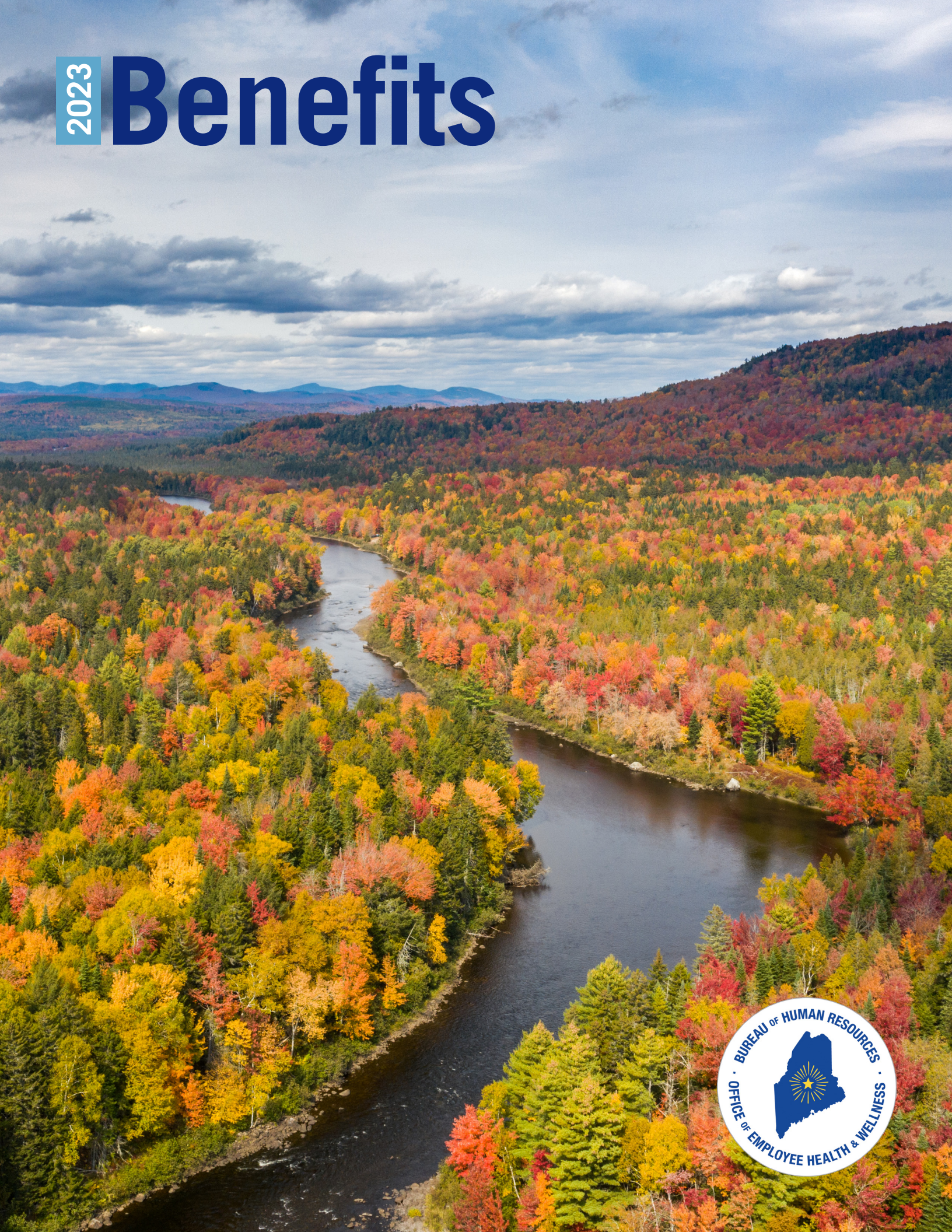


2023 Benefits



At the State of Maine, we recognize everything you do to ensure our success. In return, we want to provide you with the resources you need to care for yourself and your family. That's why we have created an affordable, comprehensive benefits program with a range of features to help you manage your health and well-being.

This guide offers a high-level summary of your plan options. Please read it carefully so you can make the best decisions for you and your family. For complete details, please see the summary plan description (SPD) at maine.gov/bhr/oeh/benefits/som-health-plan/coverage.

If you have any questions, please contact the Office of Employee Health & Wellness at 207-624-7380 or email us at info.benefits@maine.gov.





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Benefits Basics

On the following pages you will find a general overview of each of the benefit programs available to State of Maine employees. The intent of this booklet is to provide you with key information about each plan along with valuable resources for you to access more details.

Who can enroll?

If you are a full-time or part-time active State of Maine and ancillary¹ employee who is eligible to participate with the Maine Public Employees Retirement System, you are also eligible to participate in all health benefits.

If you're eligible to enroll, you also can enroll your dependents:

- Your legal spouse or domestic partner (same or opposite sex).
- Your dependent children up to age 26, regardless of student or marital status.
- Your disabled dependent children of any age, provided the disability began prior to reaching the age of 26 and the child was insured under the State of Maine plan.

New Hire Enrollment

You must enroll for benefits within 60 days of your start date. New employees are eligible for benefits the 1st of the month following one month of employment. For example:

- Feb 5th - first day of work
- March 5th - one month employment mark
- April 1st - benefits effective date

Once enrolled, you must continue with your plan for the remainder of the plan year due to IRS regulations governing pre-tax plans, unless you have a qualifying life event.

Open Enrollment

During the annual open enrollment period, you will have another opportunity to choose the benefits that best meet your needs. During open enrollment, you may elect plans, enroll in coverage previously waived, add or drop eligible dependents, or terminate your coverage.

1. Ancillary employers include, but not limited to, Maine Community College System, Maine Turnpike Authority, Maine Public Employees Retirement System, etc. Refer to State of Maine Statute MRS Title 5, 285 for a complete list.

Making Changes To Your Benefits During the Year

If you need to add or remove coverage for yourself or your dependents, you must wait until the next open enrollment period, unless you have a qualifying life event as defined by the IRS.

Here are some examples of qualifying life events:

- Birth, legal adoption or placement for adoption.
- Marriage or divorce.
- Dependent child reaches age 26.
- Spouse or dependent loses or gains coverage elsewhere.
- Death of your spouse or dependent child.
- Spouse or dependent becomes eligible or ineligible for Medicare/Medicaid or the state children's health insurance program.
- Court-ordered change.
- Spouse's open enrollment that occurs at a different time than yours.

If you qualify to make a change, you will have 60 days from the day of the event to notify your employer and make your benefit elections.



Common Insurance Terms

Coinsurance: Coinsurance is your share of the costs of a covered healthcare service, calculated as a percent (for example, 20%) of the allowed amount for the service. Your coinsurance will begin after you have met your deductible. For example, if the health plan's allowed amount for a medical service is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health plan pays the rest of the allowed amount.

Copay: A copay is a fixed dollar amount you pay for a healthcare service. The amount can vary by the type of service. Your copays will not count toward your deductible but will count toward your out-of-pocket maximum.

Deductible: The deductible is the amount you owe for covered healthcare services before your plan begins to pay benefits. For example, if your deductible is \$1,200, your plan won't pay anything until you've met your \$1,200 deductible for covered healthcare services subject to the deductible. Preventive care is not subject to the deductible as it is covered 100% by any medical plan option.

Embedded Deductible: If you are on a family medical plan with an embedded deductible, your plan contains two components: an individual deductible and a family deductible. Having two components to the deductible allows each member of your family to have your insurance policy cover their medical bills prior to the entire dollar amount of the family deductible being met. The individual deductible is embedded in the family deductible.

Explanation of Benefits (EOB): An EOB is a statement from the insurance company showing how claims were processed. The EOB tells you what portion of the claim was paid to the healthcare provider and what portion of the payment, if any, you are responsible for.

Individual mandate: Federal health reform mandates most US citizens have health insurance for themselves and their dependents. State of Maine helps you stay insured by offering affordable healthcare for all employees who work full-time or part-time. Coverage is effective the first of the month following one month of employment and allows you to cover your spouse and children.

In-Network vs. Out-of-Network: A network is composed of all contracted providers. Networks request providers to participate in their network, and in return, providers agree to offer discounted services to their patients. If you pick an out-of-network provider, your claims will be higher because you will not receive the discounts the in-network providers offer.

Out-of-Pocket Maximum: The out-of-pocket maximum is designed to protect you in the event of a catastrophic illness or injury. Your out-of-pocket maximum includes your deductible, coinsurance and copays that come out of your pocket. After you have paid the specified out-of-pocket amount during a policy year, the plan pays the remaining covered services at 100%.

Preventive Care: Routine healthcare services can minimize the risk of certain illnesses or chronic conditions. Examples of preventive care services include but are not limited to physical exams, mammograms, flu vaccines, prostate tests and smoking cessation.

Reasonable and customary: The amount of money a health plan determines is the normal or acceptable range of charges for a specific health-related service or medical procedure. If your healthcare provider submits higher charges than what the health plan considers normal or acceptable, you may have to pay the difference.

Medical

We are committed to helping you and your dependents maintain your health and wellness by providing you with access to the highest levels of care. We offer you a comprehensive medical plan (administered by Anthem Blue Cross Blue Shield) and prescription coverage (administered by MedImpact).

Plan Details	PPO Plan	
	You Pay In-Network	You Pay Out-of-Network
Annual Deductible¹ Individual / Family	\$600 / \$1,200	\$3,000 / \$6,000 ²
Out-of-Pocket Maximum¹ Individual / Family	\$2,000 / \$4,000	\$5,000 / \$10,000
Coinsurance (for most services)	10%	40%
Services		
Preventive Care	Fully covered	40% after deductible
Physician Office Visit	\$20 no deductible	
Specialist Office Visit	\$40 no deductible	
Walk-in Clinic Maine-based	\$25 copay	
Emergency Room	\$300 copay	
Inpatient Care	10% after deductible	40% after deductible
Outpatient Care		
Pharmacy		
Out-of-Pocket Maximum¹ Individual / Family	\$4,600 / \$9,200	

1. Per calendar year
2. Family deductible amount must be satisfied by at least two family members



Health Premium Credit Program

The Health Premium Credit Program provides health plan members actively employed by the State of Maine the opportunity to receive up to a 5% individual premium discount each fiscal year. You must meet specific requirements by the annually stated deadline to be awarded the credit. The Health Premium Credit earned does not roll from year-to-year, and program requirements are updated from year-to-year.

The Program is voluntary, and participation is confidential. For Wellness Resources, log on to WellStarME.org.

Medical Plan Premiums

Deduction amounts below are biweekly for full-time employees. Locate the section of the table that contains your base annual salary. Find the level of coverage for you and any covered dependents within that section. Follow that row to the right to see the biweekly amounts for both the employee and the employer with and without the health credit.

	With Health Credit		Without Health Credit	
	You Pay	State Pays	You Pay	State Pays
Level 1: Base annual salary is equal to or less than \$30,000				
Employee Only	\$0.00	\$515.85	\$25.79	\$490.06
Employee & Spouse/Domestic Partner	\$215.79	\$863.15	\$242.76	\$836.18
Employee, Spouse/Domestic Partner & Child(ren)	\$297.73	\$724.97	\$324.70	\$959.09
Employee & Child(ren)	\$123.66	\$986.06	\$150.63	\$698.00
Dual Contract¹	\$0.00	\$641.90	\$26.97	\$614.93
Level 2: Base annual salary is between \$30,000 - \$80,000				
Employee Only	\$25.79	\$490.06	\$51.58	\$464.27
Employee & Spouse/Domestic Partner	\$242.76	\$836.18	\$269.74	\$809.20
Employee, Spouse/Domestic Partner & Child(ren)	\$324.70	\$959.09	\$351.68	\$932.11
Employee & Child(ren)	\$150.63	\$698.00	\$177.61	\$671.02
Dual Contract¹	\$26.97	\$614.93	\$53.95	\$587.95
Level 3: Base annual salary is equal to or more than \$80,000				
Employee Only	\$51.58	\$464.27	\$77.38	\$438.47
Employee & Spouse/Domestic Partner	\$269.74	\$809.20	\$296.71	\$782.23
Employee, Spouse/Domestic Partner & Child(ren)	\$351.68	\$932.11	\$378.65	\$905.14
Employee & Child(ren)	\$177.61	\$671.02	\$204.58	\$644.05
Dual Contract¹	\$53.95	\$587.95	\$80.92	\$560.98

1. Both employee, spouse/domestic partner work for the State and share children.

Part-time Employee Rates

Part-time employee rates are pro-rated; contact the Office of Employee Health & Wellness at (207) 624-7380 for more information and part-time employee costs.

Retirees Not on Medicare

Premium rates below do not reflect retirees who receive a pro-rated premium contribution.

	Monthly Pension Deduction	Monthly State Contribution
Retiree	\$0	\$1,031.70
Retiree & Spouse	\$1,078.94	\$1,078.94
Retiree, Spouse & Child(ren)	\$1,488.64	\$1,078.94
Retiree & Child(ren)	\$618.32	\$1,078.94
Surviving Spouse	\$1,031.70	\$0.00
Retiree on Medicare & Spouse Under Age 65	\$1,078.94	\$1,078.94



Pharmacy

If you need a long-term medication, you may pay less over time by using the MedImpact pharmacy. We'll deliver up to a 90-day supply right to you — and standard shipping is free. To learn more about your benefit, log in at [medimpact.com](https://www.medimpact.com) and scroll down until you see the tile that says 'Learn more about my benefits.' and click READ MORE. First-time visitors, please take a moment to register before using this service.

Note: If you request a brand-name medication when a generic equivalent is available, you will pay the applicable copayment, plus the difference in cost between the brand and the generic.

	Retail Pharmacy (30-day supply)	Maintenance Retail Pharmacy (90-day supply)	Home Delivery (90-day supply)
Generic	\$10 copay	\$15 copay	\$15 copay
Preferred Brand	\$30 copay	\$45 copay	\$45 copay
Non-Preferred Brand	\$45 copay	\$70 copay	\$70 copay
Diabetic Medications¹	\$25 copay	Standard copays apply	Standard copays apply
	Retail Pharmacy	Maintenance Retail Pharmacy	Through MedImpact Direct Specialty
Specialty² (30-day supply)	N/A	N/A	25% with \$150 max
Specialty² (90-day supply)	N/A	N/A	25% with \$225 max

1. The State of Maine participates in MedImpact's Patient Assurance ProgramSM, where Tier 2—Preferred Brand medications used to treat diabetes are subject to a member cost share cap of \$25 per 30-day supply. These medications include insulin, GLP-1, SGLT2, and DPP-4 products (examples include Humulin[®]/Humalog[®], Lantus[®], Glyxambi[®], and Trulicity[®]). For a complete listing of the medications participating in the Patient Assurance Program, please contact MedImpact Member Services at 1.800.788.2949. Please note, the list of medications participating in the Patient Assurance Program is subject to change.

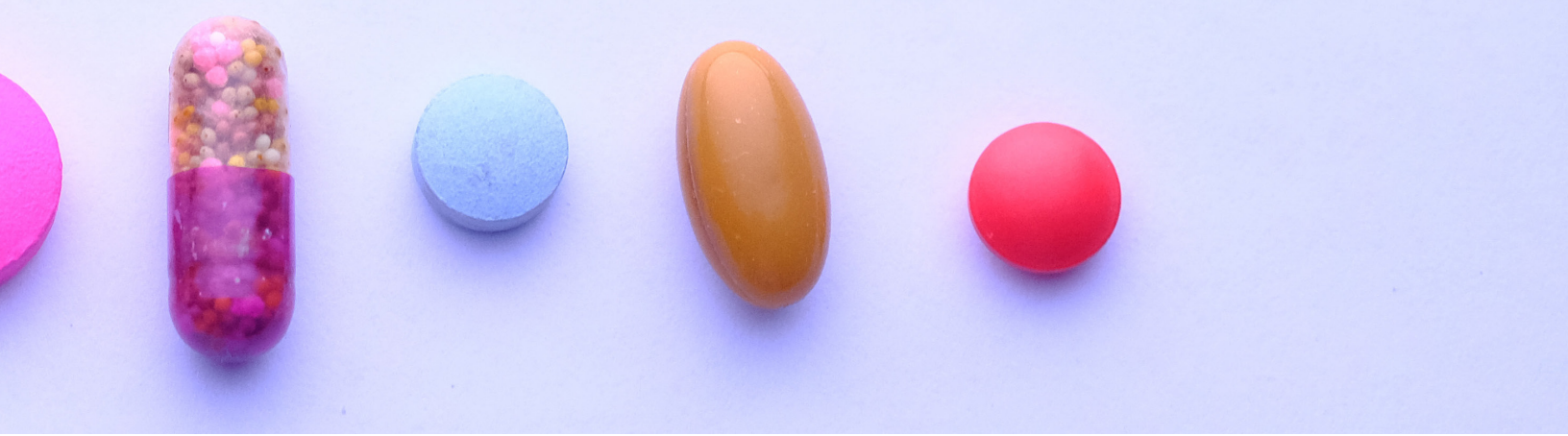
2. Must be filled through MedImpact Direct Specialty.

For short-term prescriptions, such as antibiotics, use a participating retail pharmacy.

As a member, you can go to nearly any retail pharmacies, including most major drugstores. Just ask your retail pharmacy if it's in our network. You can also access the Pharmacy Locator tool via the online member portal or mobile app to find participating network pharmacies, including 24-hour, ChoiceSpecialty and staff ("preferred") pharmacies. Just go to [medimpact.com](https://www.medimpact.com) on your computer or mobile device to register or sign in.

Use generics and preferred medications.

If you are taking a medication that's not on the preferred list, ask your doctor to consider prescribing a lower-cost generic or preferred brand-name drug. Log in to your account at [medimpact.com](https://www.medimpact.com), and see if a medicine is covered by your pharmacy benefit by clicking on the Drug Price Check link found in the menu bar. Just enter your drug's name and Drug Price Check will tell you the formulary status of that drug, and also see if there are other drugs in a certain drug class that may be available for a lower cost.



Prior authorization:

When is a coverage review necessary?

Some medications are not covered unless you first receive approval through a coverage review (prior authorization). This review uses plan rules based on FDA-approved prescribing and safety information, clinical guidelines and uses that are considered reasonable, safe and effective.

There are other medications that may be covered, but with limits (for example, only for a certain amount or for certain uses), unless you receive approval through a coverage review. During this review, MedImpact asks your doctor for more information than what is shown on the prescription before the medication may be covered under your plan. To find out whether a medication requires a coverage review, log in at [medimpact.com](https://www.medimpact.com) and select the Drug Price Check tool, and search for your medication.

Specialty medications:

Get individualized service through [MedImpact Direct Specialty](#)

Specialty medications are drugs that are used to treat complex conditions, such as cancer, growth hormone deficiency, hemophilia, hepatitis C, immune deficiency, multiple sclerosis and rheumatoid arthritis. MedImpact Direct Specialty, a MedImpact specialty pharmacy, is composed of therapy-specific teams that provide an enhanced level of individual service to patients with special therapy needs.

Whether they're administered by a healthcare professional, self-injected, or taken by mouth, specialty medications require an enhanced level of service. By ordering your specialty medications through MedImpact Direct Specialty, you can receive:

- Toll-free access to specialty-trained pharmacists and nurses 24 hours a day, 7 days a week
- Discreet delivery of your medications to you or your doctor, depending on who is administering the drug, at no additional charge
- Most supplies, such as needles and syringes, provided with your medications
- Safety checks to help prevent potential drug interactions
- Personalized refill program
- Up to a 90-day supply of your specialty medication for just one copayment

How can you use the member website?

- Obtain an overview of plan benefits and copay amounts
- Determine if prescribed medications are on the formulary/preferred list
- Locate a network pharmacy near work or home
- Print a tax report of prescription expenses
- Obtain drug price estimates and out-of-pocket costs
- View cost differentials and calculate potential savings with generic vs. brand

Anthem Discounts

Saving money is good. Saving money on things that are good for you — that's even better. With SpecialOffers, you can get discounts on products and services that help promote better health and well-being.¹ It's just one of the perks of being an Anthem member.

Fitness and Health

- **Active&Fit Direct™** — Active&Fit Direct allows you to choose from more than 9,000 participating fitness centers nationwide for \$25 a month (plus a \$25 enrollment fee and applicable taxes). Offered through American Specialty Health Fitness, Inc.
- **FitBit** — Get fit your way with Fitbit trackers and smart watches that fit with your lifestyle, budget and goals. Save up to 22% on select Fitbit devices.
- **Garmin** — Get 25% off select Garmin wellness devices.
- **Jenny Craig** — Take advantage of a free, three-month program (food not included) plus \$120 in food savings (purchase required), or save 50% off premium programs (food cost separate).
- **ChooseHealthy** — Get discounts on acupuncture, chiropractic, massage and fitness clubs.
- **Global Fit** — Get discounts on gym memberships, fitness equipment, coaching and more.

Family and home

- **23andMe** — Get \$40 off each Health + Ancestry kit. Your DNA says a lot about you. Save 20% on a 23andMe kit and learn about your wellness, ancestry and more.
- **Safe Beginnings®** — Babyproof your home while saving 15% on everything from safety gates to outlet covers.
- **Nationwide Pet Insurance** — Receive an automatic 5% discount when you enroll through your company or organization. Save up to 15% when you enroll multiple pets.
- **ASPCA Pet Insurance** — Get 5% off pet insurance. You can choose from three levels of care, including flexible deductibles and custom reimbursements.
- **WINFertility®** — Save up to 40% on infertility treatment. WINFertility helps make quality treatment affordable.
- **LifeMart®** — Get great deals on beauty and skin care, diet plans, fitness club memberships and plans, personal care, spa services and yoga classes, sports gear and vision care.

Medicine and treatment

- **SelfHelpWorks** — Choose one of the online Living programs and save 15% on coaching to help you lose weight, stop smoking, manage stress or diabetes, restore sound sleep or face an alcohol problem.
- **Brevena** — Enjoy a 41% discount on BREVENA® skin care creams and balms for smooth, rejuvenated skin from face to foot.
- **Puritan's Pride** — Choose from a large selection of discounted vitamins, minerals and supplements from Puritan's Pride.
- **Allergy Control Products** — Save 20% on select doctor recommended products such as allergy friendly bedding, air purifiers and filters, asthma products and more. Plus enjoy free shipping on all orders over \$79 when shipping ground within the contiguous U.S.
- **National Allergy® supply** — Save 20% on select National Allergy® Doctor Recommended Products:
 - Allergy bedding
 - Air purifiers and filters
 - Home allergy products
 - Personal care
 - Humidifiers and dehumidifiers
 - Vacuums and steam cleaners

Get Started

To find the discounts that are available to you, log in to [anthem.com](https://www.anthem.com) and select **Discounts**.



Additional Employee Wellness Programs

(for those enrolled in the State of Maine Health Plan)

Tobacco Cessation

Unlimited counseling visits and the first two 90-day treatment regimens for certain tobacco cessation prescription drugs and over-the-counter drugs are covered 100%.

Nutritional Counseling

Nutritional counseling covered 100%. Unlimited visits covered with a doctor or a registered dietitian.

National Diabetes Prevention Program (NDPP)

This program is covered 100% to prevent or delay type 2 diabetes.

WellStarME

WellStarME is an on-line tool provided to plan members at no cost and provides information about stress reduction, prediabetes and nutrition. A personalized scorecard will be developed so you can learn about your current health status and how to easily link to local resources for support.

Centers of Excellence - Carrum Health Surgery Benefit

A no cost surgery benefit you won't have to budget for.

Today more than ever, surgery can be complicated and costly. Not all medical providers deliver the same quality of care and often there are unexpected expenses. That's why we provide you and your eligible family members the Carrum Health benefit - at no cost to you. The [Carrum Health benefit](#) makes it easy to get the highest quality care you deserve.

State of Maine health plan members and their enrolled dependents can use Carrum Health which provides enhanced coverage for certain planned procedures at participating Centers of Excellence.

With Carrum Health, you'll have:

- All or most of your out-of-pocket medical expenses paid for
- Access to the best surgeons in the country from hospitals like Johns Hopkins, Stanford, Rush, and many others
- A dedicated care specialist to guide you through every step of the surgery process
- Travel expenses (if needed) covered for you and a companion if you don't live near a Center of Excellence¹
- A mobile app to explore options, track your progress, and communicate with your care specialist for ongoing support

Covered surgeries

We hope you never need surgery, but if you do, you can use Carrum Health for the following procedures:

- Bariatric
- Cardiac
- Joint Replacements
- Spine Surgeries

Exclusive Provider of Knee and Hip Replacement Surgeries

Beginning July 1, 2022, it will be mandatory for plan members to go through the Plan's Carrum Health benefit when receiving total and partial hip and knee replacement surgery. Surgery expenses for these joint replacements will be fully covered at Spectrum Orthopedics, for plan members and dependents ages 18+ when going through Carrum Health. Information about limited exceptions and prior authorization may be obtained through Carrum Health.

How It Works

Carrum Health gives you peace of mind from start to finish.

- 1. Activate your account:** Answer a few questions about your health history, read profiles of surgeons, and get a detailed estimate of out-of-pocket costs, if any.
- 2. Meet your care specialist virtually:** A dedicated care specialist will reach out to walk you through the process, learn about you and your goals, and answer all of your questions.
- 3. Relax as Carrum plans your surgery:** After learning about you and your goals, your care specialist will gather your medical records, submit forms to your surgeon, and plan travel for you and your loved one, if necessary. You'll also meet with your surgeon in person or virtually to ensure surgery is absolutely medically necessary.
- 4. Receive world-class care:** You'll be in the best hands on the day of your surgery and after everything is finished and you've recovered, you'll walk away feeling a whole lot stronger and healthier.
- 5. Never get a medical bill:** The Carrum Health benefit covers all of the medical costs related to your procedure so you won't ever need to deal with copays or coinsurance.

Get Started Today

Go to my.carrumhealth.com/stateofmaine to get started or visit carrumhealth.com to learn more and view frequently asked questions. You can also learn more by calling **1-888-855-7806**.

Hinge Health

Conquer back and joint pain without drugs or surgery.

You and your eligible family members (employees and dependents 18+ enrolled in a State of Maine medical plan) get free access to Hinge Health's programs for back, knee, hip, shoulder, neck, and other pain, which may include:

- Wearable sensors for live feedback in the app
- Support from a personalized care team, such as physical therapists and health coaches
- Personalized exercise therapy

Over 300,000 members have joined our programs so far, and cut their pain by nearly 70%!

Learn More & Apply

To learn more call **855-902-2777**, or apply at hingehealth.com/stateofmaine/oe.

Cancer Support from Dana-Farber Direct Connect

When you are faced with a possible diagnosis of cancer, Dana-Farber Direct Connect is there to provide support and dedicated care coordination during your diagnosis and treatment.

Their patient liaisons will help find the right specialist, arrange an appointment tailored to your individual situation, and make sure you have what you need throughout your experience at Dana-Farber.

Dana-Farber Direct Connect is offered to all employees, dependents and retirees of the State of Maine.

Contact Dana-Farber

1-866-977-3262

directconnect@dfci.harvard.edu

dana-farber.org/dana-farber-direct-connect-at-state-of-maine



Dental

Good oral health contributes to your overall wellbeing. Our Dental Plan administered by Northeast Delta Dental helps you and your family maintain a healthy mouth. The level of benefit coverage provided by the plan is based on reasonable and customary charges. If your provider charges more than what the insurance allows, you may be responsible for the difference (aka “balance billing”).

Plan Details	Dental Plan		
	You Pay State of Maine PPO Network	You Pay Delta Dental Premier Network	You Pay Out-of-Network
Calendar Year Deductible Per Person / Family	\$25 / \$75 (does not apply to preventive services)		
Calendar Year Maximum Per Person	\$1,500	\$1,250	\$900
Services			
Preventive & Diagnostic (e.g. cleanings)	Fully covered	Fully covered	10%
Basic Restorative (e.g. fillings)	10%	20%	30%
Major Restorative (e.g. caps and crowns)	40%	50%	60%
Orthodontics (adult & child) (e.g. braces)	40%	50%	60%
Orthodontic Lifetime Maximum	\$1,500	\$1,200	\$900

Dental Plan Employee Contributions (Biweekly)

	Dental Plan
Employee	\$0 (no cost to you)
Employee + 1	\$11.50
Employee + 2 or more	\$35.34

Double-Up Max Carryover Benefit

With this benefit, you may increase your annual maximum by accumulating \$250 a year in additional benefits for use in future coverage periods.

To qualify, you must have a claim paid for either: oral exam OR cleaning AND total paid claims cannot exceed \$500 during that year.

- **PPO:** You can accumulate up to \$2,200
- **Premier:** You can accumulate up to \$2,000
- **OON:** You can accumulate up to \$1,900

Dental Wellness Benefit

The Health Through Oral Wellness (“HOW”) program is available to plan members. Ask your dentist or hygienist about a free HOW assessment; you may be eligible for additional services at no cost!

EyeMed Vision Discount

EyeMed Vision Discount Program is offered to all Northeast Delta Dental plan members at no cost! Save up to 35% off eyewear!

Visit nedelta.com/patients/eyemed-discounts for more information.

Vision

Eye exams can tell your doctor a lot about your overall health. It's important to schedule regular exams to help detect significant medical conditions before they become serious. This year, supplemental vision services will be administered through Aetna Vision Preferred, and provides coverage towards prescription glasses and/or contact lenses.

Plan Details	Vision Plan	
	You Pay In-Network	You Pay Out-of-Network
Services (once every 2 calendar years)		
Exams & Materials Exams Materials	\$15 copay	\$48 allowance
Frames	\$150 allowance, then 20% off any remaining balance	\$64 allowance
Lens Enhancements Transitions Standard polycarbonate Factory scratch coating	No additional cost	Not covered
Lenses Single Vision Bifocal Trifocal	\$15 copay, then covered in full	\$36-\$69 allowance
Contact Lenses Non-elective Elective conventional Elective disposable 1-800-CONTACTS	Covered in full \$150 allowance ¹ \$150 allowance \$185 allowance	\$210 allowance \$105 allowance \$105 allowance N/A

1. \$150 allowance, then 15% off any remaining balance

Additional Options

In-network coverage for optional lens upgrades, additional eyeglasses, and more can be found at maine.gov/bhr/oe.

Additional optional products and services are not covered.

Vision Plan Employee Contributions (Biweekly)

	Vision Plan
Employee	\$2.40
Employee + 1	\$3.84
Employee + 2 or more	\$6.25



Flexible Spending Accounts

We offer two types of flexible spending accounts (FSAs) administered by P&A that can help you save on a pre-tax basis for out-of-pocket expenses. FSAs are a great way to plan ahead and save money over the course of a year.

Healthcare FSA

You may contribute up to \$3,050 per calendar year (pre-tax deduction) for eligible healthcare expenses such as medical copay, deductibles, prescriptions, dental and vision care service, and more. Visit [irs.gov](https://www.irs.gov) to view a full list of eligible expenses.

P&A will issue a debit MasterCard that allows access to your Healthcare FSA funds. Just use the P&A debit MasterCard to pay for eligible healthcare expenses.

Dependent Care FSA

You may contribute up to \$5,000 per calendar year (\$2,500 if married, but filing a separate tax return) of your income or your spouse's earned income, whichever is less, for eligible dependent care expenses (pre-tax deduction).

Eligible expenses include daycare expenses, before and after school care, nursery care, day camps, elder care, and more. Visit [irs.gov](https://www.irs.gov) to view a full list of eligible expenses.

Remember

Unlike your other health insurance benefits, your FSA benefit runs on a calendar year basis (Jan 1 - Dec 31). You must re-enroll each year if you want to participate. Be sure to make your selection for a FSA during open enrollment or when you enroll in benefits.



Retirement

Save and invest for your retirement by contributing pre-tax to the MaineSaves 457(b) Deferred Compensation Plan. You choose how much to set aside and where you'd like to invest your funds within the Plan. You do not pay taxes on your funds invested or the investment earnings until you take a distribution from the Plan (e.g. after retirement).

Investment Options

The MaineSaves 457(b) Plan offers three providers to choose from: Corebridge Financial, Empower and Voya provide a variety of the investment options. Your payroll contributions will be sent directly to the provider you've selected. Local representatives are available to assist you. Visit [maine.gov/bhr/oe/benefits/Saving for Retirement](https://maine.gov/bhr/oe/benefits/Saving_for_Retirement) for more information.

Contribution Limits

The IRS sets the annual contribution limit. Participants age 50 and older and those within 3 years of normal retirement age may contribute an additional amount. Contact one of the local representatives with AIG Retirement Services, Empower or Voya for assistance.

How To Enroll

Visit [maine.gov/bhr/oe/benefits/Saving for Retirement](https://maine.gov/bhr/oe/benefits/Saving_for_Retirement).

Plan Details	Annual Contribution Limits (1/1/2023-12/31/2023)
Regular	\$22,500
Age 50 Catch-Up	\$30,000
Pre-Retirement Catch-Up	\$45,000 ¹

1. Special calculation required.



Additional Programs

Living Resources Program

All State of Maine employees and their household members are eligible for the Living Resources Program (LRP). The Program offers counseling services, legal & financial information, work-life solutions and online support. These services are also extended to members of your household at no cost to you and are available 24/7.

- **Counseling Services** - LRP can help you connect with a local counselor for you to meet with in- person. You are eligible for 5 counseling visits per year.
- **Wellness Coaching** - LRP health coaching helps you make positive lifestyle changes for weight management, tobacco and nicotine cessation, back care and more.
- **Financial Information, Legal Support & Resources** - Speak with an attorney or financial expert for assistance with issues such as family law, retirement planning, taxes, budgeting and more!
- **Work-Life Solutions** - LRP specialists can provide qualified referrals for services such as finding child- care, hiring movers, planning events, etc. Make your to-do list a little easier on yourself!
- **Online Support** - GuidanceResources Online, the LRP website, includes a wide variety of tools and re- sources including articles, podcasts, videos, etc.
- **Free Online Will Preparation** - Estate Guidance lets you quickly and easily create a will online.

Use the LRP Today

The Living Resources Program is available 24/7 and available to you and your family members at no cost.

1-844-207-5465

[guidanceresources.com](https://www.guidanceresources.com)

Web ID: LivingME

You can also download the GuidanceResources Now mobile app in your app store.

Gym Membership Reimbursement Program

The State of Maine will reimburse up to \$40 per month towards a gym membership fee for a qualified gym. Reimbursements are made quarterly.

Note: gym attendance and proof of payment required.

The gym membership reimbursement is considered taxable income. Steps to participate and request forms can be found at maine.gov/bhr/oe/wellness.



Money-Saving Tips

Here's a list of money-saving tips to help you spend your healthcare dollars wisely.

- Receive care from health, dental & vision providers within the plan's network for lower copays and coinsurance
- Did you know many medical services are covered 100% (in network)? They include, but not limited to:
 - Tests performed at independent labs
 - Some services provided by independent imaging facilities
 - Preventive cancer screenings (e.g. mammograms, colonoscopies, etc.)
 - Vaccines
 - Routine physicals and eye exams
 - Explore surgical options provided by an ambulatory surgery center or Carrum Health
- Use Emergency Room alternatives (when appropriate). Visit a Maine-based walk-in clinic (\$25 copay), call Anthem's 24/7 NurseLise (no cost) or have a video visit with a network doctor or therapist with LiveHealth Online (no cost).
- Shop around for medical services using cost comparison tools such as [CompareMaine.org](https://www.comparemaine.org)
- Ask your provider for a 90-day prescription for medications you take on a regular basis; this will save you money on your copays at the pharmacy.
- Participate in the Health Credit Premium Program for lower premium cost
- Open a tax-free medical flexible spending account for known medical, dental & vision expenses
- Take advantage of wellness resources like the gym membership reimbursement program
- Take care of your mental health with the Living Resources Program provided at no cost to you



Contacts

Medical

Anthem Blue Cross and Blue Shield

1-844-273-4614

1-888-671-4333 (TTY)

1-800-607-3262 (24/7 NurseLine)

anthem.com

24/7 Nurseline

Call the number located on the back of your ID card.

Carrum Health

1-888-885-7806

my.carrumhealth.com/stateofmaine

Pharmacy

MedImpact

1-877-391-1099

customerservice@medimpact.com

medimpact.com

Livongo Diabetes Management

1-800-945-4355

welcome.livongo.com/stateofme

Wellness

Living Resources Program

1-844-207-5465

guidanceresources.com

Web ID: LivingME

Gym Membership

Reimbursement Program

1-800-422-4503

maine.gov/bhr/oeht

WellStarME

1-207-620-9202

wellstarme.org

Dental

Northeast Delta Dental

1-800-832-5700

1-800-332-5905 (TTY)

nedelta.com

Vision

Aetna Vision Preferred

1-877-973-3238

<https://www.aetnavision.com/aetna/en>

State of Maine

Office of Employee Health & Wellness

61 State House Station
Augusta, ME 04333-0061

Hours: Mon-Fri 8:00-4:30

(207) 624-7380

1-800-422-4503 (toll free)

info.benefits@maine.gov

maine.gov/bhr/oeht/benefits

Flexible Spending Accounts

P&A Group

1-800-688-2611

padmin.com

Retirement

MaineSaves 457(b)

1-800-422-4503

maine.gov/bhr/oeht/benefits/

[Saving for Retirement](#)



The descriptions of the benefits are not a guarantee of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official plan documents will govern.

