



YOUR 2023-24 BENEFITS

October 1, 2023 - September 30, 2024



Welcome

Your benefits are an important part of your overall compensation. We are pleased to offer a comprehensive array of valuable benefits to protect your health, family and way of life. This guide answers some of the basic questions you may have about your benefits. Please read it carefully, along with any supplemental materials you receive.

Eligibility

You are eligible for benefits if you work 30 or more hours per week. You may also enroll your eligible family members under certain plans you choose for yourself. Eligible family members include:

- ▶ Your legally married spouse
- ▶ Your biological children, stepchildren, adopted children or children for whom you have legal custody (age restrictions may apply). Disabled children age 26 or older who meet certain criteria may continue on your health coverage.

When Coverage Begins

- ▶ **New Hires:** You must complete the enrollment process within 30 days of your date of hire. If you enroll on time, coverage is effective on the first of the month following 30 days from date of hire.
- ▶ If you fail to enroll on time, you will **NOT** have benefits coverage (except for company-paid benefits) until you enroll during our next annual Open Enrollment period.
- ▶ **Open Enrollment:** Changes made during Open Enrollment are effective October 1, 2023 - September 30, 2024.

Choose Carefully!

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualifying life event during the year. Following are examples of the most common qualifying life events:

- ▶ Marriage or divorce
- ▶ Birth or adoption of a child
- ▶ Child reaching the maximum age limit
- ▶ Death of a spouse or child
- ▶ You lose coverage under your spouse's plan
- ▶ You gain access to state coverage under Medicaid or The Children's Health Insurance Program

Making Changes

To change your benefit elections, you must contact Human Resources within 31 days of the qualifying life event. Be prepared to show documentation of the event, such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

Required Information—You will be required to enter a Social Security number (SSN) for all covered dependents when you enroll. The Affordable Care Act (ACA) requires the company to report this information to the IRS each year to show that you and your dependents have coverage. This information will be securely submitted to the IRS and will remain confidential.

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Enrollment

Go to <https://ffbenefits.ffga.com/cityofwatauga/>. There, you will find detailed information about the plans available to you and instructions for enrolling.

Medical

We are proud to offer you a choice of medical plans that provide comprehensive medical and prescription drug coverage. The plans also offer many resources and tools to help you maintain a healthy lifestyle. Following is a brief description of each plan.

United Healthcare HMO

With this plan, you select a primary care physician (PCP) from the participating network of providers who will coordinate your health care needs, refer you to specialists (if needed) and approve further medical treatment. Services received outside of the HMO's network are not covered, except in the case of emergency medical care.

United Healthcare HDHP HSA

The High-Deductible Health Plan (HDHP) works similarly to a traditional PPO:

- ▶ You may see any health care provider and still receive coverage, but will maximize your benefits and lower your out-of-pocket costs if you see an in-network provider.
- ▶ The plan pays the full cost of qualified in-network preventive health care services.
- ▶ You pay the full cost of non-preventive health care services until you meet the annual deductible. **NOTE:** *If you enroll one or more family members, you must meet the full FAMILY deductible before the plan starts to pay expenses for any one individual.*
- ▶ Once you meet the deductible, you pay a percentage of your health care expenses (**coinsurance**) and the plan pays the rest.
- ▶ Once your deductible and coinsurance add up to the out-of-pocket maximum, the plan pays the full cost of all qualified health care services for the rest of the year. **NOTE:** *If you enroll one or more family members, you must meet the full FAMILY out-of-pocket maximum before the plan starts to pay covered services at 100% for any one individual.*



Health Savings Account

The HDHP comes with a type of savings account called a health savings account (HSA). The HSA lets you set aside pre-tax dollars to help offset your annual deductible and pay for qualified health care expenses.

Here's how the HSA works:

- ▶ You contribute pre-tax funds to the HSA through automatic payroll deductions.
- ▶ Your calendar year contributions may not exceed the annual IRS limits listed below.

HSA Contribution Limit	2023	2024
Employee Only	\$3,850	\$4,150
Family (employee + 1 or more)	\$7,750	\$8,300
Catch-up (age 55+)	\$1,000	\$1,000

- ▶ You can withdraw HSA funds, tax free, to pay for qualified health care expenses now or in the future. Unused funds roll over from year to year and are yours to keep, even if you change medical plans or leave your employer.

Important Notes:

- ▶ You must meet certain eligibility requirements to have an HSA: You must a) be at least 18 years old, b) be covered under a qualified HDHP, c) not be enrolled in Medicare and d) cannot be claimed as a dependent on another person's tax return. For more information, visit www.irs.gov/forms-pubs/about-publication-969.
- ▶ For a complete list of qualified health care expenses, visit www.irs.gov/forms-pubs/about-publication-502.
- ▶ Adult children must be claimed as dependents on your tax return for their medical expenses to qualify for payment or reimbursement from your HSA.

Medical (Continued)

The following is a high-level overview of the coverage available. For complete coverage details, please refer to the Summary Plan Description (SPD).

Key Medical Benefits	United Healthcare \$3,500 HMO Navigate HMO Network	United Healthcare HDHP HSA Navigate HMO Network
	In-Network Only	In-Network Only
Deductible (per calendar year)		
Individual / Family	\$3,500 / \$7,000	\$2,500 / \$5,000
Out-of-Pocket Maximum (per calendar year)		
Individual / Family	\$6,600 / \$13,200	\$2,500 / \$5,000
Covered Services		
Office Visits (physician/specialist)	\$30 / \$50 copay	0%*
Virtual Visits	\$0	\$0 copay when using myuhc.com/virtualvisits
Routine Preventive Care	\$0	No charge
Outpatient Diagnostic (lab/X-ray)	\$30 copay	0%*
Complex Imaging	20%	0%*
Ambulance	20%	0%*
Emergency Room	20%	0%*
Urgent Care Facility	\$25 copay	0%*
Inpatient Hospital Stay	20%	0%*
Outpatient Surgery	20%	0%*
Prescription Drugs (Tier 1 / Tier 2 / Tier 3)		
Retail Pharmacy (30-day supply)	\$5 / \$30 / \$65	0%*
Mail Order (90-day supply)	\$12.50 / \$75 / \$162.50	0%*

NOTE: Tobacco User Surcharge - a tobacco user surcharge of \$25/month will be charged. Employees who are tobacco users can waive the fee if they participate in the complete a tobacco cessation program. Employees will be required to sign an affidavit during open enrollment.

NOTE: Covered spouses with available coverage - the City will no longer allow spouses on the plan if they have or are eligible for other healthcare coverage through their employer. The employee will be required to sign an affidavit during open enrollment verifying that his/her spouse does not have coverage available through their employer.

Coinsurance percentages and copay amounts shown in the above chart represent what the member is responsible for paying.

*Benefits with an asterisk (*) require that the deductible be met before the Plan begins to pay.

To be eligible for the HSA, you cannot be covered through Medicare Part A or Part B or TRICARE programs. See the plan documents for full details.

1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.

Dental

We are proud to offer you a choice of dental plans.

United Healthcare DHMO

With this plan, you choose a primary dental provider to manage your care. There are no charges for most preventive services, no claim forms and no deductibles. Reduced, pre-set charges apply to other services.

United Healthcare DPPO

This plan offers you the freedom and flexibility to use the dentist of your choice. However, you will maximize your benefits and lower your out-of-pocket costs if you choose a dentist who participates in the United Healthcare network.

The following is a high-level overview of the coverage available.

Key Dental Benefits	DHMO	DPPO	
	In-Network Only	In-Network	Out-of-Network ¹
Deductible (per calendar year)			
Individual / Family	\$0 / \$0	\$50 / \$150	\$50 / \$150
Benefit Maximum (per calendar year; preventive, basic and major services combined)			
Per Individual	Unlimited	\$1,500	\$1,500
Covered Services			
Preventive Services	\$5	No charge	10%*
Basic Services	See copay schedule	20%*	20%*
Major Services	See copay schedule	50%*	50%*
Orthodontia (Child & Adult)	Child \$1,985 / Adult \$1,895 copay	50%; maximum \$1,500	N/A

Coinsurance percentages shown in the above chart represent what the member is responsible for paying.

*Benefits with an asterisk (*) require that the deductible be met before the Plan begins to pay.

1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.

Vision

We are proud to offer you a vision plan.

United Healthcare

This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and lower your out-of-pocket costs if you choose a provider who participates in the United Healthcare network.

The following is a high-level overview of the coverage available.

Key Vision Benefits	United Healthcare	
	In-Network	Out-of-Network Reimbursement
Exam (once every 12 months)	\$10	Up to \$40
Materials Copay	\$10	\$10
Lenses (once every 12 months)	No charge after materials copay	Up to \$40
Single Vision		Up to \$60
Bifocal		Up to \$80
Trifocal		
Frames (once every 24 months)	Up to \$130	Up to \$45
Contact Lenses (once every 12 months; in lieu of glasses)	Up to \$130	Up to \$105



Life and AD&D

Life insurance provides your named beneficiary(ies) with a benefit after your death.

Accidental death and dismemberment (AD&D) insurance provides specified 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.

Basic Life/AD&D (Company-paid)

This benefit is provided at **NO COST** to you through Mutual of Omaha.

Benefit Amount	
Employee	1 times basic annual salary up to \$100,000

Supplemental Life/AD&D (Employee-paid)

If you determine you need more than the basic coverage, you may purchase additional coverage through Mutual of Omaha for yourself and your eligible family members.

Benefit Option		Guaranteed Issue ¹
Employee	\$10,000 increments; minimum of \$10,000 up to \$500,000 or 5 times salary (whichever is greater)	\$150,000
Spouse	\$5,000 increments; minimum of \$5,000 up to \$150,000 (not to exceed 100% of your additional life coverage)	\$30,000
Child(ren)	14 days to 6 months: \$250; 6 months to 25 years: \$10,000	\$10,000

1. During your initial eligibility period only, you can receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.

Longevity

Eligible employees shall receive, in December of each year, a lump sum longevity pay for every month of employment. Employees that average a minimum of 40+ hours a week qualify for longevity pay of twelve dollars (\$12) per month for every month of employment. Employees that average a minimum of 25-29 hours a week qualify for longevity pay of six dollars (\$6) per month for every month of employment.



Disability

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness.

Long-Term Disability

Provided at **NO COST** to you through Mutual of Omaha

Benefit Percentage	50%
Monthly Benefit Maximum	\$5,000
When Benefits Begin	after 90th day of disability
Maximum Benefit Duration	Social Security Retirement Age

Employee Assistance Program

Life is full of challenges, and sometimes balancing them all can be difficult. We are proud to provide a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The EAP is provided at **NO COST** to you through Mutual of Omaha.

The EAP can help with the following issues, among others:

- ▶ Mental health
- ▶ Substance abuse
- ▶ Relationships or marital conflicts
- ▶ Grief and loss
- ▶ Child and eldercare
- ▶ Legal or financial issues

EAP Benefits

- ▶ Assistance for you and your household members
- ▶ Up to four (4) in-person sessions with a counselor per issue, per year, per individual
- ▶ Unlimited toll-free phone access and online resources

Valuable Extras

We also offer the following additional benefits:

- ▶ WataugaFit
- ▶ 457(b)
- ▶ Retirement (TMRS)
- ▶ PARS

Mutual of Omaha Extras

We also offer the following additional benefits through Mutual of Omaha Valuable:

- ▶ Will Preparation Services: Free online will preparation services by Epoq, Inc. Log onto www.willprepservices.com and use the code **MUTUALWILLS** to register
- ▶ World Wide Travel Assistance: Pre-trip assistance and emergency travel support services. For full details call (800) 856-9947
- ▶ Hearing Discount Program: Contact client services for more details at (844) 267-5436 or visit amplifonusa.com/mutualofomaha

UHC Rewards

Good news — your health plan comes with a new way to earn up to \$300. UnitedHealthcare Rewards is included in your health plan at no additional cost.

There's so much good to get

With UHC Rewards, a variety of actions — including many things you may already be doing — lead to rewards. The activities you go for are up to you — same goes for ways to spend your earnings.

Reach daily goals:

- ▶ Track 5,000 steps or 15 active minutes each day, or double it for an even bigger reward
- ▶ Track 14 nights of sleep

Complete one-time reward activities:

- ▶ Go paperless
- ▶ Get a biometric screening
- ▶ Take a health survey
- ▶ Connect a tracker

Personalize your experience by selecting activities that are right for you — and look for new ways of earning rewards to be added throughout the year.

There are 2 ways to get started

With UHC Rewards, a variety of actions — including many things you may already be doing — lead to rewards. The activities you go for are up to you — same goes for ways to spend your earnings.

On the UnitedHealthcare® app:

- ▶ Scan this code to download the app
- ▶ Sign in or register
- ▶ Select the Menu tab and choose UHC Rewards
- ▶ Activate UHC Rewards and start earning
- ▶ Though not required, connect a tracker and get access to even more reward activities

On myuhc.com®:

- ▶ Sign in or register
- ▶ Select UHC Rewards
- ▶ Activate UHC Rewards
- ▶ Choose reward activities that inspire you — and start earning



Your health	Your goals	Your rewards
Get in on an experience that's designed to help inspire healthier habits	Personalize how you earn by choosing the activities that are right for you	Earn up to \$300 and use it however you want

Voluntary Benefits

Our benefit plans are here to help you and your family live well—and stay well. But did you know that you can strengthen your coverage even further? It's true! Our voluntary benefits are designed to complement your health care coverage and allow you to customize our benefits to you and your family's needs. The best part? Benefits from these plans are paid directly to you! Coverage is also available for your spouse and dependents. You can enroll in these plans during Open Enrollment—they're completely voluntary, which means you are responsible for paying for coverage at affordable group rates.

Accident- The Standard

Accident insurance can soften the financial impact of an accidental injury by paying a benefit to you to help cover the unexpected out-of-pocket costs related to treating your injuries. Some accidents, like breaking your leg, may seem straightforward: You visit the doctor, take an X-ray, put on a cast and rest up until you're healed. But in reality, treating a broken leg can cost up to \$7,500. And it's not only broken limbs—an average non-fatal injury could cost you \$6,620 in medical bills. When your medical bill arrives, you'll be relieved you have accident insurance on your side. There is a \$200 wellness incentive per person on the plan to have a wellness visit.

Cancer- The Guardian

Cancer may not feel like a priority you need to worry about right now, but with almost 2 million new cases of cancer occurring in 2021, it can (literally) pay to be prepared. The cancer indemnity plan pays a flat dollar amount to you when a covered person is diagnosed with internal cancer. Other benefits include payments made directly to you for hospital confinement, medical imaging, radiation, chemotherapy, immunotherapy, transportation and lodging. The plan also includes a cancer screening wellness benefit.

Critical Illness- The Standard

Most of us don't have an extra \$7,000 ready to spend—and even if we do, we don't want to spend it on medical expenses. Unfortunately, the average cost to treat a critical illness is just that: \$7,000. But with critical illness insurance, you'll receive a lump-sum benefit if you are diagnosed with a covered condition. You can use this benefit however you like, including to help pay for: treatments, prescriptions, travel, increased living expenses and more.

Hospital Indemnity- The Standard

When you or a dependent need to be hospitalized, your family deserves to focus on their well-being, not the stress of the average three-day hospital stay, which can cost you \$30,000. Hospital indemnity insurance can help reduce costs by paying you or a covered dependent a benefit to help cover your deductible, coinsurance and other out-of-pocket costs due to a covered hospitalization.

MASA - Medical Transportation

With medical transport protection, you will have zero out-of-pocket expenses for any emergent air or ground transport from anywhere in the United States, regardless of who transports you. You will receive medical emergency transportation solutions to help cover your out-of-pocket medical transport costs when your insurance falls short.

Permanent Life Insurance - Texas Life

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.

Pet Insurance - MetLife

You want the best for your pet. While it's hard to anticipate accidents and illnesses, MetLife Pet Insurance makes it a little easier to be prepared for them. As an employee of ABC Company, you're eligible for a discount on Nationwide Pet Insurance. Premiums vary based on the age of your pet, species, size (as an adult), plan type, deductible and state of residence.

Legal and Identity Theft - MetLife

Identity theft can be emotionally devastating and take years to resolve without help from an experienced professional. Replacing documents, cutting through red tape, and untangling fraud is daunting. But with help from MetLife's experienced team, available 24/7, restoration takes place quickly and effectively, giving customers peace of mind. This benefit is paid entirely by you.

Short Term Disability - Mutual of Omaha

This plan can help replace a portion of your monthly income if you are unable to work due to a covered illness—including pregnancy—or an off-the-job accident. You can choose monthly benefit amounts from \$400 to \$4,000. You can use this money to help cover your living expenses until you're back on your feet. You also have flexibility of choosing when benefits start and how long they will continue. Some pre-existing condition limitations apply.

Cost of Benefits

October 1, 2023 - September 30, 2024

Your contributions toward the cost of medical, dental and vision coverage are automatically deducted from your paycheck before taxes if elected. The amount will depend upon the plan you select and if you choose to cover eligible family members. *The Annual Salary considered will be the current salary at the time of enrollment, whether open enrollment, new hire enrollment and will only be subject to change if a qualifying event happens during the plan year.

Medical

Coverage Tier	Bi-Weekly Employee Contribution							
	United Healthcare \$3,500 HMO				United Healthcare HDHP HSA			
	Tier 1: \$50,000 or Below	Tier 2: \$50,001 to \$69,999	Tier 3: \$70,000 to \$99,999	Tier 4: \$100,000 or Higher	Tier 1: \$50,000 or Below	Tier 2: \$50,001 to \$69,999	Tier 3: \$70,000 to \$99,999	Tier 4: \$100,000 or Higher
Employee Only	\$17.04	\$34.07	\$51.11	\$68.15	\$36.27	\$54.40	\$72.54	\$90.67
Employee + Spouse	\$210.54	\$245.64	\$280.73	\$315.82	\$261.46	\$298.82	\$336.17	\$373.52
Employee + Child(ren)	\$202.37	\$236.09	\$269.82	\$303.55	\$251.31	\$287.08	\$322.96	\$358.85
Family	\$307.64	\$358.91	\$410.18	\$461.45	\$382.04	\$436.62	\$491.19	\$545.77

Dental

Coverage Tier	Bi-Weekly Employee Contribution	
	United Healthcare UHC DHMO	United Healthcare UHC DPPO
Employee Only	\$0.00	\$0.00
Employee + Spouse	\$5.89	\$17.84
Employee + Child(ren)	\$7.85	\$21.09
Family	\$10.74	\$27.89

Vision

Coverage Tier	Bi-Weekly Employee Contribution
	United Healthcare Vision Plan
Employee Only	\$0.00
Employee + Spouse	\$3.67
Employee + Child(ren)	\$3.67
Family	\$3.67

Supplemental Life/AD&D

Deductions for supplemental Life/AD&D are taken from your paycheck after taxes. Rates are available during enrollment.

Contact Information

Coverage	Carrier	Phone #	Website/Email
Medical	United Healthcare	(800) 980-5213	www.myuhc.com
Dental	United Healthcare	(800) 980-5213	www.myuhc.com
Vision	United Healthcare	(800) 980-5213	www.myuhc.com
Life/AD&D	Mutual of Omaha	(800) 646-8882	www.mutualofomaha.com
Disability	Mutual of Omaha	(800) 646-8882	www.mutualofomaha.com
Employee Assistance Program (EAP)	Mutual of Omaha	(800) 646-8882	www.mutualofomaha.com
Voluntary Benefits	First Financial Group of America	(800) 883-0007	victoria.joye@ffga.com

Benefits Website

Our benefits website <https://ffbenefits.ffga.com/cityofwatauga/> can be accessed anytime you want additional information on our benefits programs.

Questions?

If you have additional questions, you may also contact:

Julie Rodriguez at (817) 514-5819 | jrodriguez@wataugatx.org

Karen Porter at (817) 514 - 5826 | kporter@wataugatx.org



DISCLAIMER: The material in this benefits brochure is for informational purposes only and is neither an offer of coverage or medical or legal advice. It contains only a partial description of plan or program benefits and does not constitute a contract. Please refer to the Summary Plan Description (SPD) for complete plan details. In case of a conflict between your plan documents and this information, the plan documents will always govern.
Annual Notices: ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. The company will distribute all required notices annually.

