

2025 EMPLOYEE BENEFITS OPEN ENROLLMENT

Office of Human Resources



Medical



Prescription



Dental





🚯 FSA

Deadline:



montgomerycountymd.gov/OE 🜐

Open Enrollment

Open Enrollment 2025: October 7 – October 25, 2024

Open Enrollment is your once-a-year opportunity to enroll in a Flexible Spending Account (FSA) or change your medical, prescription (Rx), dental, vision, and optional life insurance elections for yourself and your dependents. All changes and supporting documentation must be received by **October 25, 2024, at 5 pm ET**. Any changes you make during the Open Enrollment period will take effect January 1, 2025.

Please take the time to understand your 2025 benefit options outlined in this guide. More information and resources are available on the Open Enrollment website:



Qualifying Life Events

Outside of Open Enrollment, you may only make changes if you experience a qualifying life event because the IRS has strict regulations for plans that allow pre-tax deductions. Any qualifying life event changes must be made within 60 days of the qualifying event. Financial hardship is not an IRS qualifying life event. Qualifying life events are as follows:

- Birth of a newborn, adoption, or placement for adoption or medical child support order
- Marriage or divorce
- Death of a dependent
- Becoming eligible for other coverage outside of the County
- Losing coverage outside of the County

Note for New Employees

Any benefit elections made during your New Hire enrollment were for the current plan year (2024). If you want to make changes to your medical, Rx, dental, vision and optional life insurance elections or (re)enroll in an FSA for plan year 2025, you must submit your elections during Open Enrollment.

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What's New for 2025

- Medical, prescription, dental, vision, and life insurance vendors and plan designs will remain the same in 2025. Although the plans are not changing, premiums will increase on the medical, Rx, and dental PPO plans for 2025. See the chart below for rates and differences per paycheck.
- Special optional life insurance offer (see page 6 for details).
- Health Care FSA limit increasing to \$3,200 (see page 7).
- The Office of Human Resources (OHR) is bringing back the in-person benefits fair! Join OHR's Health Insurance Team and MCG's insurance plan representatives on Tuesday, October 15, 11 am – 2 pm in the Executive Office Building (see page 8 for details).



Rate Changes for 2025

As healthcare costs across the nation continue to rise, so do the costs for MCG and employees. There will be premium increases for the medical, Rx, and dental PPO plans for 2025. These increases are a result of medical inflation as well as an increase in the utilization of our plans. See the rate table below for an outline of the 2025 rates and the impact on the difference in costs per paycheck.

2025 Employee Rates	Your New 2025 Cost Per Biweekly Paycheck				Difference Between 2024 and 2025 Rates Per Biweekly Paycheck		
	Self	Self + 1	Family		Self	Self + 1	Family
Medical							
CareFirst High Option POS (medical only)	\$77.82	\$134.63	\$226.68	9	\$8.40	\$14.53	\$24.46
CareFirst Standard Option POS (medical only)	\$72.38	\$125.20	\$210.82	9	\$7.82	\$13.51	\$22.76
UnitedHealthcare HMO (medical only)	\$63.71	\$122.47	\$194.69	9	6.88	\$13.22	\$21.01
Kaiser HMO (Rx included)	\$75.32	\$141.61	\$222.96	9	\$4.59	\$8.64	\$13.61
Prescription (Rx)							
Caremark Standard Option \$10/\$20/\$35	\$28.52	\$52.75	\$81.75	9	\$3.04	\$5.61	\$8.69
Dental							
Dental PPO (Traditional Dental Plan)	\$4.05	\$9.02	\$12.98	9	\$0.09	\$0.20	\$0.28
Dental HMO (DHMO)	\$1.35	\$2.56	\$3.74	9	\$0.00	\$0.00	\$0.00
Vision							
Vision Plan	\$0.44	\$0.69	\$1.05	9	60.00	\$0.00	\$0.00
				-			

The County does not offer premium credit if your spouse maintains coverage outside of the County.

How To Make Changes for 2025

Enrolling online is easy! No forms to fill out. Make your elections online via Employee Self-Service 24/7. **Go to** <u>www.montgomerycountymd.gov/OE</u> -> Enroll Now (available 10/7/2024).

- 1. Review the variety of online planning tools and resources.
- 2. Obtain this information before you begin and have it handy:
 - Your Self-Service User ID & Password
 - Names of dependents to be added or removed
 - New dependent's Date of Birth & Social Security Number
 - Required dependent documentation
- 3. Make your benefits changes online via Employee Self-Service. Follow the steps in the Self-Service Benefits User Guide.
- 4. Upload any required paperwork, such as documentation for newly added dependents.

No Changes?

If you review your Open Enrollment materials and decide not to make any changes for 2025, **you DO** still need to log in to Employee Self-Service (ESS) to print your 2025 confirmation statement. Remember, FSA plan participation does not carry over from year to year; you must re-enroll during Open Enrollment to continue participation for 2025.

- 5. Download your 2025 online confirmation statement and keep it for your records. This is your receipt for your 2025 elections. If there is any discrepancy with your enrollment, you will be required to provide your confirmation statement as proof of your Open Enrollment activity. **Without proof, no changes will be permitted after Open Enrollment ends.**
- 6. Complete the steps above by the Open Enrollment deadline on Friday, October 27, 2024, by 5 pm.

What if I	Do Not	Make	Changes?
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Benefit Plan	If You Take No Action During Open Enrollment:	
Medical		
Prescription		
Dental	Your coverage will be the same as the election you had in place for the 2024 plan year. Any premium changes from 2024 to 2025 will apply.	
Vision		
Optional Life Insurance		
Flexible Spending Account (FSA)	You will not be able to participate in the Health Care FSA or Child Care FSA for 2025.	

Action Required: Do These Scenarios Apply to You?

Please carefully review the three circumstances described below. If any of these scenarios apply, you will not be able to utilize online Employee Self-Service (ESS) for your election changes.

- 1. If you have a dependent aging out (turning age 26) between October 7 and December 31, 2024, OR
- 2. If your eligible dependent was removed during the 2021 Bolton Dependent Recertification project due to lack of documentation and you would like to re-enroll them on your plans during Open Enrollment, *OR*
- 3. If you are trying to enroll a spouse or child who is also a County employee, you will not be able to use ESS.

If so, it is important that you **act quickly and request an enrollment form by calling MC311** and placing a service request with OHR.

Navigating Dependent Enrollment

Who Is Eligible?

- Your legal spouse or grandfathered domestic partner established prior to 6/28/16.
- Children (biological, legally adopted, stepchildren, or under your legal custody) under age 26.
- Disabled dependents over the age of 26.

Do I Need to Upload Documentation for my Dependents?

NOT enrolling any new dependents	NO
Enrolling new dependent(s)	YES

Enrolling New Dependents? If you are adding a new dependent to your plans, you must upload the following dependent eligibility documentation when submitting your Open Enrollment elections in Employee Self-Service (ESS) benefits. If documentation is not received before the Open Enrollment deadline, your dependents will not be added for the 2025 plan year. Note: Dependent social security numbers and dates of birth are required when you enroll. Collect that information before getting started. Individual Taxpayer Identification Numbers (ITIN) will be accepted.

If you want to	You need to make your changes (online) and submit:
Add a dependent	 Spouse: Official State Marriage Certificate (certified by appropriate State or County Official) Biological Child: State Birth Certificate Adopted Child: Copy of Adoption or Placement for Adoption Papers Stepchild: State Birth Certificate, Marriage Certificate, and Divorce Decree or Custody Papers Disabled Child: Medical plan verification of disability prior to age 26 Legal Custody: Copy of Court Order granting legal custody
Remove a dependent	No additional documentation is needed during Open Enrollment

Required Documentation Tips:

- Gather any required documentation:
 - Marriage certificates must be signed, dated, and certified by the clerk of the court or other state or county official. Certificates signed by a clergy member (*e.g.*, priest, minister, rabbi) are not acceptable. (If you were married outside of the U.S., OHR will accept a copy of your international marriage certificate).
 - > Birth certificates must show your dependent child or stepchild is your or your spouse's direct descendant.
 - Need to order your domestic certified Marriage Certificate or child's Birth Certificate? Visit <u>www.vitalchek.com</u>.
- Save these documents to whatever device you plan to use for your online enrollment transaction (*e.g.*, your computer, tablet, smartphone) so that they are ready to upload when you make your online elections.
- If you don't have access to a document scanner, take a photo of your document on your smartphone and either email it to yourself to download to your computer / tablet, or use your smartphone to make your elections.

Remember, **it is your responsibility to make sure your covered dependents are eligible for the plans**. Electing or continuing benefits for someone who is not entitled is considered fraud. Misrepresenting your eligibility, or failure to remove ineligible dependents, could lead to repayment of claims. Be sure to review your covered dependents and take the necessary steps to remove any dependents who are no longer eligible.

Exploring Your Benefit Choices

Discover a range of benefit options and find the plans that best fit your needs and lifestyle for 2025. Before you finalize your benefit elections, make sure you have explored all of the resources in this guide and in the resources section of the Open Enrollment website (<u>www.montgomerycountymd.gov/OE</u>).



Medical:

MCG continues to offer four comprehensive medical plans in 2025, giving you the flexibility to choose coverage that best supports your health. Visit <u>www.montgomerycountymd.gov/OE</u> for plan summaries and a side-by-side comparison of the plans. Please note that only the Kaiser HMO plan includes prescription drug coverage. The UHC and CareFirst plans do not include prescription coverage. If you elect CareFirst or UHC and want prescription coverage, you will also need to enroll in the stand-alone CVS Caremark prescription plan.



Prescription:

Feel confident managing your medication needs with the support of MCG's prescription coverage through CVS Caremark. The plan has a \$50 annual deductible that your family unit must satisfy before the plan begins paying their share. You will pay the discounted retail cost of the prescriptions until you have reached the \$50 deductible. After, you are only responsible for your applicable copay. Visit <u>www.montgomerycountymd.gov/OE</u> to access the CVS Caremark benefit summary and other helpful tools like the **Check Drug Cost Tool** that estimates your copays for your specific prescription drugs.



Dental:

Take the worry out of maintaining your oral health with MCG's dental coverage. Choose between Cigna DHMO and PPO plans. Both plans cover preventive, basic restorative, major restorative, and orthodontic care. Costs associated with diagnostic and preventive care—like your annual cleanings, oral exams and x-rays—are covered in full under both of MCG's dental plans.

- Visit <u>www.montgomerycountymd.gov/OE</u> for complete benefit summaries, side-by-side dental comparisons, and a detailed video to walk you through both choices.
- Need help choosing a plan? Contact Cigna's preenrollment helpline at 800-564-7642 and let them know your employer is Montgomery County Government.



Vision: If you are enrolled in either the UHC or However, the stand alone vision plan wi

If you are enrolled in either the UHC or Kaiser medical plans, there is a vision discount built in. However, the stand-alone vision plan with EyeMed offers more comprehensive vision coverage. Visit <u>www.montgomerycountymd.gov/OE</u> for additional EyeMed vision resources, such as the complete EyeMed vision benefit summary and information on included discounts for LASIK eye surgery, hearing benefits, and more.



Life Insurance Special One-Time Opportunity

Open Enrollment is your chance to increase or purchase optional life insurance for yourself or your dependents. This year, you have a unique one-time opportunity to increase your optional life insurance by one tier (1x salary) without requiring a Statement of Health (SOH). All other optional life changes will require an SOH.

MetLife will send you a personalized plan summary with details on how much optional life insurance you currently have, if any, and what personal options you can elect during Open Enrollment.

- Current enrollees can increase coverage by one tier (1x salary) without completing an SOH this year.
- Current enrollees increasing by 2 or more tiers (2x salary increase or more) will require a SOH.
- All new enrollees will require SOH.

Think you might take advantage of this? Learn more by attending the MetLife webinar on October 10 from 2 – 3 pm.

Statement of Health

Newly elected or increased employee optional life changes made during Open Enrollment in increments of 2x salary or more are not guaranteed. Coverage is subject to a Statement of Health (SOH) and approval from MetLife. If you elect to enroll for the first time or increase your coverage by 2x salary or greater during Open Enrollment, you will receive an email from MetLife to complete the SOH online after Open Enrollment and will have 60 days from that date to complete the SOH online. To learn more about SOH, see the SOH FAQ on the Open Enrollment website (www.montgomeryvountymd.gov/OE).

How Much Life Insurance Do You Need and How Much Does It Cost?

Visit <u>www.montgomerycountymd.gov.OE</u> to access MetLife's needs assessment tool to help you determine how much coverage you need and the premium calculation worksheet to find out how much your employee or dependent optional life will cost. Optional Life rates for yourself are based on your age and salary; premiums increase in five-year bands coinciding with your birthdate (e.g. when you reach age 30, 35, 40, and so on).





Enroll or Re-Enroll in a Flexible Spending Account

Save big with Flexible Spending Accounts (FSAs) which allow you to set aside pre-tax dollars to pay for your qualified medical expenses and dependent care expenses tax-free.

How It Works: Your elected amount is deducted from your paycheck each pay period-prior to Federal. State, and FICA taxes being calculated—so you pay less in taxes. That amount is placed in your FSA. You then use your taxfree FSA funds for eligible expenses.

Enroll and Re-Enroll: You must re-enroll every year during Open Enrollment if you want to participate in the Health Care or Child Care FSA for plan year 2025. Per IRS regulations, Health Care and Child Care FSA plan participation does not carry over from year to year. However, you can enroll or drop the commuter FSA at any time throughout the year.

2025 FSA Contribution Limits and Deadlines

2025 Annual Maximum Contributions			
Health Care FSA	\$3,200		
Child Care FSA	FSA \$5,000 per household (\$2,500 if married and filing separate tax returns)		
Commuter Choice FSA	\$230 for MCGEO employees		
	\$300 for Unrepresented employees		
	(IAFF and FOP employees are not eligible to participate.)		
2025 Plan Year Deadlines			
Deadline to Spend 2025	Use it or lose it! The IRS requires you to use your 2025 plan year FSA funds on eligible		
Funds	expenses by March 15, 2026, or you will lose the remaining balance.		
Deadline to File 2025	You must file all 2025 plan year incurred claims before April 30, 2026, or you will forfeit		
Claims	your remaining balance.		
Deadline to Use 2024	When making your 2025 FSA elections, keep in mind that unused funds from the 2024		
Funds	plan year will roll over for you to spend through March 15, 2025.		

Please visit www.montgomerycountymd.gov/OE for a complete list of eligible FSA expenses, a plan comparison chart and an informational video.

Wellness and EAP

Empower your health journey with these wellness support programs and tools through LiveWell and ComPsych. These resources are available at any time; you do not need to take action during Open Enrollment to gain access.

More Great Resources Available to MCG Employees

COMPSYCH[®]

Mental Well-Being Support The Employee Assistance Program (EAP), ComPsych

Guidance Resources, provides free, confidential support and resources to help you manage life's changes and challenges. MCG employees and their family members have access to confidential counseling, financial planning, legal support, online will preparation, concierge services, finding childcare, buying a home, caring for a pet, and more! For more information, go to: www.guidanceresources.com.

Live/Vell Better You. Better Us.

LiveWell*

LiveWell is MCG's joint labormanagement award-winning employee wellness program. LiveWell's mission is to cultivate a culture of well-being through holistic programs, resources, and policies that empower employees to lead a

healthier lifestyle. It focuses on the six dimensions of wellbeing: emotional, intellectual, physical, financial, occupational, and social. For more information, visit: www.montgomerycountymd.gov/livewell.

*LiveWell programs are open to insurance-eligible MCG and participating agency employees.

Events & Resources

The following events and resources are available to help you with your Open Enrollment decisions.

Events				
	ion unless otherwise noted. Visit the Open Enrollment website <u>nd.gov/oe</u>) to register and access virtual meeting links.			
Benefits Open Enrollment Fair Executive Office Building Lobby Auditorium 101 Monroe St, Rockville	Special In-Person Event: Tuesday, October 15, 11 am – 2 pm OHR's Health Insurance Team and MCG's insurance plan representatives will be on-site to address your Open Enrollment questions. Stop by vendor booths for free giveaways, plan materials, and chances to win exciting prizes! No registration required.			
Book a 1:1 virtual appointment	OHR's Health Insurance Team members are available to speak with you 1:1. Timeslots are limited. Advanced registration is required.			
Attend Open Enrollment Virtual Office Hours	Join this virtual meeting to ask your Open Enrollment questions directly to the OHR Health Insurance Team. No registration required. Virtual Office Hours is held in a group setting. If your questions involve private or personal information, please book a 1:1 appointment instead.			
Live Information Webinars	Attend virtual educational webinars hosted by OHR's Health Insurance Team and MCG's insurance carriers. You will have a chance to ask questions at the end of each presentation. Advanced registration required.			
Pre-recorded videos	Watch pre-recorded videos from each of the insurance carriers (available 24/7) beginning October 7, 2024. No registration required.			
Website Resources				
MCG Open Enrollment Website	Visit <u>www.montgomerycountymd.gov/oe</u> between October 7 – October 25. for tons of helpful resources such as plan summaries and other included program flyers, calculator and estimator tools, event registration, and more all in one convenient spot!			
Other Resources				
Place a service request with MC311	Call 240-777-0311 to place a service request and a member of the OHR Health Insurance Team will respond. Please make sure to leave both a phone number and email to ensure the fastest response time. Don't wait until the last minute!			
Visit the OHR Customer Care Center in person	The Customer Care Center is located on the 7^{th} floor of the Executive Office Building and is open Monday – Friday from 8 am – 4 pm.			
Contact your MCG insurance carriers	Visit <u>www.montgomerycountymd.gov/OE</u> (resources) for carrier contact information.			







Legal Notices For the 2025 Plan Year

Please keep the following legal notices with your important benefits documentation.

Notice of Creditable Coverage

Important Notice from Montgomery County About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Montgomery County and prescription drug coverage available for people with Medicare. It also explains the options you have under Medicare prescription drug coverage and can help you decide whether or not you want to enroll. At the end of this notice is information about where you can get help to make decisions about your prescription drug coverage.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

- Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- Montgomery County has determined that the prescription drug coverage offered by MCG's group insurance plan is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join a Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15 to December 7. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

You should compare your current coverage, including which drugs are covered, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area.

What Happens to Your Current Coverage If You Decide to Join a Medicare Drug Plan? At this time, MCG offers Medicare eligible retirees the following prescription plans:

- Caremark Standard Option Prescription Plan
- Prescription coverage available through the Kaiser's Medicare Plus plan

If you (and/or your dependents) are eligible for Medicare (including due to disability) and elect to participate in the Caremark High Option Prescription Plan or Standard Option Prescription Plan, you (and/or your dependents) will automatically be enrolled in Medicare Part D. Medicare requires that you have a 21-day period to opt out of Medicare Part D participation. However, if you opt out, you (and your dependents, if applicable) will not have any prescription drug coverage through MCG's prescription drug plans. If you elect to participate in the Kaiser plan, this is not applicable.

If you or your Medicare eligible dependent decide to join a Medicare drug plan, coverage under the MCG plan will terminate for that individual. Therefore, please note that if you join a Medicare drug plan, and as a result your County coverage is terminated, coverage for your dependents will also terminate.

If you decide to join a Medicare drug plan and you decide to drop your current County coverage, be aware that you and your dependents will only be able to elect coverage at open enrollment.

When Will You Pay a Higher Premium (Penalty) To Join a Medicare Drug Plan?

You should also know that if you drop or lose your coverage with MCG and don't enroll in Medicare prescription drug coverage within 63 days after your current coverage ends, you may pay more (a penalty) to enroll in Medicare prescription drug coverage later.

If you go 63 days or longer without prescription drug coverage determined to be Creditable Coverage, your monthly premium may go up at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without coverage, your premium may always be at least 19% higher than the Medicare Base beneficiary premium. You'll have to pay this higher premium as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to enroll.

For More Information About This Notice or Your Current Prescription Drug Coverage

The Office of Human Resources, Health Insurance Team 101 Monroe Street, 7th Floor Rockville, Maryland 20850

Contact MC311, Monday through Friday, 8 a.m. to 5 p.m.: 240-777-0311; any questions MC311 cannot answer are immediately routed via a service request to the OHR Health Insurance Customer Care Center, Monday through Friday, open 8 a.m. to 4 p.m.

NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Montgomery County changes. You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage

More detailed information about Medicare plans that offer prescription drug coverage is in the *Medicare & You* handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans. For details about Medicare prescription drug plans:

- Visit <u>www.medicare.gov</u>
- Call your State Health Insurance Assistance Program (see your copy of the Medicare & You handbook for their telephone number) for personalized help.
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For people with limited income and resources, extra help paying for Medicare prescription drug coverage is available. Information about this extra help is available from the Social Security Administration (SSA) online at <u>www.socialsecurity.gov</u>, or you call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

October 2024

Montgomery County Office of Human Resources, Health Insurance Team 101 Monroe Street, 7th Floor Rockville, MD 20850

Notice of Grandfathered Health Plan Status

Montgomery County Government believes the Plan is a grandfathered health plan under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that the Plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the OHR Health Insurance Team by contacting MC311, Monday through Friday, 8 a.m. to 5 p.m.: 240-777-0311; any questions MC311 cannot answer are immediately routed via a service request to the OHR Health Insurance Customer Care Center, Monday through Friday, 8 a.m. to 4 p.m. You may also contact the U.S. Department of Health and Human Services at https://www.healthcare.gov/health-care-law-protections/grandfathered-plans/.

Women's Health Care and Cancer Rights Act (WHCRA)

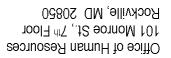
The Plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema. Call your plan provider for more information.

Availability of Other Important Legal Documents

Other legal documents are available free of charge at http://www.montgomerycountymd.gov/HI Summary of Benefits and Coverage, Group Insurance Summary Description and HIPAA Privacy Notice. A paper copy of these documents can be provided free of charge by contacting the OHR Health Insurance Team via MC311, Monday through Friday, 8 a.m. to 4 p.m.: 240-777-0311.

The County expects to continue its group insurance plans, but it is the County's position that there is no implied contract **between individual employees and the County** to do so. The County reserves the right to change or discontinue any terms of the plans, subject to applicable laws and the County collective bargaining agreements. The County may amend the plans, either prospectively or retroactively, as required by Federal or State law. In the event of a conflict between this Open Enrollment flyer, the County Code, the Summary Description and/or the Plan documents, the County Code, then the plan document and then the Summary Plan Description will govern.

Distributed October 2024





Deadline to Make Benefits Changes for 2025: October 25, 2024, at 5 pm ET



Visit the Employee Open



