



Employee Benefit Highlights

2015 - 2016

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WELCOME TO OPEN ENROLLMENT FOR YOUR 2015-2016 BENEFITS!

We know that quality benefits and the opportunity to choose are important to you and your family. With that in mind, The City of Apopka maintains a high quality benefit program. On the following pages you will find information on the benefit that are in effect for the plan year October 1, 2015 through September 30, 2016.

Who is Eligible?

Full time regular employees and their eligible dependents.

When can I Enroll?

There are certain deadlines you must meet to expedite your benefit plan enrollments. Generally, you have 10 days from your orientation to choose the benefits most useful to you and your family members. **Please make your benefit elections carefully. NO CHANGES are allowed during the plan year, unless the member experiences a qualifying life event.**

WELCOME TO OPEN ENROLLMENT FOR YOUR 2015-2016 BENEFITS!

We are honored to present your 2015-2016 Benefit Options! The elections you make during open enrollment will become effective **October 1, 2015 and run through September 30, 2016.**

Open Enrollment Procedures

We have again partnered with Explain My Benefits, our benefit technology/communication vendor to assist in our Open Enrollment. This year we will again have a self-service online enrollment using the EMB Enroll online system. These elections will be for the **2015-2016 Plan Year effective 10/1/2015!**

Open Enrollment Dates:

- **August 26 - August 30** - Our online enrollment system will be available for self-enrollment using any computer with access to the internet.
- **August 26 - August 28** - A Benefit Enrollment Kiosk will be available for you to use and enroll yourself in your benefit elections for the new plan year. This Kiosk will have multiple enrollment computers for you to use. EMB counselors will be at your location to assist you with any questions you may have, if you wish to enroll in or change any of your current Allstate or Trustmark voluntary benefit elections and help guide you through the self-enrollment portal.

Benefit Counselors will be on-site at the Fran Carlton Cent to assist, on the following dates and times:

Wednesday, August 26	8:30am - 4:30pm
Thursday, August 27	8:30am - 4:30pm
Friday, August 28	8:30am - 4:30pm

How to Self-Enroll in Benefits via EMB Enroll:

1. Access the On-Line Enrollment at: www.explainmybenefits.biz/apopka
2. Click the Red "Click Here to Log Into Your Open Enrollment" Button on the Page
3. Please follow the instructions on the page and proceed to your enrollment
4. Complete your enrollment
5. **IMPORTANT:** RECORD YOUR CONFIRMATION NUMBER _____



We offer a Blue Cross Blue Shield PPO plan. Our plan has a benefit-rich design and because it is a PPO plan, the choice of a primary care physician is not necessary and your care is self-directed. You choose which doctor(s) you would prefer and you may go to specialists without a referral. There is an out-of-network option in the plan, however, BCBS maintains a very large provider network, including emergency coverage world-wide.

DEPENDENTS

You may also elect coverage for your dependents. Eligible dependents may include the following:

- Your Legal Spouse
- Dependent Children:

Dependent child who is supported primarily by you, and who is incapable of self-sustaining employment by reasons of mental or physical handicap (proof of their condition and dependence must be submitted)

Medical - Dependent children **up to age 30** regardless of financial dependency, residency, student status, employment or marital status. Coverage ends at the end of the benefit year in which the dependent reaches age 30 (unless disabled).



BlueOptions 05772 Plan At-A-Glance

Network	BlueOptions 05772 Plan	
Deductible	In Network	Out of Network*
Single	\$2,000	\$4,000
Family	\$4,000	\$8,000
Coinsurance	In Network	Out of Network*
Member Responsibility	0%	50%
Out-of-Pocket Maximum	In Network	Out of Network*
Single	\$2,000	\$4,000
Family	\$4,000	\$8,000
What Applies to the Out-of-Pocket Maximum?	Co-pays, Deductible and Coinsurance (<i>excludes Rx</i>)	
Physician Services	In Network	Out of Network*
Physician Office Visit	\$20	Deductible + 50%
Specialist Office Visit	\$50	
Diagnostic Services (Freestanding Facility)	In Network	Out of Network*
Clinical Lab (Blood Work) at Independent Facility	\$0	Deductible + 50%
X-rays at Independent Facility	\$50	
Advanced Imaging (MRI, PET, CT)	\$75	
Hospital Services	In Network	Out of Network*
Inpatient	Deductible	30% After CYD
Outpatient Surgery	Deductible	Deductible + 50%
Physician Services at Hospital	\$100	
Emergency Room	\$500	
Urgent Care Center	\$75	Deductible + 50%
Mental Health / Alcohol & Substance Abuse	In Network	Out of Network*
Inpatient	\$0	\$3,000
Outpatient	\$0	50% (No Deductible)
Prescription Drugs (Rx)	In Network	Out of Network*
Generic	\$10	50%
Preferred Brand Name	\$30	
Non-Preferred Brand Name	\$50	
Mail Order Drug (90 Day Supply)	\$25/\$75/\$125 (2.5x Co-pay)	

*Out-Of-Network Balance Billing

For information regarding out-of-network balance billing that may be charged by an out-of-network provider for services rendered, please refer to the Out-of-Network Benefits section on the previous page.

Health Insurance - Per Pay Period Payroll Deduction

Tier of Coverage	Payroll Deduction Per Pay Period
Employee	\$0*
w/ Spouse Only	\$93.91
w/ Child(ren)	\$60.16
Family	\$129.65

**100% of the employee premium is paid by the City.*

Employee Deductible Assistance (funded & paid by the City)

The City has established a fund to assist employees with meeting their health insurance deductible.

It is the employee’s sole responsibility to make arrangement of their deductible to the provider; the City will reimburse any amount verified as paid over the first \$1,000 of each portion of the deductible (single or family).

Employee Health and Wellness Center—CareHere! (paid by City)

Employees have access to no cost general medical care at the medical facility provided by the City. There are no charges for examinations, no charge for prescriptions dispensed, no charge for lab work, and any other service available on-site. The facility also offers access to wellness programs, including weight-loss programs, tobacco cessation programs and other wellness initiatives.

Dental



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Employees have a choice between two plans. Both plans are PPOs and have “open access” within the network, plus you have the option to go outside the network. The low option, BlueDental Choice Plan, is a good basic plan. The high option plan, BlueDental Choice Plus, might be a better choice if you expect to have heavier utilization of the dental plan.

Locate a Dentist within the BCBS/Florida Combined network at www.bcbsfl.com

Plan	BlueDental Choice Plus High Plan		BlueDental Choice Standard Plan	
	In Network	Out of Network	In Network	Out of Network
Deductible Individual / Family	\$50 / \$150	\$50 / \$150	\$50 / \$150	\$50 / \$150
Annual Maximum	\$1,500		\$1,000	
Preventive Services Exams, Cleanings, X-Rays, etc.	Plan pays 100% Deductible is waived.	Plan pays 100% Deductible is waived.	Plan pays 100% Deductible is waived.	Plan pays 100% Deductible is waived.
Basic Services Fillings, Simple extractions, Periodontics, Root Canals, etc.	90% covered	80% covered	80% covered	50% covered
Major Services Crowns, Dentures, Fillings, etc.	60% covered	50% covered	50% covered	25% covered
Orthodontics				
Orthodontic Lifetime Max	\$1,500		\$1,000	
BlueDental Pays	50%		50%	

Tier of Coverage	Payroll Deduction Per Pay Period High Plan	Payroll Deduction Per Pay Period Standard Plan
Employee	\$7.66	\$5.31
w/ Spouse Only	\$16.80	\$11.52
w/ Child(ren)	\$21.63	\$15.86
Family	\$28.84	\$20.75

Dependent children are covered until the end of the calendar year in which they reach age 25 (unless disabled).



You may use any provider you wish, but your benefits are higher when you use a participating provider. You may locate a provider at www.vsp.com.

Benefit	Participating Provider	Non-Participating Provider	Frequency
WellVision Exam	\$10 Co-pay	Up to \$45.00	Every Plan Year
Frames & Lenses (single/lined bifocal/ lined trifocal) (Polycarbonate lenses for dependent children)	\$30 Co-pay	Frames - up to \$70.00 Single - up to \$30.00 Lined bifocal - up to \$50.00 Lined trifocal—up to \$65.00	Frames - Every Other Plan Year Lenses - Every Plan Year
Lens Enhancements	Scratch Resistant - \$0 Standard Progressive - \$55 Premium Progressive - \$95-\$105 Custom Progressive - \$150-\$175	Progressive - up to \$50.00	Every Plan Year
Contacts (in lieu of glasses)	\$130 Allowance (contacts and contact lens exam)	Up to \$105.00	Every Plan Year

Tier of Coverage	Payroll Deduction Per Pay Period
Employee	\$1.58
w/ Spouse Only	\$2.53
w/ Child(ren)	\$2.58
Family	\$4.16



Dependent children are covered until the end of the month in which they reach age 25.



Basic Term Life and AD&D

The City of Apopka provides Basic Life and AD&D Insurance through Cigna for all eligible employees at no cost to the employee. The Basic Life and AD&D insurance benefit is \$30,000.

Voluntary Supplemental Life

Employees have the opportunity at the time of hire to purchase extra life insurance for themselves and their dependents.

You may elect life insurance up to a maximum of \$350,000, not to exceed 5 times base annual pay.

Employee **One Time Guaranteed Issue Amount at *Initial Eligibility Only***
Up to \$200,000 (Not to exceed 3x annual salary)

If coverage is applied for at a later date (or if an upgrade in coverage is requested at a later date) "Evidence of Insurability" must be provided, including health questions.

Spouse A policy providing a **\$15,000** benefit is available for your Spouse (up to age 70).

Child(ren) A policy providing a **\$5,000** benefit per child is available for your dependent children (age 6 months to 19 years, as defined in policy; age 14 days to 6 months provides a \$500 benefit).

COSTS FOR OPTIONAL TERM LIFE INSURANCE

Coverage Tier	Rate	Available Coverage
Optional Employee	\$.56 / mo.	Per each \$1,000 additional (must be purchased in \$10,000 increments)
Dependent	\$4.25 / mo	\$15,000 spouse/\$5,000 each child



Long Term Disability (LTD) Insurance

All eligible employees have the opportunity to enroll in Long Term Disability Insurance. Benefits begin after a person is disabled for 180 days (six months). The benefit is 60% of your monthly salary (up to a maximum of \$5,000 per month).

The plan has a Two-Year "Own Occupation" benefit. This important provision means that for the first two years of disability, the policy will pay you benefits as long as you can't work at the position for which you've been educated or trained. (Some LTD policies don't pay any benefits unless you are completely disabled and unable to perform any gainful employment.)

Benefits are payable to age 65. For those over 65, the benefit period will vary based on the age at which you first purchased coverage.

Cost for Long Term Disability Insurance: \$.37/mo. per \$100 of monthly salary - not to exceed \$8,333





Identity theft in the United States is a major problem that continues to be on the rise. Professional protection and assistance have become important tools in fighting the identity theft epidemic.

Thieves today can get a hold of your personal information from trash cans, dumpsters, stolen mail, and even shoulder surfing. Once thieves have your information, it's a simple matter to open new fraudulent accounts and make purchases in your name.

When you enroll in LifeLock, you can be confident knowing that they are available 24 hours a day, 7 days a week, and committed 100% to helping protect your information as if it were their own.

LifeLock offers Proactive Protection:

- LifeLock Identity Alert System
- eRecon
- TrueAddress
- WalletLock
- Reduction in Pre-Approved Credit Card offers
- Free Annual Credit Reports
- 24-Hour Customer Service



\$1 Million Total Service Guarantee

LifeLock's proactive approach works to help stop identity theft before it happens. As a LifeLock member, if you become a victim of identity theft because of a failure in their service, they will help fix it at their expense, up to \$1,000,000.

Tier of Coverage	Payroll Deduction Per Pay Period
Employee	\$1.85
w/ Spouse Only	\$3.69
w/ Child(ren)	\$2.60
Family	\$4.44

Flexible Spending Account

Each employee is allowed to make tax-sheltered contributions to a Flexible Spending Account which may be used to pay for qualified Medical Expenses. As of January 1, 2011, “over the counter” medications and supplies no longer qualify as eligible expenses.

Your contribution is made on a Pre-Tax basis. The employee contribution maximum is \$2,000/plan year (\$38.46 per week).

Medical Expense Reimbursement Account Carryover

As of our next plan year, beginning 10/1/15, “left-over” balances from the current plan year (10/1/14 - 9/30/15) between \$100 and \$500 will be carried over to the new plan year; balances of less than \$100 revert to the employer, as will balances over \$500 - i.e.: a \$96 balance will not carry over, a \$695 balance will carry over only to the \$500 limit.

Carryover funds will be used first to satisfy expenses incurred in the previous plan year which are claimed in the new plan year after 10/1, but before 12/31.

Current year funds will be depleted before carryover funds are used for current plan year expenses, however, at the end of the plan year the roll-over provision will apply, regardless of which plan year the funds came from.

Employee Assistance Program - New Directions Behavioral Health (provided by the City)

EAP benefit providing multiple types of counseling, including work-life, legal, financial, etc. Available to all employees and their households. Coverage provided at the City’s expense - counseling services are at the employee’s expense, if charges apply.



PLEASE NOTE: *These benefits are ONLY offered once a year at Annual Open Enrollment, they are not available at new hire enrollment. In order to maintain your initial eligibility for guaranteed issue products, you must meet with a representative at the first available meeting following your date of hire. At that time the representative will be able to provide rates based on you and your family's needs.*

What are Voluntary Benefits?

Voluntary Benefits are being offered to strengthen your overall benefits package. You customize the benefit based on need and affordability.

- Ownership – Policies are fully portable and belong to you if you leave your employer, same price and same plan
- Benefits are payroll deducted
- If a claim is made the benefits are paid directly to you, not to a hospital or to a doctor
- Benefits are above and beyond and completely separate from medical insurance and other benefits
- Level premiums—Rates do not increase with age
- Guaranteed Renewable
- Designed to provide additional cash flow to assist with out of pocket medical costs and other bills

SHORT TERM DISABILITY

Trustmark's Short Term Disability is designed to provide income to you and your family when you cannot work due to an illness or injury.

Special Underwriting for New Hires at Open Enrollment Only

Guaranteed Issue:

Up to \$3,000 monthly benefit

- Pays 60% of salary up to \$6,000 per month
- Option of 7 day or 14 day elimination (waiting) period with a 6 month benefit period
- Pregnancy covered as any other illness
- Premium stays the same as long as you own the policy. The premium does not increase with age.

Universal Life with Long Term Care

Universal Life with Long Term Care includes both a death benefit and a living benefit.

- Trustmark Universal Life with Long Term Care is a permanent life insurance that is designed to match your needs throughout your lifetime. It pays a higher death benefit during your working years when expenses are high and you need maximum protection.
- The Universal Life with Long Term Care is priced to remain the same cost to you until age 100.
- The death benefit reduces at age 70 when the need for life insurance typically decreases.
- The Living Benefit, Long Term Care never reduces and is 4% of the original death benefit per month for up to 25 months.
- **If you use the Long Term Care benefit, your death benefit amount does not reduce due to the Benefit Restoration feature included.**
- Coverage available for spouse and children as well.

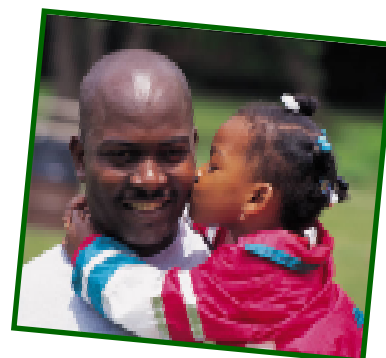
Special Underwriting for New Hires at Open Enrollment Only

Guaranteed Issue (Employee Only)

The lesser of the face amount purchased by \$12 per week or \$200,000

Life with Long Term Care example: \$100,000 Death Benefit

Long Term Care Benefit (LTC): Pays a monthly benefit equal to 4% of your death benefit for up to 25 months.	Before Age 70 \$100,000	After Age 70 \$100,000
Benefit Restoration: Restores the death benefit that is reduced to pay for LTC.	\$100,000	\$33,333
Total Maximum Benefit: Long Term Care Benefits may double the value of your insurance	\$200,000	\$133,333



TERM LIFE INSURANCE (20 YEAR TERM)

- ◆ Provides protection for the individual who wants higher amounts of coverage for a set period of time
- ◆ Premiums remain level during the entire 20 year term
- ◆ Contains a “Living” benefit that pays partial benefits if diagnosed with a terminal condition
- ◆ Coverage available for your spouse, children and grandchildren

ACCIDENT INSURANCE

24 hours a day, 7 days a week coverage to help pay for unexpected expenses that result from an Accident.

- ◆ Guaranteed Issue, No health questions
- ◆ On and off the job coverage (24 hours per day, 7 day per week)
- ◆ Benefits are paid directly to you
- ◆ Guaranteed Renewable
- ◆ Benefits are paid regardless of other coverage

SUPPLEMENTAL HEALTH OPTIONS POLICY (SHOP)

- ◆ Can help pay the high deductibles and co-insurance, not covered in your group health care
- ◆ Covers Hospitalization for injury, sickness and pregnancy
- ◆ Covers Outpatient Surgery

CANCER INSURANCE

Manage the high expenses of treatment, preserve savings, protect your family from financial hardships and focus on getting well.

- ◆ “First Occurrence” Benefit pays cash to you upon diagnosis of Internal Cancer.
- ◆ Pays additional benefits for a variety of items as treatment progresses, such as: Hospitalization, Surgery, Anesthesia, Chemotherapy and Radiation, Experimental Treatment, Home Health Care, Transportation and more.
- ◆ Employee and family coverage available
- ◆ Wellness Benefit Included

HEART/STROKE INSURANCE

Pays additional cash directly to you for a variety of items as treatment progresses, such as: Hospitalization, Pacemaker Insertion, Cardiac Catheterization, Blood, Plasma, Platelets, and Transportation and Lodging benefits for family members.



Benefit Guide Description

Please Note: This guide is designed to provide an overview of the coverages available. It is not a Summary Plan Description (SPD). Official plan and insurance documents from the carriers govern your rights and benefits, including covered benefits, exclusions and limitations. If any discrepancy exists between this guide and the official documents, the official documents will prevail.
