



An Informational Brochure for
**Fairfax County Government
Retiree Prescription Drug Benefits**





Keep this brochure for future reference

While many of the changes to your prescription drug coverage are administrative in nature, we want to keep you informed so you know what to expect during the upcoming annual open enrollment period, October 1-22, 2015, and when the benefits take effect on January 1, 2016.

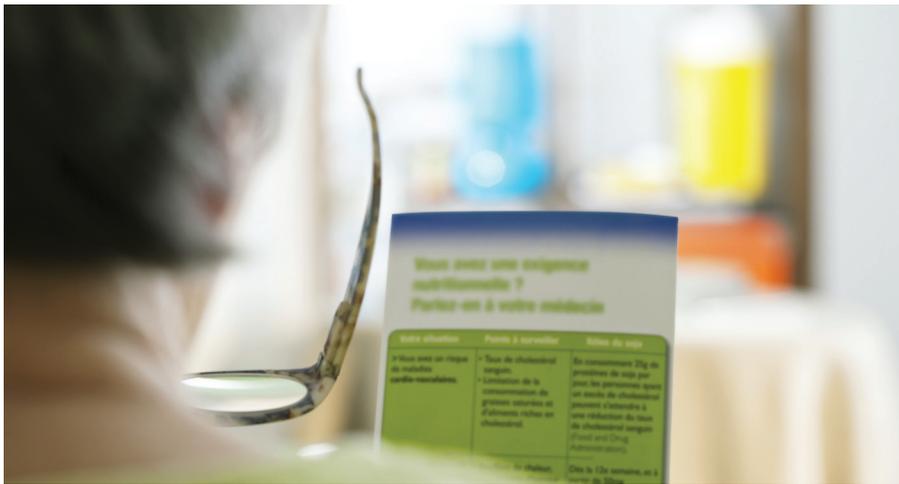
Your Medicare-eligible prescription drug benefits for 2016

This brochure provides information you need to know about your Medicare-eligible prescription drug benefits coverage beginning January 1, 2016.

For Medicare-eligible retirees and dependents, age 65 and older, Fairfax County Government will provide prescription drug benefits for the three Cigna medical plan options through a County-sponsored group Medicare Part D plan called the Cigna-HealthSpring Rx (PDP) Employer Prescription Drug Plan, or the Cigna-HealthSpring Rx (PDP) for short.

The Cigna-HealthSpring Rx (PDP) is administered by Cigna-HealthSpring® and is a Medicare-approved prescription drug plan that offers many benefits we believe you will find valuable. Throughout this transition, we will minimize changes to your prescription drug coverage as much as possible.

This transition is automatic. There is no action for you to take if you are already enrolled in one of the three Fairfax County Government medical plans through Cigna.



Pre-65 retirees who turn age 65

Pre-65 retirees who turn age 65 and become eligible for Medicare must apply for Medicare Part A and Part B as soon as they are eligible, and submit a copy of their Medicare card to the County's Benefits Division. If they have coverage through Cigna, they will be notified in advance of their Medicare-eligibility date and move to the Cigna-HealthSpring Rx (PDP). Those retirees who do not apply for and maintain Medicare Part A and Part B coverage will not be eligible for the County's supplemental medical coverage.

Information you need to know

Eligibility: The information in this brochure applies only to Medicare-eligible retired participants, age 65 and older, who will be enrolled in one of the Fairfax County Government medical plans through Cigna in 2016. Those plans are the three self-insured OAP plans (Copay, 90% Coinsurance, 80% Coinsurance) through Cigna.

Your benefit amount: If you are in one of the County's Cigna medical plans, the drug copay structure of the plan will not change. This amount is separate from the monthly premium. However, the out-of-pocket maximum will increase from \$1,000 to \$1,500 per person in 2016.

More information: In addition to this introductory brochure, you will receive more information in the coming weeks about the County's group Cigna-HealthSpring Rx (PDP) coverage. Watch for:

- Your 2016 open enrollment packet that you will receive from the County in late September.
- A pre-enrollment kit from Cigna that will include a summary of benefits, the 2016 drug list, and a required opt-out letter (if you choose to waive coverage from the County in 2016). **Note:** If you waive this prescription drug coverage, you waive out of medical too and cannot re-enroll in the future.
- A series of updates and required notices from Cigna.
- Access to an online informational video.



Use this brochure when talking with retired colleagues

Keep this brochure handy for reference if you talk about your prescription drug coverage in one of the Fairfax County Government Cigna medical plans in 2016.

Why is Fairfax County Government sponsoring a Medicare Part D prescription drug plan in 2016?

The County regularly evaluates the benefit programs for both employees and retirees to ensure your benefit coverage offers value to you and your dependents.

We have been meeting with industry experts regarding changes in Medicare funding. We elected to change our prescription drug coverage for Medicare-eligible retired participants, age 65 and older, to manage overall program costs while preserving our benefits structure. This approach:

- Retains key plan design features.
- Minimizes disruption to participants.

While there will be some changes to the plan's prescription drug formulary and out-of-pocket maximum, the County has taken steps to minimize disruption during the transition. This transition will affect how benefits are administered between Fairfax County Government, Cigna-HealthSpring, and the Medicare Part D program.

Cigna's role

Cigna will be the administrator for the County's prescription drug benefits covering Medicare-eligible retirees and Medicare-eligible dependents, age 65 and older, who enroll in the County retiree medical plans through Cigna.

Your new prescription ID card

If you are a Medicare-eligible retired participant, age 65 or older, in the Cigna plans, you will receive a new prescription drug ID card for 2016 from Cigna. You will also receive a new medical ID card for your medical coverage from Cigna. If you are age 65 or older and your spouse is under age 65, or vice versa, you both will receive new ID cards. You should receive your new ID cards in December 2015 for a January 1, 2016, effective date. To receive your existing refills at a retail pharmacy, you will need to present your new Cigna ID card. For mail order prescriptions, you will receive your refills by mail through Cigna Home Delivery Pharmacy, which will be the administrator for mail order prescription drugs. (Other mail order prescription vendors are available.)

The "donut hole" does not apply

The Cigna-HealthSpring Rx (PDP) provides consistent cost sharing with no reduction in coverage during the Medicare Part D coverage gap, or "donut hole," as it's commonly known. **This donut hole does not apply to you.**

New ID cards

By the end of December, you will receive new ID cards for your medical and prescription drug coverage. Make sure you present your new prescription drug ID card from Cigna when you visit your pharmacist in 2016. Make sure you present your medical ID card when you visit your doctor. Be sure to destroy your old ID cards after you receive your new ID cards.

As always, continue to present your separate Medicare ID card when requested.



What you need to do

This checklist explains the steps we encourage you to consider this fall.

- Read this brochure and become familiar with the prescription drug benefit changes and the communications you will receive.
- Watch for more information about the County-sponsored group Cigna-HealthSpring Rx (PDP) before and after open enrollment and throughout the year. Information will include items like your new prescription drug ID card, the preferred drug list, and other special notices and important documents.
- Review your 2016 open enrollment packet that will be mailed to you in late September.
- If you do nothing during open enrollment, in 2016 your medical plan will remain the same and you will automatically be enrolled in the Cigna-HealthSpring Rx (PDP).**
- Watch for your new prescription drug ID card and medical ID card in the mail in late December.
- If you have any questions about retiree medical plan premiums, please contact the Fairfax County Department of Human Resources Benefits Division at **703-324-3311** or **HRCentral@fairfaxcounty.gov**.

How to enroll for 2016 coverage

You will receive an enrollment election form in your 2016 open enrollment packet. If you wish to make changes to your coverage for 2016, you will need to complete and return the form to the Benefits Department. **If you do nothing during open enrollment, in 2016 your medical plan will remain the same as you have in 2015 and you will automatically be enrolled in the Cigna-HealthSpring Rx (PDP).**

For information about the upcoming open enrollment for 2016, contact the Fairfax County Department of Human Resources Benefits Division at **703-324-3311** or **HRCentral@fairfaxcounty.gov**.

How to tell if your enrollment is successful

You will receive a confirmation-of-enrollment letter from the Cigna-HealthSpring Rx (PDP) after you have been automatically enrolled in the County's group Cigna-HealthSpring Rx (PDP) coverage. Please retain this confirmation letter for your records.

Important note

You will receive a pre-enrollment kit from Cigna and a Fairfax County Government annual open enrollment packet. There is a federal requirement for Cigna-HealthSpring to include an "opt-out form" in the pre-enrollment kit. However, if you are interested in making changes for next year's enrollment, please wait for the County's annual open enrollment packet.



2015 and 2016 benefit summary comparison

The chart below provides a prescription drug copay and coinsurance comparison for 2015 and 2016. The dollar amounts remain unchanged in 2016, except each person's out-of-pocket maximum will increase from \$1,000 to \$1,500. You will still have generic, preferred brand, and non-preferred brand options, though the preferred drug list in the formulary may change. **Note:** We are now labeling your prescription drug options in four tiers.

We anticipate less than 5% of retirees will experience a change due to a prescription drug moving into a new copay tier. Watch for more detailed information from Cigna in the next several months about your prescription drug coverage. You may want to visit with your doctor to consider drugs on the new plan's formulary.

| | 2015 Fairfax County Government group medical plan with current prescription drug coverage | | 2016 Fairfax County Government group medical plan with the Cigna-HealthSpring Rx (PDP) | |
|-----------------------------------|---|--|--|--|
| 2015 Benefits | Retail Pharmacy (30-day in network*) You Pay | Mail Order (90-day in network*) You Pay | Retail Pharmacy (30-day in network*) You Pay | Mail Order (90-day in network*) You Pay |
| Deductible | \$50 per person | | \$50 per person | |
| Tier 1 Generic | \$7 copay | Zero cost for maintenance; \$14 for non-maintenance | \$7 copay | Zero cost for maintenance; \$14 for non-maintenance |
| Tier 2 Preferred Brand | 20% coinsurance (maximum of \$50) | 20% coinsurance (maximum of \$100) | 20% coinsurance (maximum of \$50) | 20% coinsurance (maximum of \$100) |
| Tier 3 Non-Preferred Brand | 30% coinsurance (maximum of \$100) | 30% coinsurance (maximum of \$200) | 30% coinsurance (maximum of \$100) | 30% coinsurance (maximum of \$200) |
| Tier 4 High Cost Drugs | Paid same as Tier 1 to 3, depending on type of drug | Paid same as Tier 1 to 3, depending on type of drug | 30% coinsurance (maximum of \$100) | 30% coinsurance (maximum of \$200) |
| Out-of-Pocket Maximum | \$1,000 per person | | \$1,500 per person | |

*Out of network you pay 30% coinsurance regardless of tier.

You can only be enrolled in one Medicare Part D plan

Medicare coverage rules allow you to be enrolled in only one Medicare Part D plan at a time. If you want to enroll in a different Medicare Part D plan (e.g., through your spouse's employer or on the individual market), you will need to drop your entire coverage, including medical, from the County, as well as any coverage you may have for dependents. If you are currently enrolled in a different Part D plan, you will automatically lose that coverage if you enroll and remain in one of the County's medical plans through Cigna. **Important note: You cannot re-enroll in one of the County's medical plans after you drop coverage.**

Medicare Part D premiums

Medicare will not require you to pay a Medicare Part D premium unless your household income is above a certain level. Any additional premium is deducted through Social Security. You will continue to pay premiums for both medical and prescription drug coverage as you do today to the County.

Late enrollment penalty

The Medicare Part D program assesses a late enrollment penalty if you do not join a Medicare Part D plan when first eligible, and then **do not** have other prescription drug coverage at least as valuable as the Medicare Part D program (i.e., creditable coverage) for 63 days or more. The County's active and retiree prescription drug programs have provided creditable coverage since the Medicare Part D program was introduced in 2006.

Notice about "opt-out" rights

Your County retiree medical and prescription drug coverage is considered one enrollment and cannot be separated. If you decide to opt out of the County's new prescription drug coverage, the Cigna-HealthSpring Rx (PDP), you will forfeit your current County medical plan coverage for you and any dependents.

You'll receive more mail

Due to federal government requirements, you and any Medicare-eligible dependent you cover, if age 65 and older, will each receive more communications associated with the Cigna-HealthSpring Rx (PDP) prescription drug program than you have in the past—before and after enrollment. You will want to keep these communications for your records. Here are some things to keep in mind about the communications:

- **These are standardized government-prescribed notices.** The language is oftentimes vague and potentially confusing because it must apply to multiple plan sponsor and participant situations.
- **Some of these communications will be more targeted to your specific situation and will require you to take action,** which will be clearly explained in the communication itself.
- **The government requires that we send these communications individually to each participant enrolled in the program.** This means that if you and your spouse are covered under this Cigna-HealthSpring Rx (PDP), you will each receive a copy of these communications for the plan.

Important note: You cannot re-enroll in one of the County's Cigna medical plans after you drop coverage.

While a notice about your "opt-out" rights will be sent to you in the coming months, no action will be required if you remain enrolled in one of the County's medical plans through Cigna.

Must-read communications

Watch your mail! The table below shows the must-read communications you will receive, including dates for an informational meeting and open enrollment. **There is no action for you to take if you are already enrolled in one of the County's medical plans with Cigna and have no changes to make for your coverage.**

| | | |
|--|---|--|
| Informational Meeting: Tuesday, September 15, 2015 at 10 a.m. Board Auditorium at Fairfax County Government Center, 12000 Government Center Parkway, Fairfax, VA 22035 | | |
| Communications you will receive | | When you will receive them |
| A Cigna-HealthSpring Rx (PDP) Pre-Enrollment Kit, including: <ul style="list-style-type: none"> • Cover letter • Information guide • Plan ratings • Summary of benefits • Opt-out notice • Drug list | | By end of September |
| 2016 Open Enrollment: October 1-21, 2015 | | |
| Retiree Benefit Meeting Schedule | | |
| Date | Time | Location |
| Monday, October 5, 2015 | 9 a.m. to 10 a.m. for Retiree meeting 9 a.m. to 2 p.m. for Health Fair, screenings, and Flu Shot Clinic | Retiree Benefit Meeting and Health Fair, Screenings & Flu Shot Clinic Government Center Board Room & Forum 12000 Government Center Parkway Fairfax, VA |
| Wednesday, October 7, 2015 | 7 p.m. to 9 p.m. | Retiree Benefit Meeting ACCA Child Development Center 7200 Columbia Pike Annandale, VA |
| Tuesday, October 13, 2015 | 1 p.m. to 3 p.m | Retiree Benefit Meeting Sherwood Regional Library 2501 Sherwood Hall Lane Alexandria, VA |
| Wednesday, October 21, 2015 | 1 p.m. to 3 p.m | Retiree Benefit Meeting Centreville Regional Library 14200 St. German Drive Centreville, VA |
| Confirmation letter and prescription drug ID card | | In December |
| Acknowledgement letter | | By end of December |
| A Welcome Kit from Cigna-HealthSpring, including: <ul style="list-style-type: none"> • Provider/pharmacy directory • Evidence of coverage • New enhanced drug list (if applicable) | | By end of December |
| Other communications from Cigna including quarterly preferred drug updates, explanations of benefits (EOBs), and other benefits-related information and required notices | | As necessary throughout the year |
| Retiree Meeting: Monday, December 7, 2015 from 10 a.m. to noon Board Auditorium at Fairfax County Government Center, 12000 Government Center Parkway, Fairfax, VA 22035 | | |

Resources

The following are the key resources to contact when you have additional questions about materials you receive:

| Resource | When to contact | Contact information |
|--|--|---|
| Cigna OAP Plans | General questions about medical coverage in the Fairfax County Government self-insured medical plan with Cigna | www.mycigna.com 800-244-6224 , 8 a.m. to 8 p.m. Eastern time, Monday through Friday For Representative Keisha Lewis: 703-324-2446 , 9 a.m. to 3 p.m. Eastern time, Monday through Friday keisha.lewis@fairfaxcounty.gov |
| Cigna-HealthSpring Member Services | General questions about your prescription drug coverage | 800-558-9562 (TTY 711), 8 a.m. to 8 p.m. local time, Monday through Friday (and on Saturdays and Sundays from October 1 through February 14) |
| Fairfax County Department of Human Resources Benefits Division | Eligibility questions, benefit plan information, and general assistance | 703-324-3311 (TTY 711), 8 a.m. to 4:30 p.m., Monday through Friday HRCentral@fairfaxcounty.gov |
| Kaiser Permanente HMO | General questions about medical coverage in the Fairfax County Government fully insured HMO with Kaiser Permanente | www.kaiserpermanente.org 301-468-6000 , 8 a.m. to 8 p.m. Eastern time, Monday through Friday |
| Medicare | General Medicare questions | www.medicare.gov 800-MEDICARE (800-633-4227) TTY: 877-486-2048 |
| Social Security Administration | Apply for low-income subsidy assistance for the Cigna-HealthSpring Rx (PDP) | www.socialsecurity.gov 800-772-1213 TTY: 800-325-0778 |

This brochure contains brief summaries of, and expected changes to, the pharmacy component of three of the Fairfax County Government medical plans for Medicare eligible Fairfax County Government retired participants age 65 and older. This brochure does not attempt to cover all details. In some instances, full details are available in written documents that legally govern the operation of the plan. If the information in this brochure differs in any way from the terms of the plan documents, the plan documents shall control. Fairfax County Government reserves the right to modify or amend, at any time and in any way whatsoever, the terms of these plans, including eligibility requirements, and to terminate the plans completely.

