

Plan Year January 1, 2023 - December 31, 2023

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Manatee YourChoice Health Plan Employee Health Benefits 5213 4th Ave. Cir. E, Bradenton, FL 34208 www.manateeyourchoice.com



Participating Constitutional Offices/Agencies: Board of County Commissioners (Plan Sponsor) Manatee County Sheriff's Office Manatee County Clerk of Circuit Court & Comptroller Manatee County Tax Collector Manatee County Property Appraiser's Office Manatee County Housing Authority Supervisor of Elections Port Authority

# Annual Enrollment Guide

Plan Year January 1, 2023 - December 31, 2023

**Annual Enrollment Begins**: Friday, October 21, 2022 **Annual Enrollment Ends:** Friday, November 4, 2022 **Changes Effective:** January 1, 2023

**All benefit-eligible employees are required to complete annual enrollment** to confirm elections and plan levels, make changes, or waive coverage. This is your only opportunity this year to make changes without experiencing a life event (*marriage, birth, etc.*).

- CONFIRM benefit elections with no changes
- WAIVE coverage
- ADD or DROP Medical, Dental, Vision or Child Life Insurance
- APPLY FOR, DROP, or CHANGE Employee or SpouseLife Insurance, Short-Term Disability (STD), or Long-Term Disability (LTD).

- ENROLL in a Flex Spending Account
- UPDATE beneficiary information
- CONFIRM medical plan level (email katherine.pettitt@mymanatee.org if discrepancy)

**If adding a spouse or dependent**, have social security number and date of birth available, as well as these required documents:

- SPOUSE Marriage certificate
- NATURAL CHILD UP TO AGE 26 Birth certificate
- STEPCHILD Birth certificate & marriage certificate
- ADOPTED OR LEGAL GUARDIANSHIP\* Court
  order
- GRANDCHILD\* (Child of current dependent) -Birthcertificate
  - \***Grandchild** up to **18 months** living with employee/Legal guardianship up to 18 years

### Insurance Coordinators are a great resource to answer questions about your benefits and annual enrollment

DEPARTMENT/AGENCY	NAME	EXT	
Board of Commissioners	Leslie Kearns	3754	
Clerk of the Circuit Court	Lisa Wooten	4009	
Clerk of the Circuit Court	Bridget Haymond	4013	
Clerk of the Circuit Court	Mercede Myers	4014	
Community and Veterans Services	Janice Dunbar-Smith	3451	
Community and Veterans Services/Libraries	Lorrie See	748-5555 ext 6303	
Convention & Visitors	Melinda McGann	722-3244 x3943	
County Administrator	Leslie Kearns	3754	
County Attorney	Nicole Bezdek	3750	
Court Administrator	Katherine Pettitt	6404	
Development Services	Tracy Trahan	3877	
Development Services	Vanessa Mutchnik	6221	
EHB	Katherine Pettitt	6404	
Financial Mgmt	Elisa Goldberg	3792	
Housing Authority	Lesa Livingston	756-3974, X.208	
Human Resources	Katherine Pettitt	6404	
IT	John Sharp	3076	
Metropolitan Planning Organization	Ryan Brown	359-5772	
Metropolitan Planning Organization	Rachel McClain	259-6045	
Neighborhood Services	Sharon McClellan	3719	
Parks & Natural R/ GT Bray	Sharon Granberg	6043	
Parks & Natural R/Ag & Ext services	Kelli Polanski	1807	
Parks & Natural R/Ag & Ext services	Wendy Henry	1811	
Port Authority	Denise Stufflebeam	722-6621	
Port Authority	Sandi Arnold	721-2501	
Property Appraiser	Barb Richardson	742-5654	
Property Management	Caitlyn Deloach	3603	
Property Management	Robin Dyer	8201	
Public Safety	Candace Kelly	1667	
Public Safety	Sherri Sweeny	1646	
Public Safety	Theresa Kersey	7874	
Public Safety/Animal Services	Lori Koutelis	8312	
Public Works	Crystal Meyers	7442	
Public Works	Danielle Riley	7441	
Public Works/Admin, Engineering	Janice Haas	7462	
Public Works/Admin, Engineering	Janette Girard	7391	
Public Works/Fleet	Darlene Passio	7370	
Public Works/Highway	Alyssa Howard	7258	
Public Works/Highway	Leslie Swanson	7249	

Public Works/Infrastructure/ Project Mgmt	Francisca Backenstross	7444	
Public Works/Stormwater	Sonia Davis	7430	
Public Works/Traffic Op/Traffic Engineer	Kristin Hall	7283	
Public Works/Transit	Evelyn Dupuy	8113	
Public Works/Transit	Melinda Waggoner	7629	
Sheriff's Office	Julie Merritt	2135	
Supervisor of Elections	Shannon Perry	6450	
Tax Collector	Antonia Medina	941.741.4842	
Tax Collector	Latoya Benton	941.741.4845	
Utilities Dept	Theresa DuBois	5294	
Utilities Dept	Sarah Metcalfe	8001	
Utilities Dept	Roberta Johnson	5208	
Utilities Dept	Suzanne Dunn	5242	
Utilities Dept	Veronica Henry	5011	
Utilities Dept	Danielle Brown	5282	
Utilities Dept /WW Lab/ WW Compliance	Bobbijo Moore	5436	
Utilities Dept/Landfill/Scale House	Debora Braziel-Jones	8004	
Utilities Dept/Lift Station	Deb Julien	5374	
Utilities Dept/MARS Prog	Aimie Johnson	5459	
Utilities Dept/North WW Plant	Aimie Johnson	5459	
Utilities Dept/Records Div	Peggy Hines	5271	
Utilities Dept/Sludge Dryer/WW	Mindy Whalen	8029	
Utilities Dept/Water Distribution	Diana Arthur	5268	
Utilities Dept/WW Collections	Morgan Defisher	5403	
Utilities Dept/WW Collections	Veronica Henry	5011	
Utilities Dept/Treatment Plant	Sarah Findley	5032	



Manatee YourChoice Health Plan Employee Health Benefits 5213 4th Ave. Cir. E, Bradenton, FL 34208 <u>www.manateeyourchoice.com</u>



Katherine: (941) 748.4501 x6404 or Ingrida: (941) 748.4501 x6403

# Medical Manatee YourChoice Health Plan (utilizing Aetna Choice POSII Open Access Network)

2023 MEDICAL MONTHLY RATES			
	Employee Pays	Employer Pays	
Employee Only	\$90.48	\$710.20	
Employee + Spouse	\$340.88	\$1,298.00	
Employee + Child(ren)	\$292.18	\$1,112.56	
Employee + Family (spouse & children)	\$413.56	\$1,896.82	
Dependent Child (age 26-30)	\$800.68	\$0	

Medical benefits are presented with an 8% rate increase and an enhancement but with no changes to the plan design. Visit <u>www.manateeyourchoice.com/employee-benefits/medical</u> for more information about the medical plan.

Pharmacy Benefit reminders: Most pharmacies are now in-network (Publix, Walgreens, CVS, Walmart, etc.), 90day supply available at all in-network pharmacies, and copays remain the same.

### Dental Aetna Dental PPO/PDN Network

\*Clerk employees should contact HR for information regarding dental options.

2023 DENTAL MONTHLY RATES		
	Employee Pays	
Employee Only	\$34	
Employee + 1	\$55	
Employee + 2 or more	\$75	

We are pleased to offer dental benefits with no change to your premium or plan design. Visit <u>www.manateeyourchoice.com/employee-benefits/dental</u> for more information about the dental plan.

### Vision Aetna Vision Preferred Network

2023 VISION MONTHLY RATES		
	Employee Pays	
Employee Only	\$4.92	
Employee + Spouse	\$9.36	
Employee + Child(ren)	\$9.84	
Employee + Family (spouse & children)	\$14.48	

We are pleased to offer vision benefits with no change to your premium or plan design. Visit <u>www.manateeyourchoice.com/employee-benefits/vision</u> for more information or <u>www.aetnavision.com</u> to find a provider.

# Flexible Spending Accounts (FSA) Must Re-enroll Every Year

Manatee County offers two reimbursement accounts to help you pay for eligible, out-of-pocket expenses such as deductibles, co-pays and childcare. The dollars you set aside come out of each paycheck, tax-free, helping you budgetand save money. These Accounts do not renew - **a new election must be made each year.** An FSA can only be elected during AnnualEnrollment, at time of hire, or with certain life events (marriage, divorce, birth, etc.).

Health Care Flexible Spending Account	Dependent DAY Care Flexible Spending Account
You can enroll in a Health Care Flex Spending	You can enroll in a Dependent Care Flex Spending
Accountand elect up to \$3050 per year to use	Account and elect up to \$5,000 to use toward child
towards out-of-pocket medical expenses such as, but	(age 12 and under) and adult <b>day care</b> expenses
not limited to:	suchas:
Co-pays	Before and after school care
Deductibles	Daycare, nursery school, and preschool
Glasses	Summer day camp
Orthodontics	Care for your spouse or relative who is physically or
You can pay for your health-related expenses at time	mentally incapable of self-care and lives in yourhome
ofservice with a <b>Payflex debit card</b> that is linked to	If money is available in your account, you can
your FSA account, or upload receipts through the	access your funds within a few days by submitting
Payflex website or app for reimbursement. Using the	a receipt for the expenses on the Payflex website
debit carddoes not eliminate the need to provide	or app. Unfortunately, the debit card option is not
receipts when requested, so please keep receipts of	available with the Dependent Care Flex Spending
all the expenses you place on the debit card.	Account.
How the "Use it or Lose it" clause applies	How the "Use it or Lose it" clause applies
Up to \$610 of unused funds can be rolled over to the	The Dependent Care Flex Spending Account is "use it
following year. Any remaining balance at the end of	or lose it". This means that any funds you do not
that year will be forfeited.	utilize by the end of the year will be forfeited. So,
	carefully consider your anticipated expenses.
Terminated employees will have access to subn	

Terminated employees will have access to submit claim reimbursement request(s) for IRS eligible expenses incurred up to their last day of employment. Any unused amounts remaining in the FSA account will be forfeited.

For more information visit <u>www.manateeyourchoice.com/employee-benefits/flexible-spending-account</u> or call1-844-PAYFLEX (729-3539) or 1-888-678-8242.

#### How an FSA Saves Money

Let's say you enroll and contribute \$2,500 per year into an FSA and pay the average tax rate of 29.8 percent. By putting that money aside before paying taxes on it rather than allowing the funds to be taxed, **you'd save nearly \$750 for the year!** 

### Short Term Disability Hartford Insurance Group

**Short Term Disability (STD) Insurance** is designed to help protect your income if you are hurt or sick and cannot work. It is equal to 60% of your pre-disability earnings up to a maximum of \$1,000 per week.

Rates are		WORKSHEET FOR STD Calculate Estimated Monthly Premium	
Age	Rates Per \$10 of	1. Find your <b>weekly earnings</b> by dividing your annual	
	Weekly Benefit	earnings by 52.	Line 1: \$576.92
ALL	\$0.401		(30,000/52)
The co	st for STD is subject	2. Calculate your <b>weekly benefit</b> by multiplying your	
sal	ary. Evidence of	weeklybenefit by .60 (60% max benefit of weekly earnings	
	ility (EOI) is required	<i>up to</i> \$1,000.00 per week).	Line 2: \$346.15
	s elected at time of	3. Divide rate by 10.	
			<u>Line 3: \$0.0401</u>
	omplete the steps in	4. Multiply line 2 by the amount in line 3.	
	rollment system to		<u>Line 4: \$13.88</u>
calcu	ate and view your		
premiu	m. * Policy is subject		
to pre-	existing conditions.	Line 2 (weekly benefit) X Line 3 (rate/10) = (Est. Monthly Premium)	

### Long Term Disability Hartford Insurance Group

**Long Term Disability (LTD) is provided to all eligible employees.** Core LTD is equal to 50% of an employee's base monthly salary up to \$3,000 per month after the disability exceeds 90 days and is provided at no cost to employees.

#### Additional LTD | Can be applied for *any time during the year*.

You can elect to enroll in Additional LTD and increase your benefit to 66 2/3% of base monthly salary, up to \$5,000 permonth. The cost for Additional LTD is subject to age and salary. Evidence of Insurability (EOI) is required unless elected at time of hire. Complete the steps in the enrollment system to calculate and view your premium.

2023 AD RATES	DDITIONAL LTD MONTHLY	WORKSHEET FOR ADDITIONAL LTD Calculate Estimated Monthly Premium		
EMPLOYE	E Up to 66 2/3% Base Monthly Salary			
Age Rates Per \$100 of Insured		1.Enter your monthly earnings,		
	Earnings	not to exceed \$7,500, on Line 1. <u>Line 1: \$5,000</u>		
<40	\$0.105	Select your rate from the rate table		
40-49	\$0.304	and divide this by 100. <u>Line 2: \$.00304</u> (.304 ÷ 100)		
50-59	\$0.713	Multiply Line 1 by the amount shown on Line 2. <u>Line 3: \$15.20</u>		
60-64	\$0.732	$\underline{Line 5.}$		
65+	\$0.760	Line 1 (Monthly Earnings) X Line 2 (Rate/100) = Est. Monthly Premium		

## Life Insurance Securian Life Insurance Company

**Term Life insurance is provided to all eligible employees.** Core Life and AD&D is equal to 1x base annual salary up to

\$200,000 and is provided at no cost to employees.

Additional Life Insurance | Can be applied for *any time during the year*.

You can elect up to 6x base annual salary with a maximum coverage amount of \$750,000, subject to Evidence of Insurability (EOI). Complete the steps in the enrollment system to calculate and view your premium.

<b>EMPLOYEE</b> Up to 6x salary (max: \$750,000)			<b>SPOUSE</b> 50% of EE election up to \$25,000 Coverage				CHILD(REN) \$10,000 Coverage		
-	Rate per \$1000 benefit	Age	Rate per \$1000 benefit		Age	Rate per \$1000 benefit	Age	Rate per \$1000 benefit	Flat rate \$1/month
<34	\$0.050	55-59	\$0.511		<34	\$0.051	55-59	\$0.518	No matter how many children, the rate is still \$1,
35-39	\$0.058	60-64	\$0.756		35-39	\$0.066	60-69	\$0.715	month. Each Child receives
40-44	\$0.122	65-69	\$0.994		40-44	\$0.139			\$10,000 coverage.
45-49	\$0.245	70+	\$1.310	1	45-49	\$0.263			*No EOI for children
50-54	\$0.346				50-54	\$0.336			

Visit <u>www.manateeyourchoice.com/employee-benefits/life-ad-d</u> for more information.

WORKSHEET FOR ADDITIONAL TERM LIFE Calculate Estimated Monthly Premium			
1.Enter the amount of additional term life,			
on Line 1. <u>Line 1: \$46,000</u>			
Select your rate from the rate table			
and divide this by 100. <u>Line 2: \$.000122</u> (.122 ÷ 1000)			
Multiply Line 1 by the amount			
shown on Line 2. <u>Line 3: \$5.61</u>			
Line 1 (Monthly Earnings) X Line 2 (Rate/100) = Est. Monthly Premium			

IRC section 79 provides an exclusion for the first \$50,000 of group-term life insurance coverage provided under a policy carried directly or indirectly by an employer. There are no tax consequences if the total amount of such policies does not exceed \$50,000. The imputed cost of coverage in excess of \$50,000 must be included in income, using the IRS Premium Table, and are subject to social security and Medicare taxes. This amount is shown on employee's check as Life Over 50.

### Aetna Navigator <u>www.aetnanavigator.com</u>

- Find a Doctor
- Download ID Cards
- View Claim Status and EOB (Explanation .. of Benefits)
- View Flexible Spending Account Balance
- Compare Costs for Office Visits, Tests & Procedures
- Research Prescription Drugs
- Online Wellness Programs/Tools and much more

### Login/Sign Up

ManateeYourChoice.com > Benefit Login > Aetna Navigator **OR** www.aetnanavigator.com

*Each enrolled member will create an individual username and password* and will need their Member ID Number or Social Security Number to sign up.

### Health Bucks

Health Buck award totals will **NOT** be in the 2023 annual enrollment platform. Notification of HiiP awards will be mailed to the participant's home address. For questions, please contact:

HiiP: Vanessa Rene, (941) 748.4501 x6418, <u>vrene@manateeyourchoice.com</u> Agility: Larry Luh x1660 (For EMS only)

# Wellbeing Benefits Learn more at <u>www.manateeyourchoice.com</u>

At Manatee County Government, we are committed to providing quality service with an emphasis on accountability, civility and ethics. We also believe that this can only be accomplished through the leadership of our employees. At the heart of it all, our employees have a passion for public service. They form partnerships, drive innovation, and invest in people, and our community, every single day. That is why we invest in a holistic wellbeing approach and offer programs and services in the areas of physical, emotional, financial, community, and career health. When each of these areas are well, our employees are able to bring their best selves to work and help us makeManatee County a premier place in which to live and work and play.



Review the Beyond Compensation Booklet available at <u>www.manateeyourchoice.com</u> to review all of the benefits that are available to Manatee County Government employees. (Note: Agency benefits may vary slightly. Consult with your HR department for agency-specific benefits).

#### **FREQUENTLY ASKED QUESTIONS**

#### Q. What if my address is wrong?

A. Contact your HR Liaison to update your address.

#### Q. Who do I contact for a password re-set in Benefit Express?

A. Contact your Insurance Coordinator.

#### Q. What do I need to print and submit to my Insurance Coordinator?

A. Annual Enrollment is paperless. There are no forms to submit to an insurance coordinator or to EHB. All documents are submitted through the system electronically. Keep a copy for your own records.

#### Q. If I am adding a dependent to my coverage, what documents should I have ready to upload?

A. When adding dependents to the plan, you will need to upload applicable marriage and/or birth certificates:
 Adding spouse: Verify coverage by uploading a copy of your marriage certificate.
 Adding child: Verify coverage by uploading a copy of the child's birth certificate.

#### Q. How do I update a beneficiary for my Life Insurance?

A. The enrollment system provides an opportunity to update or designate your beneficiaries.

#### Q. How do I ADD a Flex Spending Account?

A. Flexible spending accounts elections do not roll over from one year to the next. If you wish to have an FSA for 2023, you must elect it as part of the annual enrollment process.

#### Q. Will I get a new insurance card?

A. You will receive a new:

- Aetna may be mailing new ID cards to all members due to a recent update. Please verify your plan level.
- Medical/dental ID card if you have experienced a Plan Level change or are adding or dropping coverage.
- Vision card if you add vision coverage
- Payflex debit card if you add a Health Care Spending Account

#### Q. How long before I receive STD benefits?

A. On the 15th day of your disability.

#### Q. When will my STD benefits end?

A. Claims are individually analyzed by the carrier based on disability and physician notes to determine number of benefit weeks, up to 13 weeks, including the 14-day waiting period. Benefits end when you no longer satisfy the applicable eligibility conditions.

#### Q. Does STD cover pre-existing conditions?

A. Must be treatment-free for 3 consecutive months before or after the date your plan begins. After your plan has been in effect for 12 months, no limitations on pre-existing conditions.

#### Q. I don't have any changes. I want everything to stay the same. What do I need to do?

A. You must go into the system and engage in the Annual Enrollment process for the following critical reasons:

- This is your opportunity to verify that the Medical Plan level that you and your dependents elected by doing Qualifying Events is reflecting as you would expect in the system. If you identify sometime in 2023 that your plan level is not correct, the change will be made the 1st of the month following notification. If there is a discrepancy with your planlevel, please email <u>Katherine.pettitt@mymanatee.org</u>.
- You can make additions or deletions to your coverage that will become effective January 1st.
- You must **confirm and/or update your beneficiaries** for your Core and Additional Life Insurance. Everyemployee has at least core coverage and an updated beneficiary is very important to have on file.

# **COMPLETING ANNUAL ENROLLMENT**

#### How to Complete Annual Enrollment:

The 2023 Annual Enrollment is an active enrollment. This means that even if you do not wish to make any changes to your current benefits, you are still required to complete annual enrollment. Please have all necessary items (social security number, marriage/birth certificates, and date of birth, if adding dependents, etc) available prior to beginningyour enrollment session.

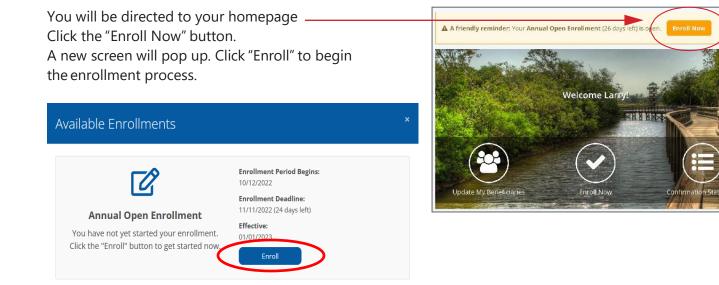
Go to <u>www.manateeyourchoice.com</u> and click the blue benefits login box at the top of the page, then select "Enrollment System". Or, go directly to <u>www.manateeyourchoiceenrollment.com</u>.

Follow the log in instructions on the screen. \* ALL users will follow the initial login instructions and create a new password for annual enrollment, even if you have already established a password in Benefit Express.



Create a permanent password and select 3 security questions.

Choose if you wish to receive your 1095c Form electronically instead of physically mailed to your home and update your personal email addresses if needed. *Remember*, this form is not required for filing your taxes and will be retained electronically in Benefit Express.



#### How to Complete Annual Enrollment (continued):

Complete each step of the enrollment process. If adding a dependent (spouse or child), you must click "upload document" and upload the required documentation (marriage or birth certificate)

🗹 Test, Sally Test    E	dit	Upload	document

As you make changes, you will see the numbers at the right of the screen change.

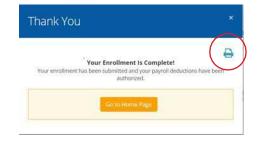
The total of your pay period deductions are pending approval. If you're adding a dependent or waiting for an EOI response, your total pay period deduction amount won't increase until those benefits are approved.



Review your 2023 elections on the confirmation page then select the **Finish Enrollment** button. Remember that the Total Cost (Semi-monthly and Monthly) shown represents deduction cost BEFORE any new benefits you have applied for. Review carefully and make any necessary corrections.



A new window will include a print button in top right corner. Members can print a copy of their confirmation for their records, but **it is not required** for submission to insurance coordinators or to EHB.



You can upload a verification document or make changes to your enrollment through Friday, November 4th by selecting the enroll button on your homepage then selecting "Change" on the pop-up screen.

#### NOTE:

If you and/or your dependents receive a new insurance card this year, please double check the plan level you reflect on the card is the one you qualified for.



### 1095 C for 2022 Information on your option to elect to receive your form electronically

Under federal law, Manatee County must provide information to the IRS about medical plan coverage inwhich you are enrolled.

This information helps you and the IRS to determine whether you have maintained health coverage required under the Individual Mandate as well as determining potential eligibility for a premium tax credit.

In addition to the information we provide to the IRS, we must provide you with a statement that includes the same information that we will provide to the IRS. This statement is referred to as 1095-C. The statement we must provide to you will be furnished on paper if you do not consent to receive it electronically. If you elect to consent to receive these statements electronically, your consent will continue apply each year unless you withdraw your consent.

To properly access the electronic statement, you must have access to a PC or Mac computer, internet access, Wi-Fi or connected printer, Adobe Acrobat reader. You will receive an email from <u>noreply@mybenefitexpress.com</u> containing a link. When the link is selected you will be required to provide certain identifying pieces of information to access the electronic form. Whether or not you opt to receive this link, the statement will be available within the benefits software (Benefit Express). Note: you may be required to print the statement and attach it to a Federal, State, or local income tax return.

Even if you elect to consent to receive the statement electronically, you can still obtain a paper copy of thestatement by contacting Employee Health Benefits. Please note that your request for a paper statement will not be treated as a withdrawal of consent as to future statements.

You may withdraw your consent by logging into Benefit Express and selecting print on the communicationspage. Your withdrawal of consent does not apply to a statement that was furnished electronically before the date on which the withdrawal of consent takes effect.

Manatee County Government will stop furnishing your statement electronically if your email address is notvalid or you are no longer eligible for benefits.

Changes to contact information for the purpose of receiving the electronic statement, should be made within the Benefit Express system or by contacting your insurance coordinator. During annual enrollment for 2023, you'll have the option to receive the statement (copy of Form 1095-C) electronically instead of apaper format.

If you have questions about this notice, please contact Lesli Strickland at Employee Health Benefits.

### Employee Health Benefits – Benefit Providers

Benefit	Provider	Link & phone number
Medical	Aetna	Aetna Choice POS II Open Access Network
		www.manateeyourchoice.com/employee-benefits/medical
		Claim questions
		1-877-580-5019
Dental	Aetna	Aetna PPO/PDN Network
		www.manateeyourchoice.com/employee-benefits/dental
		Claim questions
		1-877-238-6200
Vision	Aetna	www.manateeyourchoice.com/employee-benefits/vision
		Claim questions
		1-877-973-3238
Quest Diagnostics		855-623-9355
Flexible Spending Account	PayFlex	www.manateeyourchoice.com/employee-benefits/flexible-
		spending-accounts
		Claim questions
		1-844-PAYFLEX (729-3539)
Short Term Disability	Hartford	www.manateeyourchoice.com/employee-
		benefits/disability/short-term-disability
		Claim questions
		1-800-549-6514
Long Term Disability	Hartford	www.manateeyourchoice.com/employee-
		benefits/disability/long-term-disability
Life Insurance	Securian	www.manateeyourchoice.com/employee-benefits/life-ad-d
Telemedicine	Teladoc	www.manateeyourchoice.com/teladoc
LAMP		941-741-2995, ext 6495

**NOTE**: Your Choice Health Plan hires Aetna as a third-party administrator to process claims for medical, dental and vision, provide customer service and run the provider network.