ **IdentityForce**
- ❑ **Compare and select providers**

For more information contact our onsite Cigna rep Stephen at Stephen.Laica@CignaHealthcare.com or SO-Benefits@ocsofl.com



Your Humana Dental and Vision benefits guide:

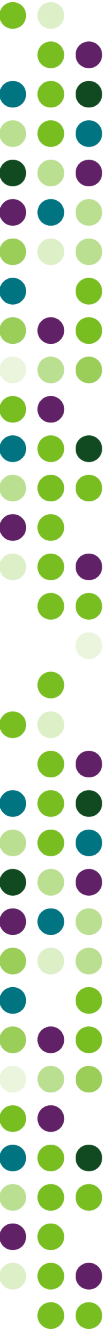
2025 – 2026 Plan Year



**ORANGE COUNTY
SHERIFF'S OFFICE**

SHERIFF JOHN W. MINA

Humana[®]





Our dental plans will make you smile

At Humana we want to help take care of you. Dental health is an important part of your overall well-being, and Humana's dental benefits help make it easy to make your dental care a priority. When you sign up for a Humana dental plan, you're signing up for a healthier you.

Why sign up for dental benefits?



Preventive dental care, such as check-ups and cleanings, help stop issues before they start saving you time and money in the long run. And when you use an in-network dentist, **preventive care is at no additional cost to you.**



For years, doctors have recognized the link between oral health and whole-body health. **Routine teeth cleanings can help reduce your risk for heart disease, stroke and dementia.**



Plus, caring for you is at the heart of everything we do so we make it easy for you to get the help you need – when you need it. Our service teams are always ready to help and answer your questions.



Dental PPO Plus+

The benefits and services highlighted below provide an overview of the dental plan you can sign up for. The table shows how services will be paid when you visit a dentist in the Humana network.

Traditional Preferred PPO Plan 100/100/50 INFS+

Network: PPO/Traditional Preferred	In Network
Deductible The amount you pay before your dental plan starts paying for covered expenses (excluding preventive services):	Individual: \$50 Family: \$150
Annual Maximum Total amount the plan pays in a plan year:	\$1,000 + extended annual maximum
Extended Annual Maximum Additional coverage for preventive, basic, and major services after the annual maximum is met (excludes orthodontia)	30%
Preventive services Visit any in-network dentist at no additional cost to you for preventive care services including 4 routine cleanings per year , routine X-rays, and oral cancer screening (ages 40+)	Plan pays 100% of covered services, no deductible and does not apply against annual maximum
Basic services Basic services include services like fillings, simple extractions, emergency care for pain relief, 4 periodontal maintenance cleanings per year (if needed) , root canals, crowns, bridges, oral surgery, and fixed dentures	Plan pays 100% of covered services after deductible
Major services Major services include removable dentures, dentures relines, denture repair and adjustments, and Implants	Plan pays 50% of covered services after deductible

Orthodontia:

Adult & child orthodontia covered at **80%** with lifetime maximum of \$1,000 (includes Invisalign & Byte)

Other benefits:

- Flexible plan with ability to see any dentist. You'll get the most out of your plan and pay less for services when you see an in-network dentist.



Dental PPO

The benefits and services highlighted below provide an overview of the dental plan you can sign up for. The table shows how services will be paid when you visit a dentist in the Humana network.

Traditional Preferred PPO Plan 100/80/50 INFS

Network: PPO/Traditional Preferred	In Network
Deductible The amount you pay before your dental plan starts paying for covered expenses (excluding preventive services):	Individual: \$50 Family: \$150
Annual Maximum Total amount the plan pays in a plan year:	\$1,000 + extended annual maximum
Extended Annual Maximum Additional coverage for preventive, basic, and major services after the annual maximum is met (excludes orthodontia)	30%
Preventive services Visit any in-network dentist at no additional cost to you for preventive care services including 3 routine cleanings per year , routine X-rays, and oral cancer screening (ages 40+)	Plan pays 100% of covered services, no deductible and does not apply against annual maximum
Basic services Basic services include services like fillings, simple extractions, emergency care for pain relief, 4 periodontal maintenance cleanings per year (if needed) , root canals, oral surgery, and denture repairs	Plan pays 80% of covered services after deductible
Major services Major services include crowns, bridges, dentures, dentures relines, and adjustments	Plan pays 50% of covered services after deductible

Orthodontia:

Adult & child orthodontia covered at **50%** with lifetime maximum of \$1,000 (includes Invisalign & Byte)

Other benefits:

- Flexible plan with ability to see any dentist. You'll get the most out of your plan and pay less for services when you see an in-network dentist.





Virtual dental care 24/7

For PPO Plans only

When it's urgent, you can see a dentist virtually

Humana members have access to **\$0 teledentistry**, also known as virtual dental care, as part of your Humana dental plan. Teledentistry services allow you to see a dentist within minutes from your computer, smartphone or tablet.

If you're in pain or cannot visit a dentist's office, virtual dental care may be an option rather than a visit to the emergency room. **Teledentistry dentists can:**

- **Write prescriptions when needed** (Please note, your dental plan does not cover the cost of medications.)
- **Perform a visual exam** for things like mouth, tooth or jaw pain
- **Provide instructions** on caring for mouth, tooth or jaw pain
- **Help you determine if you need urgent/emergency care** or home care until you can see their dentist
- **Help you find a dentist** if you don't have one or if requested



Starting a virtual dental visit:

Once your dental plan coverage begins, you can sign up for a virtual visit account so you're ready when you need to see a dentist virtually:

1. Go to dental.com/Humana from your computer, tablet or mobile device and click on the **"See a dentist now"** button
2. Entering your dental insurance information:
 - Select "Group" for "Product Type"
 - "Subscriber ID" is your "Member ID" listed on your dental ID card.

Dental HS195 DHMO

The benefits and services highlighted below provide an overview of the dental plan you can sign up for. The table shows how services will be paid when you visit a dentist in the Humana network.

HS195 DHMO/Prepaid Dental Plan – In Network Only

With this plan, you pay a set amount, or copay, for each service when you see a participating primary care dentist. There are no yearly maximums, no deductibles and no waiting periods. Below is a sampling of the most frequently used dental services for this plan.

	Description	What you pay
Preventive services	Oral exam	No charge
	X-ray (complete series)	No charge
	Prophylaxis cleaning (adult/child) – 2 routine cleanings per year	No charge
	Topical application of fluoride (child <16)	No charge
	Sealant (per tooth)	No charge

Basic services	Amalgam filling (one surface)	No charge
	Resin-based composite filling (one surface, anterior)	No charge
	Resin-based composite filling (one surface, posterior)	\$30

	Description	What you pay
Major services	Crown	\$245
	Endodontic therapy, molar tooth	\$210
	Periodontal maintenance	\$40
	Extraction	\$5-\$60

Orthodontia	Adult and Children routine orthodontic treatment	\$2135
	Retention	\$300

Benefits shown are for in-network services. This is an example, and costs may vary. If you enroll in this plan, you can view your Summary of Benefits and Coverage for details.





How to find a dentist in the network

Visiting a dentist in the Humana network ensures you're getting the lowest cost for dental care. To find an in-network dentist, follow these steps:



Step 1: Scan the QR code or go to humana.com/findadentist and select the "Dentist" tab

Step 2: Enter your search information based on the plan

Enter your **ZIP code**

In **"Select a lookup method"** choose:

- **"PPO"** for Traditional Preferred PPO plans
- **"DHMO"** for DHMO plan

Select the network:

- **"PPO/Traditional Preferred"** for Traditional Preferred PPO Plans
- **"HS195 DHMO/Prepaid Network"** for DHMO plan

Click **"Search"** button



Is your dentist missing from our network?



We don't want you to have to choose between continuing to see your dentist and receiving the best possible value from your dental benefit plan.

You can help us get your dentist in our network. **Scan the QR code and fill out the online form to refer your dentist.**



Vision plans are definitely worth a closer look

There's more to vision health than getting an annual eye exam. It not only makes sure you're seeing clearly but also supports your eye and overall health. A yearly eye exam monitors your vision and eye health for things like glaucoma and cataracts, and signs of medical conditions, including diabetes and high blood pressure.

Why sign up for vision benefits?



Get an annual eye exam* for no more than \$5 when you see an in-network doctor. And they may help detect or prevent other eye or health conditions.



Easily find an eye doctor near home, work or away with independent, retail and online options.



Save an average of 80% off retail prices for glasses and contacts with our fixed copays and allowances.



Plus, caring for you is at the heart of everything we do so we make it easy for you to get the help you need – when you need it. Our service teams are always ready to help and answer your questions.



\$\$ Earn EyeRewards when you get an eye exam \$\$

Get a reward voucher to use at Sunglass Hut when you visit an in-network eye care professional for your annual eye exam.

The voucher will be available through your online Humana account at [MyHumana.com](https://www.mychumana.com).

* Eye exams not covered on Humana Vision Materials Only plans



See the savings with a Humana Vision plan

On average, members save 80% off retail prices for glasses and contacts with our fixed copays and allowances when visiting an in-network provider.

Example: Humana Vision plan	Retail	Humana Vision
		In-network providers
Eye exam	\$119	\$5
Lenses	\$153	\$20
Average retail frame cost	\$208	\$208
Average frame allowance	None	– \$110
Discount on balance over frame allowance	None	– 20%
YOUR COST	\$480	\$103

Savings example only for illustrative purposes. Actual savings will depend on benefits and frame selection. Retail cost based on industry averages.





How to find a vision doctor in the network

Visiting a vision provider in the Humana network ensures you're getting the lowest cost when using your vision benefits. To find an in-network doctor, follow these steps:



Step 1: Scan the QR code or click on this Huma.na/Vision link to search for eye doctors in the **Humana Vision plan** network.

Step 2:

Search for an eye doctor using your location to find a doctor in your area, or search by a doctor's name



In-network online providers

You may also consider one of our many in-network online options including [Oakley](#), [Ray-Ban](#), [Glasses.com](#), [ContactsDirect.com](#), [LensCrafters](#) and [Target Optical](#).





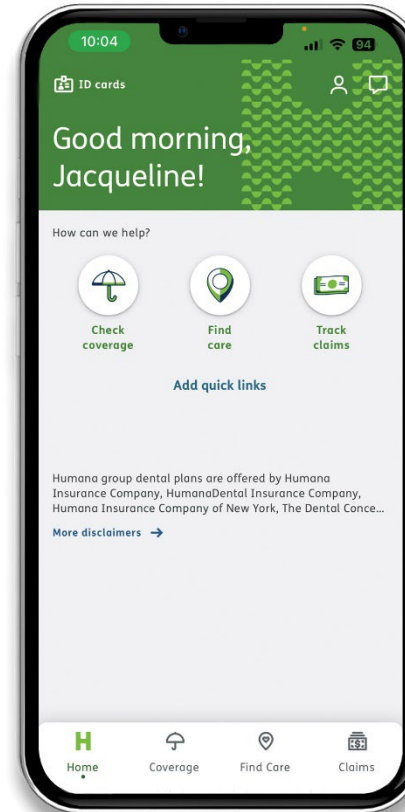
Manage your Humana plan online

MyHumana on the go

Once you become a Humana plan member, you get the most out of your plan with a MyHumana account, and take your Humana essentials wherever you go with the MyHumana mobile app.

Depending on your plan, you can use the app to:

- Explore coverage and benefit details the moment you need them
- Get your member ID cards and add them to your phone's wallet
- Find care close to you and get directions on your phone's map app
- Review claims status
- Access your exclusive member discounts



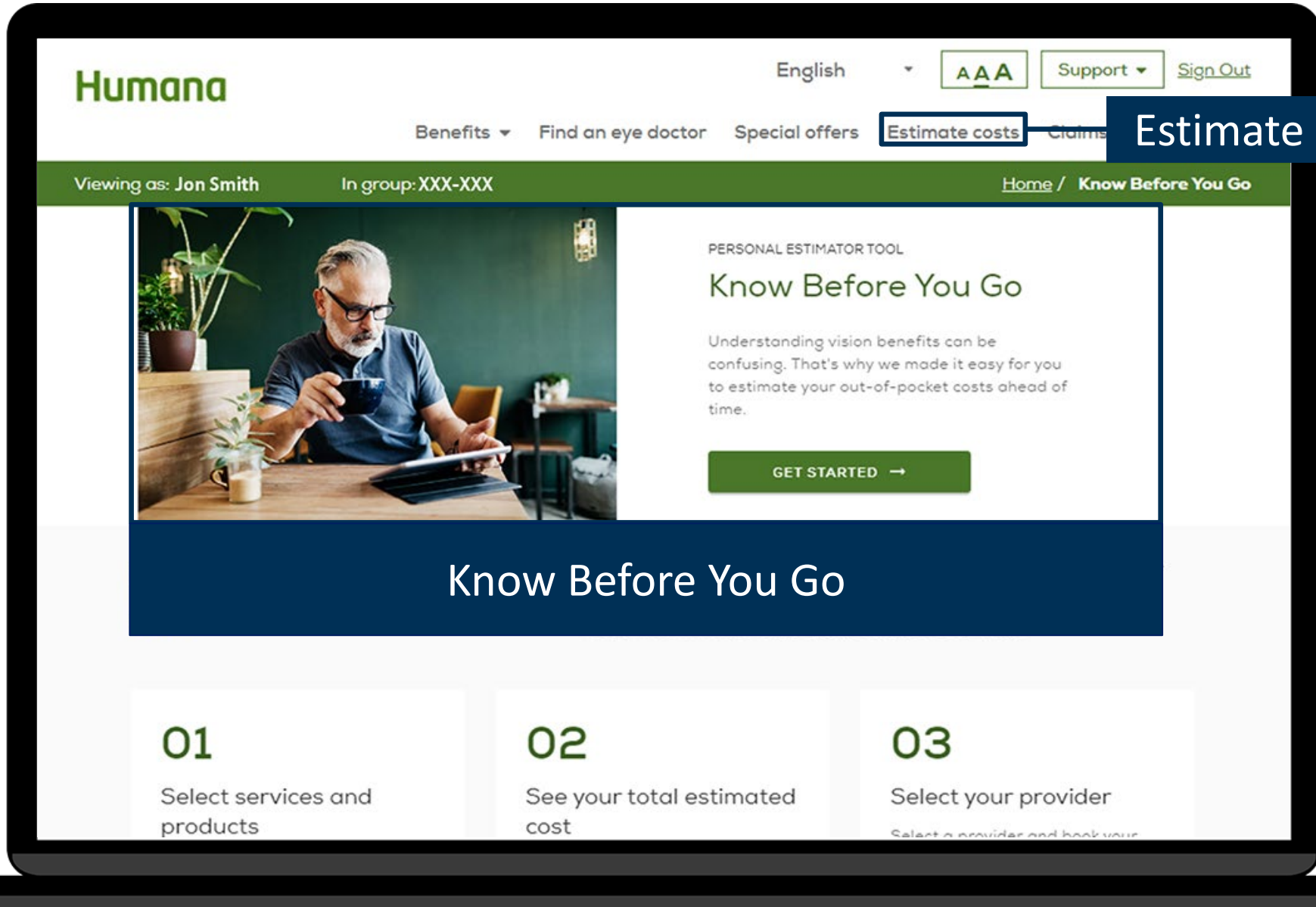
Once your Humana plan coverage begins, go to [MyHumana.com](https://www.humana.com) to activate your account **or download and register on the MyHumana App** for iOS and Android.



Learn more at [humana.com/member/manage-your-account](https://www.humana.com/member/manage-your-account)



Vision Benefits Cost Estimator



Estimate costs

More confidence

Better experience

Know Before You Go

Exclusive discounts for Humana members

We're teaming up with select companies to
support the enhanced well-being of our members



Dental health

Discounts on personalized dental products, including:

- Innovative dental devices with tracking and personalized feedback
- Teeth whitening



Eye health

See clearly with supportive vision care discounts, like:

- Bladeless and traditional LASIK vision correction
- Exams, glasses and contacts



Hearing

Improve your hearing experience with discount options, such as:

- Unique online solution for hearing aids and support
- Professional care in your area with savings up to 60% on hearing aids



Access these exclusive discounts and many more by signing into **MyHumana.com**.

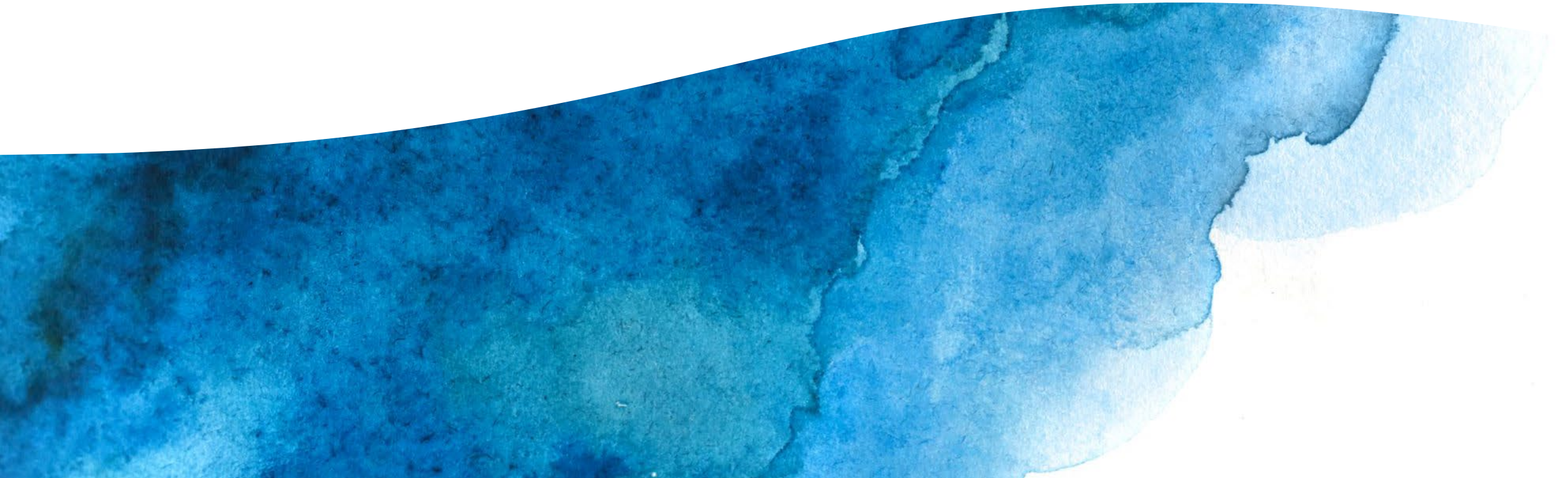


Look for "Special Discounts" in the "Coverage" section of MyHumana.

P&A Group Retiree Billing

Administered By:

Megan Szymanski and Michael Quinlan





Billing Process

- ❑ P&A will be handling Open Enrollment for all retirees.
- ❑ Retirees OE packets were placed in the mail on July 31st.
- ❑ Retirees will need to make a positive election by 8/15.
- ❑ This is a passive enrollment. Retirees who do not wish to make an election by 8/15 will continue with the coverage they are currently enrolled.

Sending P&A Elections

- Via mail election and check send to:
6400 Main Street, Suite 210
Williamsville, NY 14221
- Email to GIBILLING@Padmin.com
- If you are already set up for FRS deduction no New FRS form will need to be completed
- The P&A Group will update the deductions on your behalf.
- October invoices will be mailed September 10th.



Portal Access



Retirees will have 24/7 access to our online portal (www.padmin.com) as well as mobile app.



Here they view balance information, sign up for direct deposit, contact our call center, etc.



Our call center is open 8:30 AM – 10:00 PM EST. They can be reached at 716-852-2611.

Questions?

P&A Administrative Services