

Agenda



- 1. What is Open Enrollment?
- 2. What are my Resources?
- 3. October 2023 Benefit Summary
- 4. Detailed Benefit Overview
- 5. Questions?

What is Open Enrollment?



A TIME TO ENROLL

- New Hires
- Current Employees
- Dependents and Beneficiaries



TYPICALLY, WHEN PLAN CHANGES OCCUR

- Potential new coverages, carriers, or plans
- Potential plan changes, coverage options, carriers



A TIME TO MAKE CHANGES

- Add or Drop Dependents
- Change Plans
- Waive Coverage
- Update Beneficiaries



BENEFITS ARE EFFECTIVE OCTOBER 1

You can only change elections after
 OE only if you experience a
 Qualifying Life Event (QLE)

Open Enrollment will take place Wednesday, August 23 – Thursday, August 31. Open Enrollment will be MANDATORY. You are required to log in to confirm your elections regardless of whether you are making changes or waiving coverage.

What is a Qualifying Life Event (QLE)?



- A "life change" which enables employees to enroll or change benefits outside of open enrollment.
- Some examples are:
 - Birth or Adoption of a Child
 - Marriage, Divorce or Legal Separation
 - Death of a Legal Spouse or Dependent Child
 - Change in your Spouse's employment status that results in a loss or gain of coverage

Who is Eligible to Enroll?



Employees

- You are eligible if you are an active, full-time employee scheduled to work at least 30 hours per week.
- New employees are eligible to participate on the first of the month following date of hire.
- Permanent part-time employees that work more than 28 hours per week or 1,456 annual hours are also eligible to enroll in medical, dental, and vision benefits.

Eligible Dependents

- Your legal spouse
- Your natural children, step-children or adopted children up to age 26
- Disabled dependents (proof of disability is required)

When including a dependent on your benefits, proof of eligibility will be required. Proof of eligibility may include marriage license, birth certificate, adoption papers, or other legal documents that prove eligibility under the plan.

Dependent Eligibility Verification

Do you know that your dependents are eligible to be on the plan?

After open enrollment, the City will be verifying dependent eligibility to make sure that all dependents on the plan are eligible to be covered.

Why?

- Prevent surprises if a dependent isn't eligible to be on the plan, their claims can be denied which means that all medical expenses would be the responsibility of you as the employee or the dependent. We want to make sure this doesn't happen and you can obtain coverage before benefits are needed.
- Keep benefits costs low by not accidentally paying claims on dependents that aren't eligible
- Stay compliance with the plan requirements

Coming Soon! Additional details about the Dependent Eligibility Verification. Be on the lookout.



What are my Resources?



BENEFIT GUIDE

 Emailed & Posted on the Web Benefits Portal



VIRTUAL BENEFIT MEETINGS

- Friday, August 25 at 9:00 AM



IN-PERSON BENEFIT MEETINGS

- Wednesday, August 23 at 10:00 AM (Annex)
- Thursday, August 24 at 10:00 AM (Fire Station)
- Monday, August 28 at 2:30
 PM (Fire Station)



Q&A

- Have a question? We are available after the benefit meetings and webinars to respond to your individual questions.
- Call or email: 678-540-1428 or woodstock@a2benefits.com

Who is a 2 benefits?



We have a dedicated Benefit Service Team here to assist you!

- Looking for an In-Network Provider or Pharmacy?
- Need assistance with a claim question or issue?
- Have a question about your Benefits or Coverage details?
- Call or email
 - 678-540-1428 or woodstock@a2benefits.com

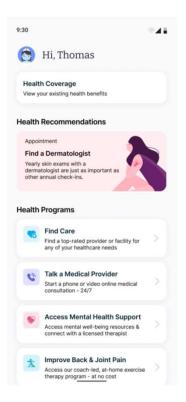


Who is HealthJoy?



HealthJoy is your virtual Healthcare Assistant. Your first stop for all your healthcare needs!

- Access and understand your benefits
- A virtual wallet for ID cards
- On-demand LIVE help
- Make smart choices
- Save time and money
- Chat or phone 24/7/365
- Telemedicine consult with a doctor online 24/7/365
- Download the app today!



October 2023 Benefit Summary



MEDICAL

- Renewing with UMR
- *Plan* changes
- New employee contributions



DENTAL

- Renewing with Guardian
- There are no changes to the current contributions



VISION

- Renewing with EyeMed
- There are no changes to the current contributions



LIFE / DISABILITY / EAP

- Renewing with New York Life with no plan changes
- There are no changes to the current contribution



TELEMEDICINE

- Continuing with HealthJoy



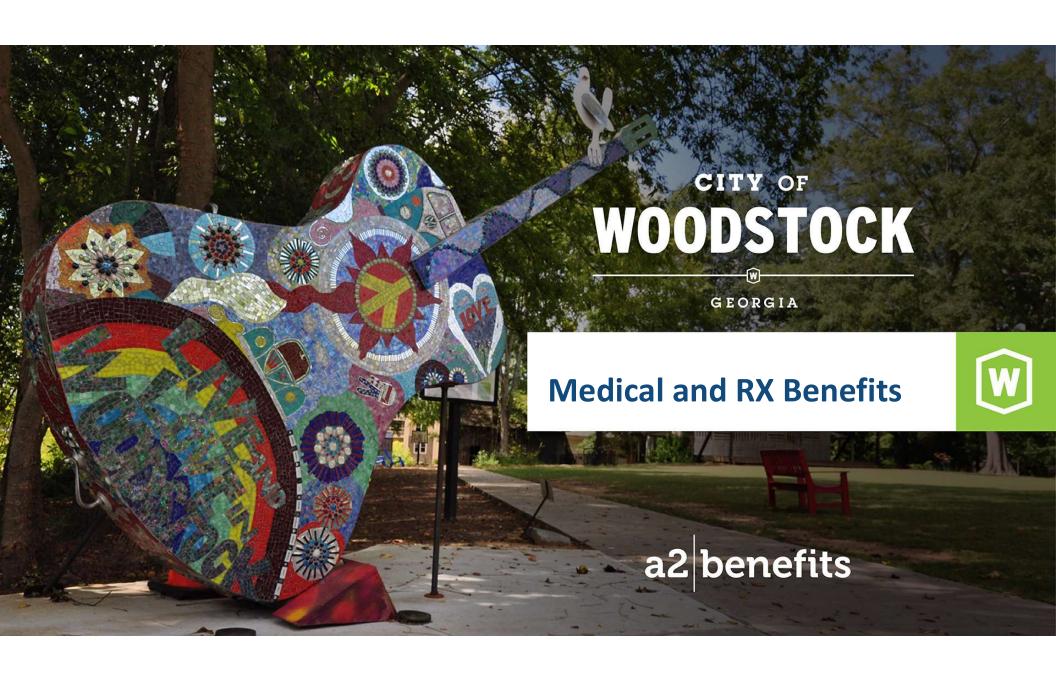
WELLNESS

- Continuing with TargetCare
- Changing to TargetCare from GoPivot for our Wellness Points Tracking



FLEXIBLE SPENDING & HEALTH SAVINGS ACCOUNTS

- Renewing with UMR for:
 - · FSA
 - Limited Purpose FSA
 - Health Savings Account (HSA)



Medical Benefits Eff. 10/1 thru 12/31



In-Network	Basic	Premium	HDHP
Calendar Year Deductible Employee / Employee + Spouse or Child / Family	\$1,500 / \$3,000 / \$4,500	\$500 / \$1,000 / \$1,500	\$1,500 / \$3,000 / \$3,000
Coinsurance	100% / 0%	100% / 0%	90% / 10%
Out-of-Pocket Max (OOPM) Employee / Employee + Spouse or Child / Family	\$1,500 / \$3,000 / \$4,500	\$500 / \$1,000 / \$1,500	\$2,250 / \$4,500 / \$4,500
Office Visits Preventative Primary Specialist Urgent Care	Covered at 100% \$25 Copay \$35 Copay \$60 Copay	Covered at 100% \$25 Copay \$35 Copay \$60 Copay	Covered at 100% Ded. then 10% Co-ins to OOPM Ded. then 10% Co-ins to OOPM Ded. then 10% Co-ins to OOPM
Emergency Room	\$150 Copay	\$150 Copay	Ded. then 10% Co-ins to OOPM
Inpatient & Outpatient	\$250 Copay per Admission then Deductible	\$250 Copay per Admission then Deductible	Ded. then 10% Co-ins to OOPM
Employer HSA Contribution	None	None	Individual: \$750; Family: \$1,500
Network	UnitedHealthcare Choice Plus Network		

a2 benefits All plans include out of network benefits, please refer to the benefit summaries for those details.



Rx Benefits Eff. 10/1 thru 12/31



Prescription Coverage	Basic	Premium	HDHP
Rx Out-of-Pocket Max (00PM) Employee / Employee + Spouse or Child / Family	\$1,500 / \$3,000 / \$4,500	\$500 / \$1,000 / \$1,500	Combined with Medical
Retail (30 Day Supply)*			
Generics Tier 1 Brand Tier 2 Preferred Brand Tier 3	\$15 Copay \$30 Copay \$60 Copay	\$15 Copay \$30 Copay \$60 Copay	Ded. then 10% Co-ins to OOPM Ded. then 10% Co-ins to OOPM Ded. then 10% Co-ins to OOPM
Mail Order Maintenance (90 Day Supply) Tier 1 / 2 / 3	\$25 Copay / \$60 Copay / \$120 Copay	\$25 Copay / \$60 Copay / \$120 Copay	Ded. then 10% Co-ins to OOPM
Formulary	Southern Scripts Core	Southern Scripts Core	Southern Scripts Core

[•]Find your formulary at Southern Scripts member page https://southernscripts.net/members/ and use your group code: 76411860 to search for your medications.



^{*}Copays increase by \$10 if you do not use a First-Choice Pharmacy

Medical Benefits Eff. 1/1 thru 9/30



In-Network	Basic	Premium	HDHP
Calendar Year Deductible Employee / Employee + Spouse or Child / Family	\$2,000 / \$4,000 / \$6,000	\$1,000 / \$2,000 / \$3,000	\$1,500 / \$3,000 / \$3,000
Coinsurance	80% / 20%	90% / 10%	90% / 10%
Out-of-Pocket Max (OOPM) Employee / Employee + Spouse or Child / Family	\$3,000 / \$6,000 / \$9,000	\$1,500 / \$3,000 / \$4,500	\$2,250 / \$4,500 / \$4,500
Office Visits Preventative Primary Specialist Urgent Care	Covered at 100% \$25 Copay \$35 Copay \$35 Copay	Covered at 100% \$25 Copay \$35 Copay \$35 Copay	Covered at 100% Ded. then 10% Co-ins to OOPM Ded. then 10% Co-ins to OOPM Ded. then 10% Co-ins to OOPM
Emergency Room	\$250 Copay	\$250 Copay	Ded. then 10% Co-ins to OOPM
Inpatient & Outpatient	\$250 Copay per Admission then Deductible + 20% Coins to OOPM	\$250 Copay per Admission then Deductible + 10% Coins to OOPM	Ded. then 10% Co-ins to OOPM
Employer HSA Contribution	None	None	Individual: \$750; Family: \$1,500
Network	UnitedHealthcare Choice Plus Network		

Rx Benefits Eff. 1/1 thru 9/30



Prescription Coverage	Basic	Premium	HDHP
Rx Out-of-Pocket Max (00PM) Employee / Employee + Spouse or Child / Family	Combined with Medical	Combined with Medical	Combined with Medical
Retail (30 Day Supply)*			
Generics Tier 1 Brand Tier 2 Preferred Brand Tier 3 Specialty Tier 4	\$15 Copay \$30 Copay \$60 Copay 25% to \$200	\$15 Copay \$30 Copay \$60 Copay 25% to \$200	Ded. then 10% Co-ins to OOPM Ded. then 10% Co-ins to OOPM Ded. then 10% Co-ins to OOPM Ded. Then 10% Co-ins to OOPM
Mail Order Maintenance (90 Day Supply) Tier 1 / 2 / 3	\$25 Copay / \$60 Copay / \$120 Copay	\$25 Copay / \$60 Copay / \$120 Copay	Ded. then 10% Co-ins to OOPM
Formulary	Southern Scripts Core	Southern Scripts Core	Southern Scripts Core

[•]Find your formulary at Southern Scripts member page https://southernscripts.net/members/ and use your group code: 76411860 to search for your medications.

^{*}Copays for Tiers 1 – 3 increase by \$10 if you do not use a First-Choice Pharmacy; Tier 4 increases to 25% to \$250



Medical/ Rx – Contributions



Bi-Weekly (26)	Basic	Premium	HDHP
Non-Tobacco U	ser - Participating in Welln	ess (Both Wellness & Toba	cco Discounts)
Employee	\$28.83	\$39.96	\$6.96
Employee + Spouse	\$106.42	\$118.02	\$82.23
Employee + Child(ren)	\$80.95	\$97.25	\$65.15
Family	\$164.02	\$181.90	\$126.74
Bi-Weekly (26)	Basic	Premium	HDHP
Tobacco User - Not Participating in Wellness (ng in Wellness (No Discour	nts)
Employee	\$98.06	\$109.19	\$76.19
Employee + Spouse	\$175.65	\$187.25	\$151.46
Employee + Child(ren)	\$150.18	\$166.48	\$134.38
Family	\$233.25	\$251.13	\$195.97

Medical/ Rx – Contributions



Bi-Weekly (26)	Basic	Premium	HDHP
Non-Tobacco Us	ser – Not Participating in W	ellness (Non-Tobacco User	Discount Only)
Employee	\$63.45	\$74.58	\$41.58
Employee + Spouse	\$141.04	\$152.64	\$116.85
Employee + Child(ren)	\$115.57	\$131.87	\$99.77
Family	\$198.64	\$216.52	\$161.36
Bi-Weekly (26)	Basic	Premium	HDHP
Tobaco	o User - Participating in W	ellness (Wellness Discoun	t Only)
Employee	\$63.45	\$74.58	\$41.58
Employee + Spouse	\$141.04	\$152.64	\$116.85
Employee + Child(ren)	\$115.57	\$131.87	\$99.77
Family	\$198.64	\$216.52	\$161.36



PLANselect is a tool to help you select the best health plan to meet your

unique needs and those of your family.

PLANselect helps you choose the health plan that will likely result in the **lowest overall cost** and best value given anticipated medical needs. After answering a few multiple-choice questions, the proprietary algorithms provide a personalized financial analysis and plan comparison, which considers premiums, HSA contributions and expected out-of-pocket costs (co-pays, deductibles).





Decision Support Tool



Log into the City of Woodstock site

Scan the QR code for direct access
OR go to: www.myplanselect.com
Enter username "woodstock" and password "benefits"

Answer four questions

After accepting the user agreement, the model will walk you through four simple, multiple-choice questions about your medical needs. You can finish in a couple minutes, no research required.

Review analysis and recommendation

PLANselect provides a financial analysis that ranks the plans based on finding the highest value and providing the services you need for the lowest total cost.

Enroll

Run multiple scenarios if you like. Once you make a decision, click the Enroll button on the results page to visit your enrollment system to make your selection.

Quick, easy, anonymous

- This tool is designed to help you save money on your healthcare coverage
- Takes just minutes to get results
- No personal information or medical history is required
- Recommendations are unbiased and based on your needs
- Videos are available throughout the tool in case you have questions or want to learn more
- HSA and FSA calculators are included so you can optimize your contributions
- There's a built-in Spanish version



Medical Plan Comparison Examples



Joe's Simple Fracture (in-network emergency room visit & follow up car	Joe's Simple	Fracture (in-nety	work emeraency	room visit &	follow up c	are)
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Joe's Simple Fracture (in-network emergency room visit & follow up care)		
Basic	Premium	HDHP
Plan Details: Plan Deductible: \$2,000 Specialist Copay: \$25 Hospital Facility Coinsurance: \$250 Other Coinsurance: 20%	Plan Details: Plan Deductible: \$1,000 Specialist Copay: \$25 Hospital Facility Coinsurance: \$250 Other Copay: 10%	Plan Details: Plan Deductible: \$1,500 Specialist Coinsurance: 10% Hospital Facility Coinsurance: 10% Other Coinsurance: 10%
Services in this example: 1 Emergency room visit (including medical supplies), 1 X-Ray, Durable medical equipment (crutches), 10 Visits for Rehabilitation services (physical therapy)		
Cost Sharing: Deductible: \$1,246 Copays: \$250 Coinsurance: \$0 Limits or Exclusions: \$0	Total Example Cost: \$2,800 Cost Sharing: Deductible: \$1,000 Copays: \$250 Coinsurance: \$24.60 Limits or Exclusions: \$0	Cost Sharing: Deductible: \$1,246 Copays: \$0 Coinsurance: \$24.60 Limits or Exclusions: \$0
Total Joe would pay: \$1,496	Total Joe would pay: \$1,274.60	Total Joe would pay: \$1,270.60

•Remember to also include your employee contribution amounts





How to find a Medical Provider





There are several ways to find an in-network provider

- Contact your provider and ask if they accept: "UnitedHealthcare Choice Plus Network"
- Call the number on the back of your ID card
- Via <u>www.UMR.com</u>; select "Find a Provider," then search "UnitedHealthcare Choice Plus Network". For medical providers, choose "Search for a medical provider." For behavioral health providers (including counseling and substance abuse) select "View directory of behavioral health providers"
- Remember to look for a Premium Designated Provider for a \$10 lower copay with the Basic or Premium Plan.

First Choice Pharmacies





Members of Liviniti (formerly Southern Scripts) have access to reduced prescription costs at participating First Choice pharmacies.

- There is a copay differential for First Choice pharmacies. The copay will be \$10 higher for Tier 1 3 drugs and up to \$25 higher for specialty drugs if you choose to utilize a non-First Choice pharmacy. WalMart, Kroger and Publix are examples of First-Choice pharmacies.
- Visit www.southernscripts.net/members/firstchoice/ to find the pharmacy nearest you!

Variable Copay Program





Designed to significantly reduce the cost of eligible specialty and brand medications by utilizing manufacturer-provided coupons.

HOW VARIABLE COPAY™ WORKS

- Potentially reduces plan and member costs by utilizing manufacturer-provided coupons. After your out-of-pocket (OOP) is satisfied, the remaining dollars bring drug cost savings to your employer.
- Upon enrollment, a Variable Copay™ Network Pharmacy will communicate with you each month on reminders of your shipment and verification of address.
- Medication arrives at your doorstep monthly via a shipping courier (UPS, FedEx, DHL) approximately 5-7 days before your current medications are completed. Additionally, a Variable Copay™ Network Pharmacy will contact your prescribing physician when refills are
- Should you have questions regarding prescription fulfillment, your Variable Copay navigator will provide you with your new filling pharmacy's contact information during enrollment. You will also find the filling pharmacy's contact information on your prescription

ENROLL IN VARIABLE COPAY™

- Enrollment in Variable Copay™ is quick and simple. Call (833) 439-9617 to speak with a dedicated Variable Copay™ Concierge.
- Enrollment is also available within the Southern Scripts mobile app. Download the Southern Scripts app today free on iOS and Android. The Southern Scripts app provides convenient access to your pharmacy information, such as: digital ID card, Southern Scripts prescription history, drug price check, drug formulary search, pharmacy locator, Variable CopayTM enrollment, prior authorization reviews and möre.

Common examples of medications that qualify include: Eliquis, Stelara, Simponi, Otezla, Cosentyx, Humira



International Mail Order





The Intl Mail Order program is a voluntary prescription drug program that's offered by Liviniti

- This program is available to employees and dependents.
- Medications are filled for 90 days (prescription must be written for 90 days)
- It's simple to enroll, safe, and free. There are 300+ brand name drugs available at no cost and shipping & handling is covered by the program!
- To see if your drug is covered visit <u>www.IntlMailOrder.com</u> or call 1-866-488-7874

7-Day Opioid Limits





There is a 7-day limit on Opioids for an initial opioid prescription for members new to pain management therapy.

- Limit Two Prescriptions of 7-Day Supply within a 90-day period
- No Extended-Release Opioids allowed for acute pain
- Quantity Limit of Four immediate-release opioid tablets per day
- Contact Southern Scripts Account Team for more information on this program at <u>www.southernscripts.net</u> or 800.710.9341

Get the Most, For the Least \$

PREVENTIVE CARE

Always covered 100% when In-Network

MAIL ORDER!

Receive a 90 Day supply for less than the Retail Cost International Mail Order is available also

GOODRx

Save up to 80% on your prescription drug prices simply by using the GoodRx app. Search & Compare Prices, Save To My RX, Show To Your Pharmacist

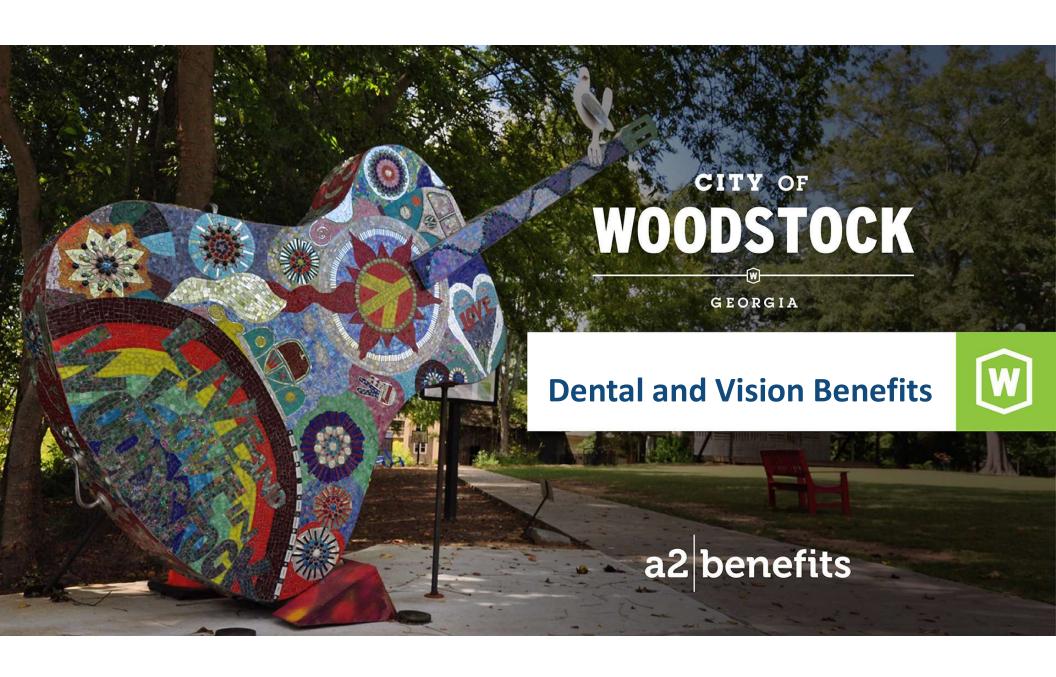
URGENT CARE & TELEMEDICINE

Consider these options when health crisis is less than life threatening

GENERIC DRUGS & PUBLIC DRUG PROGRAMS

Always ask for a Generic alternative, and consider Public Drug Programs at grocery stores, Target, Wal-Mart, etc.





Dental



	Network Access Plan	Value Plan
	Good for those using Out-of-Network Providers	Good for those using In-Network Providers
Calendar Year Deductible Individual Family	\$50 \$150	N/A N/A
Annual Plan Maximum (Preventative does not reduce annual plan maximum)	\$1,000	\$1,000
Coinsurance Preventative Basic Major	100% 80% 50%	100% 100% 60%
Orthodontia (Child Only – up to 19) Coverage Lifetime Max	50% \$1,000	50% \$1,000
Out-of-Network Reimbursement	90th UCR	Maximum Allowable Cost (MAC) Fee Schedule

Dental Rollover Benefit





Guardian provides the opportunity for members to roll over a portion of their unused annual maximum through a rollover benefit.

- There is a \$1,000 annual maximum for Basic and Major services combined.
- In order to earn the Maximum Rollover Amount (MRA), a member must submit a claim but not exceed the paid claims threshold during the benefit year.
- Every covered member has his or her own MRA and the MRA can be used for future expenses as long as the member is active on the plan.
- If you have questions on your rollover maximum balance, contact Guardian directly.

How to find a Dental Provider





There are several ways to find an in-network provider

- Contact your provider and ask: "Do you participate in the Guardian DentalGuard Preferred network"
- Contact Guardian at 800.541.7846
- Via the <u>www.guardianlife.com</u>; Select "Find a Provider" at the top of the screen. Select "DentalGuard Preferred" as your plan type and search by location or name.

Vision



	In-Network	Out-Of-Network Reimbursement
Exam	\$10 Copay	Up to \$35
Lenses		
Single Vision	\$25 Copay	Up to \$25
Bifocal	\$25 Copay	Up to \$40
Trifocal	\$25 Copay	Up to \$60
Frames	\$120 Allowance, plus 20% discount off remaining balance	Up to \$48
Contact Lenses (in lieu of frames and lenses)	\$135 Allowance, plus 15% discount off remaining balance	Up to \$95
Laser Vision Correction	15% off retail price or 5% off promotional price	No Coverage
Exam / Frame / Lenses or contacts	Once every 12 / 24 / 12 r	months

How to find a Vision Provider





There are several ways to find an in-network provider

- Contact your provider and ask: "Do you participate in the EyeMed Select vision network"
- Contact EyeMed at 866.939.3633
- Via <u>www.eyemedvisioncare.com</u>; click on "Find an eye doctor" at the top of the screen; then choose the "Select" network

Dental / Vision - Contributions 8 Guardian Real





Dental	Network Access Plan	Value Plan
	Bi-Weel	kly (26)
Employee	\$0.00	
Employee + 1 (Spouse or Child)	\$12.30	
Family	\$19.41	

Vision	
	Bi-Weekly (26)
Employee	\$2.58
Employee + 1 (Spouse or Child)	\$4.89
Family	\$7.16







In an effort to promote a healthy workplace and strive to keep everyone's cost for health care coverage affordable, the City offers a Wellness Plan.

 Employees on the medical plan can earn this reward by participating in the below:



1. Clinical Health Assessment (CHA)



2. Review of Results



3. Ongoing Health Coaching Program

TargetCare Wellness – CHAs



Onsite CHA Event Dates

Annex:

- October 17th
- October 18th

Fire Station 14:

- October 17th
- October 18th
- October 19th

- Targetcare will be onsite for the Clinical Health Assessments again this year!
- The Wellworks platform will open on September 13th, through this portal you will complete your consent form, questionnaire and schedule your appointment.
- Once you complete your CHA, you will need to log back into the health portal to schedule your review with a TargetCare nurse.
 - Remember you must also complete your review to receive the wellness incentive given by the City of Woodstock!
- If you had a Risk Score of 81 or higher last year, your risk score must have reduced by at least 5% at the 2023 CHA in order to receive the wellness incentive.





Right on Target Health Coaching Program

- Extremely High Risk (>100): It is required you meet with the TargetCare healthcare provider at least every four (4) weeks for assistance in gaining control of existing conditions and/or modifying current health risk factors.
- **High Risk (81-100):** It is required you meet with the TargetCare healthcare provider at least every eight (8) weeks to discuss your current health risks and set goals to help manage existing conditions.
- **Borderline High Risk (61-80)**: It is required you meet with the TargetCare healthcare provider every eight (8) weeks for at least three visits to discuss preventive measures to lower your chance of developing chronic diseases.
- **Above Normal Risk (41-60)**: It is required you meet with the TargetCare healthcare provider within sixteen (16) weeks to discuss your health and your personal management of your risks.
- **Optimal or Normal (0-40)**: There are no further requirements to meet with the TargetCare healthcare provider. You are still encouraged to speak with the provider if you desire, but it is optional.

Reasonable Alternative Standard (RAS) Program:

- If you have a risk score of 81 or higher, you must enter and be compliant with the RAS program to maintain your wellness incentive.
 - If you are in this category, your risk score must have reduced by at least 5% at the 2023 CHA in order to receive the wellness incentive.
- You and your health coach will design a customized RAS program for you to help you meet your goals.







There are many benefits of participating the Targetcare Wellness program:

- You will earn a lower premium on your medical insurance!
- CHA's can help detect chronic diseases early and educate individuals on steps they need to take before they become more serious.
- You will have access to the onsite TargetCare clinic for acute care and minor illness needs, such as
 - Common cold, bronchitis, acne, fever, sinus infection, sore throat, minor skin infections, and so much more!
- There are no copays for visiting the clinic, as well as no copays for prescriptions if written in clinic.

TargetCare Wellness







- Earn up to \$250 annually in gift cards through the rewards mall by completing a combination of scorecard activities including:
 - Participating in quarterly individual wellness challenges
 - · Completing preventive screenings
 - Tracking steps monthly
 - And more!
- To access your account, visit www.targetcarehealth.com or download the Mobile App and:
 - Login to the Health Portal:
 - Username: COW + First Initial of First Name + Last Name + Last 4 digits of Social Security Number (Ex. John Smith 000-00-1234 would be COWJSmith1234)
 - Password:
 - First Initial of First Name + Last Name + DOB (MMDD) (Ex. John Smith DOB 01/01/1990 would be JSmith0101)
 - Click "Login"
- After Logging In, you will be required to change your password. Must be 8 characters with at least 1 upper case letter, 1 lower case letter and 1 number.





Wellness through Onelife Fitness

City employees are eligible for a **DISCOUNTED MEMBERSHIP** of only \$7.99 per month to Onelife Fitness which provides free group fitness classes at their facility located at 301 Gold Creek Trail off Highway 92. Once you have registered with the Woodstock location, you can use any of the Atlanta area locations.







Tobacco Program

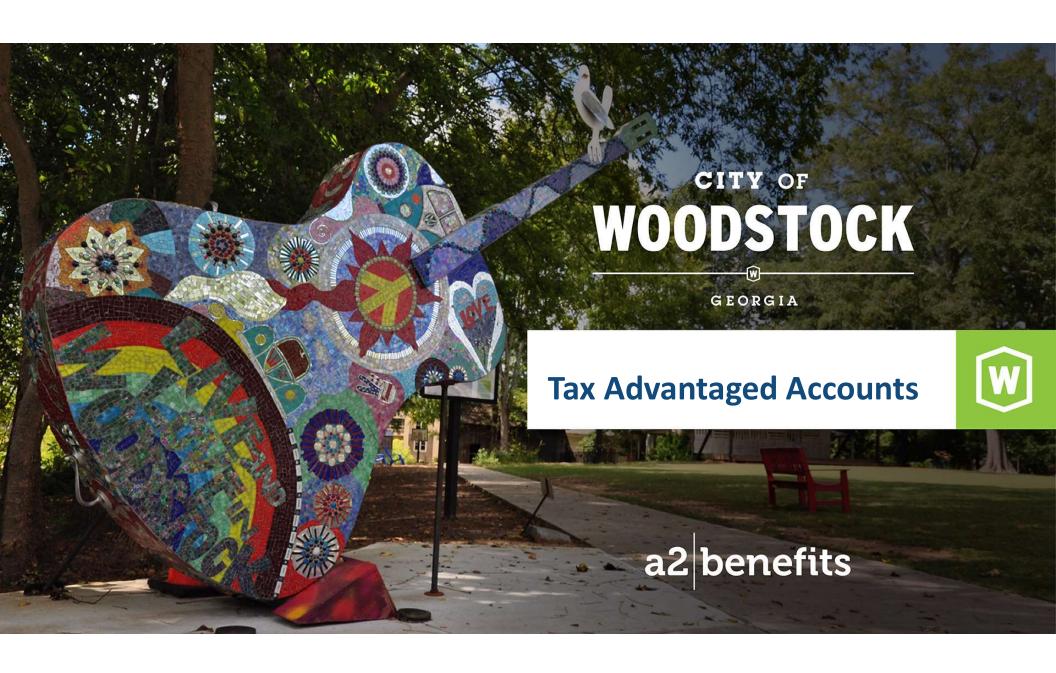




The City strives to improve the overall health and wellness of its employees and the impact it will have on the cost of healthcare, the City will maintain the current tobacco surcharge of \$75 per month.



- In order to receive the discounted rate on your premiums, you will be required to complete an affidavit stating that you are and have been tobacco-free for the past 90 days.
- This affidavit question will be available through your online enrollment with Employee Navigator under the medical section.
- In addition, the City provides resources through Liviniti (formerly Southern Scripts) and TargetCare to enable you to accomplish your goal. You can utilize one or more of the following resources to become tobacco free. Reach out to a2 for more info!



Tax-Advantaged Accounts







- Flexible Spending Accounts (FSA)
 - Healthcare FSA
 - Limited Purpose FSA
 - Dependent Care FSA
- Health Savings Accounts (HSA)

Health Savings Account



- Being enrolled in the HDHP Medical plan option gives you access to a Health Savings
 Account (HSA). This is an account that allows you to set aside tax-free dollars to
 save money to pay for eligible healthcare expenses! This account is your personal
 bank account, and you keep the account if you leave the City.
- The City of Woodstock will contribute \$750 for individual and \$1,500 for family tiers.
- You can view your account details through your UMR account login or on Optum directly.
- The account belongs to you and you take it with you should you ever leave the City.

Individual Maximum	Family Maximum		
\$3,850	\$7,750		
If you are over 55, you can contribute an additional \$1,000 per year.			
(Maximums include City of Woodstock employer contributions)			





Flexible Spending Accounts



- Flexible Spending Accounts (FSAs) enable you to put aside money for out-of-pocket health related expenses. FSAs are a way of using pre-tax payroll deductions to pay for either dependent care or non-reimbursable health expenses.
- City of Woodstock's FSA is on a plan year which runs from October 1 to September 30

Healthcare & Limited Purpose FSA	Dependent Care FSA		
Maximum Contribution \$3,050 Up to \$610 carryover available	Maximum Contribution \$5,000 No carryover – "Use it or lose it"		
FSA Elections do not rollover, you must re-enroll in this benefit each year if you would like to participate!			

Tax-Advantaged Account Comparison UMR AOPTUM



	HSA	Healthcare FSA	Limited- Purpose FSA	Dependent Care FSA
2023 Maximum Contributions	Employee: \$3,850 Family: \$7,750	\$3,050	\$3,050	\$5,000 (\$2,500 if married and filing separate income tax returns)
Who is eligible?	Employees who elect the the HDHP Medical	Employees who elect the Basic or Premium Plans	Employees who elect the the HDHP Medical	Anyone
Eligible Expenses	*Medical, Dental, Vision and Pharmacy Expenses for your and your dependents	Medical, Dental, Vision and Pharmacy Expenses for your and your dependents	*Dental and Vision Expenses for your and your dependents	Daycare expenses for children under 13, disabled dependent care and elder care expenses
Carryover	Entire account balance	Up to \$610 per year	Up to \$610 per year	None – Use it or Lose it!
Funds Available	Only available as payroll deducted. City makes a lump sum payment of \$250 Employee or \$750 any other tier the 1st payroll in October	All funds available at the beginning of the plan year	All funds available at the beginning of the plan year	Only available as payroll deducted

^{*}If you enroll in an HSA and a Limited Purpose FSA, dental & vision expenses can be reimbursed from either account, but the same expenses can't be reimbursed from both accounts. You can't "double dip"!

Examples of Eligible FSA/HSA Expenses

- Orthodontia treatment
- Prescription copays
- Chiropractic
- Contraceptive prescriptions
- Psychiatrist/Counseling
- Durable medical equipment
- Lasik eye surgery
- Medical plan deductible & coinsurance

- Dental plan deductible & coinsurance
- Contact solutions, cleaners
- Vision expenses
- Eyeglasses
- Contact lenses
- Diabetic supplies
- Medical plan office visit copays



Basic Life and AD&D





City of Woodstock provides all full-time employees with a Basic Life Benefit and an additional Accidental Death and Dismemberment benefit. AD&D may pay benefits if you die or suffer from certain serious injuries as a result of an accident.

Employee Benefit: \$50,000 Life and \$100,000 AD&D, Employer Paid!





- **Employee Benefit**: Increments of \$10,000 up to 5x earnings or \$500,000
- **Spouse Benefit**: Increments of \$5,000 up to \$250,000, not to exceed the employee amount
- Child Benefit: Birth to 6 months \$1,000; 6 months to 26 years -\$10,000 / AD&D Flat \$10,000

Guarantee Issue (GI):

- Employee: \$150,000
- Spouse: \$50,000
- Child: \$10,000

Important Notes:

- You must be enrolled in Employee voluntary life / AD&D in order to elect voluntary dependent Life / AD&D coverage.
- The AD&D is non-matching so you can enroll in a different amount of AD&D than life. However, you must enroll in the voluntary life to elect AD&D. (AD&D does not require EOI).
- See the benefit guide, portal or Employee Navigator for rates. Premium increases as enrollee jumps into the next age bracket. Spouse rates are based on the employee age.

Disability Insurance





The City of Woodstock believes that you should have income protection if you are unable to work as a result of illness, injury or an approved maternity leave, offering you the below benefits for disability coverage.

- Voluntary Short-Term Disability
- Employer-Paid Long-Term Disability

Disability Insurance





EMPLOYEE PAID

- Provides 60% of your weekly income up to \$2,000 per week
- Benefits begin on the 15th day after accident or sickness
- The maximum benefit period is 11 weeks



EMPLOYER PAID

- Provides 60% of your monthly salary up to \$5,000 per month
- · Benefits begin after 90 days of disability
- Any long-term disability benefit paid to you is offset by any state-mandated disability benefits you receive





Financial, Legal & Estate Support



NYL's Financial, Legal & Estate Support Program helps you navigate financial and legal challenges which can be very stressful for you and your family. This benefit is offered at no cost.



The program includes:

- Financial Connect access to a team of qualified experts including CPAs and Certified Financial Planners
- Legal Connect gives you access to unlimited phone consultations with a staff of attorneys who can provide guidance on issues such as divorce, adoption, estate planning, real estate and identify theft
- EstateGuidance a user friendly online tool you and your family can access to write a last will and testament, a living will and other documents outlining your wishes for final arrangements
- Phone: (800) 344-9752
- Website: guidanceresources.com (web ID: NYLGBS)

Secure Travel





New York Life Secure Travel offers additional protection when you travel. They have assistance available for pretrip planning, assistance while traveling and emergency medical transportation benefits for covered persons traveling 100 miles or more from home. Service is a phone call away, 24/7/365.

- From the United States and Canada, call (888) 226-4567
- From other locations, call collect (202) 331-7635
- Fax: (202) 331-1528
- Email: ops@us.generaliglobalassistance.com



Employee Assistance & Wellness Support



Life: just when you think you've got it figured out, along comes a challenge.

NYL's suite of value-add resources includes:

- Employee Assistance Program provides support through unlimited telephone access to EAP professionals 24 hours a day, seven days a week. You also have up to 3 face-to-face sessions with a counselor (per issue per year). Visits are 100% confidential & are provided to you through your employer at no cost to you; If additional resources are needed your EAP will help locate the appropriate resources in your area
- Guidance Resources Resources and tools on topics such as health and wellness, legal regulations, family & relationships, work & education, money & investments, and home & auto.
- Well-being Coaching To help you achieve your goals, you have access to a certified coach wo will work with you one-on-one to address issues such as burnout, time management & coping with stress.

• Phone: (800) 344-9752

Website: guidanceresources.com



Employee Assistance Program







- Thriveworks has a dedicated team available to assist you in scheduling an appointment with licensed professional counselors, coaches, and psychologists and can offer a full spectrum of therapy services.
- To schedule an appointment or request services using your benefits, call the dedicated phone number or visit the link for more information.
- Phone: (855) 701-0727
- Website: https://thriveworks.com/partners/city-woodstock/



Nationwide Pet Insurance



Protecting your four-legged family members in an uncertain world isn't always easy. Nationwide® pet insurance helps you provide for your pets—and protect your pocketbook—by reimbursing you for eligible veterinary bills related to accidents, illnesses, preventive care and more.



- You have the option to choose a plan that best fits your needs at a 70% or 50% reimbursement.
- There are options for coverage that include wellness procedures as well.
- Pricing varies by what type of pet you cover, and which plan you choose. Note that preexisting conditions are not covered.
- Enrolling is easy! Use the links or phone numbers below:
 - Go to http://www.petinsurance.com/woodstockga
 - Call 877-738-7874 and mention that you're an employee of City of Woodstock to receive preferred pricing

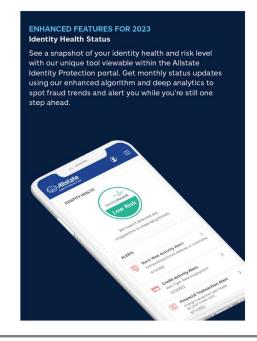






The City provides you the opportunity to purchase a proactive monitoring service that alerts you at the first sign of fraud.

- Get alerts for credit inquiries, accounts opened in your name, unsavory content on your social media account, compromised credentials, and financial transactions and more!
- Enrolling your family extends that protection to anyone in your household.
- Allstate Pro+ plans and pricing: \$9.95 per person / month or \$17.95 per family / month
- To Enroll: Visit https://www.myaip.com/cityofwoodstock or call 1.800.789.2720



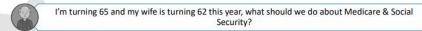


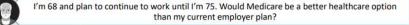
SOCIAL SECURITY & MEDICARE SUPPORT -TRANSITIONS

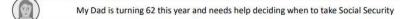
TRANSITIONS Benefit Group WE PROVIDE TRUSTED ADVICE FOR SOME OF LIFE'S MOST DIFFICULT QUESTIONS

Your Employer has partnered with Transitions to provide a premier benefit for you and your family members. Log into our transitionsrbg.com members area to access educational resources and to schedule an appointment with your dedicated advisor!

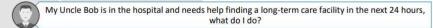












I'm 26 and was laid off work, by my employer. COBRA is so expensive, what are my other options?

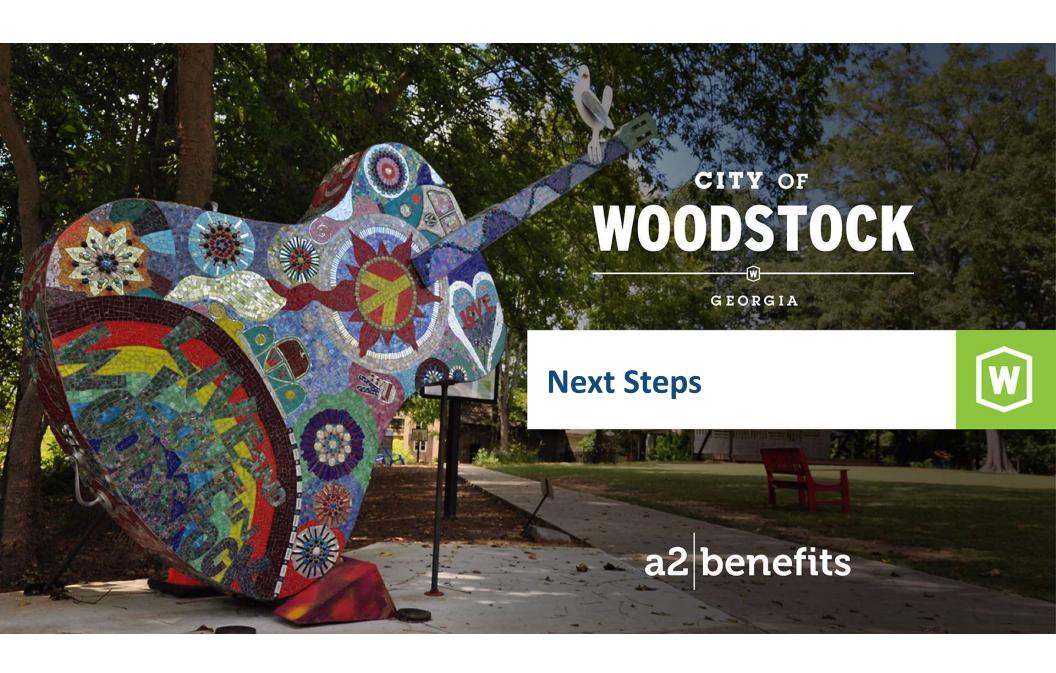
After 42 years, I'm planning to retire this year. What are the key items that I need to be thinking about when I leave my employer.





Who is Eligible for this **BENEFIT?**

- **Employees**
- **Spouses**
- **Dependents**
- **Loved Ones**



How do I Enroll?

Open Enrollment will take place August 23 through August 31

To enroll in benefits, go to https://employeenavigator.com

New Users

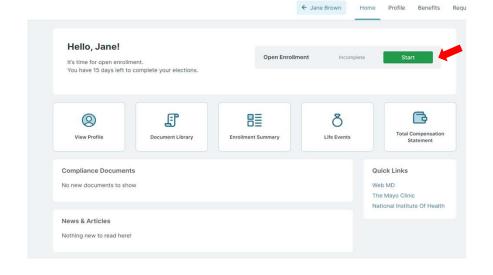
- Click "Login" located in the top right-hand corner of the Home Page
- Click on Register as a new use located at the bottom of the login screen and enter the following information to create your username and password:
 - First Name
 - Last Name
 - · Company Identifier: cityofwoodstock
 - · Last 4 digits of your social security number
 - · Date of Birth

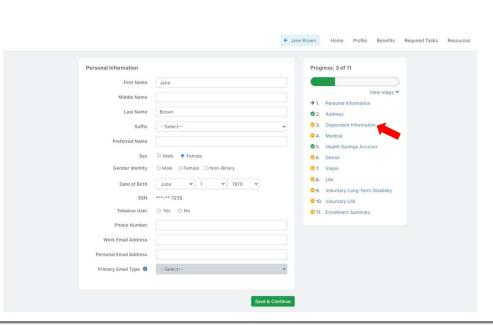
Existing Users

• If you have forgotten your Username or Password, please click the "Forgot Username" or "Forgot Password" link on the LOG IN screen.

How do I Enroll?

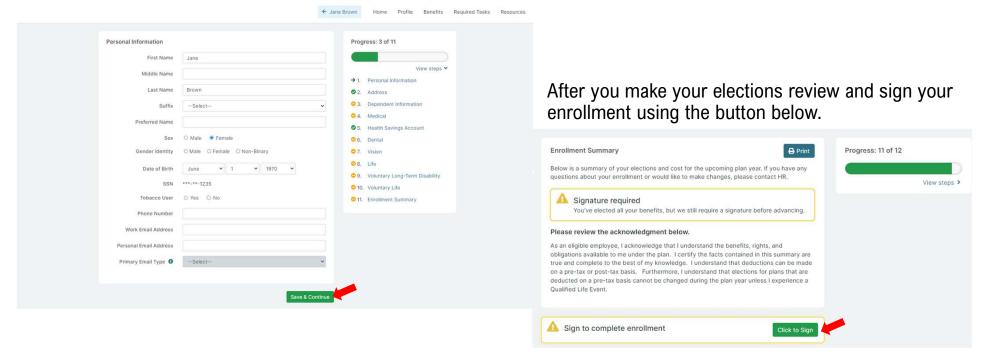
Click "Start" to review/update your personal information. Follow the prompts to add and review your dependents.





How do I Enroll?

Use the Save & Continue button to view and elect/decline each benefit.



Next Steps







- Complete your Enrollment on the enrollment website between August 23 through August 31. Online elections must be made (even if you are waiving coverage) or you risk loss of coverage. Please carefully review your Benefits Guide and plan information.
- Be sure to check Beneficiaries for Life coverages.
- Don't forget to re-elect FSA if you'd like to participate again.
- Call or Email HR or a2 benefits with any questions
 - Woodstock@a2benefits.com or (678) 540-1428
- You can also visit the benefits portal for information on all your City of Woodstock benefits! https://cowoodstock.a2portal.com/

