



2025 - 2026

BENEFIT GUIDE



Welcome

The benefit elections you select are an important part of your overall compensation. We are pleased to offer a comprehensive array of valuable benefits to protect your health, your family, and your way of life.

This guide provides important benefit plan information and helps answer some of the basic questions you may have about the coverages offered. Please read it carefully, along with any supplemental materials you receive.

CHANGES FOR 2025-2026

Medical Plan Provider Change

Curative

3 plan options: EPO, PPO, & PPO Max

\$0.00 Deductible, Copay, Out of Pocket Max with intake call

HSA no longer offered

City contributions end 9/30/25.

Dental, Vision, Life/ADD, Disability Provider Change

Guardian

Vision is upgraded to VSP

Dental, Group & Vol Life/ADD, & Disability plans:

No change other than provider.

OPEN ENROLLMENT

Common Questions



Who is Eligible?

- All Full-time employees.
- Legally married spouses of Full-time employees.
- Children who are:
 - Biological, Step-, or adopted children, or children of legal custody for who are 26 or younger.
 - Disabled children 26 years or older who meet criteria may be eligible for continued coverage.

When can I enroll?

- ***New Hire*** - You **MUST** enroll within 30 days of your hire date.
 - If you miss the enrollment window, you will not be able to enroll in coverage until the next open enrollment period.
- ***Open Enrollment***
 - Our plan year runs from October 1st through September 30th.

When does my coverage start?

- ***New Hires***
 - Coverage begin the 1st of the month following 60 days of Coverage.
- ***Open Enrollment Changes***
 - Coverage elections/changes made during open enrollment begin October 1st of each year.

Qualifying Events

Choose Carefully!

Due to IRS regulations, your elections selected during your enrollment period are locked unless you experience a qualifying event during the year.

Common Qualifying Events:

- Marriage or divorce
- Birth or adoption of a child
- Child reaching the maximum age limit
- Death of a spouse or child
- You lose or gain coverage through your spouse.
- You gain access to state coverage under Medicaid or CHIP

Time Limit to Enroll After a QE:

Changes must be made within 31 days of your qualifying event. If you miss your enrollment period, you will not be able to change coverages until the next open enrollment period.

Required QE Documentation:

Depending on the type of QE you may be required to provide:

- Birth Certificate or Adoption Documentation
- Marriage License
- Divorce Decree
- Benefit Enrollment/Termination Documentation

Other Required Information:

- Social Security Numbers will be required for all covered dependents.
 - This is required by the IRS under the Affordable Care Act (ACA) to verify that you have affordable coverage. This information is secure and confidential.

Definitions

Deductible

The amount of money you must pay each plan year to receive co-insurance benefits. Deductibles will have both an individual and family amount.

Out of Pocket Maximum

This is the most amount of money you'll pay out in a plan year. Depending on the plan you select, it may match your deductible, but is typically a higher amount.

Copayment

Also called a "Copay", this is a fixed dollar amount that is determined for and applied to specific services. Not all plans have copays.

Coinsurance

The percentage of service costs that insurance will cover after meeting your deductible. If the plan's coinsurance is 80/20, you are responsible for 20% of service costs until the out of pocket max is reached.



Medical Plan Road Map

- Provider: Curative
- Three plan options: EPO, PPO, PPO Max
- Large Physician network nationwide on all plans.
- All members 18+ must complete baseline call for \$0 plan
- Resources and tools available to help maintain a healthy lifestyle!

Plan Highlights:

EPO:

- \$0.00 out-of-pocket costs for in-network coverage.
- No out of network coverage.
- Mail order and 30,000+ retail pharmacies.
- Walgreens not included.

PPO:

- \$0.00 out-of-pocket costs for in-network coverage.
- Out of Network \$10k/\$20k Deductible (Indiv/Family).
- Mail order and 30,000+ retail pharmacies.
- Walgreens not included.

PPO MAX:

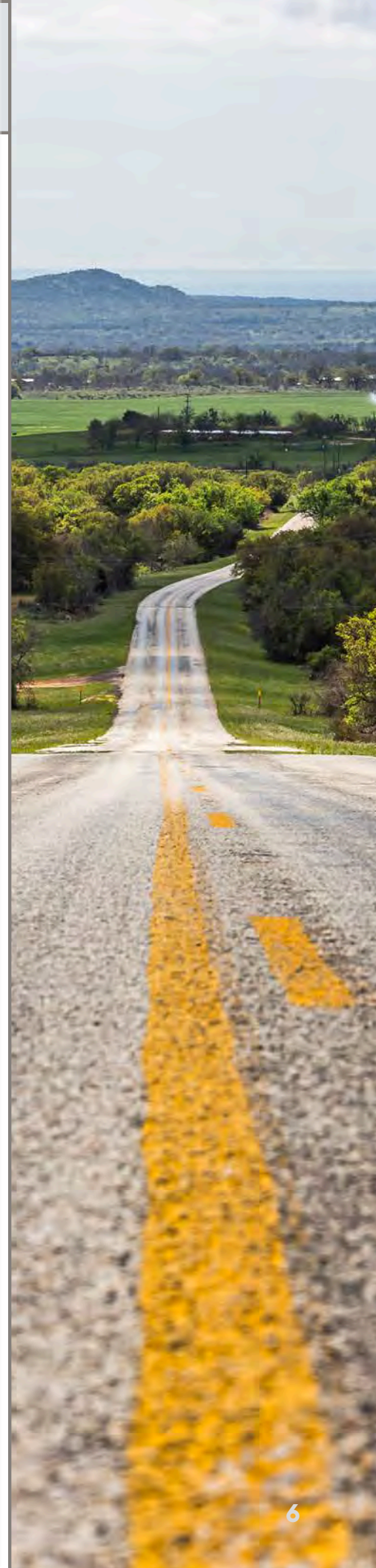
- \$0.00 out-of-pocket costs for in-network coverage.
- Out of Network \$0 Deductible.
- Mail order and 60,000+ retail pharmacies.
- Walgreens, CVS, Walmart included as in-network.
- Includes a ClassPass Fitness membership.

ALL PLANS:

- Baseline call required for all members 18+ annually.
- Curative Cash Card provides funds for any charges at an in-network provider or to pay a cash price, so members always have \$0.00 out of pocket costs for healthcare.
- Telehealth program with \$0.00 Copay.
- Wellness and condition management programs for \$0.

Disruption Report showed:

- 99.59% Records Match
- 99.87% Claims Match
- 99.76% Paid Claims Match



Medical Plan Option 1

CURATIVE EPO			
	In-Network w/ Baseline	In-Network No Baseline	Out of Network
Deductible	\$0.00	\$5,000 Indiv. \$10,000 Family	Not Covered
Out of Pocket Max	\$0.00	\$7,500 Indiv. \$15,000 Family	Not Covered
Coinsurance	0%	20% Medical 25% Pharmacy	Not Covered
Office/Virtual Visit Primary Doctors	\$0.00	\$25 Copay After Deductible	Not Covered
Office/Virtual Visit Specialist Doctor	\$0.00	\$50 Copay After Deductible	Not Covered
Urgent Care ER Physicians	\$0.00	20% After Deductible	20% After Deductible
Hospital Room & Surgery	\$0.00	20% After Deductible	Not Covered
Lab and X-Ray	\$0.00	20% After Deductible	Not Covered
Pharmacy Network	30,000+ In-network pharmacies including H-E-B, Costco, and multiple local Hill Country Pharmacies & Curative Pharmacy		
Preferred Drugs Generic/Brand/Specialty	\$0.00	\$50 Copay After Deductible	Not Covered
Non-preferred Drugs Generic/Brand/Specialty	\$50.00 Brand/Generic \$250 Specialty	\$100 Copay or 25% After Deductible	Not Covered

Employee Deductions	Monthly Deduction	Biweekly Deduction
Employee Only	\$0.00	\$0.00
Employee + Spouse	\$405.62	\$202.81
Employee + Children	\$218.90	\$109.45
Family	\$624.53	\$312.26

Medical Plan Option 2

CURATIVE PPO			
	In-Network w/ Baseline	In-Network No Baseline	Out of Network
Deductible	\$0.00	\$5,000 Indiv. \$10,000 Family	\$10,000 Indiv. \$20,000 Family
Out of Pocket Max	\$0.00	\$7,500 Indiv. \$15,000 Family	\$15,000 Indiv. \$30,000 Family
Coinsurance	0%	20% Medical 25% Pharmacy	50%
Office/Virtual Visit Primary Doctors	\$0.00	\$25 Copay After Deductible	\$50 Copay After Deductible
Office/Virtual Visit Specialist Doctor	\$0.00	\$50 Copay After Deductible	\$100 Copay After Deductible
Urgent Care ER Physicians	\$0.00	20% After Deductible	20% After Deductible
Hospital Room & Surgery	\$0.00	20% After Deductible	50% After Deductible
Lab and X-Ray	\$0.00	20% After Deductible	50% After Deductible
Pharmacy Network	30,000+ In-network pharmacies including H-E-B, Costco, and multiple local Hill Country Pharmacies & Curative Pharmacy		
Preferred Drugs Generic/Brand/Specialty	\$0.00	\$50 Copay After Deductible	40% After Deductible
Non-preferred Drugs Generic/Brand/Specialty	\$50 Brand/Generic \$250 Specialty	\$100 Copay or 25% After Deductible	40% After Deductible

Employee Deductions	Monthly Deduction	Biweekly Deduction
Employee Only	\$67.00	\$33.50
Employee + Spouse	\$544.66	\$272.33
Employee + Children	\$348.11	\$174.06
Family	\$825.78	\$412.89

Medical Plan Option 3

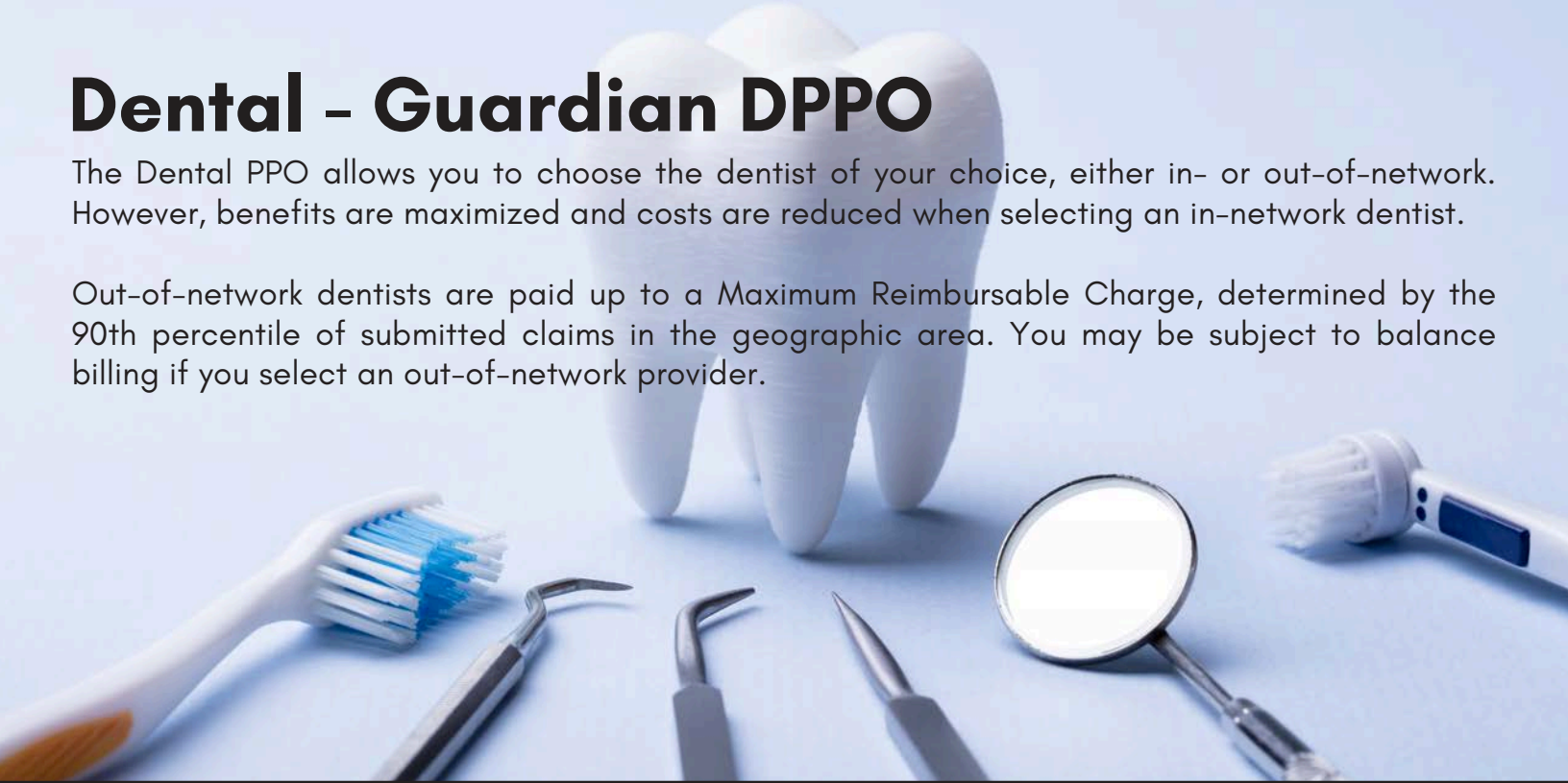
CURATIVE PPO MAX			
	In-Network w/ Baseline	In-Network No Baseline	Out of Network
Deductible	\$0.00	\$5,000 Indiv. \$10,000 Family	\$5,000 Indiv. \$10,000 Family
Out of Pocket Max	\$0.00	\$7,500 Indiv. \$15,000 Family	\$7,500 Indiv. \$15,000 Family
Coinsurance	0%	20% Medical 25% Pharmacy	20%
Office/Virtual Visit Primary Doctors	\$0.00	\$25 Copay After Deductible	\$50 Copay After Deductible
Office/Virtual Visit Specialist Doctor	\$0.00	\$50 Copay After Deductible	\$100 Copay After Deductible
Urgent Care ER Physicians	\$0.00	20% After Deductible	20% After Deductible
Hospital Room & Surgery	\$0.00	20% After Deductible	20% After Deductible
Lab and X-Ray	\$0.00	20% After Deductible	20% After Deductible
Pharmacy Network	60,000+ In-network pharmacies including Walgreen's, CVS, H-E-B, Costco, Local Hill Country Pharmacies & Curative Pharmacy		
Preferred Drugs Generic/Brand/Specialty	\$0.00	\$50 Copay After Deductible	40% After Deductible
Non-preferred Drugs Generic/Brand/Specialty	\$50 Brand/Generic \$250 Specialty	\$100 Copay or 25% After Deductible	40% After Deductible

Employee Deductions	Monthly Deduction	Biweekly Deduction
Employee Only	\$171.25	\$85.63
Employee + Spouse	\$862.41	\$431.21
Employee + Children	\$768.06	\$384.03
Family	\$1,459.23	\$729.62

Dental - Guardian DPPO

The Dental PPO allows you to choose the dentist of your choice, either in- or out-of-network. However, benefits are maximized and costs are reduced when selecting an in-network dentist.

Out-of-network dentists are paid up to a Maximum Reimbursable Charge, determined by the 90th percentile of submitted claims in the geographic area. You may be subject to balance billing if you select an out-of-network provider.



Benefit Cost Overview	In Network	Out of network
Deductible		
Individual/ Family	\$50/\$150	\$50/\$150
Covered Services		
Preventative Includes Periodic Oral Evaluations	100%	100%
Basic Includes Endodontic and Periodontal Services	80%	80%
Major Includes Implant Services	50%	50%
Orthodontia (Adult/ Child up to Age 19)	50%	50%
Maximums Per calendar year; preventive, basic, and major services combined.		
Orthodontia Maximum - Adult/Child	\$1,500	\$1,500
Annual Maximum (Rollover Allowed)	\$1,500	\$1,500
EMPLOYEE DEDUCTIONS - 24 PP		
	Monthly	Biweekly
Employee Only	\$0.00	\$0.00
Employee +Spouse	\$26.22	\$13.11
Employee + Child(ren)	\$38.81	\$19.41
Employee + Family	\$73.65	\$36.83

Vision Insurance

Guardian – VSP Network

Benefit Service Overview	Coverage Amounts	
Benefit Frequency	12 / 12 / 12	
Exam Copay	\$10	
Materials Copay	\$25	
Glasses Allowance		
Frames	\$150 allowance, 20% off balance	
Contact Allowance		
Medically Necessary	\$0 copay, \$150 allowance, 15% off balance over \$150	
Elective Materials	\$150 Max (Copay Waived) + 15% discount of Fitting/Eval Fee	
Lenses Allowance		
Single, Bifocal, Trifocal, & Lenticular	\$25.00 Copay	
Laser vision correction	10-20% retail price or 5% off promotional price	
Rates Per Pay Period (24)	Monthly	Per Pay Period (24)
Employee Only	\$8.52	\$4.26
Employee & Spouse	\$16.19	\$8.10
Employee & Child(ren)	\$17.04	\$8.52
Employee & Family	\$25.05	\$12.53

OTHER COVERAGE AMOUNTS

Additional pairs benefit:

- 20% off purchase of complete pair of eyeglasses and a 15% off conventional contact lenses once the funded benefit has been used

Additional discounts:

- 20% off non-covered items with limitations

Retail Chain Providers:

- Expanded network of providers including Walmart, Sam's, Costco.



Flex Savings Account (FSA)

Administered by FFGA and UMB Bank

Flex Spending Accounts Rules:

- Contributed to with Pre-Tax dollars
- Require enrollment each year to participate.
- Must be used by the end of September each year or the balance is forfeited and not returned to the employee.
 - 2.5 month grace period at the end of each plan year to incur expenses.
 - 90-day period at the end of the plan year to file receipts for reimbursement.
- Medical FSAs can be used for qualified medical, dental, or vision expenses.
- Dependent care FSA can be used for or qualified dependent care expenses
- Active employees who waive coverage are eligible to receive a \$500.00 FSA account each year, IF they provide a copy of current active insurance.

Health Care FSA

2025 Max Limit: \$3,300 annually per individual

Qualified Expenses Include:

- Coinsurance and Copayments
- Prescriptions
- Eye exams/eyeglasses, Lasik Eye Surgery
- Dental treatment and Orthodontia

Dependent Care FSA

2025 Max Limit: \$5,000 per Household if filing taxes Jointly

Qualified expenses include:

- Tuition costs for a dependent child under the age of 13 (ie. Nursery schools, pre-school and daycare centers).
- Care for household member who is physically or mentally incapable of caring for him/herself and qualifies as your federal tax dependent.

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p502.pdf.



Life and AD&D Dearborn

Guardian

City Paid Life and AD&D

The City pays 100% of a \$50,000 Life and AD&D policy that will provide a payment to you or your designated beneficiary(ies) in the event you experience loss of limb or life.

How does AD&D benefit insurance protect me?

AD&D insurance provides specific benefits to you in the event of a covered accidental bodily injury that directly causes dismemberment (i.e., the loss of a hand, foot or eye).

In the event that your death occurs due to a covered accident, both the life and the AD&D benefit would be payable. Review the Plan's Certificate of Coverage for a complete detail of benefits, limitations, and exclusions.

BENEFICIARY REMINDER!!

Please take the time to make sure you update your beneficiaries during open enrollment or when you have a life change.

Voluntary Life and AD&D - Employee Paid

Additional Life and AD&D is available to you during open enrollment for coverage amounts beyond the City paid life insurance policy.

REMINDER:

- Coverage up to Guarantee Issue (no EOI required) is only available during the New Hire Enrollment Period
- During Open Enrollment you can increase coverage by:
 - The allowed increment without an EOI
 - An amount above the allowed increment but below the maximum allowed with the completion of an EOI. Your premium will not change until approved.

Life Benefit	Employee	Spouse	Children
Life Maximum Benefit	\$200,000	\$200,000	\$10,000
Guaranteed Issue	\$200,000	\$30,000	\$10,000
Benefit Reduction	35% reduction at age 65; 50% reduction at age 70		



Voluntary Life and AD&D Rates

Employee deductions are per pay period (24)

2025 Voluntary Life Rates - Monthly Per \$1,000 of Coverage

Child	.160
Under 25	0.062
25-29	0.062
30-34	0.080
35-39	0.090
40-44	0.122
45-49	0.207
50-54	0.408
55-59	0.658
60-64	0.811
65-69	1.398
70-74	3.274
75-79	3.293
80+	3.290
ADD Rate	.030

Calculation Example:

Individual Age: 31

Coverage Amount Desired: 130,000

$$130,000/1000 = 130$$

$$130 \times .068 = 8.84 \text{ per month}$$

$$4.42 \text{ per pay period (24)}$$

Long and Short Term Disability

Guardian

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness. Review the Plan's Certificate of Coverage for a complete detail of benefits, limitations, and exclusions.

Long Term Disability	
100% Employer Paid Premium	
Monthly Benefit Percentage	50%
Monthly Benefit Maximum	\$6,000
When Benefits Began	After 120 days Disabled
Maximum Duration	SSNRA

Short Term Disability	
Voluntary Coverage - Employee Paid	
Weekly Benefit Percentage	60%
Weekly Benefit Maximum	\$2,000
When Benefits Begin	15 days
Maximum Benefit Duration	17 weeks or until LTD begins

Short Term Disability Premium Rates

Monthly Premium Rate Per \$10 of Weekly Benefit	
Age	Employee
<20	\$0.233
20-24	\$0.233
25-29	\$0.282
30-34	\$0.415
35-39	\$0.349
40-44	\$0.265
45-49	\$0.299
50-54	\$0.398
55-59	\$0.481
60-64	\$0.647
65-69	\$0.647
70+	\$0.647



Telemedicine - New Benefits

REMINDER!!

The Telemedicine benefit offers virtual:

Primary Care Treatment
Urgent Care Treatment
Behavioral Health Support
Bill and Treatment Search Support
Basic Legal Services



Recuro Health Complete Care

Recuro Health Complete Care provides access to Virtual Primary Care, Behavioral Health, and Urgent Care from one platform. An integrated care team of **board-certified primary care** and behavioral health physicians enables whole-person care with a personal touch through phone-based and video interactions. Genetic testing and health risk assessments provide for a more personalized treatment plan for acute and chronic conditions. If medically necessary, prescriptions can be sent to your preferred pharmacy.

Health Advocate Solutions

Healthcare is becoming harder to understand. Personal Health Advocates help you navigate through insurance and healthcare systems. Advocates research treatments, resolve claims and locate doctors, specialists, hospitals, dentists and pharmacies. **Skilled negotiators** will attempt to negotiate discounts on your behalf, no matter your benefit status. Registered nurses are on-call 24/7 to answer questions and provide medical explanations.

Legal Services

Have legal questions? Get legal answers from **experienced lawyers at discounted rates**. Attorneys help with traffic tickets, bankruptcy, divorce, and spousal and child support. Additional services are also available at no cost to you!

ACCESS YOUR BENEFITS ON THE GO!

With the My Benefits Work
mobile app & portal

Scan here for the app!



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Telemedicine

New Benefits



How to Access your Benefits

Follow these easy steps to start using your benefits:

1. Download - My Benefits Work App

Scan the QR Code or go to your app store.



ANDROID APP ON
Google Play



Available on the
App Store

2. Register

Register your account on the app or the web portal – you only need to register once and your login will work for both.

3. Enter ID

Use your Group ID and Member ID from the front of your membership card.

4. Enter Email

Enter your email address – this will be your username for the app and portal.

5. Enter Phone Number

Enter your mobile phone number and a password, then proceed.

6. Confirm

You will be prompted to confirm your account through text message or email. Enter the code and continue.

After You've Registered, Start Exploring!

- Easily access your benefits, all in one place
- Keep your benefit and insurance cards organized in My Wallet
- Add your spouse and dependents to your benefit program
- Get live support by chat or phone call

Employee Assistance Program

Guardian (ComPsych)

Life is full of challenges, and sometimes balancing it is difficult. The City of Burnet provides a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The Employee Assistance Program (EAP) is provided at **NO COST** to you.

The EAP can help provide support in the following areas:

- Mental health
- Family and relationships
- Child and eldercare
- Substance abuse and addiction
- Grief and loss
- Legal or financial services

Employee Benefits:

- The program includes up to three (3) in-person sessions with a counselor per issue, per year, per individual.
- Unlimited toll- free phone access and online resources.

EAP Contact Information

Website:

www.guidanceresources.com

Phone Number:

855-239-0743

Enter Your Organization ID: Guardian



Cancer, Critical Illness, Accident & Permanent Life

American Fidelity, Guardian, and Texas Life

PureLife-plus Permanent Life Insurance

Texas Life www.texaslife.com

Life insurance can be an ideal way to provide money for your family when they need it most. PureLife-plus offers permanent insurance with a high death benefit and long guarantees that can provide financial peace of mind for you and your loved ones. PureLife-plus is an ideal complement to any group term and optional term life insurance your employer might provide and has the following features: affordability, portability at the same cost, accidental death benefits and a chronic illness rider. This is great coverage for you, your spouse, children and grandchildren.

Cancer

American Fidelity www.americanfidelity.com

Designed to help with the financial impact of being diagnosed, cancer insurance may help pay for expenses not covered by your major medical insurance. The plan includes an annual wellness benefit for a yearly cancer screening. There are options available for spouse and children to age 26, plus you can choose between two plans depending on the coverage you need.

Accident

Guardian www.guardianlife.com

If you have an accident, major medical insurance will help with many medical expenses, but you could be left with out-of-pocket expenses. An accident insurance policy pays cash benefits directly to you, unless otherwise assigned. This means that you will have added financial resources to help with medical costs or ongoing living expenses. There are benefits payable for broken bones, stitches, doctor's visits and more.

Critical Illness

Guardian www.guardianlife.com

The critical illness plan is an excellent way to protect you and your family from financial stress due to a diagnosis of cancer, heart attack/stroke, kidney failure or major organ failure. Benefits are paid when a doctor diagnoses you with a covered illness or condition. The money is paid directly to you to spend as you wish.



Cancer support service

Personalized, empathetic support to help you navigate a cancer diagnosis.

With cancer cases in the United States continuing to rise and remaining a leading cause of long-term disability, employees may be looking for improved benefits that can support them to a better quality of life. That's why Guardian partnered with Osara Health to bring our members facing a cancer diagnosis the support services that can help you focus on your holistic well-being throughout your treatment. Because you have Guardian Long-Term Disability Insurance as a benefit through your employer, you have access to this unique 6 to 12 week program.

A comprehensive solution to help cancer patients navigate their diagnosis



Dedicated health coach

One-on-one coaching for holistic support, education and guidance with scheduled calls over 6-12 weeks that works around your schedule.



Digital resource modules

Weekly resources sent directly to you, covering the key areas of cancer self-management as developed by Osara Health's clinical research team.



Tailored well-being information

Access to the Osara Health app to track symptoms and access tailored and verified well being content.

"My health coach understood exactly what I was going through and provided a wealth of resources on how to manage my stress, as well as other tips on food and exercise that I wouldn't have otherwise." - Osara Health Cancer Coach Program Participant

This service is only available if you have qualifying lines of coverage. See your plan administrator for more details.

Guardian's Group Long Term Disability Insurance are underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs.

Osara Health ("Osara") is a vendor to The Guardian Life Insurance Company of America ("Guardian"). Osara and Guardian are not affiliated entities. Osara provides a personalized support program through certified health coaches to address cancer management issues for the benefit of a member ("Services"). Services are designed for members 18 years+ of age, diagnosed with cancer, regardless of cancer type, stage, or prognosis. Services are not meant to provide medical advice/care. Medical advice/care should be sought from your independent healthcare provider(s). Guardian does not control or provide any part of the Services and does not bear any liability for their provision. This informational resource is not a contract and is for illustrative purposes only. Only the policy contains applicable terms. Guardian and Osara reserve the right to discontinue Services at any time without notice. Services may not be available in all states. Guardian® is a registered trademark of The Guardian Life Insurance Company of America, New York, NY and is used with permission. ©2024 The Guardian Life Insurance Company of America. All rights reserved.



How to access

As part of the Guardian disability claims process, you will be proactively provided with the details on how to access this valuable benefit.

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2024-172256 (04/26)



Critical illness insurance

Critical illness insurance may help you cover expenses not covered by your health insurance.

It's a cash payment you receive if you ever experience a serious illness like cancer, a heart attack, or a stroke, giving you the financial support to focus on recovery.

Who is it for?

Critical illness insurance is a supplemental policy for people who already have health insurance. It provides you with an additional payment to cover expenses like deductibles, treatments, and living costs.

What does it cover?

Critical illnesses include strokes, heart attacks, Parkinson's disease and cancer. Our policies can cover over 30 major illnesses, helping you stay financially stable by paying you a lump sum if you're diagnosed with one of them.

Why should I consider it?

Health coverage is becoming more expensive, with higher co-pays, premiums, and deductibles. Critical illness insurance is an affordable way to supplement and pay for additional expenses that your health insurance doesn't cover. Our policies typically provide payments for the first and second time you're diagnosed with a covered illness.

Plus, critical illness insurance is portable and payments are made directly to you.

You will receive these benefits if you meet the conditions listed in the policy.



Critical costs

John is hospitalized after a heart attack, and has to cover the cost of five days as an inpatient.

Average heart attack hospitalization expense: **\$53,000**

Average Major Medical deductible: **\$1,500**

Major Medical covers 80% of the cost after the deductible is met, but John's still responsible for 20%: **\$10,300**.

Total out-of-pocket amount for John (deductible + coinsurance): **\$11,800**.

John has a **\$10,000** Guardian Critical Illness policy, which covers the majority of these out-of-pocket expenses.

This example is for illustrative purposes only. Your plan's coverage may vary. See your plan's information on the following pages for specific amounts and details.



Your critical illness coverage

CRITICAL ILLNESS

Benefit Amount(s)	Employee may choose a lump sum benefit of \$5,000 to \$10,000 in \$5,000 increments.	
CONDITIONS		
Cancer	1st OCCURRENCE	2nd OCCURRENCE
Invasive Cancer	100%	100%
Carcinoma In Situ	30%	30%
Benign Brain or Spinal Tumor	100%	100%
Bone Marrow Failure (including Stem Cells)	100%	100%
Lung and Vascular Disorder		
Acute Respiratory Distress Syndrome (ARDS)	30%	0%
Stroke – Severe	100%	100%
Heart Conditions		
Coronary Artery Disease – bypass needed	30%	30%
Heart Attack	100%	100%
Heart Failure	100%	100%
Additional Conditions		
Kidney Failure	100%	100%
Major Organ Failure	100%	100%
	1st OCCURRENCE ONLY	
Neurological Disorders		
Alzheimer’s Disease – Advanced		100%
ALS (Lou Gehrig’s Disease)		100%
Parkinson’s Disease – Advanced		100%
Childhood Illnesses and Disorders		
Autism Spectrum Disorder		100%
Cerebral Palsy		100%
Cleft Lip/Cleft Palate		100%
Club Foot		100%
Congenital Heart Defect		100%
Cystic Fibrosis		100%
Diabetes – Type I		100%
Down Syndrome		100%
Hemophilia		100%
Multisystem Inflammatory Disease (MLS)		100%
Muscular Dystrophy		100%
Spina Bifida		100%
Spouse Benefit	May choose a lump sum benefit of \$5,000 to \$10,000 in \$5,000 increments up to 100% of the employee’s lump sum benefit.	



Your critical illness coverage

CRITICAL ILLNESS

Child Benefit- children age Birth to 26 years	25% of employee's lump sum benefit
Benefit Reductions: Benefits are reduced by a certain percentage as an employee ages	50% at age 70
Guarantee Issue: The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when you sign up for coverage during the initial enrollment period or the annual open enrollment period.	<p>We Guarantee Issue up to: \$10,000</p> <p>For a spouse: \$10,000</p> <p>For a child: All Amounts</p> <p>Health questions are required if the elected amount exceeds the Guarantee Issue.</p>
Portability: Allows you to take your Critical Illness coverage with you if you terminate employment.	Included
Pre-Existing Condition Limitation: A pre-existing condition includes any condition for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	3 months prior/6 months treatment free/12 months after
Waiver of Premium: If you become disabled due to a covered critical illness that is diagnosed after the employee's effective date, and you remain disabled for 90 days, we will waive the premium due after such 90 days for as long as you remain disabled.	Included
Health Screening Benefit	\$75 Employee, \$75 Spouse, \$75 Child per year limit.

Condition Definitions

- **Stroke - Severe:** a permanent neurological deficit which persists at least 30 days after the event.
- **Coronary Artery Disease - requiring a bypass:** requires a diagnosis to be of such a severity that it requires one or more coronary artery bypass grafts.
- **Heart Failure:** requires a heart valve replacement or acceptance into the heart transplant waiting list.
- **Kidney Failure:** occurs on the earlier date of when renal or peritoneal dialysis begins, or the date you're accepted onto the kidney transplant waiting list of a recognized kidney transplant program in the United States.
- **Major Organ Failure:** occurs on the date you're accepted onto the liver, pancreas or lung transplant waiting list of a recognized transplant program in the United States.
- **Advanced Alzheimer's Disease:** occurs on the date a physician diagnoses the cognitive decline to have progressed to the point that there's permanent inability to perform 2 or more Activities of Daily Living.
- **Advanced Parkinson's Disease:** occurs on the date diagnosed by a physician and requires at least 3 or more symptom(s) affecting movement and the central nervous system.

Critical Illness Cost Illustration

To determine the most appropriate level of coverage, you should consider your current basic monthly expenses and expected financial needs during a Critical Illness.

Spouse coverage premium is based on Employee age

Child cost is included with employee election.

	Semi-monthly Premiums Displayed					
	Election Cost Per Age Bracket					
	< 30	30-39	40-49	50-59	60-69	70+†
Employee						
\$5,000	\$0.80	\$1.40	\$3.08	\$6.63	\$13.98	\$26.05
\$10,000	\$1.60	\$2.80	\$6.15	\$13.25	\$27.95	\$52.10
Benefit Amount Up To 100% of Employee Amount to a Maximum of \$10,000						
Spouse						
\$5,000	\$0.80	\$1.40	\$3.08	\$6.63	\$13.98	\$26.05
\$10,000	\$1.60	\$2.80	\$6.15	\$13.25	\$27.95	\$52.10

†Benefit reductions may apply. See plan details.

EXCLUSIONS AND LIMITATIONS

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS FOR CRITICAL ILLNESS:

We will not pay benefits for a Second occurrence (recurrence) of a Critical Illness unless the Covered Person has not exhibited symptoms or received care or treatment for that Critical Illness for at least 6 months in a row prior to the recurrence. For purposes of this exclusion, care or treatment does not include: (1) preventive medications in the absence of disease; and (2) routine scheduled follow-up visits to a doctor. If one illness causes or contributes to another illness, we'll pay benefits for only one of these illnesses. We'll pay for the illness that has the larger benefit. If the benefit amounts for the illness are the same, we'll let you choose which one we pay.

We do not pay benefits for claims relating to a covered person: taking part in any war or act of war (including service in the armed forces) committing a felony or taking part in any riot or other civil disorder or intentionally injuring themselves or attempting suicide while sane or insane.

Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding 1 year; or (b) in an area under travel warning by the US Department of State, subject to state specific variations.

If the plan is new (not transferred): During the exclusion period, this Critical Illness plan does not pay charges relating to a pre-existing condition. If this plan is transferred from another insurance carrier, the time an insured is covered under that plan will count toward satisfying Guardian's pre-existing condition

limitation period. A pre-existing condition includes any condition for which an employee, in a specified time period prior to coverage in this plan, consults with a physician, receives treatment, or takes prescribed drugs. No benefit will be paid until the earlier of the treatment free period or a specified time period after the effective date. Please refer to the plan documents for specific time periods. State variations may apply.

Guardian's Critical Illness plan does not provide comprehensive medical coverage. It is a basic or limited benefit and is not intended to cover all medical expenses. It does not provide "basic hospital," "basic medical," or "medical" insurance as defined by the New York State Insurance Department.

Health questions are required on late enrollees. This coverage will not be effective until approved by a Guardian underwriter.

This policy will not pay for a diagnosis of a listed critical illness that is made before the insured's Critical Illness effective date with Guardian.

The policy has exclusions and limitations that may impact the eligibility for or entitlement to benefits under each covered condition. See your certificate booklet for a full listing of exclusions & limitations..

If Critical Illness insurance premium is paid for on a pre tax basis, the benefit may be taxable. Please contact your tax or legal advisor regarding the tax treatment of your policy benefits..

Contract # CI – 23 - P

Guardian's Critical Illness Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. This policy provides limited benefits health insurance only. It does not provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. Policy Form # GP-1-LAH-12R; CI – 23 - P



Accident insurance

Accidents happen. With accident insurance, you can help them hurt a bit less.

Accident insurance is an extra layer of protection that gives you a cash payment to help cover out-of-pocket expenses when you suffer an unexpected, qualifying accident.

Who is it for?

Nobody can predict when an accident might happen. That's why accident insurance is an important add-on policy for people who want to supplement the health and disability insurance coverage they already have individually or through an employer.

What does it cover?

Accident Insurance pays you lump sum of benefits after you suffer an accident. This could be more than 40 different circumstances, including: emergency treatment, ambulance, burns, dislocations, fractures, hospital confinement, and surgery.

Why should I consider it?

Health coverage may become more expensive, with higher co-pays, premiums, and deductibles. Accident insurance can be a simple, affordable way to help supplement and cover additional expenses your health and disability insurance may not cover, including x-rays, ambulance services, deductibles, and even things like rent or groceries.

Plus, accident insurance is portable and payments are made directly to you.

You will receive these benefits if you meet the conditions listed in the policy.



Added support during recovery

Amanda breaks her leg falling off her bike and needs emergency treatment.

Average non-surgical broken leg treatment expense: **\$2,500**

Average Major Medical deductible: **\$1,500**

Major Medical covers 80% of the surgical cost after the deductible is met, but Amanda's still responsible for 20%: **\$200**

Total out-of-pocket amount for Amanda (deductible + coinsurance): **\$1,700**

Amanda's Guardian Accident policy pays her a benefit of **\$1,700**, which covers all of her out-of-pocket expenses.

This example is for illustrative purposes only. Your plan's coverage may vary. See your plan's information on the following pages for specific amounts and details.



Your accident coverage

ACCIDENT	
COVERAGE - DETAILS	
Your Semi-monthly premium	\$5.28
You and Spouse	\$8.86
You and Child(ren)	\$9.38
You, Spouse and Child(ren)	\$12.95
Accident Coverage Type	Off Job
Portability - Allows you to take your Accident coverage with you if you terminate employment.	Included
WELLNESS BENEFIT - Per Year Limit	\$50
Child(ren) Age Limits	Children age birth to 26 years
FEATURES	
Air Ambulance	\$1,500
Ambulance	\$600
Blood/Plasma/Platelets	\$300
Burns (2nd Degree/3rd Degree)	9 sq inches To 18 sq inches: \$0/\$2,000 18 sq inches To 35 sq inches: \$1,000/\$4,000 Over 35 sq inches: \$3,000/\$15,000
Burns - Skin Graft	50% of burn benefit
Child Organized Sport - Benefit is paid if the covered accident occurred while your covered child, age 18 years or younger, is participating in an organized sport that is governed by an organization and requires formal registration to participate.	25% increase to child benefits
Chiropractic Visits	\$50/visit, up to 6 visits
Coma	\$10,000
Concussion Baseline Study	\$25
Concussions	\$200
Diagnostic Exam (Major)	\$200
Dislocations	Schedule up to \$9,000
Doctor Follow-Up Visits	\$100, up to 6 treatments
Emergency Dental Work	\$300/Crown, \$75/Extraction
Emergency Room Treatment	\$200
Epidural Anesthesia Pain Management	\$100, 2 times per accident
Eye Injury	\$300
Family Care—Benefit is payable for each child attending a Child Care center while the insured is confined to a hospital, ICU or Alternate Care or Rehabilitative facility due to injuries sustained in a covered accident.	\$20/day, up to 30 days
Fractures	Schedule up to \$6,000
Gun Shot Wound	\$750
Hospital Admission	\$1,500



Your accident coverage

FEATURES (Cont.)

Hospital Confinement	\$300/day - up to 1 year
Hospital ICU Admission	\$3,000
Hospital ICU Confinement	\$600/day - up to 15 days
Initial Dr. Office/Urgent Care Facility Treatment	\$100
Joint Replacement (Hip/Knee/Shoulder)	\$2,500/\$1,250/\$1,250
Knee Cartilage	\$500
Laceration	Schedule up to \$800
Lodging - The hospital stay must be more than 50 miles from the insured's residence.	\$125/day, up to 30 days for companion hotel stay
Medical Appliance—Wheelchair, motorized scooter, leg or back brace, cane, crutches, walker, walking boot that extends above the ankle or brace for the neck.	Schedule up to \$500
Outpatient Therapies	\$35/day, up to 10 days
Post-Traumatic Stress Disorder	\$400
Prosthetic Device/Artificial Limb	1: \$500 2 or more: \$1,000
Rehabilitation Unit Confinement	\$100/day, up to 15 days
Ruptured Disc With Surgical Repair	\$500
Surgery (Cranial, Open Abdominal, Thoracic, Hernia) Max	Schedule up to \$1,250 Hernia: \$250
Surgery (Exploratory or Arthroscopic)	\$400
Tendon/Ligament/Rotator Cuff	1: \$500 2 or more: \$1,000
Transportation - Benefit is paid if you have to travel more than 50 miles one way to receive special treatment at a hospital or facility due to a covered accident.	\$0.50 per mile, limited to \$500/round trip, up to 3 times per accident
Traumatic Brain Injury — A nondegenerative, noncongenital Injury to the brain from an external nonbiological force, requiring Hospital Confinement for 48 hours or more and resulting in a permanent neurological deficit with significant loss of muscle function and persistent clinical symptoms.	\$4,000
X - Ray	\$40

UNDERSTANDING YOUR BENEFITS:





- **Emergency Room Treatment** – Benefit is paid only when an insured is examined or treated within 72 hours of a covered accident.

EstateGuidance® Online Will Preparation

Secure your wishes with a legally binding will.

EstateGuidance makes drafting a will easy with online tools that walk you through the process in minutes. You can also draft a living will to ensure you get the end-of-life care you desire and a final arrangements document expressing your wishes for your funeral services.

How it can help


			
Complete a customized will:	Have your will printed and sent to you:	Draft a living will:	Draft a final arrangements document:
No cost to you	\$14.99	\$14.99	\$9.99


This service is only available if you purchase qualifying lines of coverage. See your plan administrator for more details.

ComPsych Corporation (ComPsych) is a vendor to The Guardian Life Insurance Company of America (Guardian). ComPsych and Guardian are not affiliated entities. The Employee Assistance Program (Services) is provided by ComPsych. Guardian does not control or provide any part of the Services and does not bear any liability for their provision. This informational resource is not a contract and is for illustrative purposes only. Only the policy contains applicable terms. Guardian and ComPsych reserve the right to discontinue Services at anytime without notice. Services may not be available in all states. Legal/financial assistance and resources services are not available in the states of New York and Hawaii. Provision of Services shall be in a manner consistent with applicable law.



How to access 24/7 live assistance

 **Call**
1 855 239 0743
TRS: Dial 711

 **Visit**
estateguidance.com

App: GuidanceNowSM
Enter promotional code:
Guardian

Caregiving service

Comprehensive support for every stage of life

Employees like you juggle complex responsibilities both at work and at home. The caregiving support offered through Guardian + Wellthy is tailored to your individual needs. From navigating parenthood to arranging in-home care for a loved one, you're covered with this service that's integrated directly into your Guardian disability benefit.

Access support that's truly personalized, to help assist you in your caregiving journey. Including if you're in need of:



Help managing a health condition



Childcare and teen support



Caring for an aging loved one



Mental health and well-being



End of life and loss



Financial hardships

With the help of Guardian + Wellthy caregiving support services, you can plan for future care responsibilities, get guidance for your current needs, or connect with others who are navigating care for similar situations. You will have access to self-serve tools, resources, and dedicated support.

This service is only available if you have qualifying lines of coverage. See your plan administrator for more details.

Individual outcomes may vary due to the unique aspects of each caregiving scenario. Guardian's Group Short Term Disability and Long Term Disability Insurance are underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Wellthy, Inc. ("Wellthy") is a vendor to The Guardian Life Insurance Company of America ("Guardian"). Wellthy and Guardian are not affiliated entities. Wellthy provides a care coordinator to integrate separately retained caregiver resources (e.g., senior care, childcare, etc.) for the benefit of a member or their permitted dependents ("Services"). Guardian does not control or provide any part of the Services and does not bear any liability for their provision.

This informational resource is not a contract and is for illustrative purposes only. Only the policy contains applicable terms. Guardian and Wellthy reserve the right to discontinue Services at any time without notice. Services may not be available in all states.



How to access

Visit

guardianwell.com

Look for the Guardian + Wellthy page to learn how to access your caregiving benefits.

Note: First-time GuardianWell users will need to register.

Provider Contact Information

Coverage	Carrier	Phone #	Website/Email
Medical	Curative	855-428-7284	https://curative.com
Healthcare FSA Dependent Care FSA	FFGA	855-523-8422	www.benefits.ffga.com
Vision Basic Life and AD&D Voluntary Life and AD&D Short Term Disability Long Term Disability Cancer Permanent Life Insurance	Guardian	888-600-1600	https://www.guardianlife.com

Access Your Benefits Anytime, Anywhere!

To help you access your benefits and HR information—even when you're away from work and need it most—hop on to the Employee Benefits Center to read, watch, and research benefit options available to you and your family!!



Scan the QR Code to head over to the City of Burnet Employee Benefits Portal.

Go to the Menu and select "2025-2026 Plan Year" to view information videos, plan rates and details, and summaries of benefit coverages for all plans we offer.

Ready to enroll??

Drop down the menu again, click "How to Enroll"
Scroll down to find out how to login if you haven't before.

There are specific steps for first time login, so be sure to read carefully!!

Be sure you have social security numbers and birthdates for you and your dependents.

Got Questions??

Call, E-mail or Stop By HR!
We are happy to help!

Office: 512-715-3213
Cell: 512-755-4046
Email: hr@cityofburnet.com