Mecklenburg County Benefits Brochure

Open Enrollment 2018
Now Cigna provides access to two telehealth services as part of your medical plan – AmWell and MDLIVE. Televisits with AmWell and MDLIVE can be a cost-effective alternative to a convenience care clinic or urgent care center, and cost less than going to the emergency room. And the cost of a phone or online visit is the same or less than with your primary care provider.

Register for one or both today so you’ll be ready to use a telehealth service when and where you need it.

AmWellforCigna.com 855-667-9722
MDLIVEforCigna.com 888-726-3171

Medical Plan Opt Out/Waive
Mecklenburg County Employees Only
If you have other group coverage and do not want to participate in the County’s medical plan for 2018, you may choose to opt out/waive and receive a one time cash award of $400 (grossed up to $540) added to your paycheck. The opt out/waive status will remain in effect the entire year unless you have a qualifying family status change. Employees hired during the year receive a prorated cash award. Mecklenburg County reserves the right to request proof of coverage of other medical coverage at any time.
The myTotalHealth Wellness program is here to help you reach and maintain optimal health. The rewards program offers a wellness premium incentive.

Save **$600 annually** by completing the following wellness activities:

**Biometric Screening: DUE BY SEPTEMBER 15, 2017**
You can obtain a biometric screening by going to one of the following:
1. Primary Physician
2. Minute Clinic
3. OurHealth MyClinics: To schedule your free appointment at an OurHealth MyClinic location, visit member.ourhealth.org/sign_up/Mecklenburg or call 844-826-9181.
4. Onsite Biometric Screenings: Mecklenburg County will provide limited onsite biometric screenings. Dates and locations are TBD.

**Health Risk Assessment: DUE BY SEPTEMBER 15, 2017** Login into myCigna.com and complete the Health Risk Assessment. Don’t have an account? Visit MeckWeb to find instructions for completing the Health Risk Assessment.

**Health Coaching**: Telephonic health coaching is optional and not required to receive the myTotalHealth Reward.
Cigna offers several health and wellness programs that are free to employees who are enrolled in Cigna insurance through the County.

Healthy Pregnancy/Healthy Babies Program
This program provides additional support from Cigna staff to expecting mothers throughout the course of their pregnancy. For more information or to enroll call Cigna 1.800.615.2906

Lifestyle Management Program
Whether you’re looking for help with weight, tobacco or stress management, our Lifestyle Management Programs are here for you. Each program is easy to use, available where and when you need it, and is always no cost to you. Call 1.866.417.7848 or visit myCigna.com

TeleHealth
Now Cigna provides access to two telehealth services as part of your medical plan – AmWell and MDLIVE.
Cigna Telehealth Connection lets you get the care you need, including most prescriptions, for a wide range of minor conditions. Now you can connect with a doctor via secure video chat or phone, without leaving your home or office.
AmWellforCigna.com 855-667-9722
MDLIVEforCigna.com 888-726-3171

Mail Order Prescriptions
- Delivered to your home
- 90 day supply with refills
Save time and money by simply calling Cigna to make arrangements to transfer your existing prescription to Cigna’s mail Order Program. It’s that simple! Call Cigna at 1.800.285.4812 or enroll online myCigna.com

Why is Cigna calling me? Mecklenburg County offers Cigna programs to help you get healthy and live well. Cigna is excited to get to know you, so they call you at home to talk about ways to work together to help you manage your health.
Regular fulltime employees will have two options in selecting a dental plan: the Standard or Enhanced plan. Below are just a few of the differences between the two plans:

### Standard
- Must go to a Network dentist
- Calendar Year Maximum: $1,000 per individual
- No Orthodontic coverage

### Enhanced
- May go to any dentist
- Calendar Year maximum: $1,500 per individual
- Orthodontic Coverage (Lifetime Max $1,500 per individual)

**NOTE:** Dental cards will NOT be issued to employees. To print a dental card or to locate a provider, please go to [www.cigna.com](http://www.cigna.com).

<table>
<thead>
<tr>
<th>Bi-Weekly Rates</th>
<th>County’s Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>Employee &amp; Child(ren)</td>
</tr>
<tr>
<td>12 Month</td>
<td>10 Month</td>
</tr>
<tr>
<td>Standard</td>
<td>$8.88</td>
</tr>
<tr>
<td>Enhanced</td>
<td>$14.60</td>
</tr>
</tbody>
</table>

### Dental Plan Choices for 2018

<table>
<thead>
<tr>
<th>Calendar Year Maximum</th>
<th>Standard Plan</th>
<th>Enhanced Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Class I, II, and III Expenses)</td>
<td>$1,000</td>
<td>$1,500</td>
</tr>
<tr>
<td>(per individual)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>In-Network</td>
<td>$1,000</td>
<td>$1,500</td>
</tr>
<tr>
<td>Out-of-Network</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Calendar Year Deductibles</th>
<th>Standard Plan</th>
<th>Enhanced Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Individual/Family)</td>
<td>$75/$225</td>
<td>$50/$150</td>
</tr>
<tr>
<td>In-Network</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Class I Expenses - Preventive & Diagnostic Care | 100% /80% | 100% /100% |
| (In-Network/Out-of-Network) | No Deductibles | No Deductibles |
| Oral Exams | | |
| Cleanings | | |
| Routine X-Rays | | |
| Fluoride Application | | |
| Sealants | | |
| Space Maintainers (limited to non-orthodonic treatment) | | |
| Non-Routine X-Rays | | |
| Emergency Care to Relieve Pain | | |
| Histopathologic Exams | | |

| Class II Expenses - Basic Restorative Care | 70% /50% | 80% /80% |
| (In-Network/Out-of-Network) | After Deductible | After Deductible |
| Fillings | | |
| Oral Surgery - Simple Extractions | | |
| Oral Surgery - All Except Simple Extractions | | |
| Surgical Extraction of Impacted Teeth | | |
| Anesthetics | | |
| Major Periodontics | | |
| Minor Periodontic | | |
| Root Canal Therapy/Endodontics | | |
| Relines, Rebases, and Adjustments | | |
| Repairs - Bridges, Crowns, and Inlays | | |
| Repairs - Dentures | | |

| Class III Expenses - Major Restorative Care | 40% / Not Covered | 50% / 50% |
| (In-Network/Out-of-Network) | After Deductible | After Deductible |
| Crowns/Inlays/Onlays | | |
| Dentures | | |
| Bridges | | |

| Class IV Expenses - Orthodontia | Not Covered | 50% / 50% |
| (In-Network/Out-of-network) | No Separate Deductible | No Separate Deductible |
| Coverage for Eligible Children Only (up to age 19) | | |
| Lifetime Maximum | Not Covered | $1,500 |

| Missing Tooth Provision | Teeth missing prior to coverage under the CIGNA Dental plan are not covered. |
| Treatment Review | Available on a voluntary basis when extensive work in excess of $200 is proposed. |
| Student Age | 26 |
The County offers regular fulltime employees a choice of two voluntary vision plans for a minimal premium which provides coverage for exams, lenses, frames, contacts, etc. at reduced costs.

<table>
<thead>
<tr>
<th>Vision Plan Choices for 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Copays</strong></td>
</tr>
<tr>
<td>Comprehensive Exam</td>
</tr>
<tr>
<td>Materials</td>
</tr>
<tr>
<td>Contact Lenses in lieu of eyeglasses</td>
</tr>
<tr>
<td>Contacts (including disposables), the fitting/evaluation fees, and up to two follow-up visits are covered-in-full. If covered disposable contact lenses are chosen, up to 6 boxes are included when obtained from a network provider.</td>
</tr>
<tr>
<td>Non-Covered Contact Lenses</td>
</tr>
<tr>
<td>Frames</td>
</tr>
<tr>
<td>Standard Plan: $45</td>
</tr>
<tr>
<td>Lenses</td>
</tr>
<tr>
<td>Lined bifocal</td>
</tr>
<tr>
<td>Single Vision</td>
</tr>
<tr>
<td>Bifocal</td>
</tr>
<tr>
<td>Trifocal</td>
</tr>
<tr>
<td>Lenticular</td>
</tr>
<tr>
<td>Scratch Coating</td>
</tr>
<tr>
<td>Plastic bifocals</td>
</tr>
<tr>
<td>Plastic trifocals</td>
</tr>
<tr>
<td>Uv &amp; scratch guard</td>
</tr>
<tr>
<td>Solid Tint</td>
</tr>
<tr>
<td>Transition</td>
</tr>
<tr>
<td>UV Coating (Glass)</td>
</tr>
<tr>
<td>UV Coating (Plastic)</td>
</tr>
<tr>
<td>Platinum progressive</td>
</tr>
<tr>
<td>Premium progressive</td>
</tr>
</tbody>
</table>

**Out of Network Reimbursement**

Standard and Enhanced Plan benefits are the same. Network copays do not apply.

**Comprehensive Exam**: $40

**Lenses**

- Single Vision: $40
- Bifocal: $60
- Trifocal: $80
- Lenticular: $80

**Frames**: $45

**Contact Lenses (in lieu of eyeglasses)**

- Elective: $150
- *Necessary: $210

You do not need to submit a claim for In-Network benefits. However, you must submit a claim to United HealthCare Vision for benefit reimbursement for Out of Network services.

**Bi-Weekly Rates**

<table>
<thead>
<tr>
<th></th>
<th>Employee</th>
<th>Employee &amp; Child(ren)</th>
<th>Employee &amp; Spouse</th>
<th>Employee &amp; Family</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12 Month</td>
<td>10 Month</td>
<td>12 Month</td>
<td>10 Month</td>
</tr>
<tr>
<td>Standard</td>
<td>$2.23</td>
<td>$2.63</td>
<td>$4.86</td>
<td>$5.74</td>
</tr>
<tr>
<td>Enhanced</td>
<td>$4.54</td>
<td>$5.36</td>
<td>$8.73</td>
<td>$10.31</td>
</tr>
</tbody>
</table>

**Note**: Vision cards will NOT be issued to employees as part of this plan.
What is a Health Savings Account (HSA)?
A Health Savings Account (HSA) is an account that you can put money into to save for future medical expenses. HSAs allow you to pay for eligible medical expenses on a pre-tax basis. You can make contributions with pre-tax (via payroll deduction) or post-tax dollars.

Who is eligible for an HSA?
- If you are in a Consumer Driven Health Plan (County’s HSA Medical Plan)
- If you are not covered by any other health plan including Medicare, TRICARE, or TRICARE for Life
- If you have not received VA benefits within the past 3 months
- If you are not claimed as a dependent on someone else’s tax return
- If you are not covered by a Health Care Spending Account (FSA)

How do I use my HSA?
Use your debit card, checkbook, auto pay, or online bill pay for any out of pocket health care expenses.

What are the benefits of an HSA?
- Account ownership—You own your account. You can use it, invest it, save it and move it as you see fit.
- Portability—Accounts are completely portable, meaning you can keep your HSA even if you:
  * Change jobs or retire
  * Change medical coverage
  * Become unemployed
  * Move to another state
  * Change your marital status
- Money can be used to pay for out of pocket IRS-qualified medical expenses. For a list of qualified expenses, please refer to Section 213(d) of the Internal Revenue code or visit Cigna.com.
- There are no “use it or lose it” rules for HSAs.

2018 Contribution Limits
- Individual - $3,450
- Family - $6,900
Individuals age 55 and older can contribute an additional $1,000 per year “catch-up” contribution.

When you have questions, we’ve got answers!
Cigna offers you live customer service 24 hours a day, seven days a week, 365 days a year – that includes weekends and holidays. Call 1-800-244-6224.
Flexible Spending Accounts

What is a Flexible Spending Account (FSA)?

FSA is a pre-tax program to help reduce health care and dependent care out-of-pocket expenses.

- **Health Care Spending Account** is for regular fulltime employees and eligible dependent healthcare expenses not covered by insurance like co-pays, deductibles, prescriptions, dental or vision care. You may contribute a minimum of $260.00 up to a maximum of $2600.00 per year.

  *Note: Employees enrolled in the County’s HSA plan cannot enroll in the health care spending account.*

- **Dependent Care Account** is for regular fulltime employees for dependent care expenses for a child under the age of 13 or a disabled spouse or dependent. If you are married, you can use this account if you and your spouse both work, are looking for work, or, in some situations, if your spouse is a full-time student. You may contribute a minimum of $260.00 to a maximum of $5000.00 per year.

- **Commuter Reimbursement Account (CRA)** is for regular full-time employees for transit (bus, rail, vanpool) expenses. You can use this account to purchase CATS bus, rail or vanpool passes. You may contribute up to $255/month and you may withdraw up to $255/month. Remaining balance will roll over from month to month. Deductions may be started and stopped at any time.

  Visit [www.flex125.com](http://www.flex125.com) for a complete list of eligible expenses.

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### How do I contribute to my FSA?

Once you make your annual election, the amount will be deducted from your pay in equal amounts throughout the year, before taxes are deducted.

### How do I get reimbursed?

A Flex Debit Card will be issued to you and you may use your card to be reimbursed for eligible expenses and the funds will be automatically deducted from your Spending Account. OR simply pay for the eligible expenses and then fax or mail a timely reimbursement request and receipt to be processed. Forms are available on MeckWeb intranet site.

### *Annual Savings Example:*

<table>
<thead>
<tr>
<th></th>
<th>With FSA Account</th>
<th>Without Account</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Salary</td>
<td>35,000</td>
<td>35,000</td>
</tr>
<tr>
<td>Pre-tax Contribution</td>
<td>1,500</td>
<td></td>
</tr>
<tr>
<td>Taxable income</td>
<td>33,500</td>
<td>35,000</td>
</tr>
<tr>
<td>Federal and State Taxes</td>
<td>(7,107)</td>
<td>(7,597)</td>
</tr>
<tr>
<td>After-Tax dollars spent on eligible expenses</td>
<td>0</td>
<td>1,500</td>
</tr>
<tr>
<td>Spendable income</td>
<td>26,393</td>
<td>25,903</td>
</tr>
<tr>
<td>Tax Savings with an FSA</td>
<td>490</td>
<td></td>
</tr>
</tbody>
</table>

*Sample tax savings for a single taxpayer with no dependents. Actual savings will vary based on your individual tax situation. Please consult a tax professional for more information.*

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### Important Note:

You may claim expenses incurred from January 1, 2018 through March 15, 2019. Unused

### How do I contact AmeriFlex?

**Mailing Address:**

AmeriFlex  
700 East Gate Drive, Suite 510  
Mount Laurel, New Jersey 08054

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phone: 1-888-868-3539  
fax: 1-888-631-1038

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or visit them on the web at:  
[www.flex125.com](http://www.flex125.com)
Savings and Retirement

NC Retirement System

Mecklenburg County regular full-time and part-time employees are automatically enrolled into the North Carolina Local Government Retirement System upon employment. Employees contribute 6% of gross wage and are vested after 5 years of service.

401(K) AND 457 MATCHING PLANS

Mecklenburg County offers a match to regular full-time and part-time non-sworn employees who participate in the 401(k) and/or 457 supplemental retirement plans. The match is currently:

- Dollar for Dollar Match up to 5%
- 100% Vested Immediately
- No Waiting Period for Participation

Employees are able to choose to contribute either pre-tax or after-tax Roth. The County Match is always contributed on a pre-tax basis. The 5% matching funds from the County apply to employee contributions in any one or a combination of plans for a total of 5%.

The NC 401(k) plan is administered by Prudential Retirement.

The Choice of 457 plans offered through the County

- IMCA-Retirement Corporation 457 plan.
- NC 457 plan administered by Prudential Retirement.

All sworn LEO’s will automatically receive the State mandated 5% employer contribution to the NC 401(k).

Changes can be made to your plans at any time, so start small and increase when you can. Enrolling is fast and easy and the plans work hard to make the investing simple. Local, personal help is available to all County employees.

529 COLLEGE SAVINGS PLAN

North Carolina 529 College Savings Plan

Employees can save for college through payroll deduction with the NC 529 College Savings Plan. The plan offers a wide range of investment options from conservative to aggressive. Investments can be used to any college for qualified educational expenses such as tuition, books, and room and board.

To enroll in the plan, contact the College Foundation of North Carolina (CFNC) toll free at 800-600-3453 or visit www.NC529.org. Once you have enrolled and selected the payroll deduction option a representative from CFNC will contact the County to advise that you’ve requested that your contributions be payroll deducted.

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Life and Disability Benefits

**Basic Term Life Insurance**
Regular fulltime employees are automatically covered with basic term life insurance in the amount equal to their annual salary. Dependent/Spouse coverage of $10,000 is available.

**Supplemental Term Life Insurance**
The County offers fulltime employees the opportunity to purchase up to six (6) times their annual salary (or up to $1,000,000) in supplemental term life insurance. Proof of good health is not required if requested coverage does not exceed four (4) times the annual salary or $300,000 and if enrollment begins immediately upon eligibility. The policy includes an accelerated death benefit for those with terminal illnesses as well as Accidental Death and Dismemberment (AD&D) benefits. Rates are based on age, smoking habits, and amount of insurance requested.

**Short Term Disability**
This benefit is provided to assist a fulltime employee who is disabled due to a non-work related illness or accident. Sixty percent of the employee’s weekly earnings will be paid for up to 26 weeks, after a 25-day waiting period. Short Term Disability begins 90 days after employment and excludes pre-existing

**Long Term Disability**
Long Term disability replaces 40% of a fulltime employee’s salary for up to 5 years should he or she become disabled. This benefit is provided by the County for regular employees who have less than 5 years of service with the County. Employees with 5 or more years will refer to the NC Retirement System plan for benefits. Employees can also purchase an additional 20% of coverage. Restrictions apply.
Voluntary Critical Care Benefit

What is Group Critical Care and how does it work?

Group Critical Care is designed to provide employees with additional financial protection to help them with the medical and non-medical costs of a specified disease. The plan pays a lump sum benefit after a covered illness or cancer is diagnosed. You can also choose to add an optional cancer benefit that pays a monthly benefit for extended treatment of cancer (internal or invasive cancer or carcinoma in situ).

It’s innovative
It’s there when you need it. Not only will it pay multiple times for multiple conditions, it offers an additional benefit for extended treatment and care of cancer.

It’s not complicated
The plan pays lump sum benefits upon diagnosis of a covered critical illness or cancer (internal, invasive or carcinoma in situ).

It’s flexible
You choose the face amount.

It’s accessible
Guarantee Issue coverage is available.

It’s compliant
This plan can be used along with your Health Savings Accounts.

Critical Illnesses Paid at 100%

- Heart Attack (Myocardial Infarction)
- Stroke
- Major Organ Failure
- End Stage Renal (Kidney) Failure
- Permanent Paralysis due to covered Accident
- Coma
- Blindness
- Occupational Infectious HIV or Occupational Infectious Hepatitis B, C, or D

Enhanced Wellness Benefit:

$100 payable once per plan year per covered person for screening tests such as:

- Mammography
- Pap smear
- PSA (blood test for prostate cancer)
- Serum cholesterol test for HDL & LDL
- Stress test on a bicycle or treadmill

Frequently Asked Questions

How are my benefits paid?
Benefits are paid directly to you, unless you specify otherwise. Benefits are paid regardless of any other coverage you may have with other insurance companies.

What if I change employers?
Benefits are portable. If you change jobs or retire, you can take your coverage with you at no increase in premium.

How do I file a claim?
Wellness claims may be filed over the phone. Simply call our Policyholder Service Center at 1.800.325.4368. For all other types of claims, visit coloniallife.com for additional information.

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It’s not complicated
The plan pays lump sum benefits upon diagnosis of a covered critical illness or cancer (internal, invasive or carcinoma in situ).

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Enhanced Wellness Benefit:

$100 payable once per plan year per covered person for screening tests such as:

- Mammography
- Pap smear
- PSA (blood test for prostate cancer)
- Serum cholesterol test for HDL & LDL
- Stress test on a bicycle or treadmill

Regular fulltime employees interested in obtaining more information or enrolling in this Voluntary Medical Bridge plan should call the Employee Services Center at (704) 432-6947.
Voluntary Accident Benefit

Accidents happen in places where you and your family spend the most time; at work, in the home and on the playground and they're unexpected. How you care for them shouldn't be.

In your lifetime, which of these accidental injuries have happened to you or someone you know?

- Sports-related accidental injury
- Broken bone
- Burn
- Concussion
- Laceration
- Back or knee injuries
- Car Accidents
- Falls & spills
- Dislocation
- Accidental injuries that send you to the Emergency Room, Urgent Care or doctor’s office

Colonial Life’s Accident Insurance is designed to help you fill some of the gaps caused by increasing deductibles, co-payments and out-of-pocket costs related to an accidental injury. The benefit to you is that you may not need to use your savings or secure a loan to pay expenses. Plus you’ll feel better knowing you can have greater financial security.

What additional features are included?

- Worldwide coverage
- Portable

Will my accident claim payment be reduced if I have other insurance?

You’re paid regardless of any other insurance you may have with other insurance companies, and the benefits are paid directly to you (unless you specify otherwise).

What if I change employers?

If you change jobs or leave your employer, you can take your coverage with you at no additional cost. Your coverage is guaranteed renewable as long as you pay your premium when they are due or within the grace period.

Can my premium change?

Colonial Life can change your premium only if we change it on all policies of this kind in the state where your policy was issued.

How do I file a claim?

Visit coloniallife.com or call our Customer Service Department at 1.800.325.4368 for additional information.

Regular fulltime employees interested in obtaining more information or enrolling in this Voluntary Accident plan should call the Employee Services Center at (704) 432-6947.
Voluntary Cancer Benefit

The risk of developing cancer, unfortunately, is very real. In the United States, according to the American Cancer Society, 1 in 2 men and 1 in 3 women have a lifetime risk of developing cancer. 62% of the costs associated with cancer treatment are now considered out-of-pocket expenses not covered by your major medical insurance.

**If you are diagnosed with cancer, how will you pay for what your health insurance won’t?**

**Direct Costs Most Major Medical Plans Cover:**
- Hospital charges
- Surgeon fees
- Physician Fees
- Medication & drug costs
- Radiological fees
- Nursing costs

**Indirect Costs You Pay:**
- Loss of wages or salary
- Deductibles or coinsurance
- Travel expenses to/from treatment centers
- Lodging and meals
- Child care

**What does the Cancer Plan cover?**
The Cancer Plan pays for a variety of inpatient or outpatient benefits related to cancer treatment including, but not limited to:
- Hospital confinement
- Ambulance
- Air ambulance
- Private, full-time nursing services

Other inpatient and outpatient treatment benefits include a variety of other items such as those listed below:
- Radiation/chemotherapy
- Anti-nausea medication
- Experimental treatments
- Blood / Plasma / Platelets / Immunoglobulin
- Hair prosthesis / External breast / Voice box prosthesis
- Medical imaging studies
- Peripheral stem cell transplant
- Supportive / Protective care drugs and colony simulating factors
- Bone marrow stem cell transplant.

**The Cancer Plan covers items you may not typically think of,**
Oftentimes, there are costs associated with cancer treatment that you may not typically consider. Those costs listed below are covered under the Cancer Plan.

- Travel expenses
- Companion transportation and lodging
- Surgical procedures including skin cancer
- Second medical opinions
- Anesthesia
- Prosthetic or artificial limbs
- Outpatient surgical center
- Reconstructive surgery

With the Cancer Plan, premiums are TAX-FREE so you will receive an average savings of 30%.

**Wellness Benefit:**
Under the cancer plan, each covered individual can receive reimbursement for up to $125.00 once per calendar year for a cancer or wellness screening. The screenings include, but are not limited to:

- Chest x-ray
- Pap smear
- Mammography
- Breast ultrasound
- PSA - blood test for prostate cancer
- Biopsy of skin lesion
- Colonoscopy

**What else does the cancer benefit include?**
The cancer plan also offers extended care benefits such as coverage for:

- Skilled nursing care facility
- Family care
- Hospice
- Home health care service
- Waiver of Premium

Regular fulltime employees interested in obtaining more information or enrolling in this Voluntary Cancer plan should call the Employee Services Center at (704) 432-6947.
Voluntary Medical Bridge Benefit

How will you cover all of your medical expenses?

Medical Bridge, is designed to fill the gaps in your health insurance and help protect against those out-of-pocket expenses, including deductibles and co-pays, that occur when it comes to you or your family members’ healthcare. This plan is a Health Savings Account (HSA) - compliant plan. This plan may also be offered to employees who do not have an HSA.

What is Medical Bridge and how does it work?

The Medical Bridge Plan helps to “bridge the gaps” in your health insurance.

Some of the Benefits Include:
• Hospital Confinement
• Observation Room
• Rehabilitation Unit Confinement
• Waiver of Premium
• Health Screening

Medical Treatment Package Includes:
• Air Ambulance
• Ambulance
• Appliance
• Doctor’s Office Visit
• Emergency Room Visit
• X-Ray

Optional Riders Include:
• Daily Hospital Confinement
• Enhanced Intensive Care Unit Confinement

Enhanced Wellness Benefit:

This benefit helps reimburse you for part of the expense of tests you normally have each year. The Medical Bridge Plan pays $100 once per plan year per covered person for 24 health screening test such as:

• Blood test for triglycerides
• Breast ultrasound
• CA 15-3 (blood test for breast cancer)
• CA 125 (blood test for ovarian cancer)
• CEA (blood test for colon cancer)
• Chest x-ray
• Colonoscopy or virtual colonoscopy
• Fasting blood glucose
• Flexible sigmoidoscopy
• Hemoccult stool analysis
• Mammography
• Pap smear of thin prep pap
• PSA (blood test for prostate cancer)
• Serum protein electrophoresis (blood test for myeloma)
• Serum cholesterol test for HDL & LDL
• Stress test on a bicycle or treadmill
• Thermography

With the Medical Bridge Plan, premiums are TAX-FREE and family coverage is available.

Frequently Asked Questions

How are my benefits paid?
Benefits are paid directly to you, unless you specify otherwise. Benefits are paid regardless of any other coverage you may have with other insurance companies.

What if I change employers?
Benefits are portable. If you change jobs or retire, you can take your coverage with you at no increase in premium.

How do I file a claim?
Wellness claims may be filed over the phone. Simply call our Policyholder Service Center at 1.800.325.4368. For all other types of claims, visit coloniallife.com for additional information.

Regular fulltime employees interested in obtaining more information or enrolling in this Voluntary Medical Bridge Plan should call the Employee Services Center at (704) 432-6947.
Your Employee Wellness Program!

Mecklenburg County is committed to employee health. The myTotalHealth Employee Wellness program is designed to offer programs and services that promote health and well-being. The Wellness Ambassadors in each department can help you get connected to the program offerings.

CAMP WELLNESS

All employees are invited to participate in this annual event. Learn about new and innovate ways to stay well at our health fair. We also offer flu shots at no cost to employees and a convenient Mammography Screenings through the mobile van.

LIFESTYLE MANAGEMENT PROGRAMS

Whether you’re looking for help with weight, tobacco or stress management, Cigna’s Lifestyle Management Programs are here for you. Each program is easy to use, available where and when you need it, and is always no cost to you. Call 1.866.417.7848 or visit myCigna.com

HEALTH CHALLENGES

Health Challenges are a great way to keep your health a priority! Our team challenges are both health and activity based. The Team format helps keep you on track. Everyone is a winner when it comes to good health!

ONSITE HEALTH AND WELLNESS CLASSES

Learn new ways to stay healthy and well at work and at home with our onsite educational classes. We offer various health and wellness topics in a Lunch and Learn format.

ACCESS TO ONSITE AND PARK AND RECREATION FITNESS CENTERS

County employees have FREE access to all Park and Recreation Fitness Centers. In addition, aquatic centers and out-door pools are offered at a discounted rate. Visit the MeckWeb main page and click on the “myTotalHealth” icon to find a complete list of fitness centers and registration information.

Wellness Contact Information:
mytotalhealth@mecklenburgcountync.gov
What is the EAP?

Your Employee Assistance Program (EAP) provides you and your household members with free, confidential assistance to help with personal or professional problems that may interfere with work or family responsibilities.

Services are available 24-hours a day, 7-days a week via a toll-free nationwide number. You and your household members can receive up to six (6) face-to-face counseling sessions (which include assessment, follow-up and referral services) per person, per problem episode, per year.

In addition, the program provides access to childcare, eldercare, legal and financial resources and referrals, as well as convenience care services.

Problems Addressed

- Stress Management
- Family Problems
- Child Care/Parenting
- Substance Abuse Issues
- Marital/Relational
- Legal/Financial Concerns
- Grief/Loss
- Work-Related Issues
- Communication
- Time Management
- Health/Wellness Issues

Problem Cost

The Program is a free benefit provided and paid for by your employer. If additional help is needed, your health insurance plan may cover a portion of the costs.

Confidentiality

Business Health Services adheres to federal and state privacy laws and holds client information in the strictest of confidence. Information about a client’s problem cannot be released without the written permission of that individual.

How Does It Work?

Help is just a phone call away. Simply call Business Health Services’ toll-free number: 1.800.327.2251.

A Care Coordinator will confidentially assess the problem, assist with any emergencies and connect you to the appropriate resources. The Care Coordinator then becomes your personal point of contact and will keep in touch to ensure you are satisfied with all services provided.

You can also visit us online at www.bhsonline.com for program information, wellness resources and health tips. Employees accessing the website will need to enter the user name ‘MECKCO’ to log on.
Holidays and Leave

Holidays (11 Annually—Regular Fulltime Employees)

<table>
<thead>
<tr>
<th>Holiday</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
<td>New Year’s Day</td>
<td>Veterans Day</td>
</tr>
<tr>
<td>MLK’s Birthday</td>
<td>Thanksgiving</td>
</tr>
<tr>
<td>Good Friday</td>
<td>Friday after Thanksgiving</td>
</tr>
<tr>
<td>Memorial Day</td>
<td>Christmas Day</td>
</tr>
<tr>
<td>*Independence Day</td>
<td>One other day @ Christmas</td>
</tr>
<tr>
<td>Labor Day</td>
<td></td>
</tr>
</tbody>
</table>

*B12 Month Employees only*

Bereavement Leave

Mecklenburg County allows time away from work for the death of an immediate family member. Regular fulltime employees may take up to 24 consecutive work hours paid leave.

Leaves of Absences

There are specific types of absences which may be approved as periods of time away from work. Mecklenburg County recognizes the following types of leave. Restrictions apply.

- Administrative Leave – unpaid up to 30 days
- Military Caregiver Leave – unpaid up to 26 work weeks
- Extended Medical Leave – unpaid up to 52 work weeks
- Extended Family Leave – unpaid up to 52 work weeks
- Military Leave
- Disaster Response Leave
- Family/Medical Leave – unpaid up to 12 work weeks
- *Paid Family Leave— paid to up 6 weeks

*Full-time benefits eligible employees eligible for family medical leave as defined by FMLA excluding intermittent and employee only.

Sick Leave (12 days annually)

For regular fulltime and part time employees, sick leave is accrued on a bi-weekly basis at a rate of 0.04615 hours (12 days annually) for each regularly scheduled hour worked. There is no maximum accrual limit.

*Sick Leave Donation:* In long-term medical situations, employees may donate sick leave to other employees subject to certain conditions.

Vacation Leave

For regular fulltime and part time employees, vacation leave begins accruing on the first day of employment. The accrual rate is based upon years of service. Employees who do not use sick leave or leave without pay for 7 consecutive pay periods earn an additional 4 hours of vacation.

<table>
<thead>
<tr>
<th>Years of Service</th>
<th>Days per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12 Month</td>
</tr>
<tr>
<td>0-1</td>
<td>10</td>
</tr>
<tr>
<td>2-4</td>
<td>12</td>
</tr>
<tr>
<td>5-9</td>
<td>15</td>
</tr>
<tr>
<td>10-14</td>
<td>18</td>
</tr>
<tr>
<td>15-19</td>
<td>21</td>
</tr>
<tr>
<td>20+</td>
<td>24</td>
</tr>
</tbody>
</table>

At the end of each calendar year, employees may carry a maximum of 30 days vacation into the New Year, and any excess leave over 30 days will be rolled into the employee’s accumulated sick leave balance.
You need to Know

Coverage for Eligible Family Members

County employees may cover eligible family members by paying a bi-weekly payroll deducted premium. Eligible family members include:

- Your legally married spouse
- Your biological, foster, adopted or step-child/ren up to age 26, a disabled dependent child over age 26.

To comply with the Affordable Care Act reporting, we require dependent social security numbers be provided for dependents covered by our insurance plans.

Mecklenburg County participates in an ongoing dependent verification process. Employees covering dependents will be asked to provide verification documentation.

Do you have a Change in your Family and/or Financial Situation?

Family Status Change

It is the employee’s responsibility to advise the Employee Services Center within 31 days of a qualifying family status change (birth/adoptive, marriage/divorce, graduation of child, death, etc) if a dependent needs to be dropped or added. After the 31 day period, no dependents can be added or dropped. Premium refunds will not be made and coverage will end as soon as the dependent becomes ineligible for coverage. See Forms and Information in this brochure for contacting the Employee Services Center.

What types of changes can I make throughout the year?

- Add or drop dependent coverage, based on a qualifying event (such as marriage, birth of a child or dependent has reached maximum age).
- Change or update your life insurance beneficiary information
- Enroll or change participation level in the 401K or 457 Defined Contribution Plan.
- Enroll or change participation in the NC529 College Savings Plan.

Need More Information?

Benefit forms and information are available to County employees on the intranet (MeckWeb). Customer Service is available by phone at our Employee Services Center at (704) 432-6947 and by email at myHR@mecklenburgcountync.gov.
Asthma related
albuterol sulfate
albuterol sulfate (nebulizer solution)
albuterol sulfate/ipratropium nebulizer solution
budesonide
caffeine citrate
cromolyn sodium inhalation solution
ipratropium bromide
levalbuterol HCl
levalbuterol tartrate HFA
metaproterenol sulfate
montelukast
terbutaline sulfate
TheoChron
theophylline anhydrous
zafirlukast

Blood pressure related
acebutolol HCl
acetazolamide
Afeditab CR
amiloride HCl
amiloride/hctz
amlodipine besylate
amlodipine besylate/benazepril
amlodipine/atorvastatin calcium
amlodipine/olmesartan
amlodipine/valsartan
amlodipine/valsartan/hctz
atenolol
atenolol/chlorthalidone
benazepril HCl
benazepril HCl/hctz
betaxolol
bisoprolol fumarate
bisoprolol/hctz
bumetanide
candesartan
candesartan/hctz
captopri
captopri/hctz
cardenalol
carvedilol
candesartan
chlorothiazide
chlorthalidone
clonidine
clonidine HCl
clopres
diltiazem
diltiazem ER
doxazosin mesylate
enalapril maleate
enalapril maleate/hctz
eplerenone
eprosartan mesylate
felodipine ER
flosinopril sodium
flosinopril sodium/hctz
furosemide
guanfacine HCl
guadapine HCl
hydrochlorothiazide
indapamide
irbesartan
irbesartan/hctz
isradipine
labelolol HCl
lisinopril
lisinopril/hctz
losartan potassium
losartan/hctz
methazolamide
methylcloothiazide
methyldopa
metolazone
metoprolol succinate
metoprolol tartrate
metoprolol/hctz
minoxidil
moexipril HCl
moexipril HCl/hctz
nadolol
nadolol/bendrofluamethiazide
nicardipine HCl
nifedipine
nifedipine ER
nimodipine
niosipine
olmesartan
olmesartan/amiodipine/hctz
olmesartan/hctz
perindopril erbumine
phenoxymethylamine
pindolol
prazosin HCl
propranolol ER
propranolol HCl
propranolol/hctz
quinapril
quinapril HCl/hctz
ramipril
Selore
sotolol AF
sotolol HCl
spironolactone
spironolactone/hctz
telmisartan
telmisartan/amloidipine
telmisartan/hctz
terazosin HCl
timolol maleate
torsemid
trandolapril
trandolapril/verapamil
triaterene/hctz
valsartan
valsartan/hctz
Vecamyl – mecamylamine HCl
Verapamil

Blood thinner related
aspirin/dipyridamole ER
cilostazol
clopidogrel bisulfate
dipyridamole
Jantoven
Warfarin

Cholesterol related
amlodipine/atorvastatin
atorvastatin
cholesteryamine/aspartame
cholesteryamine/sucrose
colestipol HCl
ezemtibl
fenofibrate
fenofibric acid
fluvastatin ER
gemfibrozil
lovastatin
niacin ER
omega-3 acid ethyl esters
pravastatin
rosuvastatin
simvastatin

Diabetes related
acarbose
Bydureon
Byetta
chlorpropamide
Diabetic Supplies (i.e. lancets, syringes, urine tests, alcohol pads)
Farxiga
glimepiride

Osteoporosis related
alendronate sodium
calcitonin-salmon
etidronate disodium
ibandronate sodium
raloxifene
risendronate sodium

Prenatal Vitamins
All prescription strength prenatal vitamins are considered preventive

Please note: this list is subject to change and may not include all preventive medications that your plan covers. You can refer to myCigna.com for a complete and up-to-date drug listing for your plan.
STATEMENT OF
EQUAL EMPLOYMENT OPPORTUNITY AND AMERICANS WITH DISABILITIES ACT

It is the policy of the County to provide equal employment opportunity without regard to race, color, religion, sex, sexual orientation, genetic information, political affiliation, age, disability, national origin, or other status protected by federal, state or local law.

Discrimination against any person in the recruitment, examination, appointment, training, promotion, retention, discipline, or any other aspect of personnel administration because of race, color, religion, sex, sexual orientation, genetic information, political affiliation, age, disability, national origin, or other status protected by federal, state or local law is prohibited.

Discrimination on the basis of age, sex, or physical disability is prohibited except where age, sex, or disability requirements constitute a bona fide occupational qualification necessary for performance of the essential functions of a job.

The County will comply with the Americans with Disabilities Act (ADA) which prohibits discrimination on the basis of a disability. The County will make reasonable accommodations upon requests of otherwise qualified disabled applicants and employees to enable them to perform essential job functions except where such accommodations may constitute an unreasonable hardship or jeopardize the health and safety of employees, applicants or the general public.
The employee benefits program is administered by Mecklenburg County
Human Resources Department
700 East 4th Street
Charlotte, NC 28202

Employees Services Center:
(704) 432-6947 phone
(704) 336-2731 fax
www.charmeck.org

For additional information about any benefits described in this brochure, please consult Mecklenburg County policies, the applicable summary plan description (SPD), or the actual plan. In the event that there is any conflict between the information in this brochure, the SPD, the policies, and/or a plan, the plan document always governs.

Participation in any of the County’s benefit plans does not create and should not be viewed as a contract of employment. While Mecklenburg County intends to provide these benefits for an indefinite period of time, it reserves the right to terminate, suspend, withdraw, amend, or modify a plan at any time. Any such change or termination of benefits will be based solely on the decision of the County.

IMPORTANT NOTICES

Rate Notice for 10 Month Employees
In order to provide continuous medical coverage for 10 month staff, the County deducts additional amounts in the 10 months (22 pay periods) worked to cover the approximate 2 months in the summer (4 pay periods) in which staff do not receive a paycheck and are not paying premiums.

ACCESS TO AND AVAILABILITY OF THE NOTICE OF PRIVACY PRACTICES
Mecklenburg County Group Health Plans’ Notice of Privacy Practices (NPP) is applicable to persons enrolled in the employee and retiree medical plans, the dental plan, the medical flexible spending plan, and employee assistance program. If you wish to request a paper copy, you must submit your request in writing to the Group Health Plans’ Privacy Coordinator at Privacy.Practices@MecklenburgCountyNC.gov or via US Mail to: County HR, Compliance & Privacy Practices, 700 E. Fourth Street, Charlotte, NC 28202.