

City of Lynn

Active Employees FY2021



Guide

June 1, 2020 - June 30, 2020

Benefits Effective July 1, 2020

Welcome to the City of Lynn FY2021 Open Enrollment!

Open Enrollment begins on June 1, 2020 and ends on June 30th with benefit changes being effective as of July 1, 2020.

The benefits described in this booklet are some of the benefits offered by the City of Lynn to benefits eligible employees.

ELIGIBILITY:

You are eligible for benefits if you are an active employee of the City of Lynn working a minimum of 20 hours per week.

All Open Enrollment communication can be found on the City of Lynn Open Enrollment site under the Personnel Department Page.

What's New?

THIS YEAR, HEALTH AND DENTAL CHANGES MUST BE SUBMITTED ELECTRONICALLY THROUGH THE CITY'S EMPLOYEE SELF SERVICE (ESS) WEBSITE.

Please be advised that all enrollments/changes must be submitted by June 30, 2020.

If you are not enrolling in or making changes to your benefits, you do not need to do anything. Your benefits will continue as they are.

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Available Benefits During This Enrollment Period

June 1, 2020 – June 30, 2020

Effective Date July 1, 2020

Health Insurance

No changes to plans offered in prior year. Premiums have increased.

- Harvard Pilgrim HMO
- o Harvard Pilgrim PPO

Dental Insurance

Now all employees can enroll in either one of the plans offered below.

- o Altus High Plan (includes orthodontics)
 - Previously the Police Dept Plan
- o Altus Low Plan
 - Previously City of Lynn & School Dept Plan

^{**}All Plans Offer Family or Individual Rates**

Health Insurance

(HMO or PPO Plans)

For Active Employees: Harvard Pilgrim Health Care (HPHC) provides medical coverage, while Maxor provides your prescription drug coverage.

Harvard Pilgrim Health Care (HPHC) has new premium rates for FY2021.
 The employee contribution rates for employees hired *AFTER* July 1, 2019 will remain at 25% for the HMO plans.
 For employees hired *BEFORE* July 1, 2019, the employee contribution rates will increase from 23% to 25%.
 For the PPO plans, the employee contribution rates will remain at 30%.

Have Questions? Need More Information?

You may review the City's <u>Open Enrollment website</u> to review plans. Benefit handbooks for each of these plans have been included on this site. Monthly and weekly rates for each of these plans offered have been broken down for you on the following pages. Please note City and School Department rates are calculated differently.

Harvard Pilgrim Rates CITY EMPLOYEES

(Based on 48 weekly payments)

Monthly Premium Comparison to Prior Year

	FY2020			FY2021				
	INDIVIDUAL		FAMILY		INDIVIDUAL			FAMILY
HPHC PPO	\$	1,415.68	\$	3,800.30	\$	1,557.25	\$	4,180.33
НРНС НМО	\$	899.11	\$	2,407.48	\$	953.05	\$	2,551.93

FY 2021 PPO Employee and Employer Portions

	WEEKLY PREMIUM	EMPLOYEE %	EMPLOYEE PORTION	EMPLOYER %	EMPLOYER PORTION
PPO	\$ 389.31	30%	\$ 116.80	70%	\$ 272.51
INDIVIDUAL					
PPO FAMILY	\$ 1,045.08	30%	\$ 313.53	70%	\$ 731.55

FY 2021 HMO Employee and Employer Portions

	WEEKLY				LOYEE	EMPLOYER	EMPLOYER PORTION	
	PKE	MIUM	%	POR	TION	%	PO	KIION
НМО	\$	238.26	25%	\$	59.56	75%	\$	178.70
INDIVIDUAL								
HMO FAMILY	\$	637.98	25%	\$	159.50	75%	\$	478.48

Harvard Pilgrim Rates SCHOOL EMPLOYEES

(Based on 38 weekly payments)

Monthly Premium Comparison to Prior Year

	FY2020			FY2021				
	I	NDIVIDUAL		FAMILY	II	NDIVIDUAL		FAMILY
HPHC PPO	\$	1,415.68	\$	3,800.30	\$	1,557.25	\$	4,180.33
НРНС НМО	\$	899.11	\$	2,407.48	\$	953.05	\$	2,551.93

FY 2021 PPO Employee and Employer Portions

	WEEKLY PREMIUM	EMPLOYEE %	EMPLOYEE PORTION	EMPLOYER %	EMPLOYER PORTION
PPO	\$ 491.76	30%	\$ 147.53	70%	\$ 344.23
INDIVIDUAL					
PPO FAMILY	\$ 1,320.10	30%	\$ 396.03	70%	\$ 924.07

FY 2021 HMO Employee and Employer Portions

	WEEKLY		EMPLOYEE	EMPLOYEE		EMPLOYER		PLOYER
	PRE	MIUM	%	POR	RTION	%	PO	RTION
НМО	\$	300.96	25%	\$	75.24	75%	\$	225.72
INDIVIDUAL								
HMO FAMILY	\$	805.87	25%	\$	201.47	75%	\$	604.40

Dental Insurance (Altus)

The renewal rates for Altus Dental effective **07/01/2020 – 06/30/2021** has a **0%** increase, **no change** in rates. This year the city has decided to open both plans to all employees.

For comparisons between the High and Low Plans offered below, please refer to the <u>City of Lynn's Open Enrollment Website</u>.

Altus Dental Low Plan

100/80/50 \$25/\$75 deductible and a calendar year max of \$1,500.

Monthly premiums: Individual \$48.32 / Family \$134.60

Altus Dental High Plan with (Orthodontics \$1000 Lifetime Max)

100/100/50 \$25/\$75 deductible and a calendar year max of \$1500.

Monthly premiums: Individual \$56.16 / Family \$164.02

Effective 07/1/2020 - 06/30/2021 (weekly deductions)

Number	Name	Individual	Family	# of Weeks
9745-0001	City of Lynn Municipal (Low)	\$11.15	\$31.06	52
7945-0002	City of Lynn Municipal (High)	\$12.96	\$37.85	52
7945-0003	City of Lynn Schools (Low)	\$15.26	\$42.50	38
7945-0006	City of Lynn Schools (High)	\$17.73	\$51.79	38

Have Questions? Need More Information?

Tracy Daddario

Group Benefits Manager / DiVirgilio Financial Group

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	CITY A	ND POLICE	
PREMIUM DUE AT TIME OF ENROLLMENT		7945-0001	7945-0002
NEW ENROLLEES	IND	\$48.32	\$56.16
	FAM	\$134.60	\$164.02
EXISTING ENROLLEES TIER CHANGES			
Individual Low Plan to Family Low Plan	FAM	\$86.28	
Individual High Plan to Family High Plan	FAM		\$107.86
EXISTING ENROLLEES PLAN CHANGES			
Individual Low Plan to Individual High Plan	IND		\$7.84
Family Low Plan to Family High Plan	FAM		\$29.42

ONLINE PAYMENT https://ipn2.psymentus.com/rotp/dvis?header.paymentTypeCode=INSUR

E-CHECK PAYMENTS ONLY OR ENROLLMENTS WILL NOT BE PROCESSED

	Altus Dental Low Plan	Altus Dental High Plan
Preventative & Diagnostic		1981
Cleanings	100%	100%
Oral Exams	100%	100%
Fluoride Treatments	100%	100%
X-rays	100%	100%
Full mouth or Panorex	100%	100%
Sealants	100%	100%
Space Maintainers	100%	100%
Minor Restorative		
Denture Repairs	80%	100%
Falliative Treatment	80%	100%
Fillings - composites on all teeth	80%	100%
Simple Extractions	50%	100%
Oral Surgery/Anesthesia	50%	100%
Endodontics (Root Canals)	80%	100%
Perio Maintenance (cleanings)	100%	100%
Periodontic Surgery	50%	100%
Root Planing & Scaling	50%	100%
Major Restorative*		
Crowns	50%	30%
Prosthodontics	50%	30%
Single Tooth Implants	50%	50%
Orthodontia	N/A	30% to age 19 (\$1000 lifetime max)
Calendar Year Deductible*	\$25/\$75	\$25/\$75
Calendar Year Maximum	\$1,300	\$1,500
Dependent Coverage	Dependents to age 20	Dependents to age 26

	ENTAL COMPARISON BLIC SCHOOLS	
AND AUGUST PREMIUM DUE AT TIME OF ENROLLMENT	7945-0003	7945-0006
NEW ENROLLEES IND	\$96.64	\$112.32
FAM	\$269.20	\$328.04
EXISTING ENROLLEES TIER CHANGES		
Individual Low Plan to Family Low Plan FAM	\$172.56	
EXISTING ENROLLEES PLAN CHANGES		
Individual Low Plan to Individual High Plan IND		\$15.68
Family Low Plan to Family High Plan FAM		\$58.84

ONLINE PAYMENT https://ipn2.paymentus.com/rotp/dvia?header.paymentTypeCode=INSUR

E-CHECK PAYMENTS ONLY OR ENROLLMENTS WILL NOT BE PROCESSED

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Calendar Year Deductible*	\$25/\$75	\$25/\$75
alendar Year Maximum	\$1,500	\$1,500
Dependent Coverage	Dependents to age 26	Dependents to age 20

Benefit Contacts

City Benefits	School Benefits
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