



EMPLOYEE BENEFIT SUMMARY

CITY OF WOODSTOCK EMPLOYEE BENEFITS GUIDE



CITY OF
WOODSTOCK



GEORGIA

**2025
2026**



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IMPORTANT CONTACTS

Coverage	Vendor/ Contact	Group Number	Contact
WOODSTOCK BENEFIT PORTAL	-	-	https://cowoodstock.a2portal.com/
HUMAN RESOURCES	HR Department	-	770-592-6007 hrdept@woodstockga.gov
GENERAL BENEFIT COVERAGE QUESTIONS	a2 Benefits	-	678-540-1428 woodstock@a2benefits.com
MEDICAL / FLEXIBLE SPENDING ACCOUNT	UMR	Medical: 7670-00-411860 FSA: 7670-03-411860	800-826-9781 www.umar.com
PRESCRIPTION	Liviniti	76411860	800-710-9341 https://liviniti.com/members/
DENTAL	Guardian	00447241	800-627-4200 guardianlife.com
VISION	EyeMed	9721283	866-9-EYEMED www.eyemedvisioncare.com
LIFE / DISABILITY / AD&D	New York Life	Life: SGM 612377 AD&D: SOK 609359 STD: VDT 603424 LTD: SGD 613758	888-842-4462 myNYLGBS.com
EMPLOYEE ASSISTANCE & WELLNESS	New York Life through Guidance Resources	-	800-344-9752 www.guidanceresources.com Web ID: NYLGBS
EMPLOYEE ASSISTANCE PROGRAM	Thriveworks	-	855-726-8765 https://thriveworks.com/partners/enterprise
WELLNESS AND WELLNESS REWARDS	TargetCare	-	704-333-5575 x1000
IDENTITY THEFT PROTECTION	Allstate Identity Protection	-	800-789-2720 www.myaip.com/cityofwoodstock
PET INSURANCE	Nationwide	-	877-738-7874 www.petinsurance.com/woodstockga
VIRTUAL HEALTHCARE ASSISTANT	HealthJoy	-	Download the App today! Search “HealthJoy” in the Apple Store or Google Play 877-500-3212
CONTINUATION OF CARE ASSISTANCE	Transitions	-	800-936-1405



August 2025

City of Woodstock Employees,

This booklet is designed to help you understand the benefits we offer and how to use them. Please take it home and share it with your family. Knowing your health plan options and how to use them effectively can help you and your family meet your health goals. While there are a few changes to this year's plans and contributions, most vendors and benefits remain the same.

You'll find full details on the benefits and contributions in the following pages, but here are a few highlights:

- The Medical Basic and Premium plans have no design changes, except for an increase to the HDHP deductible to remain compliant with federal law. The individual deductible will rise to \$1,650 and the family deductible to \$3,300, effective October 1, 2025.
- For Medical HDHP participants, the City will contribute \$250 for employee-only and \$500 for all other tiers as a lump sum, with the remaining amount paid per pay period.
- Medical contributions will increase slightly for 2025. New rates are included in this guide and take effect October 1, 2025.
- The City will continue to use Liviniti as our pharmacy benefits partner. We encourage using their preferred First Choice pharmacies to help reduce costs for you and the plan. The voluntary International Mail Order Program will also continue.
- New! The Variable Copay Program (VCP) which is currently voluntary, will become mandatory on October 1, 2025. This program uses manufacturer copay assistance to reduce costs for both you and the plan. Certain high-cost medications will require use of a designated mail order pharmacy to access savings.
- The City will continue to provide Basic Life, Basic AD&D, and Long-Term Disability at no cost to you, through New York Life. Voluntary Life coverage remains available for employees and eligible dependents. Voluntary Short-Term Disability coverage is also available.
- Dental coverage will remain with Guardian. The annual orthodontia maximum is increasing to \$1,500, and employee contributions will stay the same.
- Vision coverage will remain with EyeMed, with no changes to the plan or rates.
- The City will continue its Wellness Program through TargetCare and HealthJoy.
- Voluntary benefits for Identity Theft Protection (Allstate) and Pet Insurance (Nationwide) will continue.
- Transitions Planning support remains available to assist employees and families as they approach Social Security retirement age, become eligible for Medicare, or need COBRA alternatives.

Understanding and using your benefits wisely can help save money and ensure we continue offering valuable coverage at affordable rates for all.

Thank you for everything you do each day.

Jeffrey Moon
City Manager

CITY HOLIDAYS

New Year's Day	January 1
Martin Luther King Day	Third Monday in January
Memorial Day	Last Monday of May
Independence Day	July 4
Labor Day	First Monday in September
Veteran's Day	November 11
Thanksgiving Day	Last Thursday of November
Day after Thanksgiving	Last Friday of November
Christmas Eve/Day	December 24/25

If a holiday falls on a Sunday, the following Monday shall be deemed the legal holiday.

If legal holiday falls on a Saturday, the preceding Friday shall be deemed the legal holiday.

CITY ANNUAL PERSONAL LEAVE

Full-time employees shall accrue personal leave from their date of employment. Personal leave shall accrue to the credit of each employee up to a maximum total accumulation of 680 hours for general employees, 728 hours for 207(k) police department employees and 836 hours for 207(k) fire department employees as of June 30 of each fiscal year.

GENERAL PERSONNEL		
Years of Service	Hours Earned Each Month	Hours Earned Each Year
<5	13.34	160
5	18.00	216
10	20.00	240
15	20.67	248
20+	21.33	256

SWORN POLICE PERSONNEL		
Years of Service	Hours Earned Each Month	Hours Earned Each Year
<5	13.75	165
5	18.75	225
10	20.92	251
15	21.67	260
20+	22.33	268

CERTIFIED FIRE PERSONNEL		
Years of Service	Hours Earned Each Month	Hours Earned Each Year
<5	15.50	186
5	21.67	260
10	24.33	292
15	25.42	305
20+	26.08	313



ELIGIBILITY FOR BENEFITS

You and your dependents are eligible for the City's plan of benefits on the first of the month following date of hire. You must work at least 30 hours per week to be eligible for benefits. After you become eligible for benefits, you will have an opportunity to change your benefits once each year during open enrollment. The elections you make during open enrollment will be in effect until our next open enrollment.

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.

Spouses and dependent children of the employee are also eligible to participate in our benefit plans.

Dependent children include natural children, legally adopted children, stepchildren and children for whom the employee has been appointed legal guardian. To be eligible for dependent coverage, proof that dependents meet the above criteria will be required.

You can enroll the following dependents in our group benefits plan:

UMR Medical, Guardian Dental and EyeMed Vision Plans:

- Legal Spouse
- Dependent children up to the age of 26
- Unmarried children over the age of 26 not able to support themselves due to a physical disability or developmental disability

NYL Voluntary Life:

- Legal Spouse
- Dependent children up to the age of 26

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.

When an employee separates from the City either voluntarily or involuntarily:

In the event you are no longer an active employee with the City, life, AD&D, short and long term disability benefits as well as the flexible spending accounts terminate immediately upon separation. All other benefits terminate at the end of the month in which your separation occurs.

BENEFIT CHANGES

When can I make changes to my benefit elections?

You have the opportunity to pay for your medical, dental and vision premiums on a pre-tax basis through our Cafeteria Plan. The IRS has established rules for your elections that dictate once you have made elections for the plan year, you may not change them until the next annual enrollment, unless a qualifying event occurs. It is your responsibility to notify the Human Resources department of any benefit changes within **31 days** of the qualifying event. If you miss this opportunity to enroll within the 31-day period, you are required to wait until the next open enrollment.

A qualifying event includes any of the following changes:

- Marriage or Divorce
- Birth or Adoption of a Child
- Death of a Spouse or Child
- Change in Spouse's employment or health insurance that affects your family benefits
- Change in residence or worksite if it affects the health coverage
- Change in Spouse's coverage/enrollment

EMPLOYEE NAVIGATOR

The City will continue using Employee Navigator. If you have already registered, simply enter your username and password. If you have not yet registered, follow the directions below.

Step 1: Go to <https://www.employeenavigator.com/>

Step 2: Click **Login** (located in the top right-hand corner of the screen)

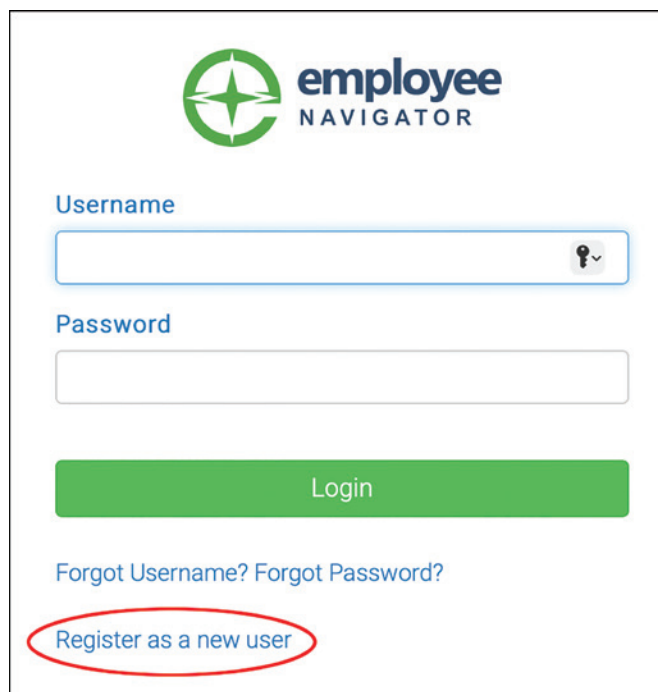
Step 3: Click **Register as a new user**.

Step 4: Provide 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

Once you've completed the registration process, you'll have access to the online enrollment system. You can access this system at anytime to review your current elections, plan summaries and even make address changes.

If you have any questions regarding Employee Navigator, please contact the a2 Benefits Team at woodstock@a2benefits.com or by phone at (678) 540-1428 Monday through Friday 8am – 5pm EST.



employee NAVIGATOR

Username

Password

Login

Forgot Username? Forgot Password?

Register as a new user



MEDICAL BENEFITS

THE CITY OF WOODSTOCK OFFERS EMPLOYEES THREE MEDICAL PLAN OPTIONS THROUGH UMR, A DIVISION OF UNITED HEALTHCARE.

As healthcare costs have risen, it continues to be a challenge for the City to offer its employees affordable benefit options. Our goal is to offer affordable benefit options that also provide you with access to high-quality services. We offer our employees access to Choice Plus Point of Service (POS) plans through UMR. The Choice Plus network allows you to visit an in-network provider without a primary care physician (PCP) referral. You can locate an in-network provider by going to www.umar.com and selecting the United Healthcare Choice Plus network.

The City offers a High Deductible Health Plan (HDHP) medical plan option. Under this plan, you are responsible for the full cost of your network discounted services, up to your deductible of \$1,650 for individual or \$3,300 for all dependent tiers. Once you meet your deductible, the City pays for 90% of your service costs and you are responsible for the remaining 10% until your out of pocket maximum is met. This plan is not eligible for a 4th quarter deductible carryover credit, but it does give you access to a Health Savings Account (HSA), which the City funds up to \$750 for individuals and \$1,500 for dependent tiers.

In addition to the HDHP, the City offers two POS plan options. The Premium plan offers a \$1,000 Employee only, \$2,000 Employee plus Spouse OR Child or \$3,000 Family deductible. Once you meet your deductible, the City pays for 90% of your service costs and you are responsible for the remaining 10% until your out of pocket maximum is met. The Basic plan offers a \$2,000 Employee only, \$4,000 Employee plus Spouse OR Child or \$6,000 Family deductible. Once you meet your deductible, the City pays for 80% of your service costs and you are responsible for the remaining 20% until your out of pocket maximum is met. The POS plans are eligible for a 4th quarter deductible carryover credit.

Tobacco Surcharge

Effective since October 1, 2013 the City applies a \$75.00 tobacco surcharge to your monthly premium if you are a tobacco user. In order to avoid the surcharge, you are required to sign an affidavit stating you have been tobacco free for the past 90 days and will continue to be tobacco free.

UHC Premium Designation Program

The Basic and Premium plans have office visit copays of \$25 when visiting an in-network primary care doctor. For specialists, the office visit copay is \$35. If employees choose an in-network doctor that is designated as a **“Premium Provider”** in the UHC Choice Plus POS Network, you receive a \$10 discount on your office visit copays for both primary care and specialists.

The Premium program recognizes doctors that meet both quality and cost efficiency guidelines. These measures combined with engaging patients in the healthcare decision-making process can help achieve better outcomes while improving the experience and reducing costs. You can find a provider's designation on umar.com. Click on Find a Provider and look for the 2 blue hearts.





MEDICAL BENEFITS

POS PLAN	In-Network Basic Plan	In-Network Premium Plan	In-Network HDHP
CALENDAR YEAR DEDUCTIBLE			
EMPLOYEE	\$2,000	\$1,000	\$1,650
EMPLOYEE + SPOUSE OR CHILD	\$4,000	\$2,000	\$3,300
FAMILY	\$6,000	\$3,000	\$3,300
OUT OF POCKET MAXIMUM (OOP) includes deductible under medical	Combined Maximum for RX & Medical	Combined Maximum for RX & Medical	Combined Maximum for RX & Medical
EMPLOYEE	\$3,000	\$1,500	\$2,250
EMPLOYEE + SPOUSE OR CHILD	\$6,000	\$3,000	\$4,500
FAMILY	\$9,000	\$4,500	\$4,500
LIFETIME MAXIMUM	Unlimited	Unlimited	Unlimited
COINSURANCE	80% / 20%	90% / 10%	90% / 10%
OFFICE VISITS			
PREVENTATIVE	Covered at 100%	Covered at 100%	Covered at 100%
PRIMARY CARE VISIT	\$25 (\$15 for Premium)	\$25 (\$15 for Premium)	Deductible, then 10% coinsurance to OOP
SPECIALIST VISIT	\$35 (\$25 for Premium)	\$35 (\$25 for Premium)	Deductible, then 10% coinsurance to OOP
MATERNITY PHYSICIAN SERVICES (FIRST VISIT ONLY)	\$250 Copay	\$250 Copay	Deductible, then 10% coinsurance to OOP
EMERGENCY ROOM VISIT (WAIVED IF ADMITTED)	\$250 Copay	\$250 Copay	Deductible, then 10% coinsurance to OOP
URGENT CARE	\$35 Copay	\$35 Copay	Deductible, then 10% coinsurance to OOP
INPATIENT SERVICES / OUTPATIENT SURGERY / PHYSICIAN SERVICES	\$250 Copay per Admission then Deductible and Coinsurance	\$250 Copay per Admission then Deductible and Coinsurance	Deductible, then 10% coinsurance to OOP
COMPLEX IMAGING (MRI / CT / PET)	\$400 Copay then Deductible	\$350 Copay then Deductible	Deductible, then 10% coinsurance to OOP
DIAGNOSTIC/ X-RAY	No Charge	No Charge	Deductible, then 10% coinsurance to OOP
FIRST-CHOICE PHARMACY PRESCRIPTION DRUGS-30 DAYS (TIER 1 / TIER 2 / TIER 3 / TIER 4 SPECIALTY)	\$15 / \$30 / \$60 Copay / 25% to \$200 Max	\$15 / \$30 / \$60 Copay / 25% to \$200 Max	Deductible, then 10% coinsurance to OOP
NON-FIRST-CHOICE PHARMACY PRESCRIPTION DRUGS-30 DAYS (TIER 1 / TIER 2 / TIER 3 / TIER 4)	\$25 / \$40 / \$70 Copay / 25% to \$250 Max	\$25 / \$40 / \$70 Copay / 25% to \$250 Max	Deductible, then 10% coinsurance to OOP
MAIL ORDER-90 DAYS (TIER 1 / TIER 2 / TIER 3)	\$25 / \$60 / \$120 Copay	\$25 / \$60 / \$120 Copay	Deductible, then 10% coinsurance to OOP

Out-of-Network: All plans offer out-of-network benefits. Should you go out-of-network, the plan pays 60% for most services after you have met your out-of-network deductible of \$6,000 employee / \$12,000 employee + spouse or child / \$18,000 family. If you go out-of-network, you may be required to file your claims yourself or pay for services then wait for reimbursement. You may also be balance billed by your provider for any difference between what your plan pays and what your provider bills. Refer to the plan documents for additional details.



MEDICAL DEDUCTIONS

Below are the bi-weekly (26) payroll deductions for your employee benefits effective 10/1/2025 - 9/30/2026.

Medical Bi-weekly Payroll Deductions (26)	Basic Plan	Premium Plan	HDHP
MEDICAL			
Employee Only	\$43.48	\$54.24	\$15.75
Employee + Spouse	\$139.09	\$154.26	\$103.35
Employee + Child(ren)	\$111.90	\$135.38	\$88.44
Family	\$214.39	\$237.76	\$159.29
MEDICAL NON- PARTICIPATION IN WELLNESS			
Employee Only	\$78.09	\$88.86	\$50.36
Employee + Spouse	\$173.71	\$188.87	\$137.96
Employee + Child(ren)	\$146.52	\$170.00	\$123.05
Family	\$249.00	\$272.37	\$193.91
MEDICAL TOBACCO SURCHARGE			
Employee Only	\$78.09	\$88.86	\$50.36
Employee + Spouse	\$173.71	\$188.87	\$137.96
Employee + Child(ren)	\$146.52	\$170.00	\$123.05
Family	\$249.00	\$272.37	\$193.91
MEDICAL NON- PARTICIPATION IN WELLNESS/ TOBACCO SURCHARGE			
Employee Only	\$112.71	\$123.47	\$84.98
Employee + Spouse	\$208.33	\$223.49	\$172.58
Employee + Child(ren)	\$181.14	\$204.62	\$157.67
Family	\$283.62	\$306.99	\$228.52

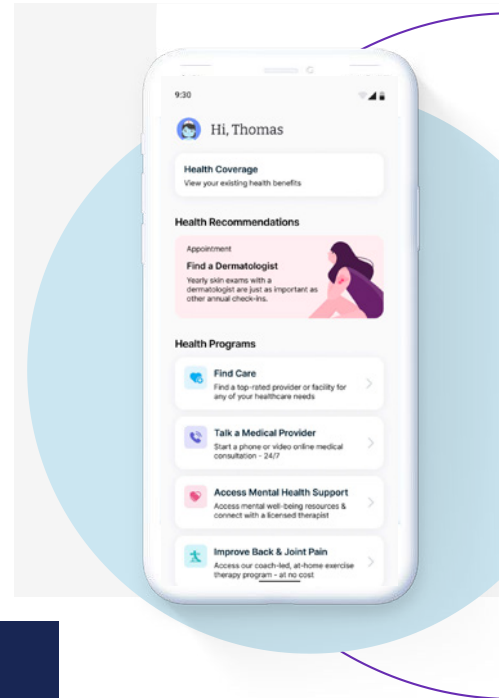
HEALTHJOY

HealthJoy Makes it Easier to be Healthy and Well.

HealthJoy is the virtual access point for all your healthcare navigation and employee benefits needs. HealthJoy is provided free by the City to help you understand and make the most of your benefits. We connect you and your family with the right benefits at the right moment in your care journey, saving you time, money, and frustration.

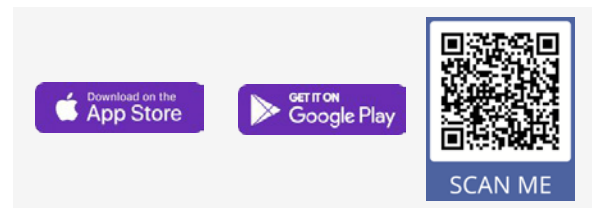
Help For Your Healthcare Journey.

With 24/7 access to our dedicated healthcare concierge team and care navigation tools, you never have to walk alone. HealthJoy helps you locate in-network doctors, find extra savings on your prescriptions, and navigate your benefits. Our mobile app and dedicated member support team are always on hand to help make it easier to stay healthy and well.



NEW for the 2025-2026 Plan Year:
MENTAL HEALTH visits will be available for a \$25 copay

Chat with HealthJoy today by
 logging into the HealthJoy app
 or call (877) 500-3212



TRANSITIONS

The City of Woodstock has partnered with Transitions Benefit Group to offer assistance to employees and their families with any benefit transition. If you or a loved one have any questions regarding Medicare, retirement planning, or continuity of benefits including COBRA alternates, please reach out to Transitions, where you will be connected to an advisor to help you with your needs. Transitions also has an online Member Hub - <https://www.transitionsrbg.com/>. Once registered on the Member Hub, you will gain access to On-Demand webinars, snippet videos, and Educational Series. These are great resources to have at your fingertips.

This benefit is 100% paid for by the City.



CALL TRANSITIONS TODAY AT 800-936-1405

WELLNESS BENEFITS

TARGET CARE

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. The City has partnered with TargetCare for our Onsite Clinic and Wellness Coaching. Employees can voluntarily elect to participate in the Wellness program through TargetCare. Participation includes the completion of a Clinical Health Assessment (CHA). Depending upon your results you could be required to meet with the TargetCare health provider on a regular frequency:

Extremely High Risk: Once every 4 weeks

High or Borderline High Risk: Once every 8 weeks

Above Normal Risk: Once every 16 weeks

Optimal or Normal: Not required; optional

The City remains committed to keeping rising medical costs at a minimum while encouraging our employees to live healthier lives. Upon completion of your biometrics you will receive a baseline score that will be explained to you by your TargetCare provider.

If your score is above the 81+ threshold, you will need to improve the score you receive by 5% in order to earn the wellness discount for the following plan year.

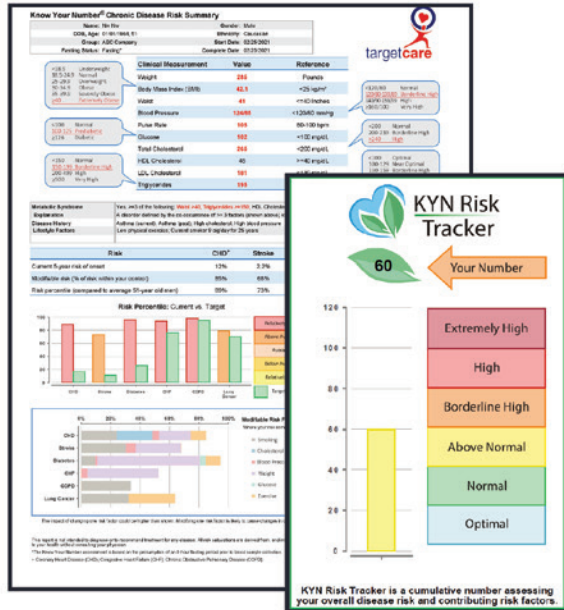
The cost for non-participation in the wellness program and/or tobacco usage is \$75 per month per program.

If you feel you are unable to meet any of the wellness program requirements to earn the wellness reward/avoid the tobacco surcharge for any reason, you may be able to earn the reward/avoid the surcharge by participating in the Reasonable Alternative Standard (RAS) program. Please contact TargetCare for additional information.



WELLNESS BENEFITS

TARGETCARE PROGRAM



Participating in the TargetCare Baseline Program (CHA & ROT Coaching) can earn you an incentive towards health insurance premiums.

Clinical Health Assessment

- Annual Clinical Health Assessments (CHA) utilize blood draws and biometric measurements to project personal health summaries.
- These individual reports are then reviewed with your TargetCare provider for targeting areas of improving overall health.

Right on Target Guidelines

- After the CHA, your TargetCare provider will guide you through your "Right on Target" visits.
- Your TargetCare provider has the knowledge and tools that will assist you as you reach your health and wellness goals.
- Our clinical providers are experts in coaching on:

- Lifestyle & Weight Management
- Disease Management
- Stress & Anxiety
- Hypertension
- Diabetes
- Tobacco Cessation
- And More!

Right on Target Guidelines

To participate in your organization's Wellness Program and to be eligible for the wellness incentive (discount on your health insurance premiums), we need your commitment to do the following:

- Complete the Clinical Health Assessment and Face-to-Face Review which includes:
 - completing a health assessment
 - having your blood pressure checked
 - having your blood sugar checked
 - Face-to-Face CHA Review
- You may also bring a coach to your visit. We will need a coach to assist you with the assessment.
- Depending on your Know Your Number score, you must participate in one of the following activities:
 - Extremely High Risk (120 or higher):** Complete 4 activities (4 weeks for each activity).
 - High Risk (101-120):** Complete 3 activities (8 weeks for each activity).
 - Borderline High Risk (81-100):** Complete 2 activities (16 weeks for each activity).
 - Above Normal Risk (61-80):** Complete 1 activity (32 weeks for each activity).
 - Normal Risk (41-60):** Complete 0 activities (64 weeks for each activity).
 - Optimal Risk (0-40):** Complete 0 activities (64 weeks for each activity).
- Along with remaining on target, employees must meet the wellness incentive, an alternative standard with which you can compare your progress. It will be your personal responsibility to ensure you are on target.

Although these guidelines are intended to help you understand the program, they are not intended to replace the advice of your doctor. They are intended to encourage you to continue to remain strictly confidential.

City of Woodstock Scorecard Program

TargetCare Baseline Program

To earn \$75 per month towards health insurance premiums, employees must complete the baseline program (complete CHA, Review, "Right on Target" coaching, and RAS goal).

Additional Incentive Opportunities

To earn up to \$250 annually in gift cards through the rewards mall, employees must complete:

- Annual TargetCare Baseline Program
- A combination of the following activities to earn \$1 per 1 point:

*Note: Roll-over points are valid for up to one program year.

Activity Type	Activity	Points	Frequency	How To Get Points	
Preventive Care	Annual Flu Shot	10	As Necessary	Employees will login to their TargetCare Health Portal (targetcarehealth.com) or mobile app to upload proof for all tests & exams.	
	Colonoscopy	20			
	Mammogram or Prostate Exam	20			
	Cervical Cancer Screening	20			
	Dental Exam	10			
TargetCare Wellness Activities	Blood Drive	10	Employees will login to their TargetCare Health Portal (targetcarehealth.com) or mobile app to upload proof for all tests & exams.		
	Complete a walk/run/bike event	5			
	Biometric Screening (Learning Center Video Series)	5			
	Individual Challenges	10			
	Register for Healthy App	2			
	BONUS Points (up to 10 points)	2			
	Watch the Wellness Video	4		One-Time	
	Sync Your Device	2			
	Step Goals	4			Monthly
	Exercise	4			
TargetCare Wellness Activities	Blood Drive	4	Quarterly		
	Complete a walk/run/bike event	5			
	Biometric Screening (Learning Center Video Series)	5			
	Individual Challenges	10			
TargetCare Wellness Activities	Register for Healthy App	2	Quarterly		
	BONUS Points (up to 10 points)	2			

To be eligible for the above incentives, you must be an active employee at the time of payout.

Need assistance with portal? Please call TargetCare at 704.333.6575 x 1000, Monday - Friday between 8:30am - 5pm EST.

Wellness Scorecard Activities

- To earn up to \$250 annually in gift cards through the rewards mall, employees must (in addition to the Baseline Program) complete a combination of the scorecard activities including:
 - Participating in quarterly individual wellness challenges that focus on different wellness topics throughout the year.
 - Complete preventive screenings.
 - Track steps monthly.
 - And much more!



MEDICAL VALUE-ADDS

UMR MEMBER PORTAL

Make umr.com your first stop. Log into your portal for easy access to:

- View **My Taskbar**, your personalized benefits to-do list
- Check your benefits and see what's covered
- **View your Claim Details or View EOB** to look up what you owe and how much you've paid
- Find a doctor in your network
- Learn about medical conditions and your treatment options and get an idea of the cost ahead of time by using the **Health Cost Estimator**
- Access tools and trusted resources to help you live a healthier life
- View a copy of your ID Card

Take UMR with you on-the-go! Access all the same information via your phone by simply using the same username and password that you use on the full-site. There is no app to download, nothing to install, no waiting. **Visit umr.com today.**

YOUR PLAN ADVISOR

Plan Advisor delivers an experience that's beyond traditional models of member support. UMR's advisors partner with you so you feel more confident in the decisions you make about your health.

- Connecting you to the care you need
- An actual person who is focused on serving you, equipped with knowledge and options to support you and your goals
- Will connect you to the proper resources if your needs are out of their reach
- Will match you to a high-quality provider.
- Can schedule appointments and identify possible health screenings or preventive care
- Ready to go with your benefit details to help navigate your coverage and costs

Plan advisors are available weekdays from 8am to 5pm EST at 800-826-9781.

NURSELINE

UMR's 24/7 Nurseline service is here for you to answer questions or provide advice about a medical issue. If you find yourself up late with a sick child, worrying about a recent diagnosis, or planning for an upcoming surgery, the Nurses are here for you! The best part? There is no cost to you for this service.

CALL NURSELINE TODAY at:

877-950-5083

CHAT LIVE ONLINE:

1. Sign in to [UMR.com](https://umr.com)
2. From the **Health Center** drop down menu, choose **NurseLine**
3. Select **Nurse chat** to get started

ONE PASS SELECT

An additional gym membership benefit is available to those enrolled in the medical plan. One Pass offers different tier levels from which to choose and includes gyms like: Planet Fitness, LA Fitness, Cyclebar, Pure Barre, Orange Theory, Stretch Lab and more. Additional perks include:

- No long-term contracts
- Flexible fitness options
- Ability to add family members
- Convenient grocery delivery
- Enroll today by visiting www.onepassselect.com and using your **OneHealthID** (your UMR medical username).

PHARMACY PROGRAMS

MAIL ORDER PHARMACY

Through Liviniti (formerly Southern Scripts) Mail Service Pharmacy, you can get up to a 90-day supply of maintenance drugs (those you take regularly to treat ongoing health conditions) delivered right to your home. Choose from one of two options to get started with mail service:



Call to get started at **800-710-9341** or visit <https://liviniti.com/members/>

You will need your Liviniti Group #: 76411860

You can also locate pharmacies, check the formulary drug list, and more via the Liviniti website or Mobile App.

INTERNATIONAL MAIL ORDER PROGRAM

This is a voluntary prescription savings program that is available for certain prescriptions for employees and dependents. It's simple, safe and often free.

- **Simple** - enrolling is easy and your medications are delivered directly to your home.
- **Safe** - Prescriptions are shipped from pharmacies in Canada, the UK and Australia (Tier-1 Countries).
- **Free** - 300+ brand name maintenance medications are offered at NO COST. Shipping and handling are covered by the program too.

To get started with this program, check to see which of your medications are offered. The medication listing can be found at www.IntlMailOrder.com - or call 1-866-488-7874.

FIRST CHOICE PHARMACIES

Members of Liviniti have access to reduced prescription costs at participating FirstChoice™ pharmacies. To locate a FirstChoice™ pharmacy nearest to you visit <https://liviniti.com/members/> and scroll to the middle of the page. Click on the link that states "FirstChoice Pharmacy Network (PDF)" for a full list.

VARIABLE COPAY PROGRAM (MANUFACTURER COPAY ASSISTANCE)

NEW: BEGINNING OCTOBER 1, 2025, THIS VARIABLE COPAY PROGRAM WILL BE MANDATORY FOR THOSE ON THE BASIC OR PREMIUM MEDICAL PLANS.

Variable Copay™ is a revolutionary program designed to significantly reduce the cost of eligible specialty and brand medications by utilizing manufacturer-provided coupons.

How the Variable Copay Program works:

- Variable Copay™ 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.
- Your medication will arrive at your doorstep monthly via a shipping courier (UPS, FedEx, DHL) – approximately 5-7 days before your current medications are completed.
- Should you have any 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 shipment.
- Enrollment in Variable Copay™ is quick and simple. Please call (833) 439-9617 to speak with a dedicated Variable Copay™ Concierge, or download the app to gain access and enroll.

This program is not available to those enrolled in the HDHP Option.

PRESCRIPTION DRUGS AND CONDITION MANAGEMENT

SAVE MONEY WITH GENERIC DRUGS

The City of Woodstock's plan offers low copays on many prescription drugs; however, you may find that you can save even more by switching to a generic drug or using public drug programs at your local pharmacies.

Generic drugs often provide a good alternative to expensive brand name drugs that are the same in dosage, safety, taken the same, same quality, performance, intended use and they meet FDA requirements.

Generic drugs use the same active ingredients and are shown to work the same way with the same risks and benefits as their brand name counterparts.

Generic drugs may cost less because their manufacturers don't have to recoup the investment in research, development and marketing incurred by new drug manufacturers who invest in developing and launching new products. As patents expire on these drugs, other manufacturers apply for FDA approval to sell generic versions. Many local pharmacies and grocery stores offer some type of discount program on common generic drugs.

Check out your preferred store's website for information on their programs.

CHRONIC CARE MANAGEMENT with TELADOC

Live healthier at no cost to you! When you join, you'll have access to connected condition management devices and the support you need. It's all available to you and 100% paid for by the City.

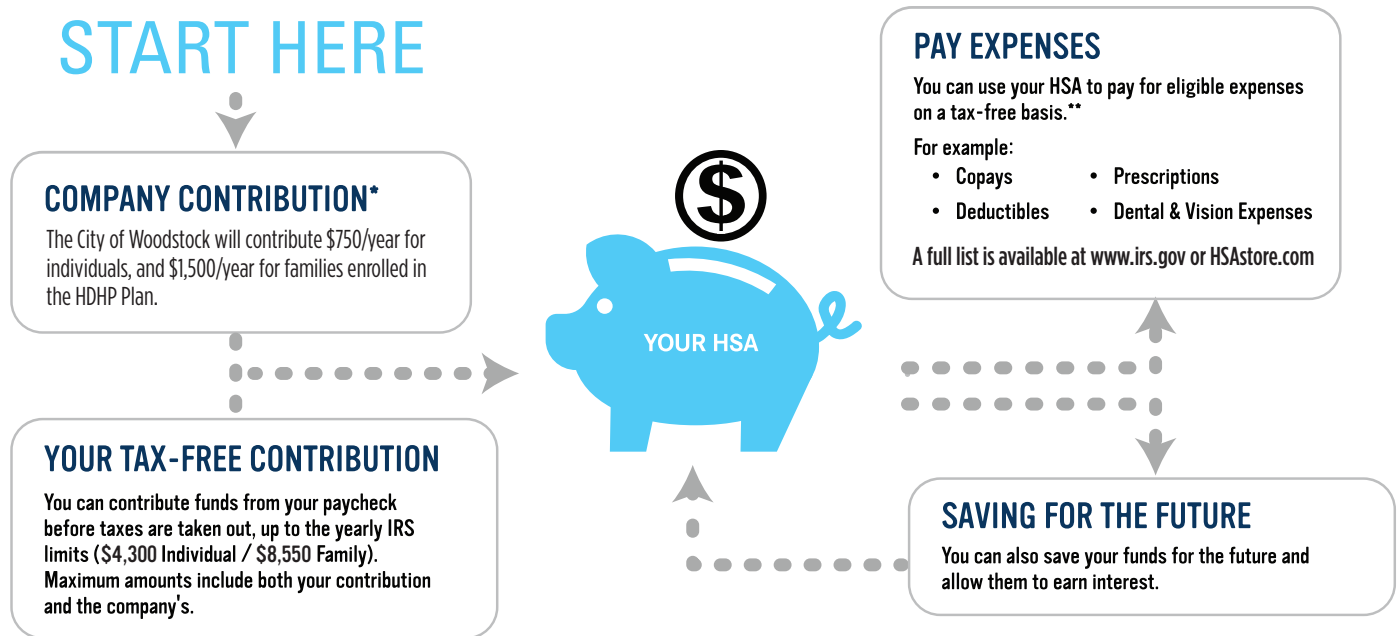
Diabetes Management	Hypertension Management
• Connected meter • Unlimited strips	• Connected monitor • One-on-one coaching
Weight Management & Diabetes Prevention	...And more programs!
• Connected scale • Expert guidance	• Health experts • Personalized plans

Get started today to see if you qualify:
Visit: TeladocHealth.com/Smile
Or call: 800-835-2362



HEALTH SAVINGS ACCOUNT (HSA)

If you enroll in the High Deductible Health Plan (HDHP), you'll have access to an HSA. You can think of your HSA as a personal savings account for your healthcare expenses, with some impressive tax advantages. The account even includes a contribution from the City of Woodstock that can be a big help throughout the year.



HOW MUCH CAN YOU CONTRIBUTE?	2025 IRS CONTRIBUTION LIMIT	WOODSTOCK CONTRIBUTION	YOUR MAXIMUM CONTRIBUTION AMOUNT
Employee Only Coverage	\$4,300*	\$750	\$3,550
Family Coverage	\$8,550*	\$1,500	\$7,050

*If an individual reaches age 55 by the end of the calendar year, he or she can contribute an additional \$1,000.

LET'S BREAK IT DOWN

- You and The City of Woodstock can add funds into the HSA that are not subject to federal income taxes** up to the IRS limits.
- The HSA allows you to pay for the qualified medical expenses with these tax-free funds. Examples of qualified expenses include but are not limited to deductibles, copays, prescriptions, dental work, eyeglasses or contacts, medical equipment, and more. For a full list, you can visit the IRS website. You can also visit HSAstore.com for additional examples.
- The account can earn interest on a tax-free basis, **and you are allowed to roll funds over year after year.**
- If you leave The City of Woodstock, or retire, you can take your HSA with you.
- You will receive a lump sum amount of either \$250 or \$500 depending on whether you are enrolled in employee or any other tier. on the first payroll after October 1, 2025. The balance will be funded bi-weekly.

**Any reference to taxes is at the federal level. State tax rules may vary.



FLEXIBLE SPENDING ACCOUNTS (FSA)

Flexible Spending Accounts or 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. FSAs allow you to increase your spendable income! You do not pay taxes, nor do you pay Social Security on the FSA payroll deductions. City of Woodstock's FSA is on a plan year which runs from October 1 to September 30.



FSA Type	Purpose	IRS Maximum
Health Care FSA*	Provides out-of-pocket health care expense reimbursement for prescriptions, dental and vision expenses. Not available if you are also enrolled in an HSA which is similar and has fewer restrictions.	\$3,300
Limited Purpose FSA	Provides out-of-pocket health care expense reimbursement for dental and vision expenses only (not medical) when you are enrolled in an HSA.	\$3,300
Dependent Care FSA	Provides expense reimbursement for daycare expenses for children up to age 13, disabled dependent care and elder care expenses.	\$5,000

Important! Unlike HSAs (described on prior page), unspent funds contributed to FSAs are subject to “use it or lose it” rules dictated by the IRS. Other than a permitted rollover of up to \$660 for health care FSAs, if you do not use all your elected FSA funds for claims incurred during 2025, unspent amounts will be forfeited so please plan your contribution amount carefully. For a list of eligible expenses, please visit [IRS.gov](https://www.irs.gov) or [FSAstore.com](https://www.fsastore.com).

TAX-ADVANTAGED ACCOUNT COMPARISON

Features	HSA	Health Care FSA*	Limited Purpose FSA	Dependent Care FSA
Who Can Enroll?	Employees who elect the HDHP medical plan	Employees in the Basic & Premium Medical Plan Options	Employees who elect the HDHP medical plan	All Employees
2025 Maximum Contributions	Employee: \$4,300 Family: \$8,550	\$3,300	\$3,300	\$5,000 (\$2,500 if married and filing separate income tax returns)
Eligible Expenses	Medical, dental, vision, and prescription expenses for you or eligible dependents	Medical, dental, vision, and prescription expenses for you or eligible dependents	Dental and vision expenses only for you or eligible dependents. Can be elected alongside an HSA to increase tax-deductible contributions.	Daycare expenses for children up to age 13, disabled dependent care and elder care expenses
Carryover	Entire account balance rolls over	Up to \$660 “use it or lose it”	Up to \$660 “use it or lose it”	No. Plan is “use it or lose it”

*You cannot enroll in the Healthcare FSA if you are enrolled in the HDHP Medical Plan.

DENTAL BENEFITS

The City of Woodstock offers two Guardian dental plans at the same cost.

Under both plans, Dental Guard Preferred Network Providers are contractually obligated to accept the fee schedule as payment in full. You can find out if your dentist participates in the network or find a new, participating dentist by visiting guardianlife.com and searching for a dentist under the Dental Guard Preferred Network.



Network Access Plan (NAP)

Members of the NAP can use either an in-network or out-of-network dentist for services. If you choose to go to an out-of-network dentist, the reimbursement for services is based on usual, customary and reasonable (UCR) charges. Guardian will pay the coinsurance rate based on what 9 out of 10 dentists charge in your area and you may be balance billed.

Value Plan

The Value Plan is similar to the NAP. You have the flexibility to visit in-network or out-of-network dentists for services. However, under the Value Plan, benefits are paid at higher coinsurance levels on basic and major services and there is no deductible. Scheduled fees are typically lower than the UCR rate, therefore if you go out-of-network, provider reimbursement may be lower than it would be under the NAP Plan and your out-of-pocket expense may be higher.

	Network Access Plan (NAP)	Value Plan
CALENDAR YEAR DEDUCTIBLE (INDIVIDUAL / FAMILY)	\$50 / \$150	\$0
ANNUAL MAXIMUM	\$1,500	\$1,500
PREVENTATIVE SERVICES	100%, not applied to the annual maximum	100%, not applied to the annual maximum
BASIC SERVICES	80% After Deductible	100%
MAJOR SERVICES	50% After Deductible	60%
FILLINGS / EXTRACTIONS	Included in Basic	Included in Basic
ENDO / PERIODONTICS	Included in Major	Included in Major
ORTHODONTIA (AGE 19 AND UNDER)	50% to \$1,500 Lifetime Max	50% to \$1,500 Lifetime Max
ROLLOVER INCENTIVE	Included	Included
OUT-OF-NETWORK CLAIMS	90th UCR	Maximum Allowable Cost (MAC)

Note: If you are using an out-of-network dentist, it is recommended that you elect the Network Access Plan.

Dental Bi-Weekly Payroll Deductions (26)	NAP	Value
Employee Only	\$0.00	\$0.00
Employee + 1	\$12.30	\$12.30
Family	\$19.41	\$19.41



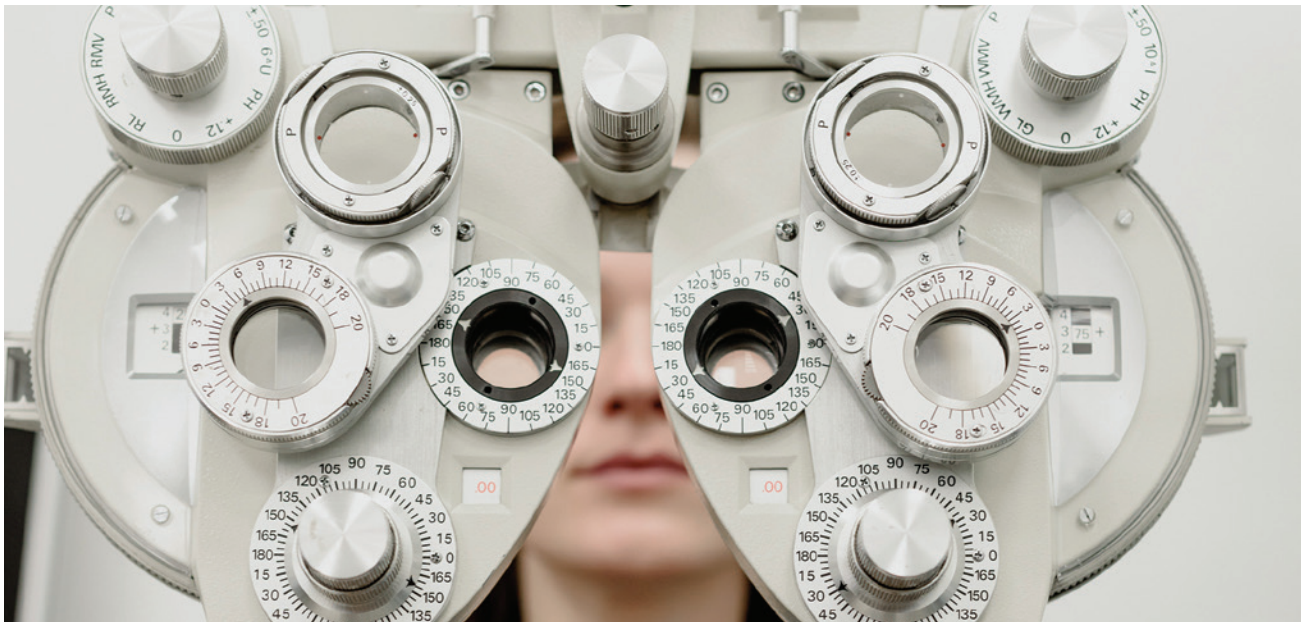
VISION BENEFITS

You may elect vision coverage for yourself and eligible family members through EyeMed Vision Care. Once enrolled, you can elect to see either in-network or out-of-network providers. EyeMed has a network of over 24,000 eye care professionals from which you can choose. This is a voluntary benefit that is 100% paid by you. To find an in-network provider, visit www.eyemedvisioncare.com and choose the Select network.



	In-Network	Out-of-Network
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 / FRAMES / LENSES OR CONTACTS	Once every 12 / 24 / 12 months	

Vision Bi-Weekly Payroll Deductions (26)	Employees Pays Per Paycheck (26)
Employee Only	\$2.58
Employee + 1 (Spouse or Child)	\$4.89
Family	\$7.16



LIFE / AD&D INSURANCE BENEFITS

Basic Life and AD&D

City of Woodstock provides all full-time employees with a Basic Life Benefit of \$50,000 and an additional Accidental Death and Dismemberment benefit of \$100,000. AD&D may pay benefits if you die or suffer from certain serious injuries as a result of an accident.



Voluntary Life & AD&D

In addition to the insurance provided at no cost by the City, you can purchase voluntary life and AD&D insurance to provide additional financial support.

Voluntary Life	Employee	Spouse	Child(ren)
Increments	\$10,000	\$5,000	Birth to 6 months: \$1,000 6 months to 26 years: \$10,000
Maximum Benefit	5x annual salary up to \$500,000	100% of employee amount up to \$250,000	\$10,000
Guaranteed Issue Amount	\$150,000	\$50,000	\$10,000

Voluntary AD&D	Employee	Spouse	Child(ren)
Increments	\$10,000	\$5,000	\$10,000
Maximum Benefit	5x annual salary up to \$500,000	\$250,000	\$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).
- Premium increases as enrollee moves into the next age bracket. Spouse rates are based on the employee age.
- *Life and AD&D benefits reduce by 35% at age 65 and 50% at age 70. Spouse AD&D coverage terminates at age 70.*

Life Insurance Enrollment Timeframes

New Hires – You may apply for up to \$150,000 of coverage through the normal enrollment process. For amounts greater than \$150,000 you will be required to provide an EOI.

Current Employees – During open enrollment, employees may elect or increase their voluntary life and AD&D benefit. Any increases on the Voluntary Life amounts will require EOI. AD&D elections do not require EOI.



VOLUNTARY LIFE / AD&D INSURANCE RATES

Voluntary Life Rates for Employee and Spouse

Age	Monthly Rate per \$1,000	Bi-Weekly Cost per \$10,000
Under 24	\$0.03	\$0.14
25-29	\$0.08	\$0.37
30-34	\$0.09	\$0.42
35-39	\$0.11	\$0.51
40-44	\$0.17	\$0.78
45-49	\$0.23	\$1.06
50-54	\$0.40	\$1.85
55-59	\$0.58	\$2.68
60-64	\$0.91	\$4.20
65-69	\$1.71	\$7.89
70-75	\$4.08	\$18.83
75+	\$4.08	\$18.83

Voluntary AD&D Rates per \$1,000 for Employee and Spouse

AD&D	\$0.03	\$0.14
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Child Life Rates:

\$0.20 per \$1,000 of coverage

\$2.00 for \$10,000 of coverage*

*This one monthly rate covers all dependent children, regardless of the number, for the amount purchased.



DISABILITY INSURANCE BENEFITS

VOLUNTARY SHORT TERM DISABILITY

The cost of your Short Term Disability (STD) plan is *paid for by you*. Benefits are subject to reduction by other sources of income such as statutory disability benefits or Social Security Benefits.

Benefit Amount

In the event that you become disabled (illness or off the job injury), the Voluntary Short Term Disability plan will provide 60% of your weekly base earnings to a maximum of \$2,000 per week beginning on the 15th day of an accident or sickness or hospital confinement.

Benefit Period

The Short Term Disability benefit has a maximum duration of 11 weeks for all full-time employees, which coincides with the beginning of our Long Term Disability plans. Pregnancy is treated as any other illness.

Your Short Term Disability (STD) benefit has an annual open enrollment that is subject to a 3/12 pre-existing condition and EOI is not required. A pre-existing condition is an illness or injury for which you received treatment within the 3 months prior to your effective date of coverage. Disabilities that occur during the first 12 months of coverage due to a pre-existing condition are excluded.

Age	Monthly Rate per \$10 of Weekly Benefit
Under 20	\$0.338
20-24	\$0.339
25-29	\$0.352
30-34	\$0.331
35-39	\$0.319
40-44	\$0.344
45-49	\$0.373
50-54	\$0.463
55-59	\$0.619
60-64	\$0.782
65-69	\$0.799
70+	\$0.903

LONG TERM DISABILITY

We understand that for most of us, our income is our most important financial resource. To be without income for an extended period of time would most likely be devastating for you and your family. The City recognizes the importance of protecting your income against the possibility of long-term disability and pays for the cost of this benefit for benefit-eligible employees.

Benefit Amount

In the event of a qualifying disability, the plan will provide you with 60% of your monthly covered earnings (not to exceed \$10,000 per month for all benefit-eligible employees working 30 or more hours per week). Benefits are subject to reduction by other sources of income such as statutory disability benefits or Social Security Benefits.

Benefit Period

If you become disabled due to accident or illness, the benefit begins after 90 days. Should you become permanently disabled and unable to return to work, or partially disabled, this benefit may continue until your Social Security Normal Retirement Age.

Survivorship Benefit

Should your disability result in death, a Survivorship Benefit of three months disability benefits would be paid to your surviving spouse and/or dependents.

STD Monthly Premium Calculation Formula	
Your salary / 52=	Weekly Earnings
Weekly Earnings * 0.6=	Eligible Earnings
Eligible Earnings / 10=	Weekly Benefit
Weekly Benefit * Above Rate=	Your Monthly Premium



EMPLOYEE ASSISTANCE & WELLNESS

Whatever life throws at you throw it our way. Employee Assistance & Wellness Support.

Life: Just when you think you've got it figured out, along comes a challenge. Whether your needs are big or small, New York Life Group Benefit Solutions is there for you with the Employee Assistance & Wellness Support program.

It can help you and your family find solutions and restore your peace of mind. This is just another example of how New York Life is committed to **Putting Benefits to Work for People.**sm



Our suite of value-add resources includes:

Employee Assistance Program	Are you feeling overwhelmed by the demands of balancing work and family life? Maybe you have questions about a legal or financial concern. You and your family members now have access to various counseling services including legal, financial, and work-life balance assistance. All counseling calls are answered by a Master's or PhD-level counselor who will collect some general information and will discuss your needs. The Employee Assistance Program provides a maximum of three sessions, per issue, per year.
GuidanceResources®	When you need information quickly to help handle life's challenges, you can visit guidanceresources.com for resources and tools on topics such as health and wellness, legal regulations, family and relationships, work and education, money and investments, and home and auto. You will also have access to articles, podcasts, videos, slideshows, on-demand training and "Ask the Expert" which provides personal responses to your questions.
Well-being : Coaching	Sometimes you may need help with personal challenges and physical issues that can be overwhelming. To help you achieve your goals, you will have access to a certified coach who will work with you, one on one, to address health and well-being issues such as burnout, time management and coping with stress. You have access to five sessions per year. All sessions are conducted telephonically.
FamilySource®	Managing the everyday concerns of home, work and family can be difficult. To help resolve those concerns, you have access to family care service specialists that provide customized research, educational materials and prescreened referrals for childcare, adoption, elder care, education, and pet care.

Contact Employee Assistance and Wellness Support 24/7:

PHONE: (800) 344-9752 or **ONLINE:** guidanceresources.com - Web ID: NYLGBS



We are pleased to offer City employees access to an expanded Employee Assistance Program (EAP) with Thriveworks. Thriveworks has a 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.

Thriveworks is ready to help anytime you may need assistance. They are focused on providing a supportive environment to help employees reach their goals of living happy, healthy lives.

To schedule an appointment or request services using your benefits, call (855) 726-8765 or visit the link <https://thriveworks.com/partners/enterprise> for more information.

NEW YORK LIFE PROGRAMS

Financial, Legal & Estate Support 24/7

Our suite of value-add resources includes:

- **FinancialConnect** – Sometimes you may not know where to start when facing a stressful financial challenge or when you need financial planning expertise. With FinancialConnect® you and your family members have unlimited access to a team of qualified experts including Certified Public Accountants (CPAs), CERTIFIED FINANCIAL PLANNERS™ (CFP®) and other financial professionals to help guide you. If additional help is needed, you can request referrals to financial professionals in your local community. In addition, on guidanceresources.com, you will have access to financial information on a wide range of topics including debt management, family budgeting, estate planning and tax planning as well as interactive tools and financial calculators.
- **LegalConnect** – If you are facing a difficult legal challenge and don't know where to start, LegalConnect® can help. This program 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 identity theft. If needed, you can be referred to a local attorney for a free 30-minute consultation and a 25 percent reduction in fees thereafter. Lastly, information on low cost and no legal options are available along with referrals to consumer advocacy groups and governmental organizations if needed.
- **EstateGuidance** – This user-friendly online tool allows you and your family members to write a last will and testament, a living will and documents outlining your wishes for final arrangements quickly, easily and cost effectively. EstateGuidance® walks you through the entire process, guiding your choices with a series of questions and breaking down each step into easy-to-understand terms. Access is available anytime, anywhere via tablet, desktop, or mobile app.

Phone: (800) 344-9752

www.guidanceresources.com

Web ID: NYLGBS

NYL GBS SECURE TRAVEL

New York Life Group Benefit Solutions (NYL GBS) Secure Travel offers additional protection when you travel. They have assistance available for pre-trip 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

SURVIVOR ASSISTANCE

Losing a loved one is extremely difficult, and NY Life understands how challenging it can be to manage a loved one's insurance benefits on top of the other pressures during this time. With Survivor Assurance, you can access your funds easily by writing a check from the book of drafts being sent to you. For questions and help, call NY Life at: **(800) 570-3778 weekdays between 8:00 am and 7:00 pm EST**

VOLUNTARY BENEFITS

NATIONWIDE PET INSURANCE

My Pet Protection® gives your pet superior protection and helps cover the cost of veterinary care if your pet becomes ill or injured. There are options for coverage that include wellness procedures including a new coverage option - My Pet Protection Wellness500. You will have the option to choose a plan that best fits your needs at a 70% or 50% reimbursement. Pricing varies by what type of pet you cover and which plan you choose.



Nationwide®
is on your side

Some of the most commonly covered items are below:

- Accidents, including poisonings and allergic reactions
- Injuries, including cuts, sprains and broken bones
- Common illnesses, including ear infections, vomiting and diarrhea
- Serious/chronic illnesses, including cancer and diabetes
- Hereditary and congenital conditions
- Surgeries and hospitalization
- X-rays, MRIs and CT scans
- Prescription medications and therapeutic diets
- Pre-existing conditions are not covered*

*Any illness or injury that your pet had prior to the start of your policy will be considered a pre-existing condition.

Enrolling is easy! There are three simple ways for you to sign up for your new pet insurance voluntary benefit:

1. Go directly to the dedicated URL: <http://www.petinsurance.com/woodstockga>
2. Visit PetsNationwide.com and enter your company name
3. Call 877-738-7874 and mention that you're an employee of City of Woodstock to receive preferred pricing

IDENTITY THEFT PROTECTION WITH ALLSTATE

Allstate's proprietary monitoring platform detects high-risk activity to provide rapid alerts, so you can detect fraud at its earliest sign, enabling quick restoration for minimal damage and stress. They provide real-time, personalized content about heightened security risks. Alerts leverage internal data to inform you about emerging threats, how they may affect users, and what steps you can take to better protect yourself.



Services include:

- High-risk transaction monitoring
- Financial transaction monitoring
- Unemployment fraud center with dedicated support
- IP address monitoring
- Social media account takeover monitoring
- Lost wallet protection & Stolen wallet emergency cash
- Dark web monitoring
- Robocall blocker / Ad blocker
- Up to \$1 million identity theft expense & stolen fund reimbursement
- Fraud resolution tracker
- Family protection and monitoring
- Family coverage, including parents, in-laws, and grandparents age 65+

Allstate Security Pro+ plans and pricing:

\$9.95 per person / month

\$17.95 per family / month‡

‡ Allstate's generous definition of family covers everyone that's "under roof and wallet." If they are dependent on you financially or live under your roof, they're covered.

How to enroll:

Visit <https://www.myaip.com/cityofwoodstock> or call 1.800.789.2720

VOLUNTARY BENEFITS

DISCOUNTED MEMBERSHIP TO ONELIFE FITNESS



Employees are eligible to access the much larger OneLife Fitness network which includes:

- Carrollton
- Crabapple
- Dawsonville
- Douglasville
- Holly Springs
- Lawrenceville
- Peachtree Commerce
- Peachtree Lexington
- Newnan
- Perimeter
- Vickery
- Windermere
- Woodstock

As part of the employee benefit package, the City of Woodstock will pay the employee's \$20 registration fee and \$17 a month (\$204/yr.) towards an already discounted corporate membership rate of \$24.99/mo. (Basic Individual) and \$32.99/mo. (Premier Individual).

The remaining \$7.99/mo. (Basic Individual), or \$15.99/mo. (Premier Individual), will be the employee's responsibility to pay monthly. OneLife Fitness will bill the employee member directly.

To register, simply go to OneLife Fitness Woodstock and present either a current paycheck stub or your City ID. The employee will then be given a OneLife Fitness Membership Agreement to sign.

READY TO KICK YOUR TOBACCO ADDICTION?

The cost of a tobacco cessation program as well as prescription treatment may be covered through the City's Tobacco Cessation Program.

Tobacco Cessation treatment options available include: prescription alternatives, The Smart Shot, acupuncture and over the counter remedies such as the patch and gums including nicotine products or natural formulas. Treatment options can also be combined with the City's Wellness Program and EAP to provide additional support.

BENEFITS OF QUITTING

Within 20 minutes: Your heart rate drops

Within 12 hours: The carbon monoxide level in your blood is normal

Within 2 weeks to 3 months: Your circulation improves and your lung function returns to normal

Within 1 to 9 months: Your coughing and shortness of breath decrease

Within 1 year: Your risk of heart disease is about half that of a tobacco user

Within 5 years: Your risk of stroke equals that of a non-tobacco user

Your Monthly Insurance Premiums: Are reduced by \$75 when you become tobacco free

RESOURCE LIST

- **Georgia Tobacco Quitline**
1.877.270.STOP
- **St. Joseph's Hospital Knock Out Nicotine**
678.843.7454
- **American Cancer Society**
1.800.ACS.2345
www.cancer.org
- **American Lung Association**
www.quitterinyou.org
- **Kill the Can**
www.killthecan.org
- **SmokeFree.Gov**
1.877.44U.QUIT

If you feel you are unable to meet any of the wellness program requirements to earn the wellness reward/avoid the tobacco surcharge for any reason, you may be able to earn the reward/avoid the surcharge by alternative means. Please contact TargetCare for additional information.

Oakbridge

Employee
Benefits

887 W Marietta St NW | Studio N-108 | Atlanta, GA 30318
678-540-1428 | www.a2benefits.com | woodstock@a2benefits.com

This benefit summary is a brief overview of the benefits offered by the City of Woodstock and is not intended to offer complete details regarding your plan options. Please see the Summary Plan Documents (SPDs) for complete details. You can request SPDs directly from the insurance carrier or Human Resources. If you are uncertain about any provisions of the benefits available to you, please refer to the SPDs that govern the plans.