



DC Government Employee Benefits Guide 2025





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Welcome



Are you enrolling in your employee benefits for the first time or making changes to your current benefits?

The following sections contain information on your DC Government employee benefits, including:

- Available Benefits
- Premium Rates
- Enrollment
- Wellness Resources
- Contact Information



About this Guide

The DC Department of Human Resources (DCHR) manages benefits programs that enable the District to attract, support and retain a well-qualified and diverse workforce. DCHR is committed to providing the highest level of customer care in administering employee benefits.

This guide provides comprehensive information about your benefits as a DC Government employee. Use this guide as your go-to resource for:

- Enrolling in benefits for the first time
- Making changes or updating your benefits during Open Enrollment or a qualifying life event
- Learning more about your benefits throughout the year

Disclaimer

This Guide is not a contract. Its purpose is to provide summary information about employee benefits. It does not fully describe each benefit. Please refer to the Summary Plan Descriptions and benefits provider materials for details of each benefit. Every effort has been made to ensure that the information contained in this Guide is accurate. The provisions of the actual contract will govern in the event of a discrepancy.

Enrollment

- Federal Employee Health Benefits
- District of Columbia Employee Health Benefits
- Open Enrollment 2025
- What's New for 2025
- How to Enroll
- ALEX, the Virtual Benefits Counselor



Enrollment

DISTRICT OF COLUMBIA EMPLOYEE HEALTH BENEFITS PROGRAM (DCEHB)

Benefits for Employees Hired On or After October 1, 1987

- Review the changes for 2025, so you understand how they impact your benefits for the coming plan year.
- Review your current benefit choices. Ask yourself, “does this coverage meet my expected needs?” If not, “what should I change?”
- Log in to Employee Self Service at <https://ess.dc.gov> to enroll in new plans or make changes to your current coverage.

Outside of the regular enrollment period, you can only change your benefits if you experience a *qualified life event*.

Qualified life events include:

- Marriage, divorce or legal separation
- Birth or adoption
- A dependent that becomes ineligible for coverage
- Death of your dependent
- Loss/gain of coverage elsewhere for employee or spouse/domestic partner
- Change in work status for you or your spouse/domestic partner



Enrollment

FEDERAL EMPLOYEE HEALTH BENEFITS PROGRAM (FEHB)

Benefits for Employees First Hired Before October 1, 1987

- Enroll in a flexible spending account, a health care and/or dependent care account under the Federal Flexible Spending Account Program (FSAFEDS). **Employees MUST reenroll in FSAFEDS each year to participate. Enrollments DO NOT carry over from year to year.**

Please Note: The maximum annual election for a Health Care Flexible Spending Account and the Limited Expense Health Care Flexible Spending Account is \$3,300 for the 2025 Benefit Period. The maximum annual election for a Dependent Care Flexible Spending Account is \$5,000 for the 2025 Benefit Period. The minimum annual election for the flexible spending accounts is \$100 for the 2025 Benefit Period.

- Enroll in, change, or cancel an existing enrollment in a dental plan under the Federal Employees Dental Vision Program (FEDVIP) Program.
- Enroll in, change, or cancel an existing enrollment in a vision plan under the FEDVIP Program.
- Enroll in, change, or cancel an existing enrollment in a health plan under the FEHB Program.

2025 Premium Rates for Federal Employees

2025 FEHB and FEDVIP premium rates and enrollment forms can be found on the US Office of Personnel Management (OPM) website at www.opm.gov/insure.



Enrollment

WHAT'S NEW FOR 2025

CareFirst CDHP Plan

DC Government employees and their eligible family members can choose the CareFirst CDHP plan, which offers low premiums but higher deductibles and out-of-pocket limits. This allows pre-tax spending on healthcare services, providing more control over expenses. Often paired with a Health Savings Account (HSA), CDHPs enable informed healthcare choices and tax-free savings for medical costs. Learn more at CareFirst CDHP plan documents web page.

Pre-Tax Contribution Limit for HSA Contribution Limit

- The 2025 limit for Health Savings Accounts (HSA) individual coverage is **\$4,300**.
- The 2025 limit for Health Savings Accounts (HSA) family coverage is **\$8,550**.

Please Note: HSA contributions are only for employees enrolled in the Aetna or CareFirst CDHP health insurance plan. Learn more at the respective CDHP ([Aetna](#) or [CareFirst](#)) plan documents web page.



Enrollment

Pre-Tax Contribution Limit for Health Care FSAs

The 2025 pre-tax contribution limit for Health Care Flexible Spending Accounts (FSA) is **\$3,300**. Deductions start with the pay period that begins on **December 15, 2024**. Learn more on [page 35](#).

Pre-Tax Commuter Benefit Limits

The 2025 maximum monthly pre-tax contribution limit for mass transit and parking is **\$325**. Deductions start with the pay period that begins on **December 15, 2024**. Learn more on [page 36](#).

Retirement Plan Contribution Limits

- The 2025 elective deferral limit for 457(b) plans is **\$23,500**.
- The 2025 Age 50 Catch-Up Limit is **\$7,500** (\$31,000 total)
- Depending on your unused deferrals, you can contribute up to “twice the maximum deferral” for pre-retirement catch-up three years prior to retirement.

Deductions start with the pay period that begins on **December 15, 2024**. Learn more on [page 37](#).



Enrollment

HOW TO ENROLL

Enrollment changes can be made through Employee Self Service (ESS). You can access ESS on any computer with an internet connection at <https://ess.dc.gov>.

The DC College Savings Plan is **not available** for enrollment through ESS. Learn more on [page 37](#).

Coverage Effective Dates

Open Enrollment 2025

Open Enrollment for 2025 employee benefits begins Monday, November 11, 2024 and ends Monday, December 9, 2024.

- For employees paid biweekly, changes made during Open Enrollment will be effective **January 12, 2025**.
- For employees paid semi-monthly (some DCPS and UDC), changes made during Open Enrollment will be effective **January 1, 2025**.

Outside of Open Enrollment

- Elections made within 31 days of new hire or a qualifying life event will be effective following the first pay period in which a payroll deduction is made to pay for the benefit.
- Flexible Spending Account (FSA) coverage begins following the first pay period in which a payroll deduction was made to pay for the benefit.

Contact the DCHR Benefits & Retirement Administration

Monday through Friday; 8:30 a.m. to 5:00 p.m.

- 202.442.7627
- dchr.benefits@dc.gov



Enrollment

ALEX, THE VIRTUAL BENEFITS COUNSELOR



Find the great-fit benefit plans you and your family will love with ALEX®, the virtual benefits counselor. ALEX is an easy-to-use online tool that will help you get the right amount of coverage for your needs. ALEX will ask questions about your health care needs (your answers remain anonymous) and educate you about the plans that are the best fit. Even if you're happy with your current plan, it's worth it to use ALEX to make sure you're not paying too much.

How long does it take go through ALEX?

Most users spend about 7 minutes with ALEX, but the actual duration will depend on your needs. Also, you can always save your place in ALEX and return later simply by providing your email address.

How can I make the most of my ALEX experience?

ALEX is best experienced on a desktop computer with sound (either headphones or speakers), but you can also use it on an Android or iOS (Apple) mobile devices.

How does ALEX calculate recommendations?

ALEX estimates the total yearly out-of-pocket costs (your premium contributions and the costs for the services you plan to use) for each plan and suggests plans with the lowest overall cost to you based on your personal preferences. ALEX's cost data is based on health insurance plan design features and average procedure cost data.

Visit ALEX at <https://start.myalex.com/dchr>.



Benefits at a Glance

- Eligibility
- Dependents
- Medical
- Dental
- Vision
- Premium Rates





Benefits at a Glance

ELIGIBILITY

DC Government employees eligible to receive benefits include:

- All full-time permanent employees
- Part-time permanent employees who generally work at least 30 hours per week
- Employees with temporary full-time appointments of at least 13 months who are employed by agencies under personnel authority of the Mayor
- Temporary and intermittent employees who work for at least 90 days within a 12-month evaluation period and are paid at least 30 hours per week (or 120 hours per month) are **eligible to only participate in an HMO health care plan**

DEPENDENTS

You are required to provide documentation to verify coverage eligibility for the dependents that you add during Open Enrollment. You must also submit dependent eligibility verification. Failure to comply will result in a cancelation of health care coverage for that dependent.

For more on enrolling dependents, including your spouse, state-registered domestic partner or legal union partner, child(ren) and/or foster child(ren), please visit <http://dchr.dc.gov/page/dependent-eligibility-verification>.



Benefits at a Glance

MEDICAL BENEFITS

District of Columbia Employee Health Benefits Program (DCEHB)

- For all employees hired on or after October 1, 1987.
- The cost is shared by the employee and the District.
- All employees must pay employee contribution premiums.

Learn more at <http://dchr.dc.gov/page/employee-benefits>.

Health Care Providers & Plans

- Aetna HMO, PPO or CDHP
- Carefirst HMO, PPO or CDHP
- Kaiser Permanente HMO
- UnitedHealthcare HMO or PPO

Dependent Coverage

Family members eligible for coverage under Self Plus One or Self and Family enrollment are your spouse (including a valid common law marriage) and **children under age 26**, including legally adopted children, recognized natural children and stepchildren (including children of same-sex domestic partners).

A child is eligible for coverage under your Self Plus One enrollment (if they are the designated covered family member) or Self and Family enrollment, if a state-issued birth certificate lists you as a parent of that child. Under certain circumstances, you may also continue coverage for a disabled child 26 years of age or older who is incapable of self-support.

For more information, please visit <http://dchr.dc.gov/page/dependent-eligibility-verification>.



Benefits at a Glance

2025 PREMIUM RATES: MEDICAL

Biweekly Employee Premium Contribution Rates

	Aetna CDHP	Aetna HMO	Aetna PPO	CarefirstCDHP	Carefirst HMO	Carefirst PPO	Kaiser Permanente	UHC HMO	UHC PPO
Self Only	\$52.33	\$135.67	\$130.28	\$50.56	\$100.28	\$110.72	\$93.83	\$118.36	\$116.68
Self +1	\$102.86	\$268.44	\$256.08	\$96.57	\$197.56	\$211.47	\$179.22	\$226.07	\$222.86
Family	\$151.21	\$389.44	\$376.47	\$148.15	\$289.82	\$324.40	\$274.91	\$346.79	\$341.87

Learn more at <http://dchr.dc.gov/page/employee-benefits>.





Benefits at a Glance

2025 PLAN RATES: DENTAL

- Provider: Cigna Dental
- **Dental HMO:** Available at **no cost** to employees; the District pays 100% of premium costs.
- **Dental PPO:** The District pays a portion of premium costs.

Dependent Coverage

Eligible family members include your spouse and unmarried, dependent **children under age 26**. This includes legally adopted children and recognized natural children who meet certain dependency requirements. This also includes stepchildren and foster children who live with you in a regular parent-child relationship.

For more information, please visit <http://dchr.dc.gov/page/dependent-eligibility-verification>.

Biweekly Employee Premium Contribution Rates

	Cigna DPP0	Cigna DHMO
Self Only	\$26.71	\$0.00
Self +1	\$37.91	\$0.00
Family	\$49.16	\$0.00

Learn more at <http://dchr.dc.gov/page/employee-benefits>.





Benefits at a Glance

2025 PLAN RATES: VISION

- Provider: VSP Vision Care.
- Vision coverage is available at **no cost** to eligible employees.
- The District pays 100% of the vision premium.

Learn more at <http://dchr.dc.gov/page/employee-benefits>.



Dependent Coverage

Eligible family members include your spouse and unmarried, dependent **children under age 26**. This includes legally adopted children and recognized natural children who meet certain dependency requirements. This also includes stepchildren and foster children who live with you in a regular parent-child relationship.

For more information, please visit <http://dchr.dc.gov/page/dependent-eligibility-verification>.

Benefits You Can Enroll In

- New Hire
- Qualifying Life Event
- Open Enrollment
- Voluntary Coverage Available for Enrollment in at Anytime





Benefits You Can Enroll In

BENEFITS YOU CAN ENROLL IN: NEW HIRE, QUALIFYING LIFE EVENT, OPEN ENROLLMENT

Benefit	Options	Who Pays	How to Enroll
Medical	<ul style="list-style-type: none"> Aetna HMO, PPO or CDHP Carefirst HMO, PPO or CDHP Kaiser Permanente HMO UnitedHealthcare HMO or PPO 	<ul style="list-style-type: none"> You pay a portion of the cost of coverage; the remaning cost is shared with the District. Premiums are deducted from your paycheck on a pre-tax basis. 	PeopleSoft
Health Savings Accounts (HSAs)	<ul style="list-style-type: none"> Consumer Driven Health Plan Savings Account (CDHP HSA)*. 	<ul style="list-style-type: none"> Contributions are deducted from your paycheck on a pre-tax basis. 	PeopleSoft <i>*Must be enrolled in a CDHP plan to be eligible.</i>
Dental	<ul style="list-style-type: none"> Cigna DHMO Cigna DPPO 	<ul style="list-style-type: none"> DHMO is 100% employer paid. You pay a portion of the cost of coverage for the DPPO. Premiums are deducted from your paycheck on a pre-tax basis. 	PeopleSoft
Vision	<ul style="list-style-type: none"> VSP Vision Care 	<ul style="list-style-type: none"> 100% employer paid. 	PeopleSoft
Life	<ul style="list-style-type: none"> The Standard Insurance Company 	<ul style="list-style-type: none"> You pay 2/3 the total cost of the monthly premium; the District pays the remaining 1/3. Optional upgrades are available 	PeopleSoft <i>*Only Available for New Hires</i>
Disability	<ul style="list-style-type: none"> The Standard Insurance Company <ul style="list-style-type: none"> Short Term Long Term 	<ul style="list-style-type: none"> You pay the full cost of coverage. Premiums are deducted from your paycheck on an after-tax basis. 	PeopleSoft




Benefits You Can Enroll In

Benefit	Options	Who Pays	How to Enroll
Supplemental Indemnity	<ul style="list-style-type: none"> Aflac <ul style="list-style-type: none"> BenExtend Critical Illness Hospital Indemnity Accident Insurance 	<ul style="list-style-type: none"> You pay the full cost of coverage. Premiums are deducted from your paycheck. 	PeopleSoft
Flexible Spending Accounts (FSAs)	<ul style="list-style-type: none"> Benefit Resource, Inc. <ul style="list-style-type: none"> Health Care FSA Dependent Care FSA 	<ul style="list-style-type: none"> Contributions are deducted from your paycheck on a pre-tax basis. 	PeopleSoft

BENEFITS YOU CAN ENROLL IN ANYTIME

Benefit	Options	Who Pays	How to Enroll
Retirement	<ul style="list-style-type: none"> 457(b) Deferred Compensation Plan 	<ul style="list-style-type: none"> Contributions are deducted from your paycheck on a pre-tax basis. 	PeopleSoft
Commuter	<ul style="list-style-type: none"> Benefit Resource, Inc. <ul style="list-style-type: none"> Transit Parking 	<ul style="list-style-type: none"> Contributions are deducted from your paycheck on a pre-tax basis. 	PeopleSoft
College Savings Plan	<ul style="list-style-type: none"> DC College Savings Plan (Section 529) 	<ul style="list-style-type: none"> Contributions are made by Direct Deposit. 	Outside of PeopleSoft/ <i>Enroll directly online</i>
Employee Assistance Plan	<ul style="list-style-type: none"> Inova EAP 	<ul style="list-style-type: none"> 100% employer paid for the first five sessions. 	Automatically Enrolled

Wellness Resources



The District Government's Workplace Wellness Plan provides the foundation for District agencies to develop activities, work environments and policies that support employee health and well-being.

- Workplace Wellness
- Health Care Plan Resources



Wellness Resources

Workplace Wellness

The District of Columbia Government believes healthy, productive employees are the cornerstone of a robust, efficient workforce. DCHR is committed to the improvement of employee health and well-being through balanced, effective combinations of wellness programs and insurance benefits to support a healthy workforce.

DCHR's workplace wellness policy addresses the following priorities:

- Preventing, detecting and reducing modifiable risk factors for chronic conditions most affecting employees.
- Employee quality of life and healthy workplace culture
- Health care costs

In partnership with health care vendors, DCHR coordinates regular on-demand and onsite health and wellness seminars, weight-loss and smoking cessation programs, cooking demonstrations, fitness classes and more at agency worksites across the District.

Health Care Provider Resources

If you enroll in a District Government health care plan, you have access to wellness resources through your plan provider, including programs that can help you:

- Quit smoking
- Increase your physical activity and fitness level
- Improve your diet and nutrition
- Maternity

In addition, disease-management programs offer support and resources to help manage chronic conditions, including:

- Diabetes
- Heart disease
- High blood pressure

For more information, visit <http://dchr.dc.gov/page/employee-wellness>.

Benefits Overview

Your benefits are an important part of your overall compensation. The District of Columbia Government offers a comprehensive benefits package that supports and protects your health, wellbeing, family, finances and lifestyle.

- Medical
- Dental
- Vision
- Life & Disability Insurance
- Work & Life
- Retirement
- Leave



Health Benefits

MEDICAL BENEFITS

District of Columbia Employee Health Benefits Program (DCEHB)

Eligible employees hired on or after October 1, 1987 have the following health plan choices:

- Aetna HMO, PPO or CDHP
- Carefirst HMO, PPO or CDHP
- Kaiser Permanente HMO
- UnitedHealthcare HMO or PPO

Your health insurance premium cost is shared with the District, which contributes up to 75 percent toward the total cost. All health insurance premium deductions are made on a pre-tax basis, unless a specific Pre-Tax Benefits Waiver Form is requested. The waiver is available online at <http://dchr.dc.gov>.

Dependent Coverage

Dependents eligible for coverage under Self Plus One or Self and Family enrollment are your spouse (including a valid common law marriage) and **children under age 26**, including legally adopted children, recognized natural children and stepchildren (including children of same-sex domestic partners).

A child is eligible for coverage under Self Plus One enrollment (if they are the designated covered family member) or Self and Family enrollment if a state-issued birth certificate lists you as a parent of that child. Under certain circumstances, you may also continue coverage for a disabled child 26 years of age or older who is incapable of self-support.

For more information, please visit <http://dchr.dc.gov/page/dependent-eligibility-verification>.

Health Benefits

PLAN COMPARISONS AT A GLANCE

Benefit	Aetna CDHP	Aetna HMO	Aetna PPO	CareFirst CDHP	CareFirst HMO	CareFirst PPO	Kaiser Permanente	UHC HMO	UHC PPO
In-Network Calendar-Year Deductible									
Employee Only	\$1,650	None	\$750	\$1,650	None	\$750	None	None	\$750
Family	\$3,300	None	\$1,500	\$3,300	None	\$1,500	None	None	\$1,500
Out-of-Pocket Maximum (per calendar year) *Please Note: Some benefits do not apply toward the out-of-pocket maximum.									
Employee Only	\$3,425	\$3,500	\$1,500	\$3,425	\$3,500	\$1,500	\$3,500	\$3,500	\$1,500
Family	\$6,850	\$9,400	\$3,000	\$6,850	\$9,400	\$3,000	\$9,400	\$9,400	\$3,000
Inpatient Services									
Inpatient Hospital	85% after deductible	\$100 copay per admission	85% after deductible	\$300 copay per admission after deductible	\$100 copay per admission	85% after deductible	\$100 copay per admission	\$100 copay	85% after deductible
Hospice Care	85% after deductible	100% (no visit limit)	85% after deductible	\$300 copay per admission after deductible	100% (180 day limit per year)	85% after deductible (180 day limit per year)	100% (no visit limit)	100% (no visit limit)	85% after deductible
Skilled Nursing Facility	85% after deductible (60 day limit per year)	\$100 copay	85% after deductible (60 day limit per year)	\$300 copay per admission after deductible	\$100 copay per admission	85% after deductible (60 day limit per year)	\$100 copay per admission	\$100 copay (60 day limit per year)	85% after deductible (60 day limit per year)
Outpatient Services									
PCP Office Visits	85% after deductible	\$10 copay	\$15 copay	\$30 copay per admission after deductible	\$10 copay	\$15 copay	\$10 copay	\$10 copay Covered persons less than age 19 No copay	\$15 copay Covered persons less than age 19 No copay
Specialist Office Visits	85% after deductible	\$20 copay	\$15 copay	\$30 copay after deductible	\$20 copay	\$15 copay	\$20 copay	\$20 copay	\$15 copay
Virtual/Video Visits	85% after deductible	\$10 copay for PCP; \$20 copay for Specialist	\$15 copay	\$30 copay after deductible	\$10 copay for PCP; \$20 copay for Specialist	\$15 copay	No charge	No charge when using designated virtual visit network. \$10 PCP/\$20 specialist	No charge when using designated virtual visit network. \$15 PCP/\$15 specialist



Health Benefits

Benefit	Aetna CDHP	Aetna HMO	Aetna PPO	CareFirst CDHP	CareFirst HMO	CareFirst PPO	Kaiser Permanente	UHC HMO	UHC PPO
<i>Outpatient Services, cont.</i>									
X-rays, Lab Tests	85% after deductible	100%	Covered 100% if part of an office visit; 85% after deductible otherwise	85% after deductible	100%	85% after deductible	100%	100%	85% after deductible
Routine Exams	100%	100%	100%	100%	100%	100%	100%	100%	100%
Routine Immunization	100%	100%	100%	100%	100%	100%	100%	100%	100%
Preventive Care	100%	100%	100%	100%	100%	100%	100%	100%	100%
Outpatient Surgery (plan facility)	85% after deductible	\$50 copay	85% after deductible	\$30 copay after deductible	\$50 copay	85% after deductible	\$50 copay	\$50 copay	85% after deductible
Short-Term Rehab (physical, occupational or speech therapy)	85% after deductible (60 visit limit per year)	\$10 copay	85% after deductible	\$30 copay after deductible	\$10 copay	85% after deductible	\$20 copay	\$10 copay (60 visit limit per year)	85% after deductible
Chiropractic Care	85% after deductible (20 visit limit per year)	\$10 copay; (20 visit limit per year)	85% after deductible (no visit limit)	\$30 copay after deductible	\$10 copay	85% after deductible	\$20 copay (20 visit limit per year)	\$10 copay (60 visit limit per year)	85% after deductible
Acupuncture	85% after deductible (10 visit limit per year)	\$10 copay; (10 visit limit per year)	\$15 copay (10 visit limit per year)	\$30 copay after deductible	Not Covered (except when approved or authorized by Plan for Anesthesia)	85% after deductible (when approved or authorized by Plan for Anesthesia)	\$20 copay (20 visit limit per year)	\$20 copay (12 visit limit per year)	\$15 copay (10 visit limit per year)
Home Health Care	85% after deductible (60 visit limit per year)	100%	85% after deductible (90 visit limit per year)	\$30 copay after deductible	100%	85% after deductible	100%	100% (60 visit limit per year)	85% after deductible (90 visit limit per year)



Health Benefits

Benefit	Aetna CDHP	Aetna HMO	Aetna PPO	CareFirst CDHP	CareFirst HMO	CareFirst PPO	Kaiser Permanente	UHC HMO	UHC PPO
Emergency Services									
Emergency Room Services & Supplies	85% after deductible	\$100 copay, waived if admitted	\$100 copay, waived if admitted	\$300 copay per admission after deductible (copay waived if admitted)	100% (\$100 copay waived if admitted)	100% (\$100 copay waived if admitted)	\$50 copay	\$100 copay per admission (copay waived if admitted)	\$100 copay per admission (deductible does not apply)
Ambulance	85% after deductible	100%	100%; deductible waived	\$30 copay per admission after deductible	100%	100%	100%	100%	85% after deductible
Maternity Care									
Office Visits (mother)	100%	100%	100%	100%	100%	100%	No Charge	100% (after initial diagnosis of pregnancy)	100% (after initial diagnosis of pregnancy)
Hospital (mother)	85% after deductible	\$100 copay	85% after deductible	\$300 copay per admission after deductible (copay waived if admitted)	\$100 copay per admission	85% after deductible	\$100 copay	\$100 copay	85% after deductible
Office Visits (infant)	Routine 100% deductible waived	Routine covered at 100%	Routine 100% deductible waived	Routine 100%	100%	85% after deductible	\$10 Copay (waived for children under age 5); Specialist is \$20	100%	100%
Medical Equipment									
Durable Medical Equipment	85% after deductible	50%	85% after deductible	\$30 copay per admission after deductible	50% of allowed	85% after deductible	50%	50% (deductible does not apply)	85% after deductible



Health Benefits

Benefit	Aetna CDHP	Aetna HMO	Aetna PPO	CareFirst CDHP	CareFirst HMO	CareFirst PPO	Kaiser Permanente	UHC HMO	UHC PPO
Mental Health									
Inpatient Care	85% after deductible	\$100 copay	85% after deductible	\$300 copay per admission after deductible	\$100 copay per admission	85% after deductible	\$100 copay per admission	\$100 copay per admission (deductible does not apply)	85% after deductible
Outpatient Care	85% after deductible	\$5 copay	\$5 copay	\$30 copay per admission after deductible	\$10 copay	\$15 Copay	Individual: \$10 per visit; Group: \$5 per visit	\$10 copay per admission (deductible does not apply)	\$15 copay per admission (deductible does not apply)
Substance Abuse									
Inpatient Care	85% after deductible	\$100 copay	85% after deductible	\$300 copay per admission after deductible	\$100 copay per admission	85% after deductible	\$100 copay per admission	\$100 copay per admission (deductible does not apply)	85% after deductible
Outpatient Care	85% after deductible	\$5 copay	\$5 copay	\$30 copay per admission after deductible	No Charge	No Charge	Individual: \$10 per visit; Group: \$5 per visit	\$10 copay per admission (deductible does not apply)	\$15 copay per admission (deductible does not apply)
Prescription Drugs									
Generic	Retail: \$10 copay (after deductible); Mail Order: \$20 copay (after deductible)	\$20 copay (Retail & Mail Order)	\$20 copay (Retail & Mail Order)	\$20 copay after deductible	\$20 copay	\$20 copay	Kaiser \$10 copay; Participating Pharmacies \$20 copay	Retail: \$20 copay; Mail Order: \$16 copay	Retail: \$20 copay; Mail Order: \$20 copay
Preferred Brand	Retail: \$30 copay (after deductible); Mail Order: \$60 copay (after deductible)	\$40 copay (Retail & Mail Order)	\$40 copay (Retail & Mail Order)	\$40 copay after deductible	\$40 copay	\$40 copay	Kaiser \$20 copay; Participating Pharmacies \$40 copay	Retail: \$40 copay; Mail Order: \$36 copay	Retail: \$40 copay; Mail Order: \$40 copay
Non-Preferred Brand	Retail: \$60 copay (after deductible); Mail Order: \$120 copay (after deductible)	\$55 copay (Retail & Mail Order)	\$55 copay (Retail & Mail Order)	\$55 copay after deductible	\$55 copay	\$55 copay	Kaiser \$35 copay; Participating Pharmacies \$55 copay	Retail: \$55 copay; Mail Order: \$66 copay	Retail: \$55 copay; Mail Order: \$55 copay

Disclaimer: This Guide is not a contract. Its purpose is to provide summary information about employee benefits. Refer to Summary Plan Descriptions and provider materials for details of each benefit. Every effort has been made to ensure this Guide is accurate. Provisions of the actual contract will govern in the event of a discrepancy.



Health Benefits

Benefit	Aetna CDHP	Aetna HMO	Aetna PPO	CareFirst CDHP	CareFirst HMO	CareFirst PPO	Kaiser Permanente	UHC HMO	UHC PPO
Infertility Treatment	Diagnosis & treatment of underlying medical condition, including Artificial Insemination; In vitro fertilization (IVF), zygote intrafallopian transfer (ZIFT), gamete intrafallopian transfer (GIFT), cryopreserved embryo transfers, intracytoplasmic sperm injection (ICSI) or ovum microsurgery and embryo transfers with three egg retrievals per lifetime; Ovulation induction (OI) limited to six cycles per lifetime; Cryopreservation for iatrogenic preservation; Oral and injectable fertility drugs. Cost sharing is based on the type and place of service	Diagnosis & treatment of underlying medical condition, including Artificial Insemination; In vitro fertilization (IVF), zygote intrafallopian transfer (ZIFT), gamete intrafallopian transfer (GIFT), cryopreserved embryo transfers, intracytoplasmic sperm injection (ICSI) or ovum microsurgery and embryo transfers with three egg retrievals per lifetime; Ovulation induction (OI) limited to six cycles per lifetime; Cryopreservation for iatrogenic preservation; Oral and injectable fertility drugs. Cost sharing is based on the type and place of service.	Diagnosis & treatment of underlying medical condition, including Artificial Insemination; In vitro fertilization (IVF), zygote intrafallopian transfer (ZIFT), gamete intrafallopian transfer (GIFT), cryopreserved embryo transfers, intracytoplasmic sperm injection (ICSI) or ovum microsurgery and embryo transfers with three egg retrievals per lifetime; Ovulation induction (OI) limited to six cycles per lifetime; Cryopreservation for iatrogenic preservation; Oral and injectable fertility drugs. Cost sharing is based on the type and place of service.	Diagnosis & treatment of underlying medical condition covered same as any other expense. Artificial insemination, ovulation induction and Advanced Reproductive Technology are excluded	50% for AI & infertility	50% for AI and Infertility	Infertility Diagnosis & Testing: 50% coins Infertility Assistive Reproductive Technology Infertility Diagnosis & Testing: 50% coins Infertility Assistive Reproductive Technology: 50% coins \$100,000 ben max/life, 3 procedures/life Applicable cost share based on place of service	Limited to \$30,000 per Covered Person per lifetime. 50% co-insurance Prior Authorization is required.	Limited to \$100,000 per Covered Person per lifetime This limit only applies to IVF Treatment and related services. IVF is further limited to 3 courses of treatment per live birth. Artificial insemination & ovulation induction are limited to 6 courses of treatment per live birth. 50% co-insurance
Applied Behavior Analysis (ABA Services)	Covered 85% after deductible	Covered 100%; no deductible or copay	Covered 100%; no deductible or copay	\$30 copay per admission after deductible	\$50 copay	85% after deductible	\$10 copay	\$10 copay for Outpatient visit	15% for Inpatient; \$15 Copay for Outpatient; 15% for partial Hospital



Disability & Life Insurance

The Standard Insurance Company is the District Government disability insurance provider. Deductions for both programs are done on an after-tax basis. Payments you receive from the program are not taxed.

SHORT-TERM DISABILITY INSURANCE

All benefits-eligible employees may enroll in the Short-Term Disability Insurance Program. Short-term disability insurance provides income replacement that may be used in conjunction with your annual or sick leave. This program has a 20-day elimination period. Income is replaced at 66 2/3 percent of the employee’s base pay and coverage lasts for six months. This program is designed to lessen the financial burden employees may incur from an extended non-work-related injury or illness. Short-term disability insurance specifically addresses absences from work due to one’s own health-related reasons. If you have a qualifying medical condition, this insurance provides a partial replacement of your income.

Key Features:

- Weekly disability benefits of \$15-\$1,385
- Income coverage of up to 66 2/3 percent of your salary
- Worldwide coverage
- Waiver of premium if you become disabled

Short-Term Disability Premium Rates

Employee Age on Calendar Year	Biweekly Premium Rate Per \$100 of Monthly Covered Benefit
Age 17-49	\$0.47
Age 50-69	\$0.61



Disability & Life Insurance

LONG-TERM DISABILITY INSURANCE

All benefits-eligible employees may enroll in the Long-Term Disability (LTD) Insurance Program. LTD insurance provides income replacement that may be used in conjunction with your annual or sick leave. This program has a 180-day elimination period. Income is replaced at 66 2/3 percent of your pre-disability earnings, reduced by deductible income. If you become disabled before age 62, LTD benefits may continue during disability until you reach age 65. If you become disabled at age 62 or older, the benefit duration is determined by your age when disability begins as indicated by Standard Insurance.

Key Features:

- Monthly LTD benefit of \$100-\$6,000
- 180-day elimination period
- Worldwide coverage
- Waiver of premium while disabled

Long-Term Disability Premium Rates

Employee Age on Calendar Year	Biweekly Premium Rate Per \$100 of Monthly Covered Payroll
Age less than 25	\$0.17
Age 25-29	\$0.21
Age 30-34	\$0.25
Age 35-39	\$0.32
Age 40-44	\$0.47
Age 45-49	\$0.70
Age 50-54	\$1.04
Age 55-59	\$1.38
Age 60-64	\$1.47
Age 65+	\$1.58



Disability & Life Insurance

GROUP LIFE INSURANCE

The Standard Insurance Company is the District Government group life insurance provider. Term life insurance provides coverage equal to an employee’s annual salary rounded to the next thousand plus an additional \$2,000. The monthly premium cost is shared with the District. You pay two-thirds of the total cost and the District pays one-third.

Please Note: Life Insurance is not available benefit for Open Enrollment 2025.

Dependents up to age 21 may be eligible for life insurance coverage. Optional life insurance is available at a low cost for employees and their dependents, but employees pay the full cost.

Basic Coverage Biweekly Rates

- \$0.065 per \$1,000 of coverage

Optional Coverage Rates

Option A: “Standard” Biweekly Rates Per \$10,000 Coverage		Option B: “Additional” Biweekly Rates Per \$1,000 Coverage	
Age	Amount	Age	Amount
Under 35	\$0.35	Under 35	\$0.034
Age 35-39	\$0.42	Age 35-39	\$0.042
Age 40-44	\$0.57	Age 40-44	\$0.058
Age 45-49	\$.92	Age 45-49	\$0.095
Age 50-54	\$1.49	Age 50-54	\$0.156
Age 55-59	\$3.00	Age 55-59	\$0.317
Age 60+	\$4.52	Age 60+	\$0.48

Option C: “Family” Biweekly Rates			
Option	Age <45	Age 45-54	Age 55+
\$10,000 spouse life & \$10,000/child life	\$0.77	\$1.46	\$3.53
\$25,000 spouse life & \$10,000/child life	\$1.50	\$3.22	\$8.39
\$50,000 spouse life & \$10,000/child life	\$2.69	\$6.14	\$16.46



Disability & Life Insurance

FEDERAL EMPLOYEES’ GROUP LIFE INSURANCE

Employees hired before October 1, 1987, are eligible for Federal Employees’ Group Life Insurance (FEGLI), which is administered by the US Office of Personnel Management. Term life insurance provides coverage equal to an employee’s annual salary rounded to the next thousand, plus an additional \$2,000.

The cost of your monthly premium is shared with the District. You pay two-thirds of the total cost and the District pays one-third. Additional life insurance levels are available for employees and their dependents at a low cost.

Optional Plan	Additional Coverage	Premium Amount
Option A Standard	\$10,000 coverage	Cost determined by age
Option B Additional	Coverage up to five times the employee’s annual salary	Cost determined by age and employee’s salary
Option C Family	Maximum multiple of 5, each multiple is equal to \$5,000 for eligible spouse and \$2,500 for each eligible child.	Cost determined by age



Disability & Life Insurance

INDEMNITY COVERAGE

Indemnity plans are a type of voluntary insurance policies that reimburse the patient and/or provider as expenses are incurred. Aflac is the District Government indemnity plan provider.

Aflac directly pays cash benefits to the designated employee (unless assigned elsewhere) in the event of illness or injury. This acts like a safety net for you and your family – you can use the funds to help cover expenses that may not be covered by your primary medical insurance.

Learn more at <http://dchr.dc.gov/page/aflac-indemnity-plans>.

Aflac indemnity plans include:

- BenExtend
- Critical Illness
- Hospital Indemnity
- Accident Insurance



Work & Life Benefits

EMPLOYEE ASSISTANCE PROGRAM

Inova Employee Assistance Program (EAP) is a comprehensive, top-ranked international provider of employee assistance services. Inova EAP offers practical, real-world solutions to employee life issues that may derail productivity and satisfaction.

District employees can log onto the Inova Employee Assistance member site at www.inova.org/eap to access their Inova EAP and Work-Life services web portal.

Login information:

Username: **DCGOV**

Password: **DCGOV**

Inova EAP resources include:

- Confidential counseling
- Legal services
- Financial services
- Savings center
- Identity theft services
- Webinar training
- Work-life referral services for child and elder care, home repairs, pet care, etc.
- Wellness coaching
- Lactation support



Work & Life Benefits

FLEXIBLE SPENDING ACCOUNTS

The District offers benefits-eligible employees two pre-tax flexible spending accounts (FSAs) — a Health Care Flexible Spending Account and a Dependent Care Flexible Spending Account. These accounts allow you to pay for eligible, out-of-pocket health and/or dependent care expenses. Every plan year you must designate the amount to be set aside in your FSAs. The IRS “Use-It-or-Lose-It” rule allows participants to carry over unused health care FSA funds from one year to the next. Participants **may carry over up to \$660** of their FSA balance into the next year. Benefit Resource, Inc. administers these accounts.

Health Care Flexible Spending Accounts

Health Care Flexible Spending Accounts (HCFSA) allow you to pay for eligible out-of-pocket medical expenses on a pre-tax basis with deductions taken directly from your base salary. HCFSA deductions reduce the gross income on your Form W-2 for tax purposes. Contributions reimburse participants for covered expenses. **The 2025 pre-tax contribution limit for HCFSA is \$3,300.** All receipts for expenses must be submitted by March 31.

Dependent Care Flexible Spending Accounts

Dependent Care Flexible Spending Accounts (DCFSA) allow you to pay for eligible dependent care expenses on a pre-tax basis with deductions taken directly from your base salary. Deductions reduce your gross income on your Form W-2 for tax purposes. Contributions reimburse participants for **covered expenses up to a maximum of \$5,000 each year.** All receipts for expenses must be submitted by March 31.



Work & Life Benefits

COMMUTER BENEFITS

All benefits-eligible employees may enroll in the Commuter Benefits Program. Commuter benefits accounts provide tax-exempt funds through a paycheck deduction that you can use to pay for eligible transit and parking services. Commuter Benefits Accounts are administered by Benefit Resource, Inc.

Transit Commuter Benefits Account

Enrolling in a Transit Commuter Benefits Account can save you up to 40 percent on commuting expenses — including Metro trains and buses, commuter trains, and more. Participants select the amount they would like to contribute for the month and their account is automatically funded with a pre-tax paycheck deduction.

Per IRS guidance, **the 2025 maximum monthly pre-tax contribution limit for mass transit and parking is \$325.**

Parking Commuter Benefits Account

Enrolling in a Parking Commuter Benefits Account can save you up to 40 percent on work-related parking expenses. Participants select the amount they would like to contribute for the month and their account is automatically funded with a pre-tax paycheck deduction.

Per IRS guidance, **the 2025 maximum monthly pre-tax contribution limit for mass transit and parking is \$325.**



Work & Life Benefits

COLLEGE SAVINGS PLAN

The DC College Savings Plan is a Section 529 plan created to help families prepare for the substantial cost of higher education. The plan offers special tax advantages that enable participants to maximize their savings potential.

A 529 plan is a tax-advantaged savings plan designed to encourage saving for future education costs. Tax-free withdrawals can be used toward qualified expenses such as:

- Tuition and mandatory fees
- Certain room and board costs during any academic period the beneficiary is enrolled at least half-time
- Computers
- Books, supplies and equipment required for enrollment/attendance
- Toolkits for apprenticeship or cosmetology school
- Certain expenses for special-needs students

DC College Savings Plan gives families a simple way to help save for rising college and vocational school costs. Features include:

- Significant tax advantages, from tax-deferred growth to tax-free qualified distributions
- Minimal initial investment of only \$25 to open an account.
- Contribute by automatic deposit
- Flexible investment choices
- Easy online enrollment and management

For more information, please visit <http://www.dccollegesavings.com>.



Retirement

RETIREMENT PLANS AT A GLANCE

457(b) Deferred Compensation Plan

- DC Government does not contribute to this plan.
- Effective July 7, 2019, new and rehired eligible employees will be automatically enrolled as participants.
- Employees hired before July 7, 2019 who can contribute the minimum of \$20 per pay period are eligible to participate.

401(a) Defined Contribution Pension Plan

- Employees hired on or after October 1, 1987.
- 100% employer funded.
- 5% of base salary (5.5 % for Corrections Officers) after one year of service.
- Must have one year of continuous service to participate.
- Fully vested after five years of continuous service.

Civil Service Retirement System (CSRS)

- Employees hired before October 1, 1987.
- Eligible employees contribute 7, 7.5 or 8% of pay to CSRS.
- Employing agency matches the employee's CSRS contributions.
- They generally pay no Social Security retirement, survivor and disability (OASDI) tax, but must pay Medicare tax (currently 1.45% of pay).

Police Officers & Firefighters Plan

- Employee is automatically enrolled when they begin active duty as a police officer with the DC Metropolitan Police Department (MPD) or as a firefighter with the Fire and Emergency Medical Services Department (FEMS).
- 7% of base pay (hired before November 10, 1996) or 8% of base pay (hired on or after November 10, 1996).

Teachers Retirement Plan

- Employees classified ET automatically contribute 7% (hired prior to November 1, 1996) or 8% (hired on or after November 1, 1996) of their salary on a biweekly basis.
- Employees that are not classified ET do not contribute to this plan.



Retirement

401(A) DEFINED CONTRIBUTION PENSION PLAN

The District Government’s primary retirement plan for eligible employees first hired on or after October 1, 1987, is a “defined contribution” plan with benefits based on 100 percent employer-provided contributions plus earnings over the course of the participant’s working years. The District funds this plan; there is no employee contribution. The current employer-paid contribution is 5 percent of the base salary (5.5 percent for Corrections Officers). Employees must have one year of continuous service to participate, they are fully vested in the 401(a) Plan after five years of continuous service. MissionSquare administers this plan.

DC 401(a) Vesting Schedule

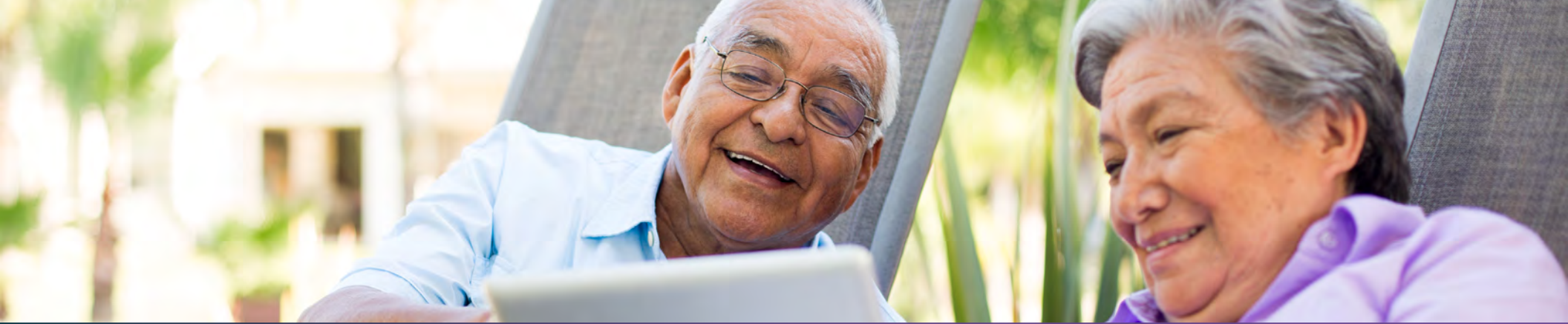
Years of Creditable Service	Percentage of Account that is Vested
Less than 2	0%
2	20%
3	40%
4	60%
5 or more	100%

457(B) DEFERRED COMPENSATION PLAN

All District Government employees are eligible to participate in the Deferred Compensation Plan, an optional savings program that allows employees to tax-defer income and invest for the future. MissionSquare administers this plan. The portion of salary an employee contributes reduces the amount of taxable income in each paycheck.

The IRS determines the annual maximum amount that can be deferred. You may also be eligible for increased annual contributions during the three years prior to the year you attain Normal Retirement Age under a special 457 catch-up provision or when you reach age 50 or older by the end of the calendar year.

Normal Limit	“Age 50 “ Catch-Up Limit	“Pre-Retirement” Catch-Up Limit
\$23,500	\$7,500	\$23,500



Retirement

- The 2025 contribution limit for elective deferrals to a 457 deferred compensation plan is **\$23,500**.
- The **2025 Age 50 Catch-Up Limit is \$7,500** (\$31,000 total).
- Depending on your unused deferrals, you can contribute up to “twice the maximum deferral” for pre-retirement catch-up three years prior to retirement.

CIVIL SERVICE RETIREMENT FOR EMPLOYEES HIRED BEFORE OCTOBER 1, 1987

Employees first hired by the District of Columbia Government before October 1, 1987 are subject to the provisions of the Civil Service Retirement System (CSRS) administered by the US Office of Personnel Management.

CSRS-covered employees contribute 7, 7.5 or 8 percent of pay to CSRS.

CSRS-covered employees who separated from the District and return to District service after April 1, 1986 must pay the Medicare tax (currently 1.45 percent of pay). CSRS-covered employees with no break in service pay no Medicare or Social Security retirement, survivor and disability (OASDI) tax. The employing agency matches the employee’s CSRS contributions.

Civil Service Retirement Option

Optional Retirement
Age 55 and 30 years of service
Age 60 and 20 years of service
Age 62 and 5 years of service
Disability Retirement: Any age and 5 years of service

The pension of an employee who chooses Voluntary Early Retirement will be reduced by 2 percent for each year under age 55.



Leave

ANNUAL & SICK LEAVE

Eligible employees accrue annual and sick leave each pay period. Upon separation, an employee receives cash value for 100 percent of the remaining accrued annual leave.

Annual Leave

Regular full-time employees accrue annual leave accordingly:

Years of Employment	Annual Leave Accrued
Less than 3 Years	13 Days (4 hours/pay period)
3-15 Years	20 Days (6 hours/pay period)
15+ Years	26 Days (8 hours/pay period)

Sick Leave

Regular full-time employees accrue 13 days of sick leave annually (**4 hours per pay period**) regardless of years of employment.

Part-Time & Executive Service Employees

Part-time employees who work at least 30 hours per pay period earn annual and sick leave at a proportional rate. Executive Service employees receive 26 days of universal leave per calendar year.

Annual Leave Bank

The Annual Leave Bank is an employee-donated accumulated annual leave fund for the use of other leave bank members. It prevents or limits income loss by employees who do not have sufficient paid leave to cover an absence. To receive leave from the leave bank, an employee must donate at least four hours of annual leave each year.

Holidays

Employees receive **12 paid holidays**:
New Year’s Day, MLK Day, Presidents Day, DC Emancipation Day, Memorial Day, Juneteenth National Independence Day, Independence Day, Labor Day, Indigenous Peoples’ Day, Veterans Day, Thanksgiving, & Christmas Day



Leave

FAMILY & MEDICAL LEAVE

DC Family & Medical Leave Act

The DC Family and Medical Leave Act (DCFMLA) was made effective on October 3, 1990 and is applicable to employees whose actual work location is in the District of Columbia as of April 1, 1991. To be eligible, employees must have worked for the District for one year with no break in service and have worked at least 1,000 hours (DCFMLA) or 1,250 hours (FMLA) during the 12-month period immediately preceding the request for leave.

DCFMLA Statutory Medical Leave

Allows for up to 16 weeks of unpaid, job-protected leave in any 24-month period for employees who are physically unable to work due to a serious medical condition. Medical documentation is required and an expected date of return must be provided.

DCFMLA Statutory Family Leave of Absence

Allows up to 16 weeks of unpaid, job-protected leave in any 24-month period for qualifying family reasons. The employee must provide documentation explaining the nature of the leave.

Paid Family and Medical Leave

Allows up to eight weeks of paid leave to care for a family member with a serious health condition or welcome a new family member. Employees may also use up to 2 weeks of this leave to care for their own serious health condition.

Contacts

A smiling woman with dark curly hair is talking on a mobile phone. She is wearing a black and white patterned jacket. In the foreground, the top of a white laptop is visible. The background is slightly blurred, showing a desk with some papers and a pen.

- DCHR Benefits & Retirement Administration
- Office of Pay & Retirement Services
- Plan Provider Contacts
 - Medical
 - Dental
 - Vision
 - Group Life & Disability
 - Indemnity Plans
 - Flexible Spending Accounts
 - Commuter Benefits
 - Employee Assistance Program
 - College Savings Plan



Contacts

DCHR BENEFITS & RETIREMENT ADMINISTRATION

(202) 442-7627

Benefits Team: dchr.benefits@dc.gov

Retirement Team: dchr.retirement@dc.gov

Distribution Team: dchr.401a457b@dc.gov
<http://dchr.dc.gov>

OFFICE OF PAY & RETIREMENT SERVICES

Payroll Concerns & Questions

(202) 741-8600

PLAN PROVIDERS: INSURANCE

Medical

Aetna Member Services

1 (888) 238-6258

dcgovquestions@aetna.com
www.aetnadcgov.com

Carefirst Member Services

(833) 556-3163

www.carefirst.com/dcgov

Kaiser Permanente Member Services

1 (800) 777-7902

<https://my.kp.org/dcgovernment>

UnitedHealthcare Member Services

1 (800) 603-3923

<https://uhcvirtual.com/dcgov>

Dental

Cigna Dental Health, Inc.

1 (800) 367-1037

www.cigna.com

Vision

VSP Vision Care

1 (800) 877-7195

<https://dcgovernment.vspforme.com/>



Contacts

Group Life & Disability

The Standard Insurance Company Customer Contact Center

1 (888) 937-4783

www.standard.com/mybenefits/dc

Indemnity Plans

Aflac

1 (877) 651-3601

<http://www.aflac.com/aps/dcgovernment/default.asp>

PLAN PROVIDERS: WORK & LIFE BENEFITS

Employee Assistance Program

Inova

1 (800) 346-0110

www.inova.org/eap

Flexible Spending Accounts & Commuter Benefits

Benefit Resource, Inc.

1 (800) 473-9595

www.benefitresource.com

401(a) & 457(b) Retirement Plans

MissionSquare

1 (800) 669-7400

www.dcretire.com

Savings Plans

DC College Savings Plan

1 (800) 987-4859

clientservice@dccollegesavings.com

www.dccollegesavings.com



dchr



GOVERNMENT OF THE
DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR