

# CITY OF WOODSTOCK



GEORGIA

## EMPLOYEE BENEFIT SUMMARY

CITY OF WOODSTOCK EMPLOYEE BENEFITS GUIDE



2018  
2019

# TABLE OF CONTENTS

Letter from City Manager ..... 3  
 City Holidays & Leave..... 4  
 Eligibility ..... 5  
 Cafeteria Plan..... 5  
 Medical & Wellness..... 6  
 Medical Benefit Value Adds..... 8  
 Prescription Drugs..... 9  
 Flexible Spending Account (FSA)..... 10  
 Dental..... 11  
 Medical & Dental Deductions ..... 12  
 Vision ..... 13  
 Life & Voluntary Life..... 14  
 Short Term Disability & Long Term Disability..... 16  
 Disability & Life Insurance Value Adds ..... 17  
 Other Benefits/Value Added Services..... 18



Coverage	Vendor/Contact	Group Number	Contact
<b>GENERAL BENEFIT COVERAGE QUESTIONS</b>	a2 Benefits	-	678-540-1428 woodstock@a2benefits.com
<b>MEDICAL / FLEXIBLE SPENDING ACCOUNT</b>	UMR	Medical: 7670-00-411860 FSA: 7670-03-411860	800-826-9781 www.umar.com
<b>PRESCRIPTION</b>	Southern Scripts	7670-00-411860	800-710-9341 www.southernscripts.net/ members.php
<b>DENTAL</b>	Guardian	00447241	800-627-4200 www.glic.com
<b>VISION</b>	EyeMed	9721283	866-9-EYEMED www.eyemedvisioncare.com
<b>LIFE / DISABILITY / AD&amp;D</b>	One America	G-617488	800-553-5318
<b>WELLNESS</b>	TargetCare		704-333-5575 x1000
<b>HUMAN RESOURCES</b>	HR Department	-	770-592-6007 mnobis@woodstockga.gov



August 2018

City of Woodstock Employees,

We are pleased to be able to continue our existing vendor relationships with UMR, Southern Scripts, Guardian and Eyemed for another plan year. We are replacing Dearborn National with One America which we think you will be very pleased with the transition.

You will find additional benefit plan details on the following pages.

I also have exciting news to share regarding the benefit plan designs and contributions:

- Medical contributions will remain unchanged for both the Premium and Basic Medical POS plans.
- Southern Scripts Variable Copay has been added to your prescription benefit coverage. This was created to help save you money and combat the rising cost of prescription medications.
- The City will continue to provide Basic Life and Long Term Disability benefits at no cost to you.
- In addition, employees will still have the option to elect Voluntary Life insurance for themselves and eligible dependents.
- Employees will have the option to elect Voluntary Short Term Disability insurance for themselves.
- Our Guardian dental plans will continue with no changes in the benefits or the rates.
- The EyeMed vision plan will continue with no plan changes or change in rates.
- The City will continue its Wellness Program through TargetCare.

This booklet is designed to help you understand the benefits that we offer and how to use them. Please take this booklet home and share it with your family. Understanding your health plan options and using them effectively can save you money and help us provide the benefits you need at rates you - and all of us - can afford.

Thank you for all that you do each and every day.

*City Manager*



## CITY HOLIDAYS

<b>New Year's Day</b>	January 1
<b>Martin Luther King Day</b>	Third Monday in January
<b>Memorial Day</b>	Last Monday of May
<b>Independence Day</b>	July 4
<b>Labor Day</b>	First Monday in September
<b>Veteran's Day</b>	November 12
<b>Thanksgiving Day</b>	Fourth Thursday of November
<b>Day after Thanksgiving</b>	Fourth Friday of November
<b>Christmas Eve/Day</b>	December 24/25

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

*If the legal holidays 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.

<b>GENERAL PERSONNEL</b>		
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

<b>SWORN POLICE PERSONNEL</b>		
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

<b>CERTIFIED FIRE PERSONNEL</b>		
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.

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 may be required.

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

## Under the 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

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

In the event you are no longer an active employee with the City, short and long term disability benefits 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

# MEDICAL BENEFITS

**The City of Woodstock offers employees two 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](http://www.umar.com) and selecting the United Healthcare Choice Plus network.

Depending on the level of medical coverage you elect, you pay the first \$1,500 or \$500 per covered member. For employee only coverage you are responsible for either the first \$1,500 or \$500. For employee/spouse coverage your total is either \$3,000 (\$1,500 each) or \$1,000 (\$500 each). For employee plus child(ren) coverage, your total is either \$3,000 (\$1,500 each) or \$1,000 (\$500 each). For family, your total is either \$4,500 (\$1,500 each) or \$1,500 (\$500 each). You are also eligible for a deductible carry-over credit each year for deductible expenses incurred from October 1 through December 31, on the portion of your deductible met.

## 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.

## Making the Right Choice

The City offers employees 2 Choice Plus POS health plans. Both 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 [myuhc.com](http://myuhc.com). Click on Find a Provider and look for the 2 blue hearts.

# WELLNESS BENEFITS

In an effort to promote a healthy workplace and strive to keep everyone’s cost for healthcare coverage affordable, the City will continue the Wellness program. The City has partnered with TargetCare for its Onsite Clinic and Wellness Coaching. Employees can voluntarily elect to participate in the Wellness program through TargetCare. Participation includes the initial completion of a Clinical Health Assessment (CHA) as well as an annual CHA. Depending upon your results you could be required to meet with the TargetCare health provider on a regular basis:

- 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 cost for non-participation in the wellness program and/or tobacco usage will remain at \$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 alternative means. Please contact TargetCare for additional information.*



# MEDICAL BENEFITS

POS PLAN	In-Network Basic Plan	In-Network Premium Plan
<b>CALENDAR YEAR DEDUCTIBLE</b>		
EMPLOYEE	\$1,500	\$500
EMPLOYEE + SPOUSE OR CHILD	\$3,000	\$1,000
FAMILY	\$4,500	\$1,500
<b>OUT OF POCKET MAXIMUM INCLUDES DEDUCTIBLE UNDER MEDICAL (RX &amp; MEDICAL HAVE SEPARATE MAXIMUMS)</b>		
EMPLOYEE	\$1,500 Med / \$1,500 RX	\$500 Med / \$500 RX
EMPLOYEE + SPOUSE OR CHILD	\$3,000 Med / \$3,000 RX	\$1,000 Med / \$1,000 RX
FAMILY	\$4,500 Med / \$4,500 RX	\$1,500 Med / \$1,500 RX
<b>LIFETIME MAXIMUM</b>	Unlimited	Unlimited
<b>COINSURANCE</b>	0%	0%
<b>OFFICE VISIT COPAY</b>		
PRIMARY CARE PHYSICIAN	\$25 (\$15 for Premium)	\$25 (\$15 for Premium)
SPECIALIST	\$35 (\$25 for Premium)	\$35 (\$25 for Premium)
<b>MATERNITY PHYSICIAN SERVICES (FIRST VISIT ONLY)</b>	\$250 Copay	\$250 Copay
<b>EMERGENCY ROOM VISIT (WAIVED IF ADMITTED)</b>	\$150 Copay	\$150 Copay
<b>URGENT CARE</b>	\$60	\$60
<b>INPATIENT SERVICES / PHYSICIAN SERVICES</b>	\$250 Copay per Admission then Deductible	\$250 Copay per Admission then Deductible
<b>OUTPATIENT SURGERY / PHYSICIAN SERVICES</b>	\$250 Copay per Admission then Deductible	\$250 Copay per Admission then Deductible
<b>DIAGNOSTIC/ X-RAY</b>	Subject to Deductible	Subject to Deductible
<b>PRESCRIPTION DRUGS – 30 DAYS</b>		
TIER 1	\$15 Copay	\$15 Copay
TIER 2	\$30 Copay	\$30 Copay
TIER 3	\$60 Copay	\$60 Copay
<b>MAIL ORDER DRUGS – 90 DAYS</b>		
TIER 1	\$25 Copay	\$25 Copay
TIER 2	\$60 Copay	\$60 Copay
TIER 3	\$120 Copay	\$120 Copay



*\*Both plans offer out-of-network benefits. Should you go out-of-network, the plan pays 60% for most services after you have met your 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. Refer to the plan documents for additional details.*

## MEDICAL VALUE ADDS

You don't have time to dig through paperwork to be left wondering where to go for care when you need it. And your health and financial resources are too valuable for second guesses. At [www.umar.com](http://www.umar.com), there are no hassles and no waiting—just the answers you're looking for, anytime, day or night.



A UnitedHealthcare Company

Log in now to:

- Check your benefits and see what's covered
- Look up what you owe and how much you've paid
- Find a doctor in your network
- Learn about medical conditions and treatment options
- Access tools and trusted resources to help you live a healthier life
- View, print and mail replacement ID cards

Visit [www.umar.com](http://www.umar.com) on your desktop or mobile device. If you already have an account, simply enter your username and password in the upper-right corner.

If it's your first time visiting, click New user? Register here to open an account. Make sure you have your ID card handy and follow the steps to get started.

As a UMR member, you can now access your benefit and claim information when you're "on the go" from your mobile device. Just use your mobile browser to log in using the same username and password that you use on the full site. What's even better—UMR has made it quick and easy! There's no app to download, nothing to install, no waiting.

Through 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 in just one easy phone call:



Call to get started at **800-710-9341**.



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

[www.southernscripts.net/members.php](http://www.southernscripts.net/members.php)

Along with Southern Scripts, we have added an additional benefit called **Variable Copay**. This program was created to save you money and help combat the rising cost of prescription medications.

If your medication has a Variable Copay Opportunity and you try to fill your medication, the pharmacy will get a rejection message stating "Variable Copay Opportunity Available". Please call 1-800-710-9341. This means your medication is eligible for a manufacturer coupon that will reduce the cost to you.





# PRESCRIPTION DRUG BENEFITS

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 and purchasing at one of the pharmacies listed below.

Pharmacy	Savings	Website
<b>KROGER</b>	\$4 for a 30-day supply of select generic medication	<a href="http://www.kroger.com">www.kroger.com</a>
<b>PUBLIX</b>	Free 14-day supply of select generic antibiotic medications/Free 30-day supply of Lisinopril/ Free 30-day supply of Metformin	<a href="http://www.publix.com">www.publix.com</a>
<b>TARGET</b>	\$4 for a 30-day supply of select generic medication	<a href="http://www.target.com">www.target.com</a>
<b>WAL-MART/SAM'S CLUB</b>	\$4 for a 30-day supply of select generic medication	<a href="http://www.walmart.com">www.walmart.com</a>

## Save Money with Generic Drugs

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.

Certain common generic antibiotics are free to you at Publix. When you bring in a prescription for one of the generic oral antibiotics listed below, you can receive up to a 14-day supply FREE.

- Amoxicillin
- Cephalexin
- Sulfamethoxazole / Trimethoprim (SMZ-TMP)
- Penicillin VK
- Ciproflaxacin
- Ampicillin



# FLEXIBLE SPENDING ACCOUNTS (FSA)

This benefit is administered by UMR. 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 deduction.



A UnitedHealthcare Company

## How Flexible Spending Accounts Work:

Each year during your enrollment period, you decide how much to set aside for healthcare and/or dependent care out-of-pocket expenses. Your contributions are deducted from your paycheck, on a pre-tax basis, in equal installments throughout the plan year. Some eligible expenses may require back-up substantiation documentation. Up to \$500 in FSA funds from one plan year may be rolled over to the next plan year. The City of Woodstock's plan years run from October 1st through September 30th.

**You may elect to use your FSA for non-reimbursable health-related expenses on items not covered by the insurance plan up to \$2,650. Items that can be reimbursed by your FSA include:**

Health Flexible Spending Account:

- Your Portion of the Medical Deductible
- Office Visit Copays
- Out of Pocket Dental Expenses
- Orthodontia Expenses
- Vision Expenses
- Other eligible expenses defined by the IRS

## Dependent Care Flexible Spending Account:

This plan will reimburse you for dependent care expenses up to \$5,000 to allow you to work or attend school full-time and include:

- A dependent child under 13 who has the same principal residence you do for more than half the year and for whom you provide over half of his or her support; or
- Any other dependent (for example, an elderly parent) that is mentally or physically incapable of self-care and resides with you.
- Your spouse, if he/she is likewise physically or mentally incapacitated and resides with you.
- Care at a licensed nursery school or daycare facility, nannies, au pairs, before and after school care, and day camps.

Some ineligible expenses include services provided by a family member, overnight camp, late payment fees, and tuition.

**Maximum contributions for FSA for plan year  
October 1<sup>st</sup>, 2018 through September 30<sup>th</sup>, 2019**

	Maximum Contribution
Health	\$2,650
Dependent / Child Care	\$5,000



# DENTAL BENEFITS

Dental Expenses may be one of the most predictable expenses you have. Before you elect dental coverage, you may want to consider the following:

- What dental expenses do I know that my family or I will have each year?
- Do I, or does my spouse have coverage elsewhere?
- What sort of coverage do I need? Do I need richer benefits because I go to the dentist more often?
- Do I need more basic coverage just to cover items such as cleanings and fillings?



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 [www.glic.com](http://www.glic.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 reimbursement levels on basic and major services and there is no deductible. Charges for visits to dentists outside of the Dental Guard Preferred Network fee schedule are the patient’s responsibility. 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
<b>CALENDAR YEAR DEDUCTIBLE</b>	\$50 / \$150	\$0
<b>ANNUAL MAXIMUM</b>	\$1,000	\$1,000
<b>PREVENTATIVE SERVICES</b>	100%	100%
<b>BASIC SERVICES</b>	80% After Deductible	100%
<b>MAJOR SERVICES</b>	50% After Deductible	60% After Deductible
<b>FILLINGS / EXTRACTIONS</b>	Included in Basic	Included in Basic
<b>ENDO / PERIODONTICS</b>	Included in Major	Included in Major
<b>ORTHODONTIA</b>	50% to \$1,000 Lifetime Max	50% to \$1,000 Lifetime Max
<b>ROLLOVER INCENTIVE</b>	Included	Included
<b>Out-of-Network Claims</b>	90th UCR	Negotiated Fee

# MEDICAL & DENTAL DEDUCTIONS

Below are the bi-weekly (26) payroll deductions for your employee benefits.

Medical Bi-weekly Payroll Deductions (26)	Basic Plan	Premium Plan
<b>MEDICAL</b>	<i>POS- \$1,500 Deductible</i>	<i>POS- \$500 Deductible</i>
Employee Only	\$11.54	\$20.77
Employee + Spouse	\$69.23	\$83.08
Employee + Child(ren)	\$66.92	\$80.77
Family	\$138.46	\$161.54
<b>MEDICAL NON-PARTICIPATION IN WELLNESS</b>	<i>POS- \$1,500 Deductible</i>	<i>POS- \$500 Deductible</i>
Employee Only	\$46.15	\$55.38
Employee + Spouse	\$103.85	\$117.69
Employee + Child(ren)	\$101.54	\$115.38
Family	\$173.08	\$196.15
<b>MEDICAL TOBACCO SURCHARGE</b>	<i>POS- \$1,500 Deductible</i>	<i>POS- \$500 Deductible</i>
Employee Only	\$46.15	\$55.38
Employee + Spouse	\$103.85	\$117.69
Employee + Child(ren)	\$101.54	\$115.38
Family	\$173.08	\$196.15
<b>MEDICAL NON-PARTICIPATION IN WELLNESS/ TOBACCO SURCHARGE</b>	<i>POS- \$1,500 Deductible</i>	<i>POS- \$500 Deductible</i>
Employee Only	\$80.77	\$90.01
Employee + Spouse	\$138.46	\$152.31
Employee + Child(ren)	\$136.15	\$150.00
Family	\$207.69	\$230.77

Dental Bi-Weekly Payroll Deductions (26)	NAP	Value
Employee Only	\$0.00	\$0.00
Employee + 1	\$12.30	\$12.30
Family	\$19.06	\$19.06



# 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](http://www.eyemedvisioncare.com) and choose the Select network.



	In-Network	Out-of-Network
<b>EXAM</b>	\$10 copay	Up to \$35
<b>LENSES</b>		
Single Vision	\$25 Copay	Up to \$25
Bifocal	\$25 Copay	Up to \$40
Trifocal	\$25 Copay	Up to \$60
<b>FRAMES</b>	\$120 Allowance, plus 20% discount off remaining balance	Up to \$40
<b>CONTACT LENSES (IN LIEU OF FRAMES AND LENSES)</b>	\$135 Allowance, plus 15% discount off remaining balance	Up to \$95
<b>LASER VISION CORRECTION</b>	15% off retail price or 5% off promotional price	NO COVERAGE
<b>ROLLOVER INCENTIVE</b>	Included	Included
<b>EXAM / FRAMES / LENSES OR CONTACTS</b>	Once every 12 / 24 / 12 months	



Below are the bi-weekly (26) payroll deductions for your employee benefits.

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



# LIFE INSURANCE BENEFITS

The 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.

## Why Buy Life Insurance?

Life insurance provides a lump sum cash benefit to surviving dependents to help cover immediate expenses such as funeral costs or ongoing living expenses.

## Waiver of Premium

If an insured employee becomes totally disabled (unable to work at any job) prior to age 60, insurance will remain in force during that disability without further payment of premiums until age 65 at which time coverage will terminate.

## Optional Life Insurance

In addition to the insurance provided at no cost by the City, you can purchase additional life insurance up to 5 times your annual salary to a maximum of \$500,000.

Spouse coverage may be purchased up to 100% of the elected employee amount to a maximum of \$250,000.

Coverage for children 14 days to age 26 can be purchased in \$1,000 increments up to a maximum of \$10,000.

You are required to purchase employee coverage in order to purchase coverage for your spouse and/or children.

Please note that Age Limitations and Reductions may apply. Please see plan documents for coverage details or contact us via email at [woodstock.a2benefits.com](mailto:woodstock.a2benefits.com).

## Evidence of Insurability

Evidence of Insurability (EOI) is required to purchase insurance above \$120,000 if you are under age 60. For ages 60-69, the guarantee issue amount is \$20,000 (\$50,000 for spouse coverage under age 70). If you or your dependents have medical conditions that make it difficult to purchase life insurance on your own, this amount is important to you. EOI requires you to complete a medical questionnaire, obtain a physical (at the carrier's request) and receive carrier approval before your insurance goes into effect.

## Life Insurance Enrollment Timeframes

**New Hires** – You may apply for up to \$120,000 of coverage through the normal enrollment process.

For amounts greater than \$120,000 you will be required to provide an EOI.

**Current Employees** – For 2018-2019, this is a one-time open enrollment, meaning you may apply for up to \$120,000 of coverage through the normal enrollment process without having to provide an EOI. For amounts greater than \$120,000 you will be required to provide an EOI. If you've previously elected an amount over \$120,000 and were already approved, One America will grandfather your election amount and you will not be required to provide EOI.

**Annual Open Enrollment Period** – All eligible employees are required to either complete an enrollment form or enroll online regardless of whether you want to continue, increase, or waive your coverage. You may elect up to the guarantee issue amount without providing EOI during this annual open enrollment period only. If you do not elect coverage this year you will be required to complete an EOI next year.



# VOLUNTARY LIFE 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	\$0.07	\$0.32
30-34	\$0.08	\$0.37
35-39	\$0.10	\$0.46
40-44	\$0.15	\$0.69
45-49	\$0.21	\$0.97
50-54	\$0.36	\$1.66
55-59	\$0.53	\$2.45
60-64	\$0.83	\$3.83
65-69	\$1.55	\$7.15
70-75	\$3.71	\$17.12
75+	\$3.71	\$17.12



## Child Life Rates:

\$0.20 per \$1,000 of coverage

\$1.00 for \$5,000 of coverage

\$2.00 for \$10,000 of coverage

This monthly rate covers all dependent children 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.

### Evidence of Insurability (EOI)

By enrolling in the STD benefit when you are first eligible, you will be automatically approved. If you decide to enroll at a later date, you will be subject to medical underwriting with an Evidence of Insurability form.

Age	Monthly Rate per \$10 of Weekly Benefit
Under 20	\$0.294
20-24	\$0.295
25-29	\$0.306
30-34	\$0.288
35-39	\$0.277
40-44	\$0.299
45-49	\$0.324
50-54	\$0.403
55-59	\$0.538
60-64	\$0.680
65-69	\$0.695
70+	\$0.785

## 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 \$5,000 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.

## 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





# DISABILITY & LIFE INSURANCE

## ONLINE WILL PREPARATION

### *Get Peace of Mind*

As part of your life insurance benefits, you have access to One America's Guidance Resources® program administered by Estate Guidance.

A poll taken by Bankrate, Inc. found that 69% of parents with children under age 18 don't have a will, yet 88% say they believe having one is important.

### **CREATE YOUR OWN WILL— In a few EASY steps**

- Go to [www.guidanceresources.com](http://www.guidanceresources.com)
- Go to register
- Organization Web ID: ONEAMERICA3
- Link to EstateGuidance will be on the left
- Follow the prompts to create and download your will at no cost
- Online support and instructions for executing and filing your will are included

## LEGAL SUPPORT AND RESOURCES

### *Expert info when you need it*

Talk to our attorneys by phone. If you require a representation, we'll refer you to a qualified attorney in your area for a free 30-minute consultation with a 25% reduction in customary legal fees thereafter.

#### **Call about:**

- Divorce and family law
- Debt and bankruptcy
- Landlord/tenant issues
- Real estate transactions
- Civil and criminal actions
- Contracts

## CONFIDENTIAL COUNSELING/EAP

- This no-cost counseling service helps you address stress, relationship and other personal issues you and your family may face. It is staffed by Guidance Consultants who will listen to your concerns and quickly refer you to in-person counseling (up to 3 sessions per issue per year) as well as other resources for:
  - Stress, anxiety and depression
  - Relationship/marital conflicts
  - Problems with children
  - Job pressure
  - Grief and loss
  - Substance abuse

[www.guidanceresources.com](http://www.guidanceresources.com)  
Company ID: ONEAMERICA3  
Toll free: 855-387-9727

## SAFE TRAVEL

### *Generali Global Assistance*

A 24-hour emergency service to help you in the event of an emergency when traveling 100 miles or more from home.

- Medical Evacuation/Return Home
- Travel Companion Assistance
- Dependent Children Assistance
- Return of Mortal Remains
- Replacement of Med's and Eyeglasses

Contact them toll free: 800-368-7878 in the USA  
From other locations- call collect: 204-330-1408  
Email: [ops@us.generaliglobalassistance.com](mailto:ops@us.generaliglobalassistance.com)



## VALUE ADDED SERVICES



**FREE MEMBERSHIP TO GOLD'S GYM** which provides free group fitness classes at their facility on 301 Gold Creek Trail off Highway 92. For more information visit [www.goldsgym.com/gyms](http://www.goldsgym.com/gyms)

## 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](http://www.cancer.org)
- American Lung Association  
[www.quitterinyou.org](http://www.quitterinyou.org)
- Kill the Can  
[www.killthecan.org](http://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.*



**NOTES:**





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*This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.*

*The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.*