



# GARLAND

TEXAS MADE HERE

**2012 Retiree Benefits  
Enrollment Guidebook**

## Benefit Phone Number and Website Information

Service/Plan	Company	Phone Number	Website
To access benefit information and to locate forms	City of Garland	Visit website	<a href="http://www.hrconnection.com">http://www.hrconnection.com</a> user name – cogretiree password - Garland1
City Care Clinic	City of Garland	972-205-3727	N/A
Blue Cross Blue Shield Plans (for pre-65 retirees and/or dependents)	Blue Cross Blue Shield	1-800-521-2227	<a href="http://www.bcbstx.com">www.bcbstx.com</a>
CIGNA Medicare Surround Health Plan (Medicare eligible retirees and/or dependents)	CIGNA	1-800-244-6224	<a href="http://www.cignamedicare.com">www.cignamedicare.com</a>
CIGNA Medicare Surround Pharmacy Only	CIGNA	1-800-558-9562	<a href="http://www.cignamedicare.com">www.cignamedicare.com</a>
Dental Plans Customer Service	Guardian Dental	1-800-541-7846, option 1	<a href="http://www.guardiananytime.com">www.guardiananytime.com</a>
Dental Plans Claims Services	Guardian Dental	1-800-541-7846, option 1	<a href="http://www.guardiananytime.com">www.guardiananytime.com</a>
Vision Plan	VSP	1-800-877-7195	<a href="http://www.vsp.com">www.vsp.com</a>
Medicare Hotline	Medicare	1-800-633-4227	<a href="http://www.medicare.gov">www.medicare.gov</a>
Texas Municipal Retirement System	TMRS	1-800-924-8677	<a href="http://www.tmr.com">www.tmr.com</a>
Retiree Billing	Verity National	1-800-840-3977 x138	N/A

For benefit questions, please contact:

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The City of Garland is pleased to provide you with this booklet that contains important information about your 2012 Benefits Program. Your participation in the program can help safeguard your financial interests and take care of your health care needs.

Please read this information carefully and take time to fill out the enclosed 2012 Retiree Benefits Enrollment form. The deadline for returning your form to the City of Garland HR Department is Friday, **November 18, 2011**.

**This guide provides a brief description of the City of Garland’s benefit plans. The official plan documents govern the terms and conditions of each plan and will control in the event of any discrepancy between the information in this guide and the official plan documents. The City of Garland retains the right to change, modify, interpret or cancel any plan—in whole or in part—without advance notice and at its sole discretion. The Plan Document is available at [www.hrconnection.com](http://www.hrconnection.com) (username: cogretiree password: Garland1).**

# Eligibility

## Eligible Retirees

You are eligible to participate in the City of Garland's retiree benefits program if you:

- Are a retired employee of the city,
- Meet the Texas Municipal Retirement System (TMRS) criteria for receiving a monthly retirement check (see [www.TMRS.com](http://www.TMRS.com) for details), and
- **Elect coverage at the time of retirement and maintain continuous, uninterrupted coverage.**

### Important Reminder

If you drop medical coverage at any time after you retire, you will not be able to re-enroll in the future, except within 30 days of your 65<sup>th</sup> birthday, when you become eligible for Medicare.

## Eligible Dependents

The following dependents are also eligible to participate, if you enroll them for coverage **at the time you retire:**

- Your spouse, as defined and recognized by Texas state laws
- Dependent child, children, or grandchildren under age 26, who are:
  - Your biological children,
  - Legally adopted or placed with you pending formal adoption,
  - Your stepchildren, or
  - Grandchildren for whom you are the legal guardian.

After you make your initial benefits election at the time of retirement, **you can add dependents only if:**

- You get married and contact the City of Garland HR Department within 30 days of the marriage to add your new spouse, or
- A court decree orders the City of Garland to insure your eligible children or grandchildren.

# Open Enrollment—Make Your Elections for 2012

Open Enrollment begins **November 1, 2011** and ends on **November 18, 2011**. Please take time to review this guide and determine which benefit plans and options best meet your needs. Then, complete the 2012 Retiree Benefits Enrollment form and return it to the City of Garland HR Department at the address shown on the inside front cover of this guide. **All retirees must complete and return an Enrollment form annually. If you fail to return a 2012 enrollment form, your current elections will automatically renew at the 2012 rates and benefits.**

## Medical Identification Cards

- **Pre-65 Retirees**— Blue Cross Blue Shield (BCBS) will continue as our medical and pharmacy plan administrator in 2012. BCBS will mail medical ID cards directly to your home. Look for these cards to arrive in your mailbox the last week of December.
- **Post-65 and Medicare Eligible Retirees**—Cigna will mail a medical and a pharmacy ID card separately if you are a new member. Please look for these to arrive in your mailbox the last week of December.

## Dental Identification Cards

The Guardian Life Insurance Company of America has been selected as the new dental provider beginning January 1, 2012; please review coverage information on page 13.

- Guardian will mail new dental ID cards directly to your home. Please look for these cards to arrive in your mail box the last week of December.

## Vision Identification Cards

VSP Vision will continue as the retiree vision provider in 2012.

- Please be advised that this program is a paperless plan, therefore, no ID cards are required or provided. To use this benefit, you will provide your vision provider with the name of the insurance carrier and the online systems will verify your coverage for you.

### Retiree Billing

Verity National Group will continue to administer retiree billing and drafting. For questions or concerns, please contact them by:

Phone: 800-840-3977 x138

Mail: PO Box 1885, San Antonio, TX 78297

Email: [CityofGarland@VerityNational.com](mailto:CityofGarland@VerityNational.com)

**Importance Notice for Pre-65 Retirees**  
**Effective January 1, 2012, Walgreen's Pharmacy will NO LONGER be an in-network retail pharmacy provider.**

# Plans Available to Pre- and Post-65 Retirees and Eligible Dependents

The table below shows the plan options in which you and your eligible dependents can enroll. Descriptions of each option are found on pages 6 - 15, with information on monthly premiums on page 5.

	Pre-65 Retiree and/or Eligible Dependent(s)	Medicare Eligible Retiree and/or Eligible Dependent(s)
<b>Medical</b>	BCBS Blue Choice Plus or BCBS Blue Choice Core	CIGNA Medicare Surround Plan
<b>Dental</b>	Guardian Scheduled Dental Plan Guardian Basic Plan Guardian Premium Plan	
<b>Vision</b>	VSP Vision Plan (retiree and spouse only)	

## Action Required When You or Your Spouse Becomes Eligible for Medicare

Thirty days before your 65th birthday, your spouse's 65th birthday, or when the person becomes Medicare eligible through disability, you need to:

1. Enroll in **Medicare Part A and Part B only** (visit [www.medicare.gov](http://www.medicare.gov) for details). **Do NOT sign up for Medicare Part D. CIGNA will automatically enroll you in Part D of Medicare for prescription drug benefits. (See page 11.)**
2. Contact Verity National Group at 1-800-840-3977, extension 138. Tell the service representative that you or your spouse will be turning 65. Your rates on your medical coverage may be reduced. **IMPORTANT:** You must make the call before the first of the month in which the individual will turn 65. For example, if you or your spouse will turn 65 on September 25, you must contact Verity National before September 1.
3. Provide the City of Garland HR Department with a copy of your Medicare ID card.

**Important Note:** If you are the primary insured (retiree of City of Garland) and you become eligible for Medicare, but your spouse is not yet 65, you will receive a new CIGNA medical ID card and Blue Cross Blue Shield (BCBS) will terminate your policy. However, your spouse will continue to be covered under the Blue Cross Blue Shield plan and will receive a NEW medical ID card in the mail. **The ID card for the old policy will no longer work in a provider's office or pharmacy. You must use the new ID card.**

# What You Pay for Coverage— Monthly Rates for 2012

## 2012 Medical

### Pre-65 Retiree/Dependents

	BCBS Blue Choice Plus	BCBS Blue Choice Core
Retiree only	\$140	\$330
Retiree + Child(ren)	\$330	\$600
Retiree + Spouse	\$420	\$710
Retiree + Family	\$770	\$998

### Post-65 Retiree/Spouse with Dependent Children

	CIGNA Medicare Surround	Medicare Surround and BCBS Blue Choice Plus	Medicare Surround and BCBS Blue Choice Core
Retiree only	\$196	n/a	n/a
Retiree + Child(ren)	n/a	\$415	\$525
Retiree + Spouse	\$415	n/a	n/a
Retiree + Family	n/a	\$690	\$790

### One Pre-65 and One Post-65 Retiree/Spouse (With or Without Dependents Under Age 26)

	Medicare Surround and BCBS Blue Choice Plus	Medicare Surround and BCBS Blue Choice Core
Retiree + Spouse	\$456	\$570
Retiree + Family	\$728	\$880

## 2012 Dental

	Scheduled Dental	Basic Dental	Premium Dental
Retiree Only	\$15	\$24	\$32
Retiree + Family	\$36	\$55	\$74

## 2012 Vision

Retiree Only	\$10.92
Retiree + Spouse	\$17.40

## 2012 Medical Plans (Pre-65 Retirees and/or Dependents)

### Medical Plan

The retiree medical plan for pre-65 retirees and/or their dependents is administered by Blue Cross Blue Shield (BCBS) and utilizes the nationwide BCBS Blue Choice network. You can use any doctor, lab or hospital you choose. However, when you use in-network providers, the plan pays a larger percentage of the cost of your care, so you save money. If you choose out-of-network providers, the plan pays a smaller percentage of the cost.

Eligible retirees and dependents under age 65 can choose either the BCBS Blue Choice Plus option or the BCBS Blue Choice Core option.

**It is the responsibility of each participant (not your doctor) to verify a provider's network affiliation with the BCBS Blue Choice plan prior to the utilization of any medical treatment or services.**

Note: Individuals who have been approved for pre-65 retiree disability Medicare must enroll in the Medicare Surround Plan; see page 10.

For a complete listing of covered preventive services, log on to [www.HRconnection.com](http://www.HRconnection.com).

#### **Helpful Hint: Out-of-Pocket Maximum**

With both the Blue Choice Plus and Core options, the medical plan will begin to pay 100% of eligible charges for the rest of the calendar year once you reach the annual out-of-pocket maximum(s). These amounts are different for each option, as shown in the chart on page 8.

Then, follow these simple steps to find the listing:

- Click on “Benefit Plans,”
- Then “Medical,” and
- Then the name of your BCBS medical option,
- Then click on the “Summary Plan Description” tab.

Preventive benefits will be covered at 100% if you use in-network providers. Here are some covered preventive care services:

- Annual Physical
- Colonoscopy—Up to 2 times per year
- Mammogram—Up to 2 screenings per year
- Routine OB/GYN exams
- Pap Test—Up to 2 tests per year
- Bone Density Testing—Up to 2 tests per year
- PSA—Up to 2 screenings per year
- Routine Hearing Exam
- Well Child Care
- Lab work processed by Quest Diagnostics
- Stress EKG/Echocardiogram—Up to 2 tests per year

**You must receive treatment from an in-network provider; as with other preventive benefits, out-of-network claims will not be considered.**

#### **Important Note About Claims**

Be sure to ask your physician to submit your claims as a preventive procedure so services will be covered at the highest level. Otherwise, benefits will be paid under the regular provisions of your Blue Choice option.



# Two 2012 Benefit Enhancements That Will Save You Money (\$\$\$)

Effective January 1, 2012, participants covered by the City of Garland Health Plan administered by Blue Cross Blue Shield of Texas will enjoy two new benefits.

## 1. BAYLOR HEALTH CARE NETWORK



The City in-network coinsurance benefit is 80% of applicable medical charges after the annual deductible has been satisfied. Beginning January 1, 2012, you will receive an **85%** coinsurance benefit when you *voluntarily* choose to utilize a Baylor Health Care facility for any eligible services.

What does this mean to you? **Example:**

	NON-BAYLOR FACILITY	BAYLOR FACILITY
Total Charges:	\$10,000	\$10,000
Less Deductible:	- 750	- 750
Sub-Total:	\$9,250	\$9,250
Member Coinsurance	20%	15%
<b>You Owe:</b>	\$ 1,850	\$ 1,387.50

## YOU SAVE \$462.50!!!

## 2. BLUE OPTIONS PROVIDERS



BlueCross BlueShield  
of Texas

When you go to [www.bcbstx.com](http://www.bcbstx.com) and login (first time users must register) and click on "Find a Doctor" – select the Blue Options Network. Each time you voluntarily utilize a *Blue Options* provider, you will save \$5 on each co-pay for primary care and specialist office visits.

# 2012 Benefit Comparisons

## (Pre-65 Retirees and/or Dependents)

### Plan Provisions

The table below shows highlights of how the two options work. For complete plan provisions, visit [www.HRconnection.com](http://www.HRconnection.com).

	BCBS Blue Choice Plus		BCBS Blue Choice Core		
<b>Annual Deductible*</b>	<b>In-Network</b>				
	Individual	\$1,500	\$750		
	Family	\$3,000	\$1,500		
	<b>Out-of-Network</b>				
Individual	\$3,000	\$1,500			
Family	\$6,000	\$3,000			
<b>Annual Out-of-Pocket Maximum*</b>	<b>In-Network</b>				
	Individual	\$6,500	\$4,750		
	Family	\$13,000	\$9,500		
	<b>Out-of-Network</b>				
Individual	\$13,000	\$9,500			
Family	\$26,000	\$19,000			
<b>Co-Pays*</b>	<b>Blue Options Provider:</b>	<b>Blue Choice Providers:</b>	<b>Blue Options Provider:</b>	<b>Blue Choice Providers:</b>	
	<b>Preventive Care</b>	\$0	\$0	\$0	
	<b>Primary Care Physician</b>	\$35	\$40	\$30	\$35
	<b>Specialist</b>	\$55	\$60	\$50	\$55
	<b>Urgent Care Emergency Room</b>	\$80 \$250 copay + 20% of charges		\$75 \$250 copay + 20% of charges	
<b>Coinsurance* (What the plan pays after you meet deductible)</b>	<b>Baylor Facility</b>	<b>Non-Baylor Facility</b>	<b>Baylor Facility</b>	<b>Non-Baylor Facility</b>	
	<b>In-Network</b>	15%	20%	15%	
	<b>Out-of-Network</b>	50%		50%	

\*The amounts shown here are the amounts you will pay when you receive care.

Special note: Chiropractic visits are limited to 24 visits per year, subject to the specialist visit co-pay.

**Deductibles and co-pays do NOT accrue towards the out-of-pocket maximum.**

#### Helpful Hint: Network Providers

To see if your doctor, specialist, or hospital is affiliated with the BCBS Blue Choice network, visit [www.bcbstx.com](http://www.bcbstx.com), or call this toll-free number: (800) 521-2227. Provider affiliation may change; we recommend checking before each medical visit to be sure your provider still participates in the network. And remember, you'll receive the highest level of coverage and save money if you use in-network providers.

# 2012 Prescription Drug Plan (Pre-65 Retirees and/or Dependents)

Effective January 1, 2012,  
Walgreen's Pharmacy will  
**NO LONGER** be an in-network  
retail pharmacy provider.

Both Blue Choice options offer coverage for approved prescription drugs. Your cost depends on the drug category:

- **Generic:** A lower cost, chemically equivalent version of a brand-name drug
- **Preferred Brand Name:** A brand-name medication found on the BCBS formulary (for a list of BCBS formulary medications, go to [www.bcbstx.com](http://www.bcbstx.com))
- **Non-Preferred Brand Name:** A brand-name not found on the BCBS formulary.

## Short-Term Prescriptions (30-Day Supply)

For short-term prescriptions, you can purchase up to a 30-day supply through your local pharmacy that is part of the BCBS Prime Rx network. Visit [www.bcbstx.com](http://www.bcbstx.com) or call 1-800-521-2227 to see if your pharmacy is in the network. Below are some network pharmacies in Garland, Rowlett, and Sachse. Check the BCBS website for additional providers.

### National Chains

- CVS Pharmacy
- Kroger Pharmacy
- Sack N Save Pharmacy
- Sam's Pharmacy
- Sav-On Pharmacy at Albertsons
- Target Pharmacy
- Tom Thumb Pharmacy
- Wal-Mart Pharmacy

### Important Note About Brand-Name Prescriptions

If you fill a prescription with a brand-name drug when a generic is available, you will pay the difference in cost between the brand-name and generic, PLUS the applicable preferred generic copay amount.

## \$4 Generic Rx

The \$4.00 prescription program is available at participating pharmacies at Kroger, Target, Tom Thumb, and Wal-Mart. The program is available to any and all persons with eligible listed prescriptions.

There is no need to provide proof of insurance to receive the benefits of the \$4.00 Prescription co-pay.

Here are the instructions on how this program works:

1. When you get your prescription from your doctor, check the pharmacy listings to see if it is listed as an approved drug.
2. If your prescription is listed, go to the pharmacy to get your prescriptions dispensed.
3. You will not need to mention you have group health insurance as this is not needed.
4. Pay \$4 for the prescriptions on the list of approved generic products.

For a complete listing of the \$4.00 covered prescription programs, please visit the following websites at:

- Kroger Pharmacy: [www.kroger.com/generic](http://www.kroger.com/generic)
- Target Pharmacy: [www.target.com/pharmacy](http://www.target.com/pharmacy)
- Tom Thumb Pharmacy: [www.tomthumb.com/pharmacy](http://www.tomthumb.com/pharmacy)
- Wal-Mart Pharmacy: [www.walmart.com/pharmacy](http://www.walmart.com/pharmacy)

Note: In participating in the program, not only are you saving money on your co-pays but you are saving the City of Garland money.

# 2012 Prescription Drug Plan

(Pre-65 Retirees and/or Dependents) (continued)

## Long-Term Prescriptions (90-Day Supply)

For ongoing “maintenance” drugs (those used for treating chronic conditions like high cholesterol, epilepsy or diabetes), you can save money by getting a 90-day supply through the PrimeMail Home Delivery Pharmacy Program or from your local network retail pharmacy.

To order prescriptions through the PrimeMail Pharmacy service, call 1-877-357-7463, select Option 3, and talk with a service representative.

Once your prescription is authorized, PrimeMail’s licensed pharmacists process the order and send it to you.

Mail order delivery typically takes between 10 and 14 days to arrive.

## Your Cost for Prescription Drugs

The table below shows what you pay for each prescription. There is a \$100 per member annual deductible for non-generic prescriptions for the Retail 30-Day or Retail 90-Day supplies. There is no deductible for any Mail Order prescriptions. To make the most of your benefits and pay the lowest amount out of your pocket, ask your doctor to prescribe generics.

### Important Note About Brand-Name Prescriptions

If you fill a prescription with a brand-name drug when a generic is available, you will pay the difference in cost between the brand-name and generic, PLUS the applicable preferred generic copay amount.

	30-Day Supply (Retail)	90-Day Supply (Retail)	90-day Supply (Mail Order)
<b>Annual Deductible</b>	\$100 per member per year on non-generic drugs only		<b>No deductible</b>
<b>Generic</b>	\$10	\$25	\$20
<b>Preferred Brand Name</b>	\$40	\$100	\$80
<b>Non-Preferred Brand Name</b>	\$80	\$200	\$160
<b>Brand Name with Generic Equivalent</b>	\$10, plus difference in cost between brand and generic	\$25, plus difference in cost between brand and generic	\$20, plus difference in cost between brand and generic
<b>Specialty Prescription Drug Benefits</b>	\$200 copay		

# 2012 Medical Plan

## (Medicare Eligible Retirees and/or Dependents)

### Medical Plan

The medical plan offers coverage that helps you and your eligible dependents maintain your good health, or pay for care when you are ill or injured.

Eligible retiree and dependents have one enrollment option: the CIGNA Medicare Surround Plan. (This plan is also the only option for retirees who have been approved for pre-65 retiree disability Medicare.) Once you reach age 65, Medicare will become your primary coverage and CIGNA will be secondary.

This plan does not use a network, but pays benefits to any doctor, lab or hospital that accepts Medicare. You don't have to pay any deductibles; CIGNA will cover both Medicare Part A and Part B deductibles for you. The plan also pays 100% of the Medicare-approved medical expenses not paid by Medicare. Expenses that are not considered medically necessary and are considered elective procedures will not be covered.

### Look for Your ID Card

If you are a new enrollee, CIGNA will mail you a medical ID card to your home in late December.

#### Reminder: Call Before You Go

Because the CIGNA Medicare Surround Plan only pays benefits to providers who accept Medicare, it's important to call and ask a doctor's office or facility before you receive services. This ensures that any covered services you receive will be reimbursed by Medicare.

# 2012 Prescription Drug Plan

## (Medicare Eligible Retirees and/or Dependents)

### Prescription Drug Plan

Retirees and dependents age 65 or older who enroll in the CIGNA Medicare Surround Plan are automatically enrolled by CIGNA in Medicare Part D and will receive prescription drug coverage through the CIGNA Medicare Rx Plan. Please do not enroll yourself in any other Part D programs. If you previously enrolled in Medicare Part D, CIGNA will automatically have your current prescription plan dropped and re-enroll you into the CIGNA Medicare Rx plan.

### Short-Term Prescriptions (30-Day Supply)

For short-term prescriptions, you can purchase up to a 30-day supply through your local pharmacy that is part of the CIGNA network. See page 9 for a list of local network pharmacies in Garland, Rowlett, and Sachse. To see if your pharmacy is part of CIGNA's network, visit [www.CIGNAmedicare.com](http://www.CIGNAmedicare.com) or call 1-800-558-9562.

### Long-Term Prescriptions (90-Day Supply)

For ongoing "maintenance" drugs (those used for treating chronic conditions like high cholesterol, epilepsy or diabetes), you can save money by getting a 90-day supply from a local CIGNA network retail pharmacy. Because the 90-day co-pay is only twice the amount of the 30-day co-pay, you save a third of the cost!

### Your Cost for Prescription Drugs

The table below shows what you pay for each prescription. The CIGNA Medicare Rx Plan covers the cost of all Medicare Part D deductibles. All medications you fill through this plan are subject to CIGNA's Medicare formulary. CIGNA covers all Part D deductibles, so you only pay the amounts shown below for each prescription.

	30-Day Supply (Retail)	90-day Supply (Retail)
<b>Annual Deductible</b>	CIGNA covers all Part D deductibles	
<b>Generic (Medicare Part D Tier 1)</b>	\$10	\$20
<b>Preferred Brand Name (Tier 2)</b>	\$30	\$60
<b>Non-Preferred Brand Name and High Cost (Tiers 3 and 4)</b>	\$60	\$120

#### Helpful Hint: Approved Medications

You can find a list of preferred brand name drugs at [www.CIGNAmedicare.com](http://www.CIGNAmedicare.com).

# 2012 Dental Plan Benefits

The City of Garland selected The Guardian Life Insurance Company of America as our provider of Dental benefits as of January 1, 2012. Guardian is an industry leader that has been helping people protect their financial well-being for over 150 years. They offer quality coverage at affordable group rates, superior claims and customer service, as well as resources to understand and get the most out of your benefits. Below are highlights of the Guardian benefits provided by The City of Garland.

Guardian Dental Customer Service: 1-800-541-7846, option 1

Guardian Claims Service: 1-800-541-7846, option 1

Guardian Dental Website: [www.guardiananytime.com](http://www.guardiananytime.com)

	Scheduled	Basic	Premium
Calendar Year Deductible			
<b>Individual</b>	\$50	\$75	\$50
<b>Family limit</b>	\$150	\$225	\$150
Calendar Year Maximum Benefit (Per Covered Member)	\$1,500	\$1,000	\$1,500
Maximum Rollover	No	Yes	No
<b>Type 1</b>			
Preventive / Diagnostic Benefits	Refer to Schedule on <a href="http://www.hrconnection.com">www.hrconnection.com</a>	100% - deductible waived	100% - deductible waived
<b>Type 2</b>			
Basic Benefits	Refer to Schedule on <a href="http://www.hrconnection.com">www.hrconnection.com</a>	50% after deductible	80% after deductible
<b>Type 3</b>			
Major Benefits	Refer to Schedule on <a href="http://www.hrconnection.com">www.hrconnection.com</a>	50% after deductible	60% after deductible
Orthodontia (Adult and Child)	50% after deductible \$1,250 lifetime max	50% after deductible \$1,250 lifetime max	50% after deductible \$1,250 lifetime max

## Sample Procedure Listing (Current Dental Terminology © American Dental Association)

Type 1	Type 2	Type 3
<ul style="list-style-type: none"> <li>Routine Exam (2 per benefit period)</li> <li>Bitewing X-rays (2 per benefit period)</li> <li>Full Mount / Panoramic X-rays (1 in 36 months)</li> <li>Periapical X-rays</li> <li>Cleaning (2 per benefit period)</li> <li>Fluoride for Children 18 and under (1 per benefit period)</li> <li>Sealants</li> <li>Space Maintainers</li> </ul>	<ul style="list-style-type: none"> <li>Restorative Amalgams</li> <li>Restorative Composites</li> <li>Endodontics (nonsurgical)</li> <li>Endodontics (surgical)</li> <li>Periodontics (nonsurgical)</li> <li>Periodontics (surgical)</li> <li>Denture Relines</li> <li>Simple Extractions</li> <li>Complex Extractions</li> <li>Anesthesia</li> </ul>	<ul style="list-style-type: none"> <li>Onlays</li> <li>Crowns (1 in 5 years per tooth)</li> <li>Crown Repair</li> <li>Implants</li> <li>Prostodontics (fixed bridge; removable complete/partial dentures) (1 in 5 years)</li> <li>Denture repairs and adjustments</li> </ul>



## 2012 Dental Plan Benefits (continued)

Guardian Dental Customer Service:	1-800-541-7846, option 1
Guardian Claims Service:	1-800-541-7846, option 1
Guardian Dental Website:	<a href="http://www.guardiananlife.com">www.guardiananlife.com</a>

### Find a Dental Provider

City of Garland belongs to the Guardian PPO network – **Dental Guard Preferred**. You may call 1-800-541-7846 or go online to find the contracted network providers who are most convenient for you.

1. Under Resources, Select “Find a Provider” (far right)
2. Select “Find a Dentist”
3. Select your dental plan “PPO”
4. Choose to search by location or search for a specific dentist or practice and enter your search criteria
  - If searching by location: enter your ZIP code or address and if desired, enter your preference on radius, provider specialty and/or language spoken.
  - Select your dental network – “**Dental Guard Preferred**”, hit “continue”
5. You will receive a list of providers to select from and will be able to download at your convenience.

To the left, there is a form where you can nominate a dentist to become part of the network. Simply click on the “Nominate your Provider” tab and complete the information. Once completed, click on the “submit” button and it will be transferred to the appropriate dental recruiter for that area.

### Online Access – Guardian Anytime – Member portal

**Once you receive your id card**, you will have access through our online member portal Guardian Anytime. With online access, you are able to find a provider, review benefit information, and have availability to discounts on certain products and services.

Go to [www.guardiananytime.com](http://www.guardiananytime.com)

1. Select the “Register Now” button (far right)
2. Under “User Role” select the “member” button, read Member Disclosure Statement at the bottom and click on “I agree”
3. Create your profile. **You will need your id card when completing this portion.**
4. You will receive online confirmation of registration with a link that directs you to Guardian Anytime.

### Pre-Treatment Authorization

While we don’t require a pre-treatment authorization form for any procedure, we recommend them for any dental work you consider expensive. As a smart consumer, it’s best for you to know your share of the cost up front. Simply ask your dentist to submit the information for a pre-treatment estimate to Guardian. We’ll inform both you and your dentist of the amount your insurance will cover and the amount that you will be responsible for. That way, you can help minimize surprises once the work has been completed.

### Basic Plan Carryover from 2011

If you submitted at least one dental claim in 2011 and your total paid claims for the year were under \$500, you may be eligible to roll over \$250, which will be added to your calendar year maximum for 2012.



# 2012 Vision Plan Benefits

If you elect vision benefits, coverage includes eye exams, contacts and eyeglass lenses and frames. You'll also get discounts on special features such as scratch-resistant lenses and laser eye surgery.

When you need eye care services, you may choose whether or not to use a network provider that has contracted with VSP. You receive a higher benefit when you use a network provider. If you use an out-of-network provider, you will pay in full at the time you receive care and submit your receipts to VSP to receive the appropriate reimbursement.

For participating providers in other areas, log on to [www.vsp.com](http://www.vsp.com) or call 1-800-877-7195.

Covered Services:	VSP Signature Provider Network:
<b>Exams</b> (Once Every 12 Months)	\$10 copay
<b>Materials</b> (Once Every 12 Months)	\$25 copay
<b>Frames</b> (Once Every 12 months)	<ul style="list-style-type: none"> <li>• Frame of your choice covered up to \$120</li> <li>• Plus, 20% of any out-of-pocket costs</li> </ul>
<b>Pair of Lenses</b> (Once Every 12 months)	<ul style="list-style-type: none"> <li>• Single vision, lined bifocal, lined trifocal lenses and tints covered in full</li> <li>• \$25 copay</li> </ul>
<b>Contact Lens Care</b> (Once Every 12 months)	<p>When you choose contacts instead of glasses, your \$120 allowance for frames applies to the cost of your contacts and the contact lens exam (fitting and evaluation). This exam is in addition to your vision exam to ensure proper fit of contacts.</p> <p>Current soft contact lens wearers may qualify for a special contact lens program that includes a contact lens evaluation and initial supply of replacement lenses. Learn more from your doctor or by going online to <a href="http://www.vsp.com">www.vsp.com</a>.</p>
<b>Out-of-Network Reimbursement Amounts</b>	<p>Exam—up to \$45</p> <p>Lenses:</p> <ul style="list-style-type: none"> <li>• Single Vision—up to \$45</li> <li>• Lined Bifocal—up to \$65</li> <li>• Lined Trifocal—up to \$85</li> <li>• Tints—up to \$5</li> <li>• Frame—up to \$47</li> <li>• Contacts—up to \$105</li> </ul>
<b>Extra Discounts and Savings</b>	<ul style="list-style-type: none"> <li>• Laser Vision Correction Discounts</li> <li>• Up to 20% savings on lens extras such as scratch resistant and anti-reflective coatings and progressives</li> <li>• Up to 20% savings on additional prescription glasses and sunglasses</li> <li>• 15% off cost of contact lens exam (fitting and evaluation)</li> </ul>

## 2012 Vision Plan Benefits (continued)

### Locate VSP Providers

It's simple to locate and make an appointment with a VSP provider. Just follow these steps:

1. Find a VSP network doctor at [vsp.com](http://vsp.com) or call 1-800-877-7195.
2. Make an appointment and tell the doctor you are a VSP member.
3. Your doctor and VSP will handle the rest.

A list of some of the VSP providers in the Garland area is shown below.

VSP Providers in Garland: Name and Address	Phone (area code 972) , unless otherwise indicated
<b>Soby Abraham, OD</b> , 3121 N. George Bush Hwy., Suite 101	495-7772
<b>Justin K. Barnett, OD</b> , 5120 Hwy 78, Suite 700	530-2020
<b>Michael J. Bollish, OD</b> , 6850 N. Shiloh Rd, Suite T	414-0444
<b>Lance M. Chong, OD</b> , 2930 S. 1 <sup>st</sup> St.	278-0154
<b>Robert E. Day, Jr., OD</b> , 3034 Broadway Blvd.	278-2121
<b>Glenn G. DeShaw, OD</b> , 2636 W. Walnut St., Suite 200	485-0700
<b>Clifton E. Dewey, OD</b> , 424 N. Jupiter Rd.	494-0329
<b>Reyna A. Hernandez, OD</b> , 3385 Naaman School Rd.	495-3997
<b>Stephen T. Khong, OD</b> , 3575C W. Walnut St.	272-9455
<b>Steven T. Le, OD</b> , 5001 Ben Davis Rd.	675-9626
<b>D. L. Morgan, OD</b> , 1456 Belt Line Road, Suite 129	214-227-4342
<b>Samantha N. Naidoo, OD</b> , 3121 N. George Bush Hwy., Suite 101	495-7772
<b>Kimberly Nguyen, OD</b> , 3575C W. Walnut St.	272-9455
<b>Mark A. Ruiz, OD</b> , 1821 Old Mill Run	494-2020
<b>Craig E. Schacherer, OD</b> , 303 S. Highway 78, Suite 203	442-2020
<b>Elliot Stendig, OD</b> , 1821 Old Mill Run	494-2020
<b>Michael J. Stewart, OD</b> , 401 W. Centerville Rd., Suite 6	840-8998
<b>Lorraine C. Suder, OD</b> , 6850 N. Shiloh Rd., Suite T	414-0444
<b>Bradley J. Wemhoener, OD</b> , 3046 Lavon Dr., Suite 130	495-8998



