



Employee Benefits

Open Enrollment

April 15 – May 3

Benefit Elections

Effective July 1, 2019

Optional Open Enrollment

Because of only minimal changes to the City's benefit offerings, this year Open Enrollment is optional for all employees.

Employees' current enrollments will rollover to the new plan year, **except for FSA.**

Enrollment and changes are to be made on the City's **enrollment system called Employee Navigator.** Access Employee Navigator with computers and mobile devices at: www.employeeenavigator.com

If you forget your Employee Navigator password from last year, **you can request a password reset online at:**
www.employeeenavigator.com

The deadline for all enrollment and changes on Employee Navigator and for forms to be submitted is **Friday May 3rd at 5:00 PM.**



Open Enrollment Action

At Open Enrollment you may add or drop eligible dependents from your coverage *without a qualifying event*.

During the plan year, you may add or drop eligible dependents from your coverage *only when you have a qualifying event*, such as:

- Marriage
- Birth
- Loss or gain of other health insurance coverage
- Adoption
- Divorce

Who is an Eligible Dependent

- Spouse
- Certified Dependent
- Biological Child
- Step Child
- Child of Certified Dependent
- Disabled Child
- Adopted Child
- Court Ordered Child

Claiming someone on your benefits who does not qualify as an eligible dependent is a violation of the City's Ethics Policy and could lead to sanctions up to and including termination and repayment of claims.

Dependent Documentation Requirement

When an employee elects to enroll a dependent not previously covered on the City's health plan or dental plan, **the dependent's coverage will not go into effect unless the employee provides required eligibility documentation** for the dependent.

The list of required documentation appears in the Employee Benefits Guide.

Submit eligibility documentation to Human Resources.



Agenda

Employee Navigator Online Enrollment Tool

Aetna Health Plan with Two Provider Networks

Importance of Primary Care Physician (PCP)

Wellness Credit Requirements 2020-2021

Dental Plan

Voluntary Vision Plan

Unum

Basic Life Insurance and AD&D Benefits, Voluntary Life Insurance and AD&D Benefits, Voluntary Short-Term Disability Insurance (STD), Voluntary Long-Term Disability Insurance (LTD)

Flexible Spending Accounts (FSA)

Allstate Voluntary Plans

Accident, Cancer, Critical Illness, Hospital Indemnity, and Term Life Insurance Policies

One-on-One Enrollment Meetings

Enrollment Counselors, New York Life Long Term Care, Liberty Mutual Auto & Home Insurance



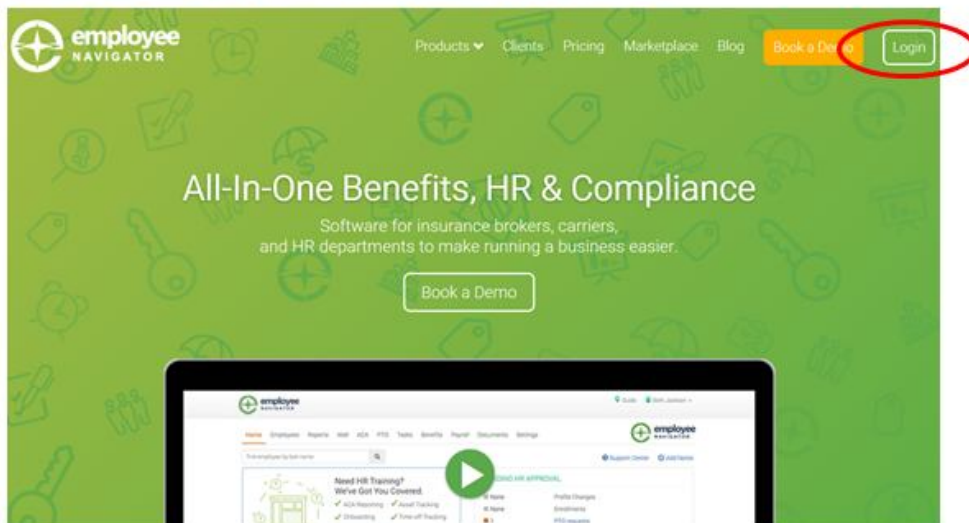
Online Enrollment Tool – Employee Navigator

Complete your 2019-2020 open enrollment elections online for Medical, Dental, Vision, Life and Disability, FSA, and Hyatt Legal plans. **Use the City’s Employee Navigator enrollment system.** www.employeenavigator.com

The login procedure is the same as last year. **Instructions are available** on the Human Resources page of CODI.

www.employeenavigator.com

Click on the “Login” button to get started.



Username

Your City of Durham Employee Email Address

Password

|

Login

[Reset a forgotten password](#)

[Register as a new user](#)



Aetna Health Plan

The City's Aetna health plan has two provider networks. You can use both networks at the same time!

Two Aetna Provider Networks:

Tier 1: Smaller network based on Duke Health, WakeMed, and THN-Cone Health

Tier 2: Larger nationwide network

The provider network you use determines the coverage level you receive.

Check online for the Aetna network participation of your providers.

Detailed instructions for using the Aetna online provider search can be found on the Human Resources page of CODI and in the Appendix of the 2019-2020 Employee Benefits Guide.



Two Aetna Provider Networks - Flexibility & Freedom!

- ✓ **You can use both Aetna networks at the same time!** You are not locked in to one network or the other.
- ✓ **You can mix and match networks!** You can see a Tier 1 PCP and a Tier 2 specialist. You can see a Tier 2 specialist and go to a Tier 1 hospital. You have the flexibility to use the provider that you want to get the savings that you want!
- ✓ **You can't lose!** You get credit in both networks for the charges you paid using either network. For example, the deductible amount you paid using one network is credited toward the deductible in the other network. You don't double pay when you mix and match networks.



Tier 1 Maximum Savings: Duke Health, WakeMed & THN-Cone Health (ACO)

- ✓ **Focused, smaller network** of providers
- ✓ Accountable Care Organization (ACO): Outcomes based medical care by providers that are incentivized by their contracts to enhance quality of care and coordinate care
- ✓ **Maximum savings** for City of Durham employees! When using this network, **you pay the lowest charges for medical care**: lowest copays, lowest coinsurance, and lowest deductible.
- ✓ Providers located in 16 counties: Alamance, Caswell, Chatham, Durham, Franklin, Granville, Guilford, Johnston, Lee, Orange, Person, Randolph, Rockingham, Vance, Wake, and Wilson
- ✓ Includes the Duke Health, WakeMed, Duke LifePoint, Alamance Regional, Annie Penn, Central Carolina, Cone Health, Granville Medical Center, Person Memorial, Wesley Long, Wilson Medical, Women's Hospital of Greensboro, and Maria Parham hospital systems. **UNC Health Care hospitals and other hospitals are not in the network!**
- ✓ 1,600+ PCPs. 8,700+ Specialists. 60 urgent care facilities.



Tier 2 Standard Savings: Choice POS (Open Access)

- ✓ **Broad, national network** of providers
- ✓ **Standard savings** for City of Durham employees. When using this network, **you pay a medium level of charges for medical care:** medium copays, medium coinsurance, and medium deductible.
- ✓ Great when traveling and for college students away at school.
- ✓ Thousands of doctors and hospitals across the country.
- ✓ Includes UNC Health Care hospitals.

Tier 3 Out-of-Network: **Highest Out-Of-Pocket Costs**

- ✓ Providers not in the two Aetna networks.
- ✓ Except for Emergency Room Visits, **out-of-network benefits are lower and your out-of-pocket costs are higher.**
- ✓ No credit toward the two Aetna network benefits for out-of-network charges you pay.
- ✓ **Use the two Aetna networks of providers to save money.**

Dual Option Health Plan Overview

You have your choice of two Aetna health plans:

Aetna Whole Health

Default plan with \$0 monthly employee only wellness rate

Aetna Whole Health Plus

Buy-up plan with \$55 monthly employee only wellness rate

Simple! Both plans work the same way, but have different copays, deductibles, and other out-of-pocket costs.

You choose the plan that is the best fit for you and your family.



Aetna Whole Health – Benefit Highlights

Benefits	Tier 1 Maximum Savings Duke, WakeMed & THN-Cone	Tier 2 Standard Savings Choice POS	Tier 3 Out-of-Network
Annual Deductible (Individual / Family)	\$2,000 / \$4,000	\$3,000 / \$6,000	\$4,000 / \$8,000
Medical Out-of-Pocket Limit (Individual / Family)	\$3,250 / \$6,500	\$5,000 / \$10,000	\$9,000 / \$18,000
Primary Care Physician Office Visit	\$30 copay	\$45 copay	50% after deductible
Specialist Office Visit	\$60 copay	\$90 copay	50% after deductible
Preventive Care	100% covered	100% covered	Not covered
Hospital Services	80% after deductible	60% after deductible	50% after deductible
Urgent Care Center Visit	\$30 copay	\$90 copay	50% after deductible
Emergency Room (First 2 Visits)	\$300 copay	\$300 copay	\$300 copay
Emergency Room (Additional Visits)	\$500 copay	\$500 copay	\$500 copay
Prescription Drugs (Tier 1 / Tier 2 / Tier 3-4)	\$0 / \$35 / \$50 copays	\$0 / \$35 / \$50 copays	Extra charge in addition to copay
Rx Out-of-Pocket Limit (Individual / Family)	\$1,500 / \$3,000	\$1,500 / \$3,000	\$3,000 / \$6,000

Monthly Employee Contribution* **\$0.00**

*Employee Only Enrollment Tier - Wellness Rate



Aetna Whole Health Plus – Benefit Highlights

Benefits	Tier 1 Maximum Savings Duke, WakeMed & THN-Cone	Tier 2 Standard Savings Choice POS	Tier 3 Out-of-Network
Annual Deductible (Individual / Family)	\$750 / \$1,500	\$1,500 / \$3,000	\$3,000 / \$6,000
Medical Out-of-Pocket Limit (Individual / Family)	\$2,500 / \$5,000	\$4,000 / \$8,000	\$8,000 / \$16,000
Primary Care Physician Office Visit	\$15 copay	\$30 copay	50% after deductible
Specialist Office Visit	\$30 copay	\$60 copay	50% after deductible
Preventive Care	100% covered	100% covered	Not covered
Hospital Services	80% after deductible	60% after deductible	50% after deductible
Urgent Care Center Visit	\$15 copay	\$60 copay	50% after deductible
Emergency Room (First 2 Visits)	\$300 copay	\$300 copay	\$300 copay
Emergency Room (Additional Visits)	\$500 copay	\$500 copay	\$500 copay
Prescription Drugs (Tier 1 / Tier 2 / Tier 3-4)	\$0 / \$30 / \$45 copays	\$0 / \$30 / \$45 copays	Extra charge in addition to copay
Rx Out-of-Pocket Limit (Individual / Family)	\$1,300 / \$2,600	\$1,300 / \$2,600	\$2,600 / \$5,200

Monthly Employee Contribution* **\$55.00**

*Employee Only Enrollment Tier - Wellness Rate



Health Plan Monthly Employee Contributions

Aetna Whole Health Plan 2019-2020				
Rate	Employee	Employee & Spouse	Employee & Child(ren)	Family
Wellness	\$0.00	\$154.40	\$86.78	\$159.65
Non-Wellness	\$20.00	\$174.40	\$106.78	\$179.65

Aetna Whole Health Plus Plan 2019-2020				
Rate	Employee	Employee & Spouse	Employee & Child(ren)	Family
Wellness	\$55.00	\$255.94	\$164.57	\$301.38
Non-Wellness	\$75.00	\$275.95	\$184.57	\$321.37



Importance of Primary Care Physician (PCP)

- ✓ You Primary Care Physician's (PCP) name appears on your Aetna ID card.
- ✓ **A good relationship with a PCP enhances medical care and outcomes.** It does not limit employees or their dependents in any way. Employees and their dependents can go to any doctor, including specialists, without a referral.
- ✓ A PCP can be a **general practitioner** or a physician whose specialty is **internal medicine, family medicine, or pediatrics.**
- ✓ Employees and their dependents can all have the same PCP or different PCPs.
- ✓ Employees and their dependents can **change their PCP anytime by calling Aetna Customer Service.**



Wellness Credit Requirements for 2020-2021

To receive the health plan wellness rate for the **2020-2021** benefit year:

- ✓ **Employees** need to complete two wellness requirements by **December 31, 2019** and, if identified as being at risk, need to participate in Care Management.
- ✓ **Spouses and spouse equivalents**, *who are covered on the City's health plan*, need to complete only one wellness requirement by December 31, 2019 and if identified as being at risk, need to participate in Care Management.

For Employees

1. Biometric Screening

- ✓ Complete on-site or with your healthcare provider

2. One Additional Activity

- ✓ Flu shot OR
- ✓ City sponsored wellness challenges or events

3. Care Management

- ✓ Required only for employees at risk for:
 - High Blood Pressure
 - High Cholesterol
 - Obesity

For Spouses or Spouse Equivalents

1. Biometric Screening

- ✓ Complete with a healthcare provider
- X Not eligible for on-site screening

2. Care Management

- ✓ Required only for spouses at risk for:
 - High Blood Pressure
 - High Cholesterol
 - Obesity



Dental Plan

Make the most of your “dental dollars” by choosing a in-network dentist.

Delta network dentists will not bill you in excess of the allowed amount for services. **Out-of-Network dentists may charge more than the allowed amount** resulting in billing for extra amounts that you have to pay.

Delta has 2 networks of dentists in North Carolina:

1. PPO Network: Best discounts for services
2. Premier Network: Good discounts for services

Refer to the **Dental Benefit Summary** in the Employee Benefits Guide for information on searching for network dentists and access to online services.

Dental Plan Benefits

General Provisions	Annual Deductible (Applies to Basic and Major Services)	\$50 Individual / \$150 Family
	Maximum Annual Benefit	\$3,000
Diagnostic and Preventive Services	Routine Oral Examinations (2 X Year)	100%
	Cleanings (2 X Year)	100%
	Periodontal Maintenance Cleaning (Code D4910)	100%
	X-rays (1 X Year for Bite Wing. 1 X 3 Years for Full Mouth.)	100%
	Brush Biopsy (Oral Cancer Screening)	100%
	Sealants (Dependents up to Age 16)	100%
	Fluoride Treatment (2 X Year for Dependents up to Age 19)	100%
Basic Services	Fillings	80%
	Space Maintainers	80%
	Endodontics (Root Canal)	80%
Major Services	Crowns	50%
	Bridges	50%
	Onlays & Inlays	50%
	Implants	50%
	Periodontics (Gum Disease Treatment)	50%
	Dentures	50%
Orthodontia Services	Orthodontia (No age limit)	50%
	Maximum Lifetime Benefit	\$1,500

Dental Plan Monthly Employee Contribution

Delta Dental Plan 2019-2020			
Employee	Employee & Spouse	Employee & Child(ren)	Family
\$14.95	\$32.83	\$33.02	\$92.68



Voluntary Vision Plan

Two plan options are available with different levels of coverage for standard progressive lenses. You choose the plan that is the best fit for you and your family.

1. **Low Plan** – Lower benefit for standard progressive lenses and lower monthly cost
2. **High Plan** – Enhanced benefits for standard progressive lenses and higher monthly cost

Voluntary Vision Plan – In-Network Benefits

Benefit Frequency	Exam	1 per plan year
	Lenses	1 per plan year
	Frames	1 per plan year

Exam	\$10 copay	
Frames & Lenses	\$10 copay	\$150 frame allowance
Contact Lenses	Lens Fitting \$10 copay Specialty Lens Fitting Allowance \$50 \$0 copay for contact lenses	(Instead of Glasses Lenses or Frames) \$150 lens allowance

Discounts	Discounts and maximums vary by lens type. Some network providers do not accept discounts. Check with your provider prior to receiving services.	
	Exam, Frames, and Eyeglass Lenses	30% discount
	Contacts and Eyeglass Lens Options	20% discount
	Disposable Contacts	10% discount

Voluntary Vision Plan In-Network Benefits

Standard Eyeglass Lenses (Not brand or premium lenses)	\$10 copay	Single Vision, Lined Bifocal, and Lined Trifocal Lenses	
	\$40 out-of-pocket max	Single Vision Polycarbonate Lenses	
	20% discount	Bifocal and Trifocal Lined Polycarbonate Lenses	
	\$55 out-of-pocket max	Single Vision High Index Lenses	
	20% discount	Bifocal and Trifocal High Index Lenses	
	Low Plan Standard Lined Trifocal Allowance Plus 20% Discount on Balance	High Plan Covered in Full	Standard Progressive Lenses
	\$15 out-of-pocket max	Ultraviolet (UV) Coating	
	\$25 out-of-pocket max	Solid or Gradient Tints	
	\$13 out-of-pocket max	Anti-Scratch Coating	
	\$50 out-of-pocket max	Anti-Reflective Coating	
	\$80 out-of-pocket max	Single Vision Photochromatic Lenses	
	20% discount	Bifocal and Trifocal Photochromatic Lenses	

Vision Plan Monthly Cost

Superior Vision Voluntary Plan 2019-2020				
Plan	Employee	Employee & Spouse	Employee & Child(ren)	Family
Low	\$8.37	\$16.74	\$19.00	\$29.35
High	\$8.62	\$17.24	\$19.57	\$30.23



Basic Life Insurance & AD&D Benefits

Coverage Details

Employer Paid Benefit

City of Durham pays the entire cost for Basic Life Insurance and AD&D Benefits.

Coverage

Basic Life Insurance	1 X Your Annual Salary up to \$250,000
Basic AD&D Benefits	1 X Your Annual Salary up to \$250,000

Age Reduction

Benefits reduce to 65% at age 70, to 50% at age 75, and terminate at retirement.

Beneficiaries

You can update your beneficiaries in Employee Navigator at Open Enrollment and anytime during the year. You may specify different beneficiaries for Basic and Voluntary benefits.

Voluntary Life Insurance and AD&D Benefits

Open Enrollment

Employees & Spouses

Employees and spouses currently enrolled in voluntary life insurance and AD&D amounts less than guaranteed issue can “bump up” their coverage by \$10,000 at open enrollment *without any health questions*. Reminders:

- ✓ Guarantee issue on employees is \$200,000.
- ✓ Guarantee issue on spouses is \$50,000.
- ✓ The amount of the spouse’s voluntary life coverage may not exceed the amount of the employee’s voluntary life coverage.

Children

Employees can add or increase children voluntary life coverage at open enrollment *without any health questions*. Reminder:

- ✓ An employee must have at least \$10,000 voluntary life coverage in order to elect voluntary life coverage for children.

Enrollment Help

You are encouraged to meet one-on-one with a benefits counselor for help with enrolling in new coverage in Employee Navigator.

Other Enrollment Options

You may decrease employee, spouse, or children coverage by any amount or terminate coverage at open enrollment without any health questions.



Voluntary Life Insurance and AD&D Benefits

Coverage Details

Employees & Spouses

Coverage is available up to \$500,000 for employees and \$500,000 for spouses with Evidence of Insurability (EOI). You choose the amount of coverage you want on your life or your spouse's life in \$10,000 increments.

Evidence of Insurability (EOI) Forms

EOI is a paper form that can be printed from Employee Navigator. Completed EOI forms must be submitted to Unum by the close of open enrollment. Coverage does not take effect until Unum approves EOI.

Children

You choose the amount of coverage you want on your children's lives. \$2,500, \$5,000, \$7,500 or \$10,000 of coverage is available for children up to age 26 *regardless of student status*.

AD&D Benefits

Employee voluntary life insurance includes AD&D benefits. Spouse and children coverage does not include AD&D.

Age Reduction

Employee and spouse coverage reduces to 65% at age 70 and to 50% at age 75.



Voluntary Short-Term Disability Insurance (STD)

Open Enrollment

Employees may enroll for the first time in Short-Term Disability insurance or increase coverage *without any health questions*, however resulting coverage is subject to a *preexisting conditions waiting period* of 3 months / 12 months.

Enrollment Help

You are encouraged to meet one-on-one with a benefits counselor for help with enrolling in new coverage or making a change to your existing coverage in Employee Navigator.

Coverage Details

Benefit

You choose your weekly benefit from \$100 to \$2,500 in increments of \$100. The maximum weekly benefit is the lesser of 60% of your weekly salary or \$2,500. Benefits are payable for up to 13 weeks.

Elimination Period

You choose from 2 Elimination/Waiting Periods for benefits to begin:

Option 1: 14 days

Option 2: 30 days

Waiting Period

For conditions present 3 months prior to the effective date of coverage, no benefits will be payable for 12 months after the effective date of coverage.



Voluntary Long-Term Disability Insurance (LTD)

Open Enrollment

Employees may enroll for the first time in Long-Term Disability insurance or increase coverage *without any health questions*, however resulting coverage is subject to a *preexisting conditions waiting period* of 3 months / 12 months.

Enrollment Help

You are encouraged to meet one-on-one with a benefits counselor for help with enrolling in new coverage or making a change to your existing coverage in Employee Navigator.

Coverage Details

Benefit

The monthly benefit is 60% of your monthly salary.

The maximum monthly benefit is the lesser of 60% of your monthly salary or \$6,000.

Benefits begin after 90 days of disability.

Benefit Duration

You choose from 2 benefit durations:

Option 1: Social Security Retirement Age 65

Option 2: 2 Years

Waiting Period

For conditions present 3 months prior to the effective date of coverage, no benefits will be payable for 12 months after the effective date of coverage.



Flexible Spending Accounts (FSA)

Personal Tax Shelter

Flexible Spending Accounts (FSA) allow you to avoid federal, state and Social Security (FICA) taxes on the money you pay for eligible out-of-pocket medical, dental, and dependent care expenses.

Your Money & Your Account

You choose an amount to be withheld from your paycheck before taxes are applied. The withholdings are placed in your FSA accounts.

No Fees

The City of Durham pays the administrative fees for the your FSA account.



Two Different Flexible Spending Accounts (FSA)

Medical Expense Reimbursement Account

Covers medical, dental and vision expenses that are only partially covered or not covered at all by your insurance.

Some examples include:

- ✓ Deductibles
- ✓ Coinsurance
- ✓ Dental Care
- ✓ Orthodontia
- ✓ Drug Copays
- ✓ Lasik

Maximum Contribution \$2,700

Dependent Care Reimbursement Account

Covers amounts you pay to daycare centers, babysitters, caregivers or after school programs that allow you and your spouse to work.

Maximum Contribution \$5,000

FSA Enrollment Action & Debit Card

Even if you participate in the FSA this year, you must reenroll in Employee Navigator to continue your participation.

FSA amounts you elected must be for expenses you incur between July 1, 2019 and June 30, 2020. You have a 2½ month Grace Period starting July 1, 2020 to exhaust your unused benefit.

“Use It or Lose It” Rule: Any balance that remains in your FSA account at the end of the Grace Period is forfeited. Plan carefully. Elect only as much FSA benefit as you can use.

Debit Card: Instant access to the funds in your medical flexible spending account. Using the debit card eliminates the need to file a paper claim form for reimbursement. Keep your current card. It will be reloaded with next year’s benefit.

Always save documentation of your eligible expenses. The administrator or the IRS may require your documentation in an audit.



Allstate Voluntary Plans Open Enrollment

- Accident
- Cancer
- Critical Illness
- Hospital Indemnity
- Term Life

Allstate continues guaranteed issue enrollment *without health questions* for new enrollment and benefit increases to Accident, Cancer, Critical Illness, and Hospital Indemnity policies.

- ✓ **This is the last year for guaranteed issue for Cancer policies.**
- ✓ The Term Life 100 policy is no longer available for new enrollment, however you can make changes to existing policies.

All employees are encouraged to meet with Benefits Counselors to discuss the Allstate policies and any enrollment changes.

Colonial policies are not eligible for open enrollment changes. Existing Colonial policies can be terminated, but not changed. Current payroll deductions will continue for Colonial products.



One-on-One Enrollment Meetings

Benefits Counselors will be available to meet one-on-one with employees to discuss coverage and options. The meeting schedule with meeting locations is posted on the Human Resources page of CODI.

One-on-one meetings with Benefits Counselors are strongly recommended for those employees making new enrollment or changes to their enrollment in:

- Health
- Dental
- Vision
- Voluntary Life and AD&D
- Voluntary Short Term & Long Term Disability
- Flexible Spending Accounts (FSA)
- Allstate Policies

Also available for one-on-one meetings are representatives from New York Life Voluntary Long Term Care Insurance and Liberty Mutual Auto and Home.



Open Enrollment Deadline

Complete your enrollment selections in Employee Navigator and submit any required forms by

Friday May 3rd at 5:00 PM

For answers to your benefits questions contact **HR Connect:**

919-560-4214 Option 1
HRConnect@DurhamNC.gov