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DC Department of Human Resources

OPEN ENROLLMENT 2015

District of Columbia Government Open Enrollment & Benefits Guide 2015

Welcome!



This guide provides comprehensive information about your benefits as a DC Government employee. Use this guide as your go-to resource for:

- Enrolling in benefits for the first time
- Making changes or updating your benefits during Open Enrollment
- Learning more about your benefits throughout the year



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DC Department of Human Resources



It's Decision Time!

Open Enrollment Period for your 2015 benefits begins **Monday, November 10, 2014** and ends **Friday, December 12, 2014 at 5:00 p.m.** This is your opportunity to review your current benefit elections and make any necessary changes.



Enrolling for the first time or making changes to your current benefits?
You're in the right place! Check out the following sections for:

- What's new for 2015
- How to enroll
- 2015 Plan Rates
- High-level overview of your benefits

What's New for 2015

Find out what you need to know about 2015 benefits changes before enrolling for or changing your benefits. The following place changes will be effective January 1, 2015.



Increased Medical Deductible

Aetna CDHP: Preferred Care (in-network) deductible:

	2014	2015
Individual	\$1,250	\$1,300
Family	\$2,500	\$2,600



Increased Out-of-Pocket Maximum:

Aetna CDHP: Out-of-Pocket Maximum deductible:

	2014	2015
Individual	\$6,050	\$6,450
Family	12,100	\$12,900



What's New for 2015



PayFlex

Flexible Spending Account (FSA) will have a \$500 carry-over option

If you're a new health-care FSA member for 2015, you won't need to worry about losing your unused funds if you can't use them by the end of the year. You can carry over up to \$500 from one year to the next.

If you enrolled in our health-care FSA for 2015, you don't have to rush to use up your FSA funds by the end of the 2014 plan year. You can carry over up to \$500 of your unused balance at the end of the year into 2015. You can use these funds to pay for eligible health care expenses from one year to the next.



What's New for 2015

2015 DC Employee Healthcare Benefits Providers (DCEHBP) Employee Premium Costs

As health care costs across the nation continue to rise, so do the costs here in the District of Columbia Government. Therefore, your costs for coverage will increase again in 2015. The District of Columbia will take on the majority of this cost increase, but we also needed to share some of this additional cost with you. There are ways we can work together to help keep cost increases at a minimum, including using network doctors, taking advantage of wellness resources, and using generic instead of brand-name drugs when filling a prescription.

Transgender Benefits Available through All DCEHBP & Federal Employee Health Benefits (FEHB)

As health care costs across the nation continue to rise, so do the costs here in the District of Columbia Government. Therefore, your costs for coverage will increase again in 2015. The District of Columbia will take on the majority of this cost increase, but we also needed to share some of this additional cost with you. There are ways we can work together to help keep cost increases at a minimum, including using network doctors, taking advantage of wellness resources, and using generic instead of brand-name drugs when filling a prescription.

Health Care Reform Update for 2015

The Affordable Care Act (ACA, also known as "health care reform") was passed in 2010. This law is intended to extend access to medical coverage to nearly everyone in the U.S. and to eliminate restrictions on key benefits. As of January 1, 2014, the government will require almost everyone to have medical insurance coverage. Those who don't have coverage will pay a penalty, this requirement is called the "individual mandate." The only exception is if you earn below a certain income level.

A woman and a young girl are sitting on a white couch, looking at a laptop screen. The woman is smiling and has her arm around the girl. The girl is also smiling and looking at the laptop. The background is a bright, indoor setting with a window showing greenery outside.

What to Do During Open Enrollment

- Federal Employees' Health Benefits Program (FEHB)
- District of Columbia Employee Health Benefits Program (DCEHBP)
- How to Enroll

What to Do During Open Enrollment

Federal Employees' Health Benefits Program (FEHB)

Benefits for Employees first Hired Before October 1, 1987

For all employees first hired before October 1, 1987, the **2015 FEHB Open Season will run from Monday, November 10, 2014 through Monday, December 8, 2014**. During the annual Open Season, employees can take the actions listed below for the Federal Flexible Spending Account Program (FSAFEDS), Federal Employees Dental and Vision Insurance Program (FEDVIP), and the Federal Employees Health Benefits (FEHB) Program.

- Enroll in a flexible spending account, a health care and/or dependent care account, under the FSAFEDS Program. Unlike with other programs, **employees MUST reenroll in FSAFEDS each year to participate**. Enrollments DO NOT carry over from year to year.

Note: The maximum annual election for a Health Care Flexible Spending Account and the Limited Expense Health Care Flexible Spending Account is \$2,500 for the 2015 Benefit Period. The maximum annual election for a Dependent Care Flexible Spending Account is \$5,000 for the 2015 Benefit Period. The minimum election for the flexible spending accounts has changed from \$250 to \$100 for the 2015 Benefit Period.

- Enroll in, change, or cancel an existing enrollment in a dental plan under the FEDVIP Program.
- Enroll in, change, or cancel an existing enrollment in a vision plan under the FEDVIP Program.
- Enroll in, change, or cancel an existing enrollment in a health plan under the FEHB Program.



2015 Premium Rates

OPM will post FEHB and FEDVIP premium rates for 2015 in early October. Participants will also find specific Federal Benefits Open Season information on the website by the first week in November. Visit OPM online at www.opm.gov/insure.

Enrollment forms will be located on the DCHR and OPM websites in late October.



What to Do During Open Enrollment

District of Columbia Employee Health Benefits Program (DCEHBP)

Benefits for Employees hired on or after October 1, 1987

For all employees first hired on or after October 1, 1987, the **2015 Open Enrollment begins November 10, 2014 and ends December 12, 2014 at 5:00 p.m. EST.**

To complete enrollment:

- Review the changes for 2015, so you understand how these changes impact your 2015 benefits.
- Review your current benefit choices. Ask yourself, “*does this coverage meet my expected needs?*” If not, “*what should I change?*”
- Log on to Employee Self Service at <https://ess.dc.gov> to enroll for new plans or make changes to your current coverage.



Outside of the regular Open Enrollment period, you can only change your benefits if you experience a *qualified life event*. Qualified life events include:

- Marriage, divorce or legal separation
- Birth or adoption
- A dependent that becomes ineligible for coverage
- Death of your dependent
- Loss/gain of coverage elsewhere for employee or spouse/domestic partner
- Change in work status for you or your spouse/domestic partner



How to Enroll

Open Enrollment 2015 benefits begins **Monday, November 10, 2014** and ends **Friday, December 12, 2014 at 5:00 p.m.** This is your opportunity to review your current benefit elections and make any necessary changes.

All Open Enrollment changes are to be made through Employee Self Service (ESS). You can access ESS through PeopleSoft on your work or home computer at <https://ess.dc.gov>.



When do changes made during Open Enrollment go into effect?

For employees that are paid bi-weekly, changes made during open enrollment will be effective January 11, 2015. For employees that are paid semi-monthly (some DCPS, some UDC) the changes made during Open Enrollment will be effective January 1, 2015.



Open Enrollment Kickoff

Friday, November 14 | 2014; 9:00 a.m. to 3:00 p.m.

Carnegie Public Library | 801 Mt. Vernon Square, NW | Washington, DC | 20001

Join the DC Department of Human Resources (DCHR) and kick off Open Enrollment 2015 with a celebration at the Carnegie Public Library on Friday, November 14. Employees will have the opportunity to meet with DCHR specialists and benefits providers to learn about benefits options, plan highlights and upcoming changes.

In addition to one-on-one assistance, benefits and wellness partners will be onsite with health and wellness promotions, including:

- Financial & Wellness Seminars
- Exercise Demos & Classes
- Health Screenings
- Vendor Promotions



Open Enrollment Sessions

In addition to the Open Enrollment Kickoff on Friday, November 14, DCHR will hold eight Open Enrollment information sessions at various locations across the city to assist District employees with the enrollment process.



Monday, November 17 • 10:00 a.m. to 3:00 p.m.

Fire & Emergency Medical Services • Frank D. Reeves Center • 2000 14th Street, NW

Wednesday, November 19 • 10:00 a.m. to 3:00 p.m.

DC Housing Authority • 1133 North Capitol Street, NE

Thursday, November 20 • 10:00 a.m. to 3:00 p.m.

Child & Family Services Agency, Office of the Chief Technology Officer • 200 I Street, SE

Friday, November 21 • 10:00 a.m. to 3:00 p.m.

Wilson Building • 1350 Pennsylvania Avenue, NW

Monday, December 1 • 4:00 p.m. to 7:00 p.m.

DC Public Schools • 1200 First Street, NE

Wednesday, December 3 • 10:00 a.m. to 3:00 p.m.

Dept. of Behavioral Health • 1100 Alabama Avenue, SE

Thursday, December 4 • 10:00 a.m. to 3:00 p.m.

Dept. of Public Works • Solid Waste Management • 1431 Okie Street, NE

Friday, December 12 • 10:00 a.m. to 3:00 p.m.

Judiciary Square • 441 4th Street, NW

A close-up, low-angle shot of the spiral binding of a notebook, showing the white plastic rings and the edges of the pages. The background is a soft, out-of-focus light blue and white.

2015 Benefits at a Glance

Insurance, Work, Life, Savings
& Investment Benefits



District of Columbia Employee Health Benefits Program (DCEHBP)

Medical Benefits

- For all employees hired after October 1, 1987
- The cost is shared by the employee and the District.
- All employees must pay employee contribution premiums.
- Additional health benefits information can be found at www.dchr.dc.gov.



Providers

Aetna: HMO, PPO, CDHP

United Healthcare : HMO Nationwide Choice

Kaiser Permanente: HMO



2015 Plan Rates

The charts below list the bi-weekly rates that you will pay for your benefits coverage beginning January 1, 2015.

Bi-Weekly Employee Rates: Medical Plans

	Aetna HMO	Aetna CDHP	Aetna PPO	Kaiser HMO	United HMO Choice
Self Only	\$70.56	\$43.30	\$75.86	\$58.29	\$65.34
Self + 1	\$138.70	\$85.12	\$149.13	\$111.33	\$124.81
Family	\$203.90	\$125.13	\$219.23	\$170.79	\$191.46

Bi-Weekly Employee Rates: Dental Plans

	Cigna DPPO	Cigna DHMO*
Self Only	\$29.10	\$0.00
Self + 1	\$41.30	\$0.00
Family	\$53.54	\$0.00



2015 Plan Rates

Vision Benefits

- Quality Plan Administrators, <http://qualityplanadmin.com>
- Vision coverage is available at no cost to eligible employees.
- The District pays 100% of the vision premium, no matter what tier of coverage you choose.



Three tier levels of coverage are offered:

	2015
Self Only	\$0
Self + 1	\$0
Family	\$0

A woman with dark hair, wearing an orange sleeveless top and large colorful earrings, is sitting at a desk. She is looking down at a laptop computer, with her hands on the keyboard. She is also holding a glass of orange juice in her right hand. The background is a bright, modern office or home workspace with white shelves and a green vase.

Benefits You Can Enroll in During Open Enrollment

November 10 through December 12, 2014



Benefits You Can Enroll in During Open Enrollment



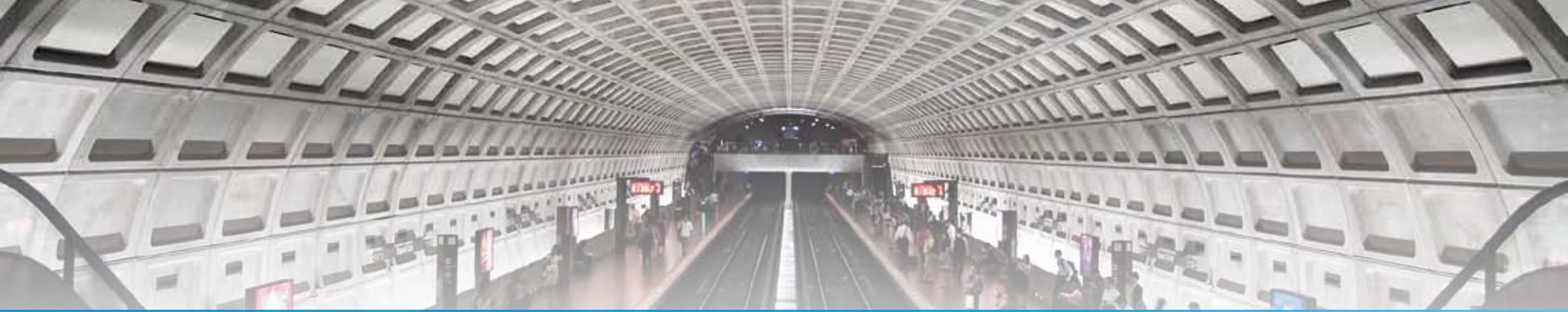
Benefit	Options	Who Pays
Medical	<input type="checkbox"/> Aetna HMO, PPO, CDHP HSA <input type="checkbox"/> Kaiser HMO <input type="checkbox"/> United Healthcare Choice	You pay a portion of the cost of coverage. Premiums are deducted from your paycheck on a pre-tax basis. See 2015 Plan Rates for more details.
Health Savings Accounts (HSAs)	<input type="checkbox"/> Aetna Consumer Driven Health Plan Savings Account (CDHP HSA) (You must be enrolled in the Aetna CDHP to be eligible)	You can choose to contribute funds from your paycheck to your HSA on a pre-tax basis.
Dental	<input type="checkbox"/> CIGNA DHMO <input type="checkbox"/> CIGNA DPPO	The CIGNA DHMO is 100% employer paid. The CIGNA DPPO you pay a portion of the cost of coverage. Premiums are deducted from your paycheck on a pre-tax basis. See 2015 Plan Rates for more details.
Vision	<input type="checkbox"/> Quality Plan Administrators	The District pays the full cost of coverage for Employees and their families.
Flexible Spending Accounts (FSA)	<input type="checkbox"/> PayFlex - Healthcare FSA - Dependent Care FSA	Contributions are deducted from your paycheck on a pre-tax basis.



Benefits You Can Enroll in During Open Enrollment



Benefit	Options	Who Pays
Supplemental Indemnity Insurance	<input type="checkbox"/> AFLAC Cancer Insurance Hospital Confinement Personal Sickness Personal Accident Specified Health Event	You pay the full cost of coverage. Premiums are deducted from your paycheck on a pre-tax basis.
Disability Insurance	<input type="checkbox"/> Standard Insurance - Short Term - Long Term	You pay the full cost of coverage. Premiums are deducted from your paycheck on an after-tax basis. See 2015 Plan Rates for more details.



Benefits You Can Enroll in During Open Enrollment



Benefit	Options	Who Pays
Retirement Plans	<input type="checkbox"/> DCPLUS 457(b) Deferred Compensation	Contributions are deducted from your paycheck on a pre-tax basis.
Commuter	<input type="checkbox"/> ADP	You can choose to contribute funds from your paycheck to your FSA on a pre-tax basis.
Savings Plan	<input type="checkbox"/> DC College Savings Plan is a section-529	Contributions are deducted from your paycheck on a pre-tax basis.
Employee Assistance Plan	<input type="checkbox"/> Inova – auto-enrolled but you must call for services.	100% Employer paid for first (5) sessions.



Wellness Resources

If you enroll in a medical plan with the District of Columbia, you will also have access to wellness resources through your plan provider, including programs that can help you:

- Quit Smoking
- Get more exercise
- Improve your diet with nutritional counseling
- Lose weight

In addition, disease management programs offer support, tools and information to help manage chronic conditions, including:

- Asthma
- Congestive heart failure
- Diabetes
- Hypertension (*high blood pressure*)



Want More Wellness?

For more detailed information about these and other available wellness programs, visit the District Employee Wellness section on our website, www.dchr.dc.gov.



Who to Contact



DCHR Benefits & Retirement

If you have questions or need additional information about your benefits, including new enrollment, changes or cancellation, contact DCHR Benefits Administration.

DCHR Benefits Administration
1 Judiciary Square
441 4th Street, NW Suite 340S
Washington, DC 20001

(202) 442-7627

dchr.benefits@dc.gov

<http://dchr.dc.gov>

Who to Contact



Plan Providers: Insurance

You may also contact the providers directly with specific benefit coverage questions.

Medical

Aetna Member Services
1 (800) 872-3862
www.aetna.com

Kaiser Permanente Member Services
(301) 468-6000 (Metro); 1 (800) 777-7902 (Outside Metro area, toll free); 1 (888) 777-5536 (Medicare)
<https://healthy.kaiserpermanente.org>

United Healthcare Member Services
1 (866) 633-2446
www.uhc.com

Dental

Cigna Dental Health, Inc.
1 (800) 367-1037
www.cigna.com

Vision

Quality Plan Administrators
(202) 722-2744 or 1 (800) 900-4112
<http://qualityplanadmin.com>

Who to Contact



Plan Providers: Insurance

Group Life & Disability

Standard Insurance Company Customer Contact Center
1 (888) 937-4783
<https://go.standard.com/mybenefits/dc>

Indemnity Plan

Aflac
1 (800) 992-3522
https://enrollment.aflac.com/AccountSites/D_F/DCGov/Homepage.aspx



Plan Providers: Work & Life Benefits

Employee Assistance Program

Inova
1 (800) 346-0110
www.inova.org/eap

Flexible Spending Accounts (FSAs)

PayFlex
1 (800) 284-4885
www.healthhub.com



Your 2015 Benefits



Your benefits are an important part of your overall compensation. The District of Columbia Government offers a comprehensive array of benefits to protect your health, your family and your way of life, including:

- Health care coverage, including medical, dental and vision
- Financial protection for you and your family, including disability, life and accident insurance coverage
- Retirement savings opportunities
- Work-life resources through the Employee Assistance Program
- Other voluntary benefits, including Flexible Spending Accounts (FSAs) for health care and dependent care



Eligibility

All full-time permanent employees, part-time permanent employees who generally work at least 20 hours per week, and employees with temporary full-time appointments of at least 13 months who are employed by agencies under the authority of the Mayor are eligible to receive benefits from the District of Columbia Government. In addition, several of the District's independent agencies also participate in the benefits programs provided to agencies under the full authority of the Mayor.

Eligible employees may enroll in plans during the designated annual open enrollment period or within 31 days of their initial employment. *Changes to plans can be made within 30 days of a qualifying life event* (e.g., marriage, birth of a child).

Health benefits and life insurance coverage begins following the first pay period for which a payroll deduction was made to pay for the benefit, although other benefits programs (such as the Defined Contribution Pension Plan) may have additional requirements.

If you have questions about your eligibility or the benefits available to you, please contact your agency HR advisor or the DCHR Benefits Administration.



Outside of the regular Open Enrollment period, you can only change your benefits if you experience a *qualified life event*. Qualified life events include:

- Marriage, divorce or legal separation
- Birth or adoption
- A dependent that becomes ineligible for coverage
- Death of your dependent
- Loss/gain of coverage elsewhere for employee or spouse/domestic partner
- Change in work status for you or your spouse/domestic partner



District of Columbia Employee Health Benefits Program (DCEHBP)

Medical Benefits



Eligible employees hired on or after October 1, 1987 have the following health plan choices:

- Aetna Healthcare HMO or PPO
- Kaiser Permanente HMO
- UnitedHealthcare HMO or Point of Service

The cost of your health insurance premium is shared with the District government, which contributes up to 75 percent toward the total premium cost. All health insurance premium deductions are made on a pre-tax basis, unless a specific Pre-Tax Benefits Waiver Form is requested. A Pre-Tax Benefits Waiver Form is available online at <http://dchr.dc.gov> this site or at the DCHR Employee Service Center located at One Judiciary Square, Suite 340 North.

To select the health plan that's right for you and your family, evaluate your options by comparing benefits, evaluating the network of providers, reviewing the plan's costs, considering the plan's quality and understanding how the plan works.

Plan Comparisons at a Glance

The following charts provide an overview of commonly used benefits. For more information about any of the plans' provisions, visit the provider website.

Benefit	Aetna CDHP	Aetna PPO Plan	AETNA HMO Plan	Kaiser Permanente HMO	UnitedHealthcare Choice
Calendar-Year Deductible					
Employee Only	\$1,300	\$750	NONE	NONE	NONE
Family	\$2,600	\$1,500	NONE	NONE	NONE
Out-of-Pocket Maximum (per calendar year) *Please Note: Some benefits do not apply toward the out-of-pocket maximum					
Employee Only	\$6,450	\$1,500	\$3,500	\$3,500	\$3,500
Family	\$12,900	\$3,000	\$9,400	\$9,400	\$9,400
Inpatient Services					
Inpatient Hospital	Covered 85% after deductible	Covered 100% after deductible	\$100 per admission	Waived if admitted as inpatient	\$100 copay per Inpatient Stay
Hospice Care	Covered 85% after deductible	Covered 100% after deductible	Covered 100%	No charge	No charge
Skilled Nursing Facility	N/A	N/A	\$100 per admission	\$100/admission	\$100 copay per Inpatient Stay
Outpatient Services					
Office Visits	Covered 85% after deductible	\$15 copay; deductible waived	Office hours: \$10 copay;	\$10/visit (Primary); \$20 (Specialist)	\$10/visit (Primary); \$20 (Specialist)
X-rays, Laboratory Tests	Covered 85% after deductible	Covered 100% if part of an office visit	Covered 100%	No charge	No charge
Routine Exams	Covered 100%; deductible waived	Covered 100%; deductible waived	Covered 100%	No charge	No charge
Routine Immunization	Covered 100%; deductible waived	Covered 100%; deductible waived	Covered 100%	No charge	No charge
Preventive Care	Covered 100%; deductible waived	Covered 100%; deductible waived	Covered 100%	No charge	No charge

Plan Comparisons at a Glance

Benefit	Aetna CDHP	Aetna PPO Plan	AETNA HMO Plan	Kaiser Permanente HMO	UnitedHealthcare Choice
Outpatient Services, Cont.					
Outpatient Surgery (at a Plan facility)	Covered 85% after deductible	Covered 100% after deductible	\$100 per admission	\$50/visit	\$50 copay per date of service
Short-Term Rehabilitation (physical, occupational or speech therapy)	Covered 85% after deductible	15% after deductible	\$20 copay	\$20/visit	\$20 copay per outpatient visit
Chiropractic Care	NOT COVERED	NOT COVERED	NOT COVERED	\$20/visit	Limitations may apply
Acupuncture	NOT COVERED	NOT COVERED	NOT COVERED	\$20/visit	Limitations may apply
Home Health Care	Covered 85% after deductible	Covered 100% after deductible	Covered 100%	No charge	No charge
Emergency Services					
Emergency Room Services and Supplies	Covered 85% after deductible	\$100 copay/waived if admitted	\$50 copay	\$50/visit	\$50/visit
Ambulance	Covered 85% after deductible	100% covered; deductible waived	Covered 100%	No charge	No charge
Maternity Care					
Office Visits (for mother)	Covered 85% after deductible	\$30 copay	\$20 copay for Physician maternity services	No charge	\$10 copay
Hospital (for mother)	15%; after deductible	Covered 100% after deductible	\$100 per stay copay for Facility services	\$100/admission	\$100 copay per Inpatient Stay
Office Visits (for baby)	Covered 85% after deductible	Covered 100% after deductible	Covered 100%; deductible waived	No charge	\$10 copay

Plan Comparisons at a Glance

Benefit	Aetna CDHP	Aetna PPO Plan	AETNA HMO Plan	Kaiser Permanente HMO	UnitedHealthcare Choice
Medical Equipment					
Durable Medical Equipment	Covered 85% after deductible	Covered 80% after deductible	50%	50% coinsurance	50% coinsurance
Mental Health					
Inpatient Care	Covered 85% after deductible	Covered 100% after deductible	\$100 per admission copay	\$100/admission	\$100 copay per Inpatient Stay
Outpatient Care	Covered 85% after deductible	\$15 copay; deductible waived	\$10 per visit	Individual: \$10/visit; Group: \$5/visit	\$10 copay per visit
Substance Abuse					
Inpatient Care	N/A	N/A	\$100 per admission	\$100/admission	\$100 copay per Inpatient Stay
Outpatient Care	N/A	N/A	\$10 per visit	Individual: \$10/visit; Group: \$5/visit	\$10 copay per visit
Prescription Drugs					
Generic	\$10 copay; Mail Order: \$20 copay	\$10 copay; Mail Order: \$20 copay	\$20 copay; Mail Order: \$8 copay	Plan Pharmacy: \$10; Participating Pharmacy: \$20; Mail Order: \$8	Retail: \$20 copay; Mail Order: \$16 copay
Preferred Brand Drugs	\$30 copay; Mail Order: \$60 copay	\$20 copay; Mail Order: \$40 copay	\$40 copay; Mail Order: \$18 copay	Plan Pharmacy: \$20; Participating Pharmacy: \$40; Mail Order: \$18	Retail: \$40 copay; Mail Order: \$36 copay
Non-Preferred Brand Drugs	\$30 copay; Mail Order: \$120 copay	\$40 copay; Mail Order: \$80 copay	\$55 copay; Mail Order: \$33 copay	Plan Pharmacy: \$35; Participating Pharmacy: \$55; Mail Order: \$33	Retail: \$55 copay; Mail Order: \$66 copay



District of Columbia Employee Health Benefits Program (DCEHBP)

Dental Benefits

The District provides comprehensive dental coverage for all non-union employees and union employees covered by the Compensation Unit 1 and 2 Collective Bargaining Agreement. The District pays 100 percent of the premium costs.

The District Government dental insurance provider is Cigna Dental Health, Inc.



Cigna DHMO

The District pays for 100 percent of the premium costs for the DHMO benefit. While the District covers premium costs for all employees who are enrolled to receive benefits.

Cigna PPO

The District now provides comprehensive dental coverage for all eligible non-union employees and union employees covered in the Compensation Units 1 and 2 Collective Bargaining Agreement.



District of Columbia Employee Health Benefits Program (DCEHBP)

Vision Benefits



The District provides comprehensive optical coverage for all non-union employees and union employees covered by the Compensation Unit 1 and 2 Collective Bargaining Agreement. The District pays 100 percent of the premium costs.

Quality Plan Administrators

Vision Expense Benefits

The DC Vision Health Care Plan will pay expenses incurred for the services of a licensed ophthalmologist, optometrist or optician, acting within the scope of his license, for those visual care services and supplies listed as Vision Expense Benefits in the Schedule of Benefits provided that:

- Such services are rendered, and supplies furnished, while the individual is covered under the Plan.
- Payment for any one service or supply will not exceed the lesser of the fee actually charged or the maximum amount payable for such services as indicated in the Schedule of Benefits.

Payment will not be made for more than:

- One (1) complete eye examination in any consecutive twelve (12) month period
- One (1) pair of lenses (including contact lenses) in any consecutive twelve (12) month period
- One (1) set of frames in any consecutive twelve (12) month period

→ Emergency

Employee Insurance

Disability Insurance Program

Standard Insurance Company is the District Government disability insurance provider. Deductions for both disability programs are done on an after-tax basis. This assures that any payments you receive from the program are not taxed.



Short-Term Disability Insurance Program

All benefits-eligible employees may enroll in the Short-Term Disability Insurance Program. Short-term disability insurance provides income replacement that may be used in conjunction with your annual or sick leave. This program has a 20-day elimination period. Income is replaced at 66 2/3 percent of the employee's base pay and coverage lasts for six months.

This program is designed to lessen the financial burden employees may incur from an extended non-work-related injury or illness. Short-term disability insurance specifically addresses absences from work due to one's own health-related reasons. If you have a qualifying medical condition, this insurance provides a partial replacement of your income.

Key Features:

- Weekly disability benefits of \$15-\$1,154
- Income coverage of up to 66 2/3 percent of your salary
- Worldwide coverage
- Waiver of premium if you become disabled

Short-Term Disability Premium Rates

Employee Age on Calendar Year	Bi-weekly Premium Rate Per \$100 of Monthly Covered Payroll
Age 17-49	\$0.39
Age 50-69	\$0.52



Employee Insurance



Long-Term Disability Insurance Program

All benefits-eligible employees may enroll in the Long-Term Disability (LTD) Insurance Program. Long-term disability insurance provides income replacement that may be used in conjunction with your annual or sick leave. This program has a 180-day elimination period. Income is replaced at 66 2/3 percent of your pre-disability earnings, reduced by deductible income. If you become disabled before age 62, LTD benefits may continue during disability until you reach age 65. If you become disabled at age 62 or older, the benefit duration is determined by your age when disability begins as indicated in the Standard Insurance Long-Term Disability table.

Key Features:

- Monthly LTD benefit of \$100-\$7,500
- 180-day elimination period
- Worldwide coverage
- Waiver of premium while disabled

Short-Term Disability Premium Rates

Employee Age on Calendar Year	Bi-weekly Premium Rate Per \$100 of Monthly Covered Payroll
Age less than 25	\$0.16
Age 25-29	\$0.20
Age 30-34	\$0.24
Age 35-39	\$0.30
Age 40-44	\$0.43
Age 45-49	\$0.65
Age 50-54	\$0.96
Age 55-59	\$1.28
Age 60-64	\$1.36
Age 65 and above	\$1.46



Employee Insurance



Group Life Insurance

Term life insurance provides coverage equal to an employee's annual salary rounded to the next thousand, plus an additional \$2,000. The cost of the monthly premium is shared with the District. You pay two-thirds of the total cost and the government pays one-third. Additional life insurance levels are available for employees and their dependents at low cost. Standard Insurance Company is the life insurance provider.

Optional life insurance is available at a low cost for employees and their dependents, but employees pay 100 percent of the cost of optional life insurance. In order to carry newly-elected life insurance coverage into retirement, new coverage must be in effect for the five years of service immediately preceding the retirement date or the entire period of service during which coverage was available (if this period is less than five years).

DC Employees' Group Life Insurance Rates

Basic Coverage : Biweekly Rates

- \$0.065 per \$1,000 of coverage
- \$0.0455 per \$1,000 is employee's share
- \$0.0195 per \$1,000 is District's share

Option A: "Standard" Biweekly Rates Per \$10,000 Coverage

Age	Amount
Under 35	\$0.317
35-39	\$0.396
40-44	\$0.634
45-49	\$1.03
50-54	\$1.742
55-59	\$3.564
60+	\$5.544

Option B: "Additional" Biweekly Rates Per \$1,000 Coverage

Age	Amount
Under 35	\$0.031
35-39	\$0.04
40-44	\$0.06
45-49	\$0.103
50-54	\$0.175
55-59	\$0.356
60+	\$0.554

Option C: "Family" Biweekly Rates

Option	Age <45	Age 45-54	Age 55+
\$10,000 spouse life & \$10,000/child life	\$ 0.86	\$ 1.62	\$ 3.92
\$25,000 spouse life & \$10,000/child life	\$ 1.67	\$ 3.58	\$ 9.32
\$50,000 spouse life & \$10,000/child life	\$ 2.99	\$ 6.82	\$ 18.29



Employee Insurance



Federal Employees' Group Life Insurance

Employees hired before October 1, 1987, are eligible for Federal Employees' Group Life Insurance (FEGLI) that the US Office of Personnel Management administers. Term life insurance provides coverage equal to an employee's annual salary rounded to the next thousand, plus an additional \$2,000.

The cost of your monthly premium is shared with the District. You pay two-thirds of the total cost and the District pays one-third. Additional life insurance levels are available for employees and their dependents at a low cost.

Optional Plan	Additional Coverage	Premium Amount
Option A Standard	Provides \$10,000 coverage	Cost determined by age
Option B Additional	Provides coverage up to five times the employee's annual salary	Cost determined by age and employee's salary
Option C Family	Provides \$5,000 coverage for the eligible spouse and \$2,500 coverage for each eligible child.	Cost determined by age



Employee Insurance

Indemnity Coverage

Indemnity plans are a type of medical insurance plan that reimburses the patient and/or provider as expenses are incurred. Aflac is the District of Columbia Government indemnity plan provider. Aflac pays cash benefits directly to the designated employee (unless assigned elsewhere), in the event of illness or injury. This acts like a safety net for you and your family – you can use the cash to help cover expenses that major medical does not – like mortgage, groceries, or whatever you need.



Available indemnity plans include:

- Individual Cancer/Specified-Disease Insurance
- Individual Hospital Confinement Sickness Indemnity Insurance
- Individual Specified Health Event Insurance



Work & Life Benefits

Inova Employee Assistance Program

Inova Employee Assistance Program (EAP) is a comprehensive, top-ranked international provider of employee assistance services. With telephonic access and convenient online resources, Inova EAP offers practical, real-world solutions to employee life issues that may derail productivity and satisfaction.

District employees can log onto the Inova Employee Assistance member site at www.inova.org/eap to access the web portal to your Inova EAP and Work-Life services. Employees will have access to articles and helpful web links on a range of topics such as Parenting, Aging, Career and Workplace Education, Health, Wellness and other daily living topics.



Inova resources include:

- Legal and Financial Tools
- Webinars
- Confidential Counseling
- Identity Theft Services
- Work-Life Referral



Work & Life Benefits

Employee Flexible Spending Accounts

The District offers all benefit-eligible employees two pre-tax benefits: the Health Care Flexible Spending Account and the Dependent Care Flexible Spending Account. These pre-tax accounts allow you to pay for eligible, out-of-pocket health and/or dependent care expenses. Every plan year you must designate the amount to be set aside in your Flexible Spending Accounts. PayFlex administers these accounts.



Health Care Flexible Spending Account Program

Health Care Flexible Spending Account Program (HCFSA) allows you to plan for and cover eligible out-of-pocket medical expenses on a pre-tax basis, with deductions taken directly from your base salary. Deductions for the HCFSA reduce the gross income on your Form W-2 for federal and social security tax purposes. Your deductions are put into a special account, which will be used to reimburse participants for covered expenses up to a maximum of \$2,500 annually. If you have not used all of the money that you deposited into your HCFSA by December 31, it must be forfeited, according to IRS rules. All receipts for expenses must be submitted by March 31. You may elect to participate in this program and/or select a new deduction amount during the next open enrollment period.



Dependent Care Flexible Spending Account Program

Dependent Care Flexible Spending Account Program (DCFSA) allows you to pay for eligible dependent care expenses on a pre-tax basis, with deductions taken directly from your base salary. These deductions reduce your gross income on your Form W-2 for federal and social security tax purposes. The deductions are put into a special account, which will be used to reimburse participants for covered expenses up to a maximum of \$5,000 annually. If you have not used all of the money that you deposited into your DCFSA by December 31, it must be forfeited, according to IRS rules. All receipts for expenses must be submitted by March 31. You may elect to participate in this program and/or select a new deduction amount during the next open enrollment period.



Employee Retirement



Civil Service Retirement CSRS for Employees Hired Before October 1, 1987

Employees the District of Columbia Government first hired before October 1, 1987, are subject to the provisions of the CSRS that the US Office of Personnel Management administers. Under each plan, you may choose to retire when you reach:

Optional Retirement

Age 55 and 30 years of service

Age 60 and 20 years of service

Age 62 and 5 years of service

Voluntary Early Retirement

50 and 20 years of service

Any age and 25 years of service

2 and 5 years of service

The pension of an employee who chooses Voluntary Early Retirement will be reduced by 2 percent for each year under age 55.



401a Defined Contribution Pension Plan for Employees Hired on or After October 1, 1987

The District Government's primary retirement plan for eligible employees first hired on or after October 1, 1987, is a "defined contribution" plan, with benefits based on 100 percent employer-provided contributions plus earnings over the course of the participant's working years. The District funds this plan; there is no employee contribution. The current employer-paid contribution is 5 percent of the base salary (5 .5 percent for Corrections Officers). Employees must have one year of continuous service to participate, and they are fully vested in the Defined Contribution Pension Plan after five years of continuous service.



457b Deferred Compensation Plan

All District government employees are eligible to participate in the Deferred Compensation Program, an optional savings program that allows employees to tax-defer income and invest for the future. The portion of salary an employee contributes reduces the amount of taxable income in each paycheck. The Internal Revenue Service determines the annual maximum amount that can be deferred.

You may also be eligible for increased annual contributions during the three years prior to the year you attain Normal Retirement Age under a special 457 catch-up provision or when you reach age 50 or older by the end of the calendar year.



Connect & Learn More

The DC Department of Human Resources is committed to providing you with the highest possible level of customer care in administering your benefits programs as a District government employee. For additional information, tools and resources, we encourage you to reach out to the DCHR Benefits & Retirement Administration.



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