



## **Section 2**

# **County Employee Health Benefits**

## FY 2015 Maryland County Government Health Benefits Survey

### Allegany

County: Allegany

Person Responding: Pamala Robinson

Title: Benefits Specialist

Phone: 301-777-5979, x1

Email: [probinson@allconet.org](mailto:probinson@allconet.org)

Fax: 301-777-2432

	Active Employees/Pre-65 Retirees		Medicare Retirees	
	Active Employees	Pre-65 Retirees	Medicare Eligible	Medicare w/Upgrade
<b>Annual Deductible (Individual)</b>			N/A	N/A
<b>In-Network</b>	N/A	N/A	N/A	N/A
<b>Out-of-Network</b>	300	300	N/A	N/A
<b>Annual Deductible (Family)</b>			N/A	N/A
<b>In-Network</b>	N/A	N/A	N/A	N/A
<b>Out-of-Network</b>	600	600	N/A	N/A
<b>Office Co-Pays (In-Network)</b>	20	20	N/A	N/A
<b>ER Copay</b>	50		N/A	N/A
<b>Coinsurance (In-Network)</b>			N/A	N/A
<b>Coinsurance (Out-of-Network)</b>			N/A	N/A
<b>Out of Pocket Max. (Individual)</b>			N/A	N/A
<b>In-Network</b>	2000	2000	N/A	N/A
<b>Out-of-Network</b>	2000	2000	N/A	N/A
<b>Out of Pocket Max. (Family)</b>			N/A	N/A
<b>In-Network</b>	4000	4000	N/A	N/A
<b>Out-of-Network</b>	4000	4000	N/A	N/A
<b>Rx Plan: Retail Generic</b>	5	7	N/A	N/A
<b>Brand, Formulary</b>	25	30	N/A	N/A
<b>Brand, Non-Formulary</b>	40	45	N/A	N/A
<b>RX Plan: Mail Generic</b>	5	7	N/A	N/A
<b>Brand, Formulary</b>	25	30	N/A	N/A
<b>Brand, Non-Formulary</b>	40	45	N/A	N/A

Notes: All Rx copays after \$100 deductible for pre-65 retirees. Medicare retirees are in a private Medicare Exchange Plan.

# FY 2015 Maryland County Government Health Benefits Survey

## Anne Arundel

County: Anne Arundel County Government

Person Responding: Douglas Hart

Title: Sr. Personnel Analyst

Phone: 410 222-7400

Email: pehart01@aacounty.org

Fax: 410 222-4512

	Active Employee and Pre-65 Retirees			Medicare Retirees
	Triple Option	Blue Choice HMO	CIGNA OAPIN	CIGNA Wrap
<b>Annual Deductible (Individual)</b>	125/250/500	100	100	
<b>In-Network</b>				N/A
<b>Out-of-Network</b>				N/A
<b>Annual Deductible (Family)</b>	250/500/1000	200	200	
<b>In-Network</b>				N/A
<b>Out-of-Network</b>				N/A
<b>Office Co-Pays (In-Network)</b>	15/25/70%AB	15	15	N/A
<b>ER Copay</b>	\$75	\$75	\$75	N/A
<b>Coinsurance (In-Network)</b>	95/5, 85/15, 70/30	100%	100%	80/20 after Medicare
<b>Coinsurance (Out-of-Network)</b>				80/20 after Medicare
<b>Out of Pocket Max. (Individual)</b>	500/1000/1500	800	1100	
<b>In-Network</b>				2000
<b>Out-of-Network</b>				2000
<b>Out of Pocket Max. (Family)</b>	1000/2000/3000	1600	3600	
<b>In-Network</b>				4000
<b>Out-of-Network</b>				4000
<b>Rx Plan: Retail      Generic</b>	5	5	5	5
<b>Brand, Formulary</b>	25	25	25	25
<b>Brand, Non-Formulary</b>	35	35	35	35
<b>RX Plan: Mail      Generic</b>	10	10	10	10/ 25 Non-CVS
<b>Brand, Formulary</b>	50	50	50	50/ 65 Non-CVS
<b>Brand, Non-Formulary</b>	70	70	70	70/ 85 Non-CVS

**FY 2014 Maryland County Government Health Benefits Survey  
Baltimore City**

**BALTIMORE CITY**

**EDWARD LOPEZ**

**H.R. MANAGER**

**410-396-7285**

[edward.lopez@baltimorecity.gov](mailto:edward.lopez@baltimorecity.gov)

**410-545-1516**

	Active Employee and Pre-65				Medicare Retirees			
	PPO	PPN	POS	HMO	POS	Traditional BCBS	PPO	HMO
<b>Annual Deductible (Individual)</b>								
<b>In-Network</b>	N/A IN OR OUT	N/A	N/A	N/A	N/A IN OR OUT	N/A	N/A	N/A
<b>Out-of-Network</b>								
<b>Annual Deductible (Family)</b>					N/A IN OR OUT	N/A	N/A	
<b>In-Network</b>	N/A IN OR OUT	N/A	N/A	N/A				N/A
<b>Out-of-Network</b>								
<b>Office Co-Pays (In-Network)</b>	5	10	5	5	5	MAJOR MEDICAL	5	5
<b>ER Copay</b>	50	50	50	50	50	50	50	50
<b>Coinsurance (In-Network)</b>	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Coinsurance (Out-of-Network)</b>	50% OF R/C	50%	50%	NO OON	50% OF R/C	50% OF R/C	50% OF R/C	NO OON
<b>Out of Pocket Max. (Individual)</b>	N/A IN OR OUT	N/A	N/A	N/A	N/A IN OR OUT	N/A	N/A	N/A
<b>In-Network</b>								
<b>Out-of-Network</b>								
<b>Out of Pocket Max. (Family)</b>	N/A IN OR OUT	N/A	N/A	N/A	N/A IN OR OUT	N/A	N/A	N/A
<b>In-Network</b>								
<b>Out-of-Network</b>								
<b>Rx Plan: Retail Generic</b>	10				10	10	10	10
<b>Brand, Formulary</b>	20				20	20	20	20
<b>Brand, Non-Formulary</b>	30				30	30	30	30
<b>RX Plan: Mail Generic</b>	15				20	20	20	20
<b>Brand, Formulary</b>	25				40	40	40	40
<b>Brand, Non-Formulary</b>	35				60	60	60	60

# FY 2015 Maryland County Government Health Benefits Survey5

## Baltimore

County: Baltimore

Person Responding: Shelly Simon

Title: Personnel Analyst

Phone: 410-887-2004

Email: [ssimon@baltimorecountymd.gov](mailto:ssimon@baltimorecountymd.gov)

Fax: 410-887-8710

	Active Employee and Pre-65 Retirees			Medicare Retirees	
	CIGNA Open Access Plus HMO (OAPIN)	CIGNA Open Access Plus (OAP)	Kaiser HMO	Cigna Medicare Surround	Kaiser Medicare Plus
<b>Annual Deductible (Individual)</b>	N/A		None	Not Applicable	None
In-Network		200			
Out-of-Network		300			
<b>Annual Deductible (Family)</b>	N/A				None
In-Network		400	None		
Out-of-Network		600			
<b>Office Co-Pays (In-Network)</b>	15	15	10	100% balance due after medicare	5
<b>ER Copay</b>	50	50	50	100% balance due after medicare	50
<b>Coinsurance (In-Network)</b>	N/A	15/85	None		
<b>Coinsurance (Out-of-Network)</b>		25/75	None		
<b>Out of Pocket Max. (Individual)</b>				\$2,000, \$300,000 lifetime	None
In-Network	1,100	1,000			
Out-of-Network		1,500	None		
<b>Out of Pocket Max. (Family)</b>					
In-Network	3,600	2,000			
Out-of-Network		3,000	None		
<b>Rx Plan: Retail Generic</b>	5	5	5	Greater of \$10 or 20%	5
Brand, Formulary	20	20	15	Greater of \$10 or 30%	5
Brand, Non-Formulary	35	35			
<b>RX Plan: Mail Generic</b>	10	10	5	Information unavailable	3
Brand, Formulary	40	40	15		3
Brand, Non-Formulary	70	70			

Note: Kaiser Rx plan covers one copay for 60 day supply. Copays listed are for Kaiser Facility pharmacies only. Cigna Rx plans are for one month supply per copay and are covered under Exp

# FY 2015 Maryland County Government Health Benefits Survey

## Calvert

County: Calvert County

Person Responding: Tim Hayden

Title: Director of Finance & Budget

Phone: 410-535-1600 ext. 2435

Email: haydent@co.cal.md.us

Fax: 410-414-3720

	Active Employee/Pre-65 Retiree		Medicare Retirees		
	HMO	PPO	HMO	PPO	Standard Group
<b>Annual Deductible (Individual)</b>					
<b>In-Network</b>	N/A	N/A	N/A	N/A	N/A
<b>Out-of-Network</b>	N/A	200	N/A	200	300
<b>Annual Deductible (Family)</b>					
<b>In-Network</b>	N/A	N/A	N/A	N/A	N/A
<b>Out-of-Network</b>	N/A	400	N/A	400	300 pp
<b>Office Co-Pays (In-Network)</b>	5	10	5	10	NA
<b>ER Copay</b>	25	N/A	25	N/A	N/A
<b>Coinsurance (In-Network)</b>	100%	100%	N/A	100%	N/A
<b>Coinsurance (Out-of-Network)</b>	N/A	80%	N/A	80%	N/A
<b>Out of Pocket Max. (Individual)</b>					
<b>In-Network</b>	N/A	800	N/A	800	300
<b>Out-of-Network</b>	N/A	800	N/A	800	N/A
<b>Out of Pocket Max. (Family)</b>					
<b>In-Network</b>	N/A	1600	N/A	1600	300 pp
<b>Out-of-Network</b>	N/A	1600	N/A	1600	N/A
<b>Rx Plan: Retail      Generic</b>	8	10	8	10	10
<b>Brand, Formulary</b>	15	20	15	20	20
<b>Brand, Non-Formulary</b>	30	35	30	35	35
<b>RX Plan: Mail      Generic</b>	8	10	8	10	10
<b>Brand, Formulary</b>	15	20	15	20	20
<b>Brand, Non-Formulary</b>	30	35	30	35	35

# FY 2015 Maryland County Government Health Benefits Survey

## Caroline

County: Caroline County

Person Responding: Sherry Bratton

Title: Assistant Director of Human Resources

Phone: 410-479-4105

Email: sbratton@carolinemd.org

Fax: 410-479-4023

	Active Employee/ Pre-65 Retiree EPO/Active/Pre 65 Retiree	Medicare Retirees Medicare Supplement	N/A	N/A
<b>Annual Deductible (Individual)</b>			-	-
In-Network	100	N/A	-	-
Out-of-Network	500	N/A	-	-
<b>Annual Deductible (Family)</b>		Only individual	-	-
In-Network	200	N/A	-	-
Out-of-Network	1000	N/A	-	-
<b>Office Co-Pays (In-Network)</b>	15 PRIM/25 SPEC	15	-	-
<b>ER Copay</b>	100	N/A	-	-
<b>Coinsurance (In-Network)</b>	90% OF "AB"	N/A	-	-
<b>Coinsurance (Out-of-Network)</b>	60% OF "AB"	N/A	-	-
<b>Out of Pocket Max. (Individual)</b>		N/A	-	-
In-Network	1500	N/A	-	-
Out-of-Network	3000	N/A	-	-
<b>Out of Pocket Max. (Family)</b>			-	-
In-Network	3000		-	-
Out-of-Network	6000		-	-
			-	-
<b>Rx Plan: Retail Generic</b>	8	N/A	-	-
Brand, Formulary	30 = DIF GENERIC	N/A	-	-
Brand, Non-Formulary	45 = DIF GENERIC	N/A	-	-
<b>RX Plan: Mail Generic</b>	16 - 90 DAY SUPPLY	N/A	-	-
Brand, Formulary	60 = DIF GENERIC	N/A	-	-
Brand, Non-Formulary	90 = DIF GENERIC	N/A	-	-

# FY 2015 Maryland County Government Health Benefits Survey

## Carroll

County: Carroll

Person Responding: Kimberly L. Frock

Title: Health Benefits & Compensation Manager

Phone: 410-386-2129

Email: klfrock@ccg.carr.org

Fax: 410-840-3671

	Active Employee/Pre-65 Retiree		Medicare Retirees	N/A
	Choice	Choice Plus	Medicare Supplemental	
<b>Annual Deductible (Individual)</b>			200	-
In-Network	N/A	N/A		-
Out-of-Network	N/A	200		-
<b>Annual Deductible (Family)</b>			400	-
In-Network	N/A	N/A		-
Out-of-Network	N/A	400		-
<b>Office Co-Pays (In-Network)</b>	10	15	N/A	-
<b>ER Copay</b>	50	50	50	-
<b>Coinsurance (In-Network)</b>	N/A	N/A	80/20	-
<b>Coinsurance (Out-of-Network)</b>	N/A	80/20	80/20	-
<b>Out of Pocket Max. (Individual)</b>			1,700	-
In-Network	N/A	N/A		-
Out-of-Network	N/A	1,700		-
<b>Out of Pocket Max. (Family)</b>			3,400	-
In-Network	N/A	N/A		-
Out-of-Network	N/A	3,400		-
				-
<b>Rx Plan: Retail Generic</b>	10	10	10	-
<b>Brand, Formulary</b>	20	20	20	-
<b>Brand, Non-Formulary</b>	30	30	30	-
<b>RX Plan: Mail Generic</b>	10	10	10	-
<b>Brand, Formulary</b>	20	20	20	-
<b>Brand, Non-Formulary</b>	30	30	30	-

Note: Retail Copays are for 30 days; Mail Copays are for 90 days

## FY 2015 Maryland County Government Health Benefits Survey

### Cecil

<b>County:</b>	Cecil County Government
<b>Person Responding:</b>	Barbara A. Imwold
<b>Title:</b>	Human Resources Manager
<b>Phone:</b>	410-996-8480
<b>Email:</b>	<a href="mailto:bimwold@ccgov.org">bimwold@ccgov.org</a>
<b>Fax:</b>	1-888-522-7158

	Active Employee/Pre-65 Retirement		Medicare Retirees	N/A
	Carefirst PPO - High Option	Carefirst PPO - Standard Option	Carefirst PPO-Standard Option	
<b>Annual Deductible (Individual)</b>	100	300	300	-
<b>In-Network</b>	100	300	300	-
<b>Out-of-Network</b>	100	300	300	-
<b>Annual Deductible (Family)</b>	300	900	900	-
<b>In-Network</b>	300	900	900	-
<b>Out-of-Network</b>	300	900	900	-
<b>Office Co-Pays (In-Network)</b>	10	10	10	-
<b>ER Copay</b>	90% of allowed benefit after deductible	75% of allowed benefit after deductible	75% of allowed benefit after deductible	-
<b>Coinsurance (In-Network)</b>	90% of allowed benefit	75% of allowed benefit	75% of allowed benefit	-
<b>Coinsurance (Out-of-Network)</b>	75% of allowed benefit after deductible	65% of allowed benefit after deductible	65% of allowed benefit after deductible	-
<b>Out of Pocket Max. (Individual)</b>	1,100	1,500	1,500	-
<b>In-Network</b>	1,100	1,500	1,500	-
<b>Out-of-Network</b>	1,100	1,500	1,500	-
<b>Out of Pocket Max. (Family)</b>	3,300	4,500	4,500	-
<b>In-Network</b>	3,300	4,500	4,500	-
<b>Out-of-Network</b>	3,300	4,500	4,500	-
				-
<b>Rx Plan: Retail Generic</b>	\$10 copay for 30-day supply	\$10 copay for 30-day supply	\$10 copay for 30-day supply	-
<b>Brand, Formulary</b>	25% copay up-to maximum of \$50 for 30-day supply	25% copay up-to maximum of \$50 for 30-day supply	25% copay up-to maximum of \$50 for 30-day supply	-
<b>Brand, Non-Formulary</b>	25% copay up-to maximum of \$50 for 30-day supply	25% copay up-to maximum of \$50 for 30-day supply	25% copay up-to maximum of \$50 for 30-day supply	-
<b>RX Plan: Mail Generic</b>	\$10 copay for 90-day supply	\$10 copay for 90-day supply	\$10 copay for 90-day supply	-
<b>Brand, Formulary</b>	25% copay up-to maximum of \$75 for 90-day supply	25% copay up-to maximum of \$75 for 90-day supply	25% copay up-to maximum of \$75 for 90-day supply	-
<b>Brand, Non-Formulary</b>	25% copay up-to maximum of \$75 for 90-day supply	25% copay up-to maximum of \$75 for 90-day supply	25% copay up-to maximum of \$75 for 90-day supply	-

**FY 2015 Maryland County Government Health Benefits Survey**

**Charles**

County: Charles County

Person Responding: Kristin Baucom

Title: HR Coordinator

Phone: 301-645-0585

Email: baucomk@charlescounty.org

Fax: 301-396-8862

	Active Employee/Pre-65 Retiree		Medicare Retirees	
	CareFirst PPN/PPO	CareFirst BlueChoice HMO	CareFirst Standard over 65	CareFirst BlueChoice over 65
<b>Annual Deductible (Individual)</b>				
<b>In-Network</b>	N/A	N/A	300/Major Medical	N/A
<b>Out-of-Network</b>	200	N/A	N/A	N/A
<b>Annual Deductible (Family)</b>				
<b>In-Network</b>	N/A	N/A	N/A	N/A
<b>Out-of-Network</b>	400	N/A	N/A	N/A
<b>Office Co-Pays (In-Network)</b>	\$15 PCP/\$20 Spec	\$10 PCP/\$15 Spec	varies	\$10 PCP/\$15 Spec
<b>ER Copay</b>	\$75 /Waived admitted	\$50/Waived admitted	N/A	\$50/Waived admitted
<b>Coinsurance (In-Network)</b>	N/A	N/A	A & B Services - C/F covers 20% that Medicare does not. Major Medical - C/F covers 80% of the 20% that Medicare does not.	N/A
<b>Coinsurance (Out-of-Network)</b>	80%/20%	N/A	A & B Services - C/F covers 20% that Medicare does not. Major Medical - C/F covers 80% of the 20% that Medicare does not.	N/A
<b>Out of Pocket Max. (Individual)</b>				
<b>In-Network</b>	1,000	2,000	200	2,000
<b>Out-of-Network</b>	1,000	N/A	N/A	N/A
<b>Out of Pocket Max. (Family)</b>				
<b>In-Network</b>	2,000	6,000	N/A	6,000
<b>Out-of-Network</b>	2,000	N/A	N/A	N/A
<b>Rx Plan: Retail Generic</b>	5	5	5	5
<b>Brand, Formulary</b>	20	20	20	20
<b>Brand, Non-Formulary</b>	35	35	35	35
<b>RX Plan: Mail Generic</b>	Disc with maint meds 2 copays for 3 mth supply. \$5/copay	Disc with maint meds 2 copays for 3 mth supply. \$5/copay	Disc with maint meds 2 copays for 3 mth supply. \$5/copay	Disc with maint meds 2 copays for 3 mth supply. \$5/copay
<b>Brand, Formulary</b>	Disc with maint meds 2 copays for 3 mth supply. \$20/copay	Disc with maint meds 2 copays for 3 mth supply. \$20/copay	Disc with maint meds 2 copays for 3 mth supply. \$20/copay	Disc with maint meds 2 copays for 3 mth supply. \$20/copay
<b>Brand, Non-Formulary</b>	Disc with maint meds 2 copays for 3 mth supply. \$35/copay	Disc with maint meds 2 copays for 3 mth supply. \$35/copay	Disc with maint meds 2 copays for 3 mth supply. \$35/copay	Disc with maint meds 2 copays for 3 mth supply. \$35/copay

# FY 2015 Maryland County Government Health Benefits Survey

## Dorchester

County: Dorchester

Person Responding: Becky Dennis

Title: HR Director

Phone: 410-901-2406

Email: bdennis@docogonet.com

Fax: 410-228-6850

### Active Employee, Pre-65 Retirees and Medicare Retirees\*

	EPO	POS	PPO	N/A
<b>Annual Deductible (Individual)</b>	N/A	N/A	N/A	-
<b>In-Network</b>	N/A	N/A	N/A	-
<b>Out-of-Network</b>	N/A	N/A	500	-
<b>Annual Deductible (Family)</b>	N/A	N/A	1000	-
<b>In-Network</b>	N/A	N/A	3000	-
<b>Out-of-Network</b>	N/A	N/A	6000	-
<b>Office Co-Pays (In-Network)</b>	30	30	15	-
<b>ER Copay</b>	100	100	100	-
<b>Coinsurance (In-Network)</b>				-
<b>Coinsurance (Out-of-Network)</b>				-
<b>Out of Pocket Max. (Individual)</b>				-
<b>In-Network</b>	1300	1300	1500	-
<b>Out-of-Network</b>	N/A	N/A		-
<b>Out of Pocket Max. (Family)</b>				-
<b>In-Network</b>	2600	2600	3000	-
<b>Out-of-Network</b>	N/A	N/A	6000	-
				-
<b>Rx Plan: Retail Generic</b>	15	15	15	-
<b>Brand, Formulary</b>	35	35	35	-
<b>Brand, Non-Formulary</b>	60	60	60	-
<b>RX Plan: Mail Generic</b>	15	15	15	-
<b>Brand, Formulary</b>	35	35	35	-
<b>Brand, Non-Formulary</b>	60	60	60	-

Note: Use AARP as a Supplement

# FY 2015 Maryland County Government Health Benefits Survey

## Frederick

County: Frederick County

Person Responding: Bonnie Madison

Title: Senior HR Analyst

Phone: 301 600 1190

Email: bmadison@frederickcountymd.gov

Fax: 301 600 2314

	Active Employee and Pre-65 Retiree		Medicare Retirees	
	In Network	Point of Service	In-Network	Point of Service (POS)
<b>Annual Deductible (Individual)</b>				
In-Network	N/A	N/A	N/A	N/A
Out-of-Network	N/A	300	N/A	300
<b>Annual Deductible (Family)</b>				
In-Network	N/A	N/A	N/A	N/A
Out-of-Network	N/A	600	N/A	600
<b>Office Co-Pays (In-Network)</b>	15	15	15	15
<b>ER Copay</b>	150	150	150	150
<b>Coinsurance (In-Network)</b>	5%	5%	5%	5%
<b>Coinsurance (Out-of-Network)</b>	N/A	20%	N/A	20%
<b>Out of Pocket Max. (Individual)</b>				
In-Network	1250	1250	1250	1250
Out-of-Network	N/A	2300	N/A	2300
<b>Out of Pocket Max. (Family)</b>				
In-Network	2500	2300	2500	2300
Out-of-Network	N/A	4600	N/A	4600
<b>Rx Plan: Retail Generic</b>	10	10	10	10
Brand, Formulary	30	30	30	30
Brand, Non-Formulary	50	50	50	50
<b>RX Plan: Mail Generic</b>	20	20	20	20
Brand, Formulary	60	60	60	60
Brand, Non-Formulary	100	100	100	100
Brand, Non-Formulary	100	100	100	100

# FY 2015 Maryland County Government Health Benefits Survey

## Garrett

**County:** Garrett County

**Person Responding:** Monty Pagenhardt

**Title:** County Administrator

**Phone:** 301.334.8970

**Email:** mpagenhardt@garrettcounty.org

**Fax:** 301.334.5000

	Active Employee and Pre-65 Retirees		Medicare Retirees
	MPOS	PPN	Plan F for medical and Part D for Drug with United Healthcare
<b>Annual Deductible (Individual)</b>			
In-Network			N/A
Out-of-Network	200	300	N/A
<b>Annual Deductible (Family)</b>			
In-Network			N/A
Out-of-Network	400	900	N/A
<b>Office Co-Pays (In-Network)</b>	15	15	N/A
<b>ER Copay</b>	35	25	N/A
<b>Coinsurance (In-Network)</b>	90%	100%	N/A
<b>Coinsurance (Out-of-Network)</b>	70%	80%	N/A
<b>Out of Pocket Max. (Individual)</b>			
In-Network	850	3,000	N/A
Out-of-Network	3,000	3,000	N/A
<b>Out of Pocket Max. (Family)</b>			
In-Network	2,550	6,000	N/A
Out-of-Network	6,000	6,000	N/A
<b>Rx Plan: Retail      Generic</b>	10	10	10
Brand, Formulary	20	20	20
Brand, Non-Formulary	35	35	35
<b>RX Plan: Mail      Generic</b>	20	20	20
Brand, Formulary	40	40	40
Brand, Non-Formulary	70	70	70

## FY 2015 Maryland County Government Health Benefits Survey

### Harford

County: Harford County Government

Person Responding: Beth A. Griffith

Title: Benefits Program Manager

Phone: 410-638-3202

Email: bagriffith@harfordcountymd.gov

Fax: 410-879-3564

	Active Employee and Pre-65 Retiree				Medicare Retirees	
	HDHP (CDH)	PPO	MPOS	HMO	TRADITIONAL	HMO
<b>Annual Deductible (Individual)</b>						
<b>In-Network</b>		250		N/A	N/A	N/A
<b>Out-of-Network</b>		500		300	N/A	300
<b>Annual Deductible (Family)</b>						
<b>In-Network</b>		500		N/A	N/A	N/A
<b>Out-of-Network</b>		1,000		600	N/A	600
<b>Office Co-Pays (In-Network)</b>		30		15 PCP/25 SPEC	20% AFTR MEDICARE	15PCP/25 SPEC
<b>ER Copay</b>	PLAN NO LONGER	55	PLAN NO LONGER	50	20% AFTR MEDICARE	50
<b>Coinsurance (In-Network)</b>	OFFERED	N/A	OFFERED	N/A	20% AFTR MEDICARE	N/A
<b>Coinsurance (Out-of-Network)</b>		20%		20%	20% AFTR MEDICARE	20%
<b>Out of Pocket Max. (Individual)</b>						
<b>In-Network</b>		N/A		N/A	N/A	N/A
<b>Out-of-Network</b>		2,000		2,000	N/A	2,000
<b>Out of Pocket Max. (Family)</b>						
<b>In-Network</b>		N/A		N/A	N/A	N/A
<b>Out-of-Network</b>		4,000		4,000	N/A	4,000
<b>Rx Plan: Retail Generic</b>		10		5	20% OF RX COST	5
<b>Brand, Formulary</b>		25		15	20% OF RX COST	15
<b>Brand, Non-Formulary</b>		45		35	20% OF RX COST	35
<b>RX Plan: Mail Generic</b>						
<b>Brand, Formulary</b>						
<b>Brand, Non-Formulary</b>	2 COPAYS FOR 90 DAY SUPPLY				\$20 COPAY/90 DAY	2 COPAY/90 DAY

# FY 2015 Maryland County Government Health Benefits Survey

## Howard

County: Howard County

Person Responding: Randy Zamzow

Title: Chief, Benefits & Records

Phone: (410) 313-3237

Email: rzamzow@howardcountymd.gov

Fax: (410) 313-3237

### Active Employee, Pre-65 Retirees, and Medicare Retirees

	Aetna Open Access (actives and pre-65 retirees)	Aetna PPO (actives and pre-65 retirees)	Kaiser HMO (actives and pre-65 retirees)	Kaisre Cost Plus plan (Medicare retirees)	Medicare Advantage 95 plan	Medicare Advantage 10 plan
<b>Annual Deductible (Individual)</b>					-	
<b>In-Network</b>	N/A	\$250	N/A	n/a	\$300	n/a
<b>Out-of-Network</b>	N/A	\$500	N/A	Medicare benefits schedule	\$300	n/a
<b>Annual Deductible (Family)</b>					\$0	
<b>In-Network</b>	N/A	\$500	N/A	n/a	\$300	n/a
<b>Out-of-Network</b>	N/A	\$1,000	N/A	Medicare benefits schedule	\$300	n/a
<b>Office Co-Pays (In-Network)</b>	10pcp 20 spec	\$20	10pcp 20 spec	\$10	\$0	\$10.00
<b>ER Copay</b>	\$100	\$100	\$100	\$50	\$50	\$50.00
<b>Coinsurance (In-Network)</b>	100%	90%	100%	n/a	95%	n/a
<b>Coinsurance (Out-of-Network)</b>	N/A	70%	N/A	Medicare benefits schedule	95%	n/a
<b>Out of Pocket Max. (Individual)</b>					-	
<b>In-Network</b>	N/A	\$1,500	N/A	\$3,400	\$1,000.00	\$6,700.00
<b>Out-of-Network</b>	N/A	\$4,000	N/A	Medicare benefits schedule	\$1,000.00	\$6,700.00
<b>Out of Pocket Max. (Family)</b>					\$0.00	
<b>In-Network</b>	N/A	\$3,000	N/A	\$3,400	\$1,000.00	\$6,700.00
<b>Out-of-Network</b>	N/A	\$8,000	N/A	Medicare benefits schedule	\$1,000.00	\$6,700.00
					-	
<b>Rx Plan: Retail Generic</b>	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00
<b>Brand, Formulary</b>	\$30.00	\$30.00	\$30.00	\$10.00	\$30.00	\$30.00
<b>Brand, Non-Formulary</b>	\$50.00	\$50.00	\$50.00	\$10.00	\$50.00	\$50.00
<b>RX Plan: Mail Generic</b>	\$10.00	\$10.00	\$20.00	\$15.00	\$10.00	\$10.00
<b>Brand, Formulary</b>	\$30.00	\$30.00	\$60.00	\$15.00	\$30.00	\$30.00
<b>Brand, Non-Formulary</b>	\$50.00	\$50.00	\$100.00	\$15.00	\$50.00	\$50.00

# FY 2015 Maryland County Government Health Benefits Survey

## Kent

County: Kent County

Person Responding: S. Martin Hale

Title: HR Director

Phone: 410-778-7481

Email: mhale@kentgov.org

Fax: 410-778-3749

Active Employee and Pre-65 Retirees			Medicare Retirees	
	HMO/HRA	N/A	GAP	N/A
Annual Deductible (Individual)		-	Employees participate in Medicare and county provides GAP coverage for services not fully covered by Medicare. County pays for benefits for only those retiring with 30 years of service.	-
In-Network	1200	-		-
Out-of-Network	N/A	-		-
Annual Deductible (Family)		-		-
In-Network	2400	-		-
Out-of-Network	N/A	-		-
Office Co-Pays (In-Network)	15/25	-		-
ER Copay	100	-		-
Coinsurance (In-Network)	N/A	-		-
Coinsurance (Out-of-Network)	N/A	-		-
Out of Pocket Max. (Individual)		-		-
In-Network	2400	-		-
Out-of-Network	N/A	-		-
Out of Pocket Max. (Family)		-		-
In-Network	4800	-		-
Out-of-Network	N/A	-		-
		-		-
Rx Plan: Retail      Generic	10	-		-
Brand, Formulary	25	-		-
Brand, Non-Formulary	45	-		-
RX Plan: Mail      Generic		-	-	
Brand, Formulary		-	-	
Brand, Non-Formulary		-	-	

**FY 2015 Maryland County Government Health Benefits Survey  
Maryland National Capital Park and Planning Commission**

County: Montgomery and Prince George's County Maryland

Person Responding: Jennifer McDonald

Title: Principal Benefits Specialist

Phone: 301-454-1726

Email: jennifer.mcdonald@mncppc.org

Fax: 301-454-1687

	Active Employee and Pre-65 Retiree			Medicare Retirees		
	UnitedHealthcare POS	UnitedHealthcare EPO	CIGNA EPO	*UnitedHealthcare Medicare Complement	UnitedHealthcare EPO	CIGNA EPO
<b>Annual Deductible (Individual)</b>				N/A		
<b>In-Network</b>	N/A	N/A	N/A		N/A	N/A
<b>Out-of-Network</b>	250	N/A	N/A		N/A	N/A
<b>Annual Deductible (Family)</b>				N/A		
<b>In-Network</b>	N/A	N/A	N/A		N/A	N/A
<b>Out-of-Network</b>	600	N/A	N/A		N/A	N/A
<b>Office Co-Pays (In-Network)</b>	10	10	10	Supplement to Medicare	10	10
<b>ER Copay</b>	35	25	35	Supplement to Medicare	25	35
<b>Coinsurance (In-Network)</b>	100%	100%	100%	100%	100%	100%
<b>Coinsurance (Out-of-Network)</b>	80%	N/A	N/A	100%	N/A	N/A
<b>Out of Pocket Max. (Individual)</b>				Supplement to Medicare		
<b>In-Network</b>	600	1,100	1,500	Supplement to Medicare	1,100	1,500
<b>Out-of-Network</b>	600	N/A	N/A	Supplement to Medicare	N/A	N/A
<b>Out of Pocket Max. (Family)</b>				Supplement to Medicare		
<b>In-Network</b>	1,800	3,600	3,000	Supplement to Medicare	3,600	3,000
<b>Out-of-Network</b>	1,800	N/A	N/A	Supplement to Medicare	N/A	N/A
<b>Rx Plan: Retail Generic</b>	8	8	8	8	8	8
<b>Brand, Formulary</b>	16	16	16	16	16	16
<b>Brand, Non-Formulary</b>	25	25	25	25	25	25
<b>RX Plan: Mail Generic</b>	16	16	16	16	16	16
<b>Brand, Formulary</b>	32	32	32	32	32	32
<b>Brand, Non-Formulary</b>	40	40	40	40	40	40

Note: This plan is a supplement to Medicare. It pays the deductible and 20% coinsurance of Medicare Covered services.

# FY 2015 Maryland County Government Health Benefits Survey

## Montgomery

County: Montgomery County, Maryland

Person Responding: Karen Bass

Title: Health Insurance Team Manager

Phone: 240-777-5054

Email: karen.bass@montgomerycountymd.gov

Fax: 240-777-5131

### Active Employee, Pre-65 Retirees, and Medicare Retirees

	BCBS CareFirst POS	United Healthcare HMO	Kaiser HMO	Caremark High Option Prescription Plan	Caremark Standard Option Prescription Plan
<b>Annual Deductible (Individual)</b>					
In-Network	N/A	N/A	N/A	N/A	N/A
Out-of-Network	\$300	N/A	N/A	N/A	N/A
<b>Annual Deductible (Family)</b>					
In-Network	N/A	N/A	N/A	N/A	N/A
Out-of-Network	\$600	N/A	N/A	N/A	N/A
<b>Office Co-Pays (In-Network)</b>	\$10	\$5	\$5	N/A	N/A
<b>ER Copay</b>	25 waived if admitted	25 waived if admitted	50 waived if admitted	N/A	N/A
<b>Coinsurance (In-Network)</b>	N/A	N/A	N/A	N/A	N/A
<b>Coinsurance (Out-of-Network)</b>	20% after deductible is met	N/A	N/A	N/A	N/A
<b>Out of Pocket Max. (Individual)</b>	1,000 per person plus deductible	1,100 per person up to 3,600 for family	N/A	N/A	N/A
In-Network				N/A	N/A
Out-of-Network				N/A	N/A
<b>Out of Pocket Max. (Family)</b>				N/A	N/A
In-Network				N/A	N/A
Out-of-Network				N/A	N/A
<b>Rx Plan: Retail Generic</b>	N/A	N/A	N/A	4 or 5	10
Brand, Formulary	N/A	N/A	N/A	8 or 10	20
Brand, Non-Formulary	N/A	N/A	N/A		35
<b>RX Plan: Mail Generic</b>	N/A	N/A	N/A	4 or 5	10
Brand, Formulary	N/A	N/A	N/A	8 or 10	20
Brand, Non-Formulary	N/A	N/A	N/A		35

# FY 2015 Maryland County Government Health Benefits Survey

## Prince George's

**County:** Prince George's County Government

**Person Responding:** Julia D. Sanders

**Title:** Manager, Benefits Administration Division

**Phone:** (301) 883-6064

**Email:**

**Fax:** (301) 883-6192

	Active Employee and Pre-65 Retirees			Medicare Retirees	
	Cigna Open Acces In-Network HMO	Kaiser Perm. HMO	Cigna Op. Acc. Plus PPO	Cigna Open Acces In-Network HMO	Cigna Op. Acc.Plus PPO
<b>Annual Deductible (Individual)</b>					
<b>In-Network</b>	50	N/A	50	N/A	N/A
<b>Out-of-Network</b>	N/A	N/A	300	N/A	300
<b>Annual Deductible (Family)</b>					
<b>In-Network</b>	N/A	N/A	50 (per family member)	N/A	N/A
<b>Out-of-Network</b>	N/A	N/A	550	N/A	550
<b>Office Co-Pays (In-Network)</b>	30 -PCP, 35-SPEC	15-PCP, 15-SPEC	30-PCP, 35-SPEC	N/A	N/A
<b>ER Copay</b>	150	50	150	N/A	N/A
<b>Coinsurance (In-Network)</b>	100%	100%	100%	N/A	100%
<b>Coinsurance (Out-of-Network)</b>	N/A	N/A	20%	N/A	20%
<b>Out of Pocket Max. (Individual)</b>					
<b>In-Network</b>	2,000	3,500	2,000	N/A	N/A
<b>Out-of-Network</b>	N/A	N/A	2,000	N/A	2,000
<b>Out of Pocket Max. (Family)</b>					
<b>In-Network</b>	4,000	9,400	4,000	N/A	N/A
<b>Out-of-Network</b>	N/A	N/A	4,000	N/A	4,000
	Carve-out (Medco)	Carve-out (Medco)	Carve-out (Medco)	Carve-out (Medco)	Carve-out (Medco)
<b>Rx Plan: Retail Generic</b>	10	10	10	10	10
<b>Brand, Formulary</b>	20 or 20%, greater of	20 or 20%, greater of	20 or 20%, greater of	20 or 20%, greater of	20 or 20%, greater of
<b>Brand, Non-Formulary</b>	40 or 30%, greater of	40 or 30%, greater of	40 or 30%, greater of	40 or 30%, greater of	40 or 30%, greater of
<b>RX Plan: Mail Generic</b>	20	20	20	20	20
<b>Brand, Formulary</b>	40 or 20%, greater of	40 or 20%, greater of	40 or 20%, greater of	40 or 20%, greater of	40 or 20%, greater of
<b>Brand, Non-Formulary</b>	80 or 30%, greater of	80 or 30%, greater of	80 or 30%, greater of	80 or 30%, greater of	80 or 30%, greater of

Notes:

1) Active Employee and Pre-65 Retirees section – The correct title for the Cigna POS medical plan is the Cigna Network POS Open Access Plan.

2) The County's prescription plan is a carve out benefit and is administered by Express-Scripts. The plan has a mandatory generic and mail order provision. The maximum copayment at retail is \$50 and the maximum copayment for the mail order is \$100.

# FY 2015 Maryland County Government Health Benefits Survey

## Queen Anne's

County: Queen Anne's County

Person Responding: Beverly Churchill

Title: Director of Human Resources

Phone: 410-758-4406

Email: bchurchill@qac.org

Fax: 410-758-6913

### Active Employee, Pre-65 Retirees, and Medicare Retirees

	PPO	EPO	BCA	N/A
<b>Annual Deductible (Individual)</b>				-
In-Network	N/A	N/A	100	-
Out-of-Network	200	N/A	500	-
<b>Annual Deductible (Family)</b>			-	-
In-Network	N/A	N/A	200	-
Out-of-Network	600	N/A	1,000	-
<b>Office Co-Pays (In-Network)</b>	15	15	15	-
<b>ER Copay</b>	35	35	100	-
<b>Coinsurance (In-Network)</b>	N/A	N/A	10%	-
<b>Coinsurance (Out-of-Network)</b>	80/20	N/A	40%	-
<b>Out of Pocket Max. (Individual)</b>			-	-
In-Network	800	6,350	1,500	-
Out-of-Network	800	12,700	3,000	-
<b>Out of Pocket Max. (Family)</b>			-	-
In-Network	2,400	N/A	3,000	-
Out-of-Network	2,400	N/A	6,000	-
			-	-
<b>Rx Plan: Retail      Generic</b>	7	7	8	-
Brand, Formulary	24	24	30	-
Brand, Non-Formulary	24	24	45	-
<b>RX Plan: Mail      Generic</b>	7	7	16 (90 day supply)	-
Brand, Formulary	24	24	60 (90 day supply)	-
Brand, Non-Formulary	24	24	90 (90 day supply)	-

# FY 2015 Maryland County Government Health Benefits Survey

## St. Mary's

County: St. Mary's County

Person Responding: Karen Gates

Title: Benefits Coordinator

Phone: 301-475-4200, ext 1104

Email: karen.gates@stmarysmd.com

Fax: 301-475-4082

	Active Employee and Pre-65 Retirees		Medicare Retirees	
	CareFirst PPO	CareFirst Open Access	Standard Group Over 65	BlueChoice
<b>Annual Deductible (Individual)</b>				
<b>In-Network</b>	N/A	N/A	200/Major Medical	N/A
<b>Out-of-Network</b>	200	N/A	N/A	N/A
<b>Annual Deductible (Family)</b>				
<b>In-Network</b>	N/A	N/A	N/A	N/A
<b>Out-of-Network</b>	400	N/A	N/A	N/A
<b>Office Co-Pays (In-Network)</b>	20 PCP / 20 Spec	10 PCP / 20 Spec	N/A	N/A
<b>ER Copay</b>	35	25	N/A	25 waived if admitted
<b>Coinsurance (In-Network)</b>	20 office visit 25 physician outpatient 35 hospital outpatient	10 PCP / 20 Spec	N/A	10 PCP / 20 Spec
<b>Coinsurance (Out-of-Network)</b>	80%/20%	N/A	10 PCP / 20 Spec	N/A
<b>Out of Pocket Max. (Individual)</b>				
<b>In-Network</b>	800	2,000	N/A	2,000
<b>Out-of-Network</b>	800	N/A	N/A	N/A
<b>Out of Pocket Max. (Family)</b>				
<b>In-Network</b>	1,600	6,000	N/A	6,000
<b>Out-of-Network</b>	1,600	N/A	N/A	N/A
<b>Rx Plan: Retail Generic</b>	10	8	10	8
<b>Brand, Formulary</b>	20	15	20	15
<b>Brand, Non-Formulary</b>	35	30	35	30
<b>RX Plan: Mail Generic</b>	20	16	20	16
<b>Brand, Formulary</b>	40	30	40	30
<b>Brand, Non-Formulary</b>	70	60	70	60

# FY 2015 Maryland County Government Health Benefits Survey

## Somerset

County: SOMERSET

Person Responding: ERICA QUILLEN

Title: HUMAN RESOURCES DIRECTOR

Phone: 410-651-5131

Email: equillen@somersetmd.us

Fax: 410-651-3559

	Active Employee and Pre-65 Retirees		Medicare Retirees	
	HMO CAREFIRST BLUE CHOICE	N/A	INTEGRAMEDICARE PRIMARY/SELF INS.	N/A
Annual Deductible (Individual)		-		-
In-Network		-		-
Out-of-Network		-		-
Annual Deductible (Family)		-		-
In-Network		-		-
Out-of-Network		-		-
Office Co-Pays (In-Network)	30/PCP- 40 Specialist	-	10	-
ER Copay	50	-	10	-
Coinsurance (In-Network)		-		-
Coinsurance (Out-of-Network)		-		-
Out of Pocket Max. (Individual)		-		-
In-Network	1,300	-		-
Out-of-Network		-		-
Out of Pocket Max. (Family)		-		-
In-Network	2,600	-		-
Out-of-Network		-		-
		-		-
Rx Plan: Retail Generic	0 - 100 Deductible/Ind.	-	10	-
Brand, Formulary	25 - 200 H/W & Family	-	25	-
Brand, Non-Formulary	45	-	40	-
RX Plan: Mail Generic	0	-	25	-
Brand, Formulary	50	-	60	-
Brand, Non-Formulary	90	-	98	-

# FY 2015 Maryland County Government Health Benefits Survey

## Talbot

County: Talbot County

Person Responding: Cynthia Haddaway

Title: Human Resources Assistant

Phone: 410-770-8012

Email: chaddaway@talbotcountymd.gov

Fax: 410-770-8013

	Active Employee and Pre-65 Retirees		Medicare Retirees	
	United Health Care PPO	N/A	Medicare Supp Coverage	N/A
<b>Annual Deductible (Individual)</b>		-		-
<b>In-Network</b>	N/A	-	N/A	-
<b>Out-of-Network</b>	300	-	N/A	-
<b>Annual Deductible (Family)</b>	N/A	-	N/A	-
<b>In-Network</b>	N/A	-		-
<b>Out-of-Network</b>	600	-		-
<b>Office Co-Pays (In-Network)</b>	10	-	N/A	-
<b>ER Copay</b>	100	-		-
<b>Coinsurance (In-Network)</b>	N/A	-		-
<b>Coinsurance (Out-of-Network)</b>	80/20	-		-
<b>Out of Pocket Max. (Individual)</b>		-	N/A	-
<b>In-Network</b>	N/A	-		-
<b>Out-of-Network</b>	1,000	-		-
<b>Out of Pocket Max. (Family)</b>		-	N/A	-
<b>In-Network</b>	N/A	-		-
<b>Out-of-Network</b>	2,000	-		-
		-		-
<b>Rx Plan: Retail      Generic</b>	10	-	10	-
<b>Brand, Formulary</b>	30	-	25	-
<b>Brand, Non-Formulary</b>	50	-	40	-
<b>RX Plan: Mail      Generic</b>	20	-	25	-
<b>Brand, Formulary</b>	60	-	50	-
<b>Brand, Non-Formulary</b>	100	-	88	-

Notes: 1) Medicare Supp Coverage - \$8,000 annual maximum for prescription drugs

# FY 2015 Maryland County Government Health Benefits Survey

## Washington

County: Washington County, Maryland

Person Responding: Debra I. Peyton

Title: Benefits Manager

Phone: 240-313-2356

Email: dpeyton@washco-md.net

Fax: 240-313-2351

### Active Employee and Pre-65 Retirees

	Low Option Medical (EPO) In-Network only	High Option Medical (PPO) In-Network	N/A	N/A
<b>Annual Deductible (Individual)</b>			-	-
In-Network	N/A	N/A	-	-
Out-of-Network	N/A	250	-	-
<b>Annual Deductible (Family)</b>			-	-
In-Network	N/A	N/A	-	-
Out-of-Network	N/A	750	-	-
<b>Office Co-Pays (In-Network)</b>	15	20	-	-
<b>ER Copay</b>	100	100	-	-
<b>Coinsurance (In-Network)</b>	N/A	N/A	-	-
<b>Coinsurance (Out-of-Network)</b>	N/A	30%	-	-
<b>Out of Pocket Max. (Individual)</b>			-	-
In-Network	N/A	N/A	-	-
Out-of-Network	N/A	1,250	-	-
<b>Out of Pocket Max. (Family)</b>			-	-
In-Network	N/A	N/A	-	-
Out-of-Network	N/A	3,750	-	-
			-	-
<b>Rx Plan: Retail Generic</b>	10	10	-	-
Brand, Formulary	20	20	-	-
Brand, Non-Formulary	35	35	-	-
Allegra D, Nexium, and Prevacid	50	50	-	-
<b>RX Plan: Mail Generic</b>	20	20	-	-
Brand, Formulary	40	40	-	-
Brand, Non-Formulary	70	70	-	-
Allegra D, Nexium, and Prevacid	100	100	-	-

Notes: Retirees become ineligible once they meet the age of 65 or attain medicare

# FY 2015 Maryland County Government Health Benefits Survey

## Wicomico

County: Wicomico

Person Responding: Michele Ennis

Title: Director of Human Resources

Phone: 410-334-3125

Email: mennis@wicomicocounty.org

Fax: 410-334-3111

	Active Employee and Pre-65 Retirees		Medicare Retirees	
	PPO	EPO	Medicare Primary	N/A
<b>Annual Deductible (Individual)</b>				-
In-Network	N/A	N/A	N/A	-
Out-of-Network	200	N/A	N/A	-
<b>Annual Deductible (Family)</b>			N/A	-
In-Network	N/A	N/A	N/A	-
Out-of-Network	600	N/A	N/A	-
<b>Office Co-Pays (In-Network)</b>	15	15	15	-
<b>ER Copay</b>	25	25	25	-
<b>Coinsurance (In-Network)</b>	N/A	N/A	Medicare	-
<b>Coinsurance (Out-of-Network)</b>	N/A	N/A	Medicare	-
<b>Out of Pocket Max. (Individual)</b>				-
In-Network	1,200	1,200	500	-
Out-of-Network	1,200	1,200	500	-
<b>Out of Pocket Max. (Family)</b>			N/A	-
In-Network	3,600	3,600	N/A	-
Out-of-Network	3,600	3,600	N/A	-
				-
<b>Rx Plan: Retail Generic</b>	5	5	5	-
Brand Formulary	30	30	30	-
Brand, Non-Formulary	45	45	45	-
<b>RX Plan: Mail Generic</b>	5	5	5	-
Brand, Formulary	30	30	30	-
Brand, Non-Formulary	45	45	45	-

# FY 2015 Maryland County Government Health Benefits Survey

## Worcester

**Worcester County Government**

**George Bradley**

**Human Resources Director**

**410-632-0090**

[gbradley@co.worcester.md.us](mailto:gbradley@co.worcester.md.us)

**410-632-05614**

	Active Employee and Pre-65 Retirees		Medicare Retirees	
	Traditional	N/A	Traditional	N/A
<b>Annual Deductible (Individual)</b>	300	-	300	-
<b>In-Network</b>		-		-
<b>Out-of-Network</b>		-		-
<b>Annual Deductible (Family)</b>	600	-		-
<b>In-Network</b>		-		-
<b>Out-of-Network</b>		-		-
<b>Office Co-Pays (In-Network)</b>	20%	-	20%	-
<b>ER Copay</b>	0% or 20%	-	0% or 20%	-
<b>Coinsurance (In-Network)</b>		-		-
<b>Coinsurance (Out-of-Network)</b>		-		-
<b>Out of Pocket Max. (Individual)</b>		-	1,300 annual	-
<b>In-Network</b>		-		-
<b>Out-of-Network</b>		-		-
<b>Out of Pocket Max. (Family)</b>		-		-
<b>In-Network</b>		-		-
<b>Out-of-Network</b>		-		-
		-		-
<b>Rx Plan: Retail Generic</b>	10	-	10	-
<b>Brand, Formulary</b>	10	-	10	-
<b>Brand, Non-Formulary</b>	20	-	20	-
<b>RX Plan: Mail Generic</b>		-		-
<b>Brand, Formulary</b>		-		-
<b>Brand, Non-Formulary</b>		-		-

## FY 2015 Maryland County Government Health Benefits Survey

### Additional Questions

Jurisdiction	Opt-out offered for employees covered by other health insurance plans				Health Care Reform		
	Opt-out offered	Number participating	Amount county pays per emp.	Opt-out changed in past 2 years?	Are plans grandfathered in?	Intend to grandfather longterm?	Participate in Early Retiree Ins Prog
Allegany	Y	16	600	N	Y	Y	Y
Anne Arundel	Y	470	498-524-546-750	N	N	N/A	Y
Baltimore City	Y	415	650 - 2,500	N	Y	Y	Y
Baltimore	N	-	-	-	N	N	Y
Calvert	Y	151	850	N	Y	Y	Y
Caroline	Y	24	VARIES	N	N	N	N
Carroll	Y	100	400 - 1,200	N	Y	Y	Y
Cecil	N	-	-	-	N	N	N
Charles	N	-	-	-	N	N	Y
Dorchester	N	-	-	-	Y	Y	N
Frederick	N	-	-	-	N	N	Y
Garrett	N	-	-	-	Y	Y	Y
Harford	Y	147	1,200	N	N	N	N
Howard	Y	406	900	N	Y	Y	Y
Kent	N	-	-	-	N	N	N
MNCPPC	N	-	-	-	Y	Y	Y
Montgomery	N	-	-	-	Y	Y	Y
Prince George's	Y	1577	400 medical/ 200 Rx	N	Y	Y	Y
Queen Anne's	Y	61	1,200 annual	N	N	N	Y
St. Mary's	N	363	VARIES	-	N	N	Y
Somerset	N	195	515-1515	-	N	N	N
Talbot	Y	49	2,000	N	N	N	N
Washington	Y	109	VARIES	N	Y	Y	N
Wicomico	N	-	-	-	Y	Y	Y
Worcester	Y	47	0	N	Y	Y	N