



Department of Human Resources
Division of Employee Benefits

November 18, 2016

Dear Milwaukee County Retiree,

Every year during open enrollment, you have the opportunity to adjust your benefit elections to suit your changing needs. This year's open enrollment period and informational sessions will be held from **December 5th, 2016 through December 14th, 2016**. County Benefit staff and representatives from the County's medical and pharmacy plans will be present to answer questions.

The 2017 adopted budget made no changes to medical deductibles, coinsurance, or office copays. However, it did include minor changes to Milwaukee County's benefit programs, including:

- The removal of the routine eye exam under the Choice Plus PPO Plan
- Addition of a 4th Tier Specialty medication copay of \$75 per 30 day supply for Medicare Advantage

A summary of the key benefits provisions for 2017 are included with this letter.

Enrollment Changes:

Not everyone needs to enroll this year. If you are currently enrolled, and do not return the enclosed enrollment form, the Milwaukee County Benefits Division will assume continued enrollment for 2017.

Please review the information included with this letter, and contact the Benefits Division via e-mail at benefits@milwaukeecountywi.gov, or at 414-278-4198 if you have any questions.

Annual Enrollment Informational Session Schedule

During this year's sessions, the Milwaukee County Benefit's Division staff will be presenting on the 2016 benefit offerings available to retirees and their dependents. Retirees are welcome to attend any of the sessions listed below; **attendance is optional**.

<p>Monday, December 5</p> <p>Washington Park Senior Center – Main Hall 4420 W. Vliet Street</p> <p>1:00 PM - 2:30 PM - Presentation for Medicare Eligible Retirees</p> <p>2:30 PM - 4:00 PM - Vendor Fair</p>	<p>Wednesday, December 7</p> <p>Wilson Park Senior Center – Main Hall 2601 W. Howard Avenue</p> <p>9:00 AM - 10:30 AM - Presentation for Medicare Eligible Retirees</p> <p>10:30 AM - 11:30 AM - Vendor Fair</p> <p>11:30 AM – 1:00PM - Lunch Break</p> <p>1:30 PM - 3:00 PM – Presentation for Medicare Eligible Retirees</p> <p>3:00 PM - 4:00 PM - Vendor Fair</p>	<p>Friday, December 9</p> <p>Clinton Rose Senior Center 3045 N. Martin Luther King Drive</p> <p>9:00 AM - 10:30 AM - Presentation for Medicare Eligible Retirees</p> <p>10:30 AM - 12:00 PM - Vendor Fair</p> <hr/> <p>Tuesday, December 13</p> <p>Boerner Botanical Gardens – Lower level Multimedia Room 9400 Boerner Drive</p> <p>9:00 AM - 10:30 AM - Presentation for Medicare Eligible Retirees</p> <p>10:30 AM - 12:00 PM - Vendor Fair</p>
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2017 Annual Enrollment

Pre-Medicare Retiree Medical Plan Coverage *At-A-Glance*

	Network	Non-Network
Annual Deductible	Single: \$1,000 EE+Child(ren): \$1,250 EE+Spouse: \$2,000 EE+Family: \$2,250	Single: \$2,000 EE+Child(ren): \$2,500 EE+Spouse: \$4,000 EE+Family: \$4,500
Office Visits	\$30 Copay	\$60 Copay
Inpatient Hospital	80% of eligible charges	60% of eligible charges
Outpatient Surgery	80% of eligible charges	60% of eligible charges
Emergency Room	\$200 Copay	\$200 Copay
Preventive Services	100% of eligible charges	60% of eligible charges
Medical Out-of-Pocket Maximum	Individual: \$3,000 Aggregate Family: \$6,000	Individual: \$4,600 Aggregate Family: \$9,200
Pharmacy Copay – Retail <i>Up to 30-day supply</i>	Tier One: \$10 Tier Two: \$30 Tier Three: \$50	Tier One: \$10 Tier Two: \$30 Tier Three: \$50
Pharmacy Copay – Mail Order <i>Up to 90-day supply</i> <i>Required for maintenance medications</i>	Tier One: \$25 Tier Two: \$75 Tier Three: \$125	Tier One: \$25 Tier Two: \$75 Tier Three: \$125
Specialty Pharmacy – Mail Order <i>Up to 30-day supply</i>	Tier 4: \$75	Not Covered
Pharmacy Out of Pocket Maximum	Individual: \$2,000 Aggregate Family: \$4,000	Individual: \$2,000 Aggregate Family: \$4,000
<p>Note: this at-a-glance guide is intended as a summary only. For specific terms, provisions, conditions, limitations or exclusions, please refer to the Summary Plan Description.</p>		

2017 Annual Enrollment

Comparison of Medicare-Eligible Retiree Medical Plan Options

Coverage*	County Standard Plan	UHC Medicare Advantage
Annual Deductible	\$1,000	None
Medical Out-of-Pocket Maximum	Individual: \$3,000	Individual: \$2,400
Office Visits	\$30 Copay (Primary Care and Specialist)	\$10 Copay (Primary Care) \$20 Copay (Specialist)
Inpatient Hospital	80% of eligible charges	\$500 Copay per admission
Outpatient Surgery	80% of eligible charges	\$250 Copay per occurrence
Ambulance	80% of eligible charges	\$100 Copay per occurrence
Emergency Room	\$200 Copay	\$65 Copay per occurrence
Preventive Services	100% of eligible charges	100% of eligible charges
Diagnostic Procedures/Tests	80% of eligible charges	90% of eligible charges
Lab Services	80% of eligible charges	\$10 Copay
Radiology	80% of eligible charges	\$25 Copay
Durable Medical Equipment	80% of eligible charges	80% of eligible charges
Fitness	Reimbursement up to \$100/year	UHC's Silver Sneakers program
Pharmacy Coverage	Retirees will receive the same pharmacy coverage from OptumRx regardless of whether they choose the standard County plan or the Medicare Advantage option.	
<p>*Comparison assumes single coverage utilizing network providers.</p> <p>Note: this at-a-glance guide is intended as a summary only. For specific terms, provisions, conditions, limitations or exclusions, please refer to the Summary Plan Description.</p>		