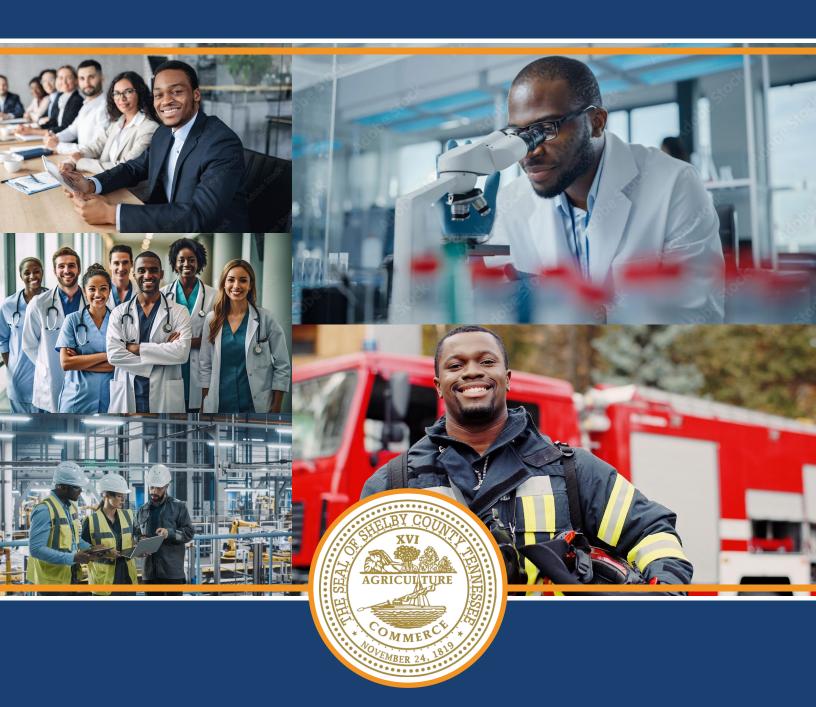
SHELBY COUNTY GOVERNMENT BENEFITS GUIDE



OPEN ENROLLMENT | NOVEMBER 1 - 15, 2023



DISCLAIMER: Every effort has been made to ensure the accuracy of this information; however, if there is a conflict with any plan or benefits policy, the plan policy will always govern.

WELCOME TO OPEN ENROLLMENT

What's New For 2024

- No Change to Health Care Premiums
- Slight increase in Dental Plan rates
- Flu Shots are available at the Employee Care Clinic on October 1, 2023 to February 29, 2024.
- Shelby County Government is implementing two-factor authentication to better protect your benefit portal account. (See details on page 3) You must complete this process before you can enroll!
- Please see our new YouTube Wellness Channel: @totalhealthwellnessprogram8821

Did You Know?

Resources

- Slight premium increase for Short Term Disability
- Employees must use all sick and annual leave prior to receiving benefits from the Short Term Disability Program. Employees with 8 to 10 weeks or more of accrued leave may want to consider whether to continue enrollment in STD. For more information see page 14.

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WHAT I NEED TO KNOW

When Can I Enroll?

This year, Open Enrollment is November 1 – 15, 2023. This is your one chance to enroll in benefits for the 2024 plan year. You can change your elections during the plan year **only** if you experience a Qualifying Life Event. All elections made during Open Enrollment will be effective January 1, 2024.

IMPORTANT: EXPRESS ENROLLMENT

You must log in to Keep Existing Coverage. To expedite the enrollment process, if you are not making changes to your benefit elections for the new plan year, simply click the Keep Existing Coverage button, which will quickly move you through the enrollment process.

If your spouse is currently enrolled in coverage and you do not log in to keep your existing coverage, your spouse will be removed from coverage effective January 1, 2024.

How Do I Enroll?

Shelby County is committed to providing you with the tools and resources you need to make informed benefit choices. Before you enroll, carefully review this Guide.

Dual Authentication Information

Shelby County Government is initiating two-factor authentication to protect your benefit portal account, and now is the time to sign up. It's simple and easy, and it will help keep your information secure and confidential. You must complete this process before you can enroll to make changes! Your new portal account lets you securely:

- Easily and quickly self-enroll during Open Enrollment or for reporting a Life Event.
- Access and review all your benefit information in one place.

How to Create Your Account

Creating your account is simple and only takes a few minutes. Instead of logging in by entering your last name, ZIP code, DOB, and last four digits of your Social Security number each time, you will only need to enter a username and password.

Create your account at

www.ShelbyCountyBenefits.com.

Make changes when needed to your beneficiaries, dependent information, and more. **Making Changes During the Plan Year**

During the plan year, you can add your spouse or your eligible dependent if you experience a Qualifying Life Event.

Qualifying Life Events include, but are not limited to:

- A change in your legal marital status, including marriage, annulment, divorce, or death of your spouse.
- A change in your dependent's eligibility (i.e., attainment of age 26).
- A change to your spouse's or dependent child's benefits with another employer.

You have two ways to enroll in your benefits:

Online: Log into www.ShelbyCountyBenefits.com to review your current benefit options and enroll for the 2024 plan year. You will need to complete the authentication process prior to enrolling online and create an account using a username and password.

By Phone: Call 1-877-970-4320. Licensed Benefits Counselors are available Monday through Friday, from 7:30 a.m. to 7:00 p.m. Central time to answer your questions and help you enroll.

If you complete your enrollment transaction online, you will be able to review, print, and email your confirmation statement. If you enroll by phone, you will have the option of having your confirmation statement sent to you via email. Please be sure to review your confirmation statement carefully.

IMPORTANT: If you have a life event during the year, you must contact the Shelby County Benefits Center at 1-877-970-4320, Monday through Friday, 7:30 a.m. to 7:00 p.m. Central time within 31 days of the event. If you miss the deadline, you will not be able to add/delete your dependents until the next Open Enrollment period.

Who's Eligible for Benefits?

Shelby County Government provides benefits to active full-time permanent and durational employees as well as part-time employees (who work at least 20 hours per week) and their eligible dependents. Benefits elected during Open Enrollment will be effective January 1, 2024.

When you add a new dependent to benefits, you must provide proof of relationship as indicated in this chart:

	Benefit Eligibility Requirements					
Eligibility Category	Documentation Required					
Spouse	 Copy of the Marriage Certificate (State issued); plus one form of Proof of Joint Ownership (must be dated no later than 90 days prior to your effective hire date). Employee's 2022 Federal Tax Return: Acceptable Documentation Includes Forms 1040, 1040A, and 1040EZ (both pages required). Page 2 must include signatures or an e-file confirmation number. Your joint mortgage statement listing both you and your spouse, matching the address in the Shelby County HRMS payroll system you have on file. Your joint banking statement or utility bill listing both you and your spouse, matching the address in the Shelby County Human Resource payroll system you have on file. Your current lease agreement listing both you and your spouse, including the signature page and matching the address in the Shelby County Human Resource payroll system you have on file. If no joint documentation, you must submit any of the above in employee's and spouse's name shown separately at same address. 					
Children Dependent child under the age of 26, including: Biological child Adopted/Foster child Stepchild Court Awarded Guardianship Disabled child	 Biological Child(ren): Copy of certified birth certificate (mother's copy accepted only within 30 days of birth or birth record showing employee as parent). If custodial parent is not listed on the birth certificate, you will have to provide the following: Adopted Child(ren): Court approved adoption order, placement order, or modified birth certificate; Motion for Order of Guardianship obtained from Chancery Court; Placement Order; or Final Adoption Decree. Legal Custody and Guardianship: Copies of Legal Custody and Guardianship papers issued by the court signed by the Judge. (Custody and Guardianship are both required.) Copy of Legitimate Order from Juvenile Court signed by the Judge (if father's name is not listed on birth certificate). Stepchild(ren): Copy of birth certificate showing spouse as parent required. Certified copy of the birth certificate and/or other pertinent documentation to establish eligibility to enroll on the health plan. The Affordable Care Act requires employer plans to offer coverage to dependent children until age 26. Both married and unmarried children qualify for this coverage, living or not living with parent. 					

IMPORTANT!

Effective January 1, 2015, the County implemented a Spousal Eligibility Rule (Spousal Carve Out) that restricts coverage for all employee and retiree spouses. If an employee's spouse is eligible for health coverage under his/her employer sponsored plan, the spouse is not eligible for coverage under the County's medical plan. If your spouse is enrolled in the County's medical plan, you must answer the spousal carve out question each year. Retirees will attest to whether their spouse is eligible for health coverage when enrolling.

Spouses who are employees of Shelby County Government, City of Millington, a Retiree of any of these, or with the Sheriff Reserves/Emergency Services enrolled in the County insurance plan are not subject to spousal carve out rule.

Spousal Employer Health Care Verification

The County requires spouses of covered employees and retirees who are enrolled in the County's group medical plan to complete the Spousal Employer Health Care Verification process. This process will be completed when enrolling online or calling the Shelby County Benefits Center at **1-877-970-4320**.

Failure to complete this process will result in the spouse being removed from coverage, effective December 31, 2023. You will have to wait until the next Open Enrollment to add your spouse.

HEALTH PROTECTION

Medical

Nothing is more important than your good health. To help you maintain your health and wellbeing, Shelby County Government offers three Medical plan options. Each plan offers the same types of services; however, they differ in premiums and out-of-pocket costs. The following hospitals are in-network for all Shelby County Health Care plans:

- **Methodist Hospitals**
- St. Francis Hospitals
- Regional One Health
- Lebonheur Hospital

Baptist Hospitals are Out of Network

Additional Medical Coverage Benefits

- Cigna's 24 Hour Nurse Line: 1-800-244-6224
- TeleHealth-MD Live: 1-888-726-3171
- MDLIVEforCigna.com
- ECC (Employee Care Clinic): 1-901-472-4190
- Convenience Care Clinics (i.e., Kroger's Little Clinics, Walgreen's Take Care Clinics, etc.)

, ,										
Medical Comparison Chart HRA Choi			ice (Gold) OAPIN (Silver)		HRA Standard (Bronze) Meets Minimum Value and Affordability Compliance					
Citart	In-Network Out-of-Network In-Network		Out-of-Network		vork	In-Network Out-of-N		etwork		
	Single	Family	Single	Family	Single	Family	Single	Family	Single	Family
Deductible (See chart below)	\$1,650 Individual \$3,300 Employee + 1 \$4,950 Family		\$1,650 Individual \$3,300 Employee + 1 \$4,950 Family		\$1,000 Individual \$2,500 Family		\$3,000 Individual \$6,000 Employee + 1 \$9,000 Family		\$3,000 Individual \$6,000 Employee + 1 \$9,000 Family	
Out-of-pocket Maximum	\$3,000 Inc \$4,550 Emp \$6,000 F	oloyee + 1	\$6,000 Individual \$11,400 Employee + 1 \$13,650 Family		\$4,500 Individual \$9,000 Employee + 1 \$11,250 Family		\$5,000 Individual \$8,000 Employee + 1 \$10,000 Family		\$10,000 Individual \$16,000 Employee + 1 \$20,000 Family	
Coinsurance	10%	6 *	40%*		20%	*	20%*		40%*	
Primary Care Physician	10%*		10%* 40%*		\$35 copay	per visit	20%	6 *	40%*	
Specialist	10%	ó *	40%*		\$50 copay	per visit	20%*		40%	6 *
Preventive Care	No charge		Not covered No charge		arge	No charge		Not covered		
Inpatient Hospital	10%	6 *	40%*		admissio	\$250 copay per admission then 20%*		6 *	40%	6*
Outpatient Hospital	10%	ó *	40%*		20%*		20%*		40%	6 *
Emergency Room	10%	6 *	10%*		\$500 copay per visit* (copay waived if admitted)		20%*		20%	6 *
Urgent Care	10%	6 *	10%	% *	\$50 copay p	per visit*	20%	% *	20%	6*
* A C										

*After plan deductible



How Does the HRA Deductible Work?

HRA Choice (Go	old) Contribution	
Single	Individual Deductible	\$1,650
	HRA County Contribution*	(\$650)
	Net Employee Deductible (What you owe)	\$1,000
Employee +1	Employee +1 Deductible	\$3,300
(Spouse/Child)	HRA County Contribution*	(\$1,300)
	Net Employee Deductible (What you owe)	\$2,000
Family	Family Deductible	\$4,950
(Spouse and Children)	HRA County Contribution*	(\$1,950)
,	Net Employee Deductible (What you owe)	\$3,000

HRA Standard	(Bronze) Contribution*	
Single	Individual Deductible	\$3,000
	HRA County Contribution*	(\$650)
	Net Employee Deductible (What you owe)	\$2,350
Employee +1	Employee +1 Deductible	\$6,000
(Spouse/Child)	HRA County Contribution*	(\$1,300)
	Net Employee Deductible (What you owe)	\$4,700
Family	Family Deductible	\$9,000
(Spouse and Children)	HRA County Contribution*	(\$1,950)
	Net Employee Deductible (What you owe)	\$7,050

^{*} County will pay its HRA contribution first. Any remaining HRA contributions at year end will carry over to the next year.

IMPORTANT!

HRA Plans are subject to a collective deductible (the entire amount of the deductible must be met before coinsurance is applied).

Preferred Providers Dialysis Treatment

Shelby County Government partners with HealthChoice to assist patients with Chronic Kidney Disease.

The health care coverage for dialysis treatment is:

- 100% coverage for In-Network dialysis centers (Methodist and Satellite centers only).
- 0% coverage for Out-of-Network dialysis centers.

This plan design applies to all health care plans.

For information, call HealthChoice at 1-901-821-6736, Monday – Friday from 7:00 a.m. to 3:00 p.m.

To access a list of In-Network Dialysis Treatment Facilities, log in to www.ShelbyCountyBenefits.com and click the "Forms" tab.

Premium Deductions (Pre-Tax)

All changes made during the 2023 Open Enrollment are effective January 1, 2024 and remain in effect until the end of the plan year, December 31, 2024. Please refer to the premiums/rates for the benefit programs in which you are enrolled to determine your correct deduction. You must notify the Employee Benefits Office immediately after your first paycheck in January if you believe your premium deductions are incorrect.

There are no premium changes for the 2024 plan year.

N	Semi- Monthly Medical Plan	Wellness Premium			Non-Wellness Premium (wellness requirements not met)		
	Premiums	HRA Choice (Gold)	OAPIN (Silver)	HRA Standard (Bronze)	HRA Choice (Gold)	OAPIN (Silver)	HRA Standard (Bronze)
	Employee	\$90.58	\$96.18	\$47.96	\$140.58	\$146.18	\$97.96
	Employee + Spouse	\$190.21	\$201.97	\$137.60	\$240.21	\$251.97	\$187.60
	Employee + Child(ren)	\$167.57	\$177.93	\$125.53	\$217.57	\$227.93	\$175.53
	Family	\$203.80	\$216.40	\$154.50	\$253.80	\$266.40	\$204.50

Pharmacy

Express Scripts is the pharmacy vendor for ALL Shelby County's health care plans. You will have one I.D. card for medical and prescription drug service. You will only receive a new I.D. card if you change your medical plan. For more information, visit www.express-scripts.com or call Express Scripts Member Services at 1-800-711-0917.

Keep in mind when you elect a Medical plan, you'll automatically be enrolled in prescription drug coverage. This coverage allows you to fill prescriptions at your local pharmacy or through the Express Scripts home delivery program, which can save you money. All three plans include the following prescription benefits:

	HRA Choice Gold (Express Scripts)			OAPIN Silver (Express Scripts)		HR	RA Standard (Express Scri		
In-Network	Retail (30-day supply)	(90-day supply) Maintenance Drugs	Specialty Drugs (30-day supply)	Retail (30-day supply)	(90-day supply) Maintenance Drugs	Specialty Drugs (30-day supply)	Retail (30-day supply)	(90-day supply) Maintenance Drugs	Specialty Drugs (30-day supply)
Generic	You pay 20% \$8 min/\$20 max	You pay \$25	You pay \$50	You pay 20% \$8 min/\$20 max	You pay \$25	You pay \$50	You pay 20% \$8 min/\$20 max	You pay \$25	You pay \$50
Preferred Brand with Generic Buy-up	You pay 30% \$40 min/ \$100 max	You pay \$75	You pay \$100	You pay 30% \$40 min/ \$100 max	You pay \$75	You pay \$100	You pay 30% \$40 min/ \$100 max	You pay \$75	You pay \$100
Non- preferred Brand	You pay 40% \$80 min/ \$120 max	You pay \$150	You pay \$150	You pay 40% \$80 min/ \$120 max	You pay \$150	You pay \$150	You pay 40% \$80 min/ \$120 max	You pay \$150	You pay \$150
Specialty Drugs	Not covered	Not covered	See copays above	Not covered	Not covered	See copays above	Not covered	Not covered	See copays above

If a brand name drug is requested and a generic drug is available, the member will pay the difference between the brand and the generic prescription.

Home Delivery (90-Day Supply) Maintenance Medications

Mandatory mail order for maintenance medication is required for all plans. The mail order copay applies on the fourth retail fill. If you do not move to Express Scripts mail order Pharmacy, you will receive a 30-day supply, not a 90-day supply, at retail.

A specialty drug network, the Specialty Precision Network, through Express Scripts, Inc., is available to all employees. Specialty networks usually deliver more personalized patient care, improved adherence, and healthier outcomes to patients. This network is for specialty drugs. Below are the specialty networks available:

First Choice Home Infusion

600 Commons Drive Gallatin, TN 37066 **1-866-665-3244** Accredo

1620 Century Center Parkway Memphis TN 38134-3838

1-800-803-2523

For additional updates on specialty accredited pharmacies, please use the Express Scripts mobile app, website, or contact Customer Service at **1-800-988-2285**.

COVID-19 Information

With the expiration of the U.S. Public Health Emergency Act on May 11, 2023, Shelby County employees will begin paying the applicable copay for COVID related medical services and test kits effective January 1, 2024. Employees may continue to order free COVID supplies through December 31, 2023, from Express Scripts.

Total Health Wellness Program

There are many steps you can take to improve your health, prevent health problems, or take your healthy lifestyle to the next level.

Staying healthy takes effort and consistency, so remember to focus on proper nutrition by eating a balanced diet daily, exercising regularly, and getting your routine physical examinations. Also, if you are on any maintenance medications, be sure to adhere to your prescribed dosage and follow up with your physician as recommended.

If you have any questions regarding the County's Total Health Wellness Programs, contact our Wellness Coordinator, Elyse Caudle, at **Elyse.Caudle@shelbycountytn.gov**.

Wellness Program Requirements

To promote your health and wellbeing, Shelby County is requiring all medical plan enrollees to complete the wellness requirement. Enrollees may complete either the wellness screening or the online heath risk assessment for plan year 2024.

Individuals who are married to another Shelby County employee and those enrolled in a Shelby County medical plan, must complete BOTH the biometric screening form and the online health risk assessment.

If you did not complete the wellness requirements for 2023, a non-wellness premium will apply, effective January 1, 2024.

Diabetic Supplies

Your plan covers 100% of the cost for prescription diabetic supplies. Additionally, these items are not subject to an annual deductible.

Omada for Cigna: Diabetes Prevention

Build long-term healthy habits to help reduce your risk for diabetes. An estimated 1-out-of-3 people are at risk for diabetes.* Are you? This digital program, available through Cigna, in collaboration with Omada, helps you make lifestyle changes that can reduce risks.

The goal of this program is to help you lose weight, reduce your risk for diabetes, and develop long-term healthy habits that will have a positive impact on your overall health.

*Centers for Disease Control and Prevention. National Diabetes Statistics Report: Estimates of Diabetes and Its Burden in the United States, 2017. Atlanta, GA: U.S. Department of Health and Human Services; 2017. Find out more information at https://www.omadahealth.com.

Tobacco Cessation Program

To support the overall health and wellness of County employees, Shelby County Government is taking steps to discourage the use of tobacco products. You will pay a higher cost for medical coverage if you and/or your spouse are covered under Shelby County Government's medical plan and have:

- 1. Used any tobacco products (including, but not limited to, cigarettes, electronic cigarettes, cigars, cigarillos, pipes, chewing tobacco, snuff, dip, and loose tobacco smoked via pipe) four or more times a week within the last six months; and
- 2. Failed to complete the Shelby County Government-approved tobacco cessation program, "Cigna Quit Today."

Tobacco Use Physician Affidavit Forms (for medically inadvisable documentation) are available upon request.

Remember!

Declare Your Tobacco Status

When you log in to the portal to complete your enrollment, you'll be asked if you and/or your spouse have used tobacco products in the last six months. Tobacco users will pay \$25 per person per pay period (employee and/or spouse) per month for one full year, beginning on July 1, 2024. The surcharge does not apply to dependent children.

If you or your spouse use tobacco, you can use Cigna Quit Today to avoid the surcharge.

Cigna Quit Today: A telephonic program with one-on-one coaching goals. Call **1-866-417-7848** to enroll today. You must be deemed as "making progress towards your goal" by your coach in order to avoid the surcharge. You are encouraged to enroll on or before February 1, 2024 in order to allow time to make progress before April 30, 2024.

Employee Care Clinic ECC

If you enroll in one of our Cigna medical plans, you can take advantage of our no-cost Employee Care Clinic (ECC), which provides diagnosis and treatment for minor illnesses and injuries—with no copay. The clinic is located at 1215 Poplar Avenue in Memphis, TN.

To schedule your visit, call 1-901-472-4190.

You can visit the clinic for:

- Allergy symptoms
- Ear aches
- Flu symptoms
- Cough and cold
- Heartburn
- Nausea, vomiting, and diarrhea
- Sinus pain and congestion

- Headaches, body aches, and pains
- Fever
- Minor cuts, scrapes, and burns
- Blisters and skin irritations
- Joint and muscle pain or swelling
- Biometric Screening
- And more



Walk-ins are accepted. Additionally, flu shots will be provided at the ECC from October 1, 2023 until February 29, 2024. Employees and pre-65 retirees MUST schedule their flu shot during regular clinic hours by calling **1-901-472-4190**.

The ECC does not treat major or chronic illnesses (only minor illnesses and injuries). You must visit your Primary Care Physician (PCP) for any major illnesses and injuries.

Hours of operation: M, T, Th: 8 a.m. – 4 p.m. W: 9 a.m. – 6 p.m. F: 8 a.m. – 12 p.m.

Hearing Aids

Hearing Aids are provided with a maximum benefit per ear of \$1,500, once every three years. County employees can also take advantage of the Cigna Healthy Rewards Discount Program. This comprehensive, cost-effective hearing health care benefit is provided by Amplifon Hearing Health Care. Call 1-888-779-3468 to learn more about your hearing health benefit and find a provider near you or visit go.amplifonusa.com/cignasoundsavings2.

Healthy Pregnancies, Healthy Babies Program

The Cigna Healthy Pregnancies, Healthy Babies program is an incentive program designed to help you and your baby stay healthy during your pregnancy and in the days and weeks after your baby's birth.

If you take part and finish the program, you'll be eligible to receive a \$150 gift card if you enroll in your first trimester or a \$75 gift card if you enroll in your second trimester.

To enroll, call **1-800-615-2906**. You can also visit <u>www.myCigna.com</u> for tools to help you track your pregnancy week by week, prepare for delivery, and care for your baby.

Medical FSA/Dependent FSA/Pretax Benefit (WEX)

Flexible Spending Accounts (FSAs) let you set aside tax-free dollars (subject to IRS limits) to pay for a wide range of out-of-pocket health care expenses (i.e., copays, coinsurance, and deductibles) or dependent day care expenses that are necessary for you to work. You can use this money to reimburse yourself for eligible expenses you or your dependents incur in the FSA calendar year.

You may participate in the Heath Care or Dependent Care FSA even if you do not elect coverage under the Shelby County Government Medical or Dental plans. In addition, you can use your Health Care FSA for expenses incurred by eligible dependents even if they are not enrolled for health care coverage. New Enrollees will receive a debit card from WEX health for medical expenses.

Keep in mind, if you'd like to participate in an FSA in 2024, you <u>must</u> enroll. A new election is required each year, and you cannot select "Keep Existing Coverage."

How Much You Can Cont	ribute to Your FSA in 2024			
Health Care FSA	\$3,050 (maximum contribution) * (The minimum contribution is \$25.00 per pay period for 24 pay periods.) Any contributions remaining in the Health Care FSA at the end of 2023 under \$610 will roll over to 2024.			
Dependent Care FSA	\$5,000 (maximum contribution) (The minimum contribution is \$50.00 per pay period for 24 pays periods.)			
Examples of Eligible Expenses**				
Health Care FSA	Dependent Care FSA***			
Plan deductibles, copays, and coinsurance	Expenses are reimbursable for dependent children to age 13			
r turi deddetibies, copays, and comsulance	and eligible dependent adults			
Amounts above reasonable and customary limits	and eligible dependent adults Fees for day care provided by individuals or day care centers			
	Fees for day care provided by individuals or			
Amounts above reasonable and customary limits	Fees for day care provided by individuals or day care centers			

^{*}This amount is subject to change.

REMINDER

If you currently participate in an FSA, you have until March 31, 2024 to claim 2023 Health Care FSA expenses.

^{**}For a list of eligible expenses, visit https://www.wexinc.com/

^{***}Caregivers are required to provide tax ID numbers in order for expenses to be qualified.

Dental

Cigna Dental Prepaid/DHMO Plan

The Cigna Dental Prepaid/DHMO plan provides dental services at predetermined copayment amounts, which are reduced fees for dental treatments when members receive service from their selected participating general dentist or from a participating specialist. The premiums are lower for the Prepaid/DHMO Plan. The Plan Design and Patient Charge Schedule (PCS) are located on the Winston Benefits Online Portal.

There are no deductibles to meet, no claims to file, no waiting periods for covered members, no annual dollar maximum, and preexisting conditions are covered. **You must designate a general dentist.**

Cigna Dental DPPO Plan

The Cigna Dental DPPO plan offers flexibility in that you may choose any dentist; however, you receive maximum benefits when visiting a participating network provider.

No referrals are required, and you or your dentist will file claims for services rendered. **The annual** maximum is \$2,000 per enrolled member. The premiums are lower for the DPPO Plan. The Plan Design and Providers are located on the Winston Benefits Online Portal.

For more information about either dental plan, visit <u>www.mycigna.com</u> or call 1-800-244-6224.

Dental Pre-Tax Premium Per Pay Period			
Cigna Dental Care (Prepaid/DHMO) Option	Cigna DPPO Option		
Employee Only: \$5.29	Employee Only: \$14.45		
Employee + 1 Dependent: \$8.99	Employee + 1 Dependent: \$26.97		
Employee + 2 or more Dependent: \$13.75	Employee + 2 or more Dependent: \$45.94		

Vision

MetLife Vision

MetLife Vision provides quality vision care and helps you save money on eye exams, eye glasses, and contact lenses. Members can access new vision ID cards and locate vision providers at www.metlife.com/mybenefits. This is a comprehensive benefit that ensures low out-of-pocket costs to members and their families. You can choose to purchase eyeglasses or contacts every January 1 (Option 1) or every other January 1 (Option 2). The Plan Coverage and Premiums are located on the Winston Benefits Online Portal.

Employee	Option I	Option II
Pre-Tax Premium	Per Pay Period Premium	Per Pay Period Premium
Employee	\$4.07	\$2.88
Employee plus One	\$7.31	\$5.17
Employee plus Family	\$11.37	\$8.04

FINANCIAL PROTECTION

Transamerica

Voluntary Whole Life Insurance for Employees

All active employees are eligible to enroll in Transamerica Voluntary Whole Life Insurance. You can elect Whole Life coverage in increments of \$25,000, \$50,000, \$100,000, and \$150,000. Your coverage is portable and is permanent life coverage that you can take into retirement. The premium for the coverage is based on the employee's age at the time of enrollment. Please note, spouses and dependents are not eligible for this benefit. If you elected coverage last year and want to make a change to your existing policy, you will need to contact the Shelby County Benefits Center for assistance.

MetLife Insurance

Basic Life

To protect those who depend on you financially, Shelby County Government provides you with Basic Life Insurance automatically through MetLife Insurance. This benefit is payable in the event of your death. Upon retirement from the County, the Basic Life coverage reduces to 1x (times) your annual salary.

Plan Features				
Coverage Amount	2x your annual salary			
Benefit Reduction	Age 65-69: 65% Age 70 or over: 50%			
Premium	\$0.500/\$1,000 County pays 70%: 0.350/\$1,000 Employee pays 30%: 0.150/\$1,000			

Voluntary Term Life

You have the option of purchasing additional life insurance coverage at group rates through MetLife Insurance. For detailed rate information, please log in to www.ShelbyCountyBenefits.com. Voluntary Term Life cannot be carried into retirement.

Employee Supplemental Life				
Benefit Amount	\$10,000 to a maximum of \$400,000			
Benefit Reduction	Age 65-69: 65% Age 70 or over: 50%			

The following applies when enrolling or increasing coverage:

- Late Entrants (employees currently not enrolled) must provide Evidence of Insurability (EOI) when increasing more than one coverage level or your election is over the \$150,000 Guaranteed Issue amount.
- If you complete your open enrollment online, the EOI form will be available on the benefits portal at the end of your open enrollment transaction. If you complete your enrollment via telephone, the EOI form will be emailed to you.
- Employees must submit their EOI application to MetLife Insurance for approval—do not send it to Employee Benefits.

Note: There will be a change in the Voluntary Life premium when an employee moves to the next five-year age band (e.g., from 30-34 to 35-39; 40-44 to 45-49, etc.) The change will be made January 1 of each year. Voluntary Life cannot be carried into retirement.

Dependent Life

P				
Dependent Supplemental Life				
	Spouse	Dependent Child		
Benefit	Up to \$100,000	Up to \$15,000 for each child		
Guaranteed Issue	\$50,000	N/A		

Note: for Dependent Life coverage, your dependent child is eligible at birth to age 26 (married or unmarried). Dependent Life coverage may be carried into retirement.

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Estate Resolution Services

Settling an estate can be a complex and lengthy process, but it doesn't have to be. The resources and services we offer you and your beneficiaries through MetLife Legal Plans are there to help. With your Supplemental Life coverage, you get expert legal guidance at no extra cost. Whenever you or your representative have a question about the probate process or the court representation needed, unlimited consultations for covered matters with a network attorney can leave you feeling confident with your decisions.

Tailored guidance when it matters most

With over 18,000 network attorneys, consultations are tailored to suit you. Consultations can either be over the phone or in person, so you can talk through your options in a private and supportive environment. This is all part of your coverage, so there are no forms to fill out, but there's always the option to use an out-of-network attorney if you'd prefer. The cost for these services are based on a set fee schedule.

MetLife Legal Plans offers an array of services, all covered in your plan. Working together, we'll equip you to find the best solutions for yourself or your beneficiary when settling an estate.

- Unlimited one-on-one consultations to talk to an attorney about authenticating an estate.
- Preparation and court representation means you receive prepared estate documents and in-court professional representation to help execute the transfer of probate assets from the estate.
- Help with any correspondence and tax filing needed to transfer non-probate assets. When your life insurance coverage begins, you'll automatically have each of these services at your fingertips.

Guidance is just a phone call away

Simply contact a Client Services Representative to get started.

We'll give you a case number and help you find a participating plan attorney.

- Call MetLife Legal Plans' toll-free number **1-800-821-6400**, Monday through Friday, 7am 7pm Central Time.
- Provide the company name (Shelby County Government), customer number (0228818), and the last four digits of the policy holder's Social Security number.
- And find the best network attorney for you.

Will Preparation

Take advantage of covered services including unlimited access. Talk to an attorney as many times as needed to prepare, update, or revise a will. Preparation of living wills and powers of attorney may help ease the stress for individuals who are unable to make decisions for themselves.

Expert guidance is just a click away. Simply visit **legalplans.com/estate** planning to get started.



Voluntary AD&D Insurance for Employees

All active employees are eligible to enroll in Accidental Death and Dismemberment (AD&D) Insurance through MetLife Insurance. The coverage will be effective January 1, 2024. Voluntary AD&D Insurance cannot be carried into retirement.

Plan Features				
Benefit Amount	\$10,000 to a maximum of \$150,000			
Benefit Reduction	Age 65-69: 65% Age 70 or over: 50%			

Voluntary AD&D Insurance for Dependents

Plan Features				
	Spouse	Dependent Child		
Coverage Amount	50% of employee's AD&D coverage to a maximum of \$75,000			
Benefit Reduction	65% at age 65; 50% at age 70	N/A		

Spouse eligibility is defined as your lawful spouse under the age of 70. Coverage for your spouse terminates when he/she reaches age 70. Your dependent children are eligible at birth to age 26 (married or unmarried).

Is Your Beneficiary Information Up To Date?

Making a proper beneficiary designation will ensure that your wishes are fulfilled and legal complications are avoided in the event of your death. A primary beneficiary receives your life insurance proceeds in the event of your death, but only if they are still living when you die. A contingent or secondary beneficiary receives your life insurance proceeds if the primary beneficiary is not alive when you pass away. Carefully consider your choices.

To review or update your beneficiary information, go online to www.ShelbyCountyBenefits.com or call the Shelby County Benefits Center at 1-877-970-4320. Representatives are available Monday through Friday, from 7:30 a.m. to 7 p.m. Central time. You can change your Life and AD&D beneficiaries at any time, not just during Open Enrollment.

Short Term Disability (STD)

STD Insurance replaces a portion of your income if you are unable to work due to a covered injury or illness for up to 26 weeks. STD is a voluntary program administered by MetLife. There are two benefit options available, 50% or 60% of the employee's weekly earnings, to provide some income during a time of need. The STD benefit has a 14-calendar day waiting period for sickness and a 0 day wait for injury. You are not paid STD benefits during the waiting period. Employees must use all sick and annual leave prior to receiving benefits from the STD Program. Employees with 8 to 10 weeks or more of accrued leave may want to consider whether to continue enrollment in STD. Effective January 1, 2024, there will be a slight premium increase for Short Term Disability.

STD 2024 Coverage Consideration

The following scenario of leave hours are equivalent to the 14-calendar day waiting period + 24 weeks of STD coverage (a total of 26 weeks): Work week of 37.5 hours x 26 = 975 leave hours.

NOTE: If you have a significant amount of accrued leave, you may want to consider waiving STD coverage for 2024. If you waive STD, you will need to satisfy evidence of insurability to rejoin the plan and be subject to a pre-existing condition limitation.

DISCLAIMER:

The decision to enroll in or waive any benefit offered, including the STD insurance, should be done with careful consideration. The employee should consider his/her current health, the amount of accrued leave he/she currently has available, and the likelihood that he/she may suffer an illness or injury requiring extensive leave time.

Long Term Disability (LTD)

All active full-time permanent and durational employees are automatically covered for LTD insurance through MetLife Insurance. LTD coverage replaces a portion of your income if you cannot work for an extended period of time. LTD benefits begin after 180 days of disability. The plan pays 60% of your basic monthly earnings. Benefits last until normal retirement age or you are no longer disabled. **Shelby County Government pays the full cost for LTD coverage.**

My Benefits (MetLife)

Family Medical Leave Act (FMLA)

Employees are eligible for FMLA if they are employed for at least 12 months by the start of leave and have worked for at least 1,250 hours during the previous 12-month period. FMLA is administered by MetLife, and claims can be submitted via online at **www.MetLife.com/MyBenefits** or by phone at **1-833-622-0135.**

Paid Parental Leave

Eligible employees who are employed for at least 12 months can receive a maximum of six weeks of paid parental leave per birth or adoption of a child/children. The fact that a multiple birth or adoption occurs simultaneously (i.e., the birth of twins or adoption of siblings) does not increase the total amount of paid parental leave granted for that event. Each week of paid parental leave is compensated at 100% of the employee's regular, straight-time weekly pay. Paid parental leave will be paid on regularly scheduled pay dates, minus all applicable deductions and taxes. Paid Parental Leave is administered by MetLife, and claims can be submitted via online at www.MetLife.com/MyBenefits or by phone at 1-833-622-0135.

Aflac

Voluntary Hospital Indemnity

To help you pay for the costs associated with a hospital stay, you can enroll in Group Hospital Indemnity Insurance through Aflac. It also provides funds for the out-of-pocket expenses your medical plan may not cover, such as coinsurance, copays, and deductibles. If you are currently enrolled in coverage or need more information, contact Aflac directly at 1-800-433-3036. Age requirement for Hospital Indemnity is 18-64. Do not enroll if you will be 64 in 2024.

Aflac will pay the Well Baby Care Benefit amount associated with each benefit plan option when an insured baby receives well baby care (four visits per calendar year, per insured baby). For this plan, a baby is a dependent child 12 months of age or younger. This benefit is payable only if coverage is issued with the Dependent Children Benefit Rider. \$25 per visit or \$100 annually is payable for this benefit.

Voluntary Critical Illness

To help you pay for treatment costs associated with a serious health event, you can enroll in the Group Critical Illness Insurance through Aflac. There are no age restrictions for Critical Illness Insurance. If you are currently enrolled in coverage or need more information, contact Aflac directly at **1-800-433-3036**.

Note: If you're enrolled in an Aflac individual plan (policies that are payroll deduction only), you may keep your plan; however, no new enrollments are allowed.

Health Screening Benefit

(Employee and Spouse only)

Aflac will pay \$50 for health screening tests performed while an insured's coverage is in force. AFLAC pays this benefit once per calendar year. This benefit is only payable for health screening tests performed as the result of preventive care, including tests and diagnostic procedures ordered in connection with routine examinations. This benefit is payable for the covered employee and spouse. This benefit does not pay for dependent children.

WORK/LIFE BENEFITS

Wellness Center

The Wellness Center is located on the 4th floor of 160 N. Main. Hours of operations are Monday - Friday, 6 a.m. - 7 p.m. All Shelby County Government full-time and part-time employees, as well as retirees are all eligible for membership for the Wellness Center. Please note that membership is required for use of the Wellness Center. Every individual is required to complete the Wellness Center Registration Form online at https://www.shelbycountytn.gov/FormCenter/Human-Resources-30/TOTAL-HEALTH-WELLNESS-CENTER-REGISTRATION-324

For additional information about the Wellness Center, please contact:

Elyse Caudle, Wellness Coordinator - (901) 222-2345 160 N. Main Street. 4th Floor, Memphis, TN 38103

Employee Benefits - (901) 222-2346 160 N. Main Street. 7th Floor, Memphis, TN 38103



@totalhealthwellnessprogram8821



Employee Assistance Program (EAP)

To help you and your family better balance work and family life, Shelby County provides free, confidential help for individual and work-related issues—whenever you need it—24/7. The EAP program, administered by CONCERN and paid for by the County, is available to you and your dependents, even if you are not covered under a County Medical plan.

To learn more about the EAP, contact CONCERN at 1-901-458-4000, or toll free at 1-800-445-5011, 24/7.

Managing Your Health Care Costs

Looking for ways to help manage your health care costs? Review these helpful tips:

- Take advantage of the 24-Hour Nurse Line offered by Cigna, 24/7 (no additional charges). Call 1-800-558-7453 for more information.
- When non-emergency medical care is needed, visit the new Employee Care Clinic (ECC), available to
 employees enrolled in a Cigna Medical plan. In addition, Convenience Care Clinics offer high-quality,
 affordable services for a wide variety of routine medical conditions. Call 1-800-558-7453 or go
 to www.myCigna.com.
- Emergency Room vs. Urgent Care: The Emergency Room is designed to provide fast, life-or-limb-saving care. Many, however, use the ER as a place to receive urgent care without realizing it. If you're ever in doubt, it's better to be safe and go to the closest ER. You will have an ER copay if not admitted for an inpatient hospital stay. Be informed and know the difference in costs associated with ER and Urgent Care visits under your medical plan (Walgreens Take Care Clinics, Kroger Little Clinics, Methodist Minor Medical Centers).

Telehealth MDLIVE

If you are enrolled in a Cigna medical plan, you can take advantage of telehealth services through Cigna Telehealth Connection, provided by MDLIVE, with 24/7/365 access to board-certified doctors and pediatricians by video chat or phone.

With Telehealth MDLIVE, you can have a virtual doctors appointment anytime, anywhere, on your terms. MDLIVE's doctors can diagnose you, prescribe medication when appropriate, and send the prescription directly to your pharmacy.

Connect with an MDLIVE doctor 24 hours a day, seven days a week!

📞 **Telephone:** 1. Call **1-888-726-3171.**

2. Speak to a coordinator to find a doctor who meets your needs.

3. Talk to the doctor.

Online: 1. Go to www.MDLIVEforCigna.com.

2. Find a doctor who meets your needs.

3. Video chat with the doctor.

APP: You can also download the myCigna app for an easier and more convenient way to visit with a doctor.

Plan	Provider	Phone	Website
Shelby County Benefits Center	Winston Benefits	1-877-970-4320	 www.ShelbyCountyBenefits.com Enroll in Open Enrollment Review Your Benefits Conduct Qualifying Life Events (QLE's) Change or Review Beneficiaries
Medical	Cigna	1-800-558-7453	 www.myCigna.com Find Care & Costs Search for in-network Providers View Claims Manage Spending Accounts Access Your Digital ID Cards
Prescription Drugs	Express Scripts	1-800-711-0917	 www.express-scripts.com Home Delivery Order refills and manage prescriptions Find Pharmacy View Order History
Dental	Cigna Prepaid/DHMO/ DPPO	1-800-244-6224	www.mycigna.comView Coverage Information
Vision	MetLife Vision	1-833-393-5433	 www.metlife.com/mybenefits View Policy Details View Claim Information Find a Provider Access Your ID Cards
Flexible Spending Accounts	WEX Health, Inc	1-866-451-3399	 www.wexinc.com Real-Time Access Check Claim Status Check Balance of your Accounts
Basic Life, Dependent Life, Voluntary Life, and AD&D	MetLife Insurance	1-833-771-1432	www.metlife.comFile a ClaimManage Claims
Short Term Disability	MetLife Insurance	1-833-771-1432	www.metlife.com • File a Claim
Long Term Disability	MetLife Insurance	1-833-771-1432	www.metlife.com File a Claim Manage Claims
Hospital Indemnity	Aflac	1-800-433-3036	www.aflacgroupinsurance.comFile a ClaimManage Claims
Family Medical Leave Act (FMLA)	MetLife Insurance	1-800-638-6420	www.metlife.comFile a ClaimManage Claims
Paid Parental Leave	MetLife Insurance	1-800-638-6420	www.metlife.comFile a ClaimManage Claims
Critical Illness	Aflac	1-800-433-3036	www.aflacgroupinsurance.com • File a Claim
Employee Assistance Program	CONCERN	1-901-458-4000 Toll Free: 1-800-445-5011 Representatives are available 24/7	www.myconcerneap.com
Deferred Compensation	Empower	Local Representative 1-901-500-5075	www.retirement.prudential.com
Tobacco Cessation	Cigna Quit Today	1-866-417-7848	
Employee Care Clinic	Shelby County Government	1-901-472-4190	

App Guide



My Cigna

A simple-to-use app that can help make your life easier and healthier while you're on the go. From medical and dental coverage information to claims and wellness, it's all on the MyCigna app!



Cigna Healthy Pregnancy

It's designed to help you and your baby stay healthy during pregnancy. This valuable resource offers you an easy way to track and learn about your pregnancy. It also provides support for baby's first two years!



Express Scripts

With the Express Scripts mobile app, you can skip the pharmacy trip. From up-to-the-minute order status to a handy "medicine cabinet" to keep track of prescriptions, the app is an on-the-go pharmacy.



MDLive Telehealth

With Telehealth MDLive you can have a virtual doctor's appointment anytime, anywhere, on your terms. MDLive doctors can diagnose you, prescribe medication when appropriate, and send the prescription directly to your pharmacy. You can also access the MD live app through www.mycigna.com.



MetLife

The MetLife US mobile app is available to use to track the status of claims or file a leave. You can download the app on the iTunes store or Google Play.



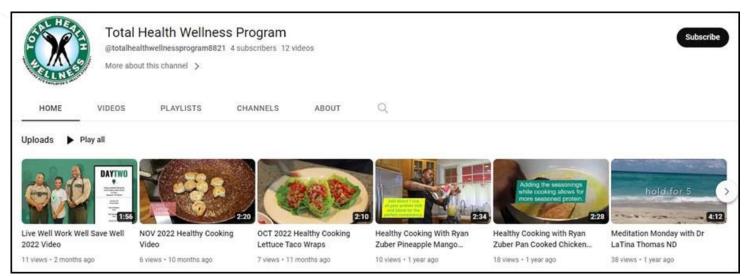
WEX HEALTH

Access your WEX benefits on the go 24/7 with the WEX benefits mobile app. This app gives you convenient, real-time access to all your WEX benefits accounts in one spot. Check the status of a recent claim or easily check the balance of your accounts.



Omada

The Omada mobile app is a fun, fast way to track your food and activity, check your progress, and talk to your group.



Click to visit the Total Health Wellness Program Youtube Channel

NOTES



SHELBY COUNTY GOVERNMENT BENEFITS GUIDE