



Employee Benefits Guide

PLAN YEAR
January 1st thru December 31st

Eligibility

The benefits offered by City of Florissant are designed to provide a comprehensive benefits package for you and your eligible dependents. The following is an overview of benefits available to you.

Eligibility

Benefits are available to you and your dependents ***the first of the month following 30 days from your date of hire.***

Eligible Dependents are:

- > Your legal spouse
- > Dependent child until the end of the month the child reaches his or her 26th birthday

Examples of a dependent child include:

- A natural biological Child;
- A stepchild;
- A legally adopted Child or a Child legally Placed for Adoption as granted by action of a federal, state, or local governmental agency responsible for adoption administration or a court of law if the Child has not attained age 26 as of the date of such placement;
- A Child under Your (or Your spouse's) Legal Guardianship as ordered by a court;
- A Child who is considered an alternate recipient under a Qualified Medical Child Support Order (QMCSO).
- Your dependent children of any age who are physically or mentally unable to care for themselves

Qualifying Events

Due to IRS regulations, once you have made your election for the **calendar** plan year, you cannot change your benefits until the next annual enrollment period unless you experience a qualifying event.

A qualifying event includes:

- > Marriage, legal separation, or divorce
- > Birth or adoption of a child
- > Change in employment status for you or your spouse
- > Change in a dependent's benefits eligibility status
- > A significant change in the cost or coverage of your spouse's benefits
- > Change in place of residence causing a loss of eligibility
- > Change in the cost of dependent care (only for the dependent care FSA)
- > Loss of a dependent (death)

To change your benefits, notify Human Resources within 30 days of the change in family status. Proof may be requested for loss of coverage.

City of Florissant offers great flexibility in managing care for you and your family by providing medical plan offered through BJC Health Solutions. You are covered at the highest level if you receive care through the BJC HealthSolutions using Tier 1 or Tier 2 using Aetna physicians network options.

Locate a network providers by reaching out to the Concierge at 844-217-8004 or MyBJCHealthSolutions.org

SUMMARY OF BENEFITS

	Tier 1 BJC HealthSolutions	Tier 2 Aetna
Calendar Year Deductible Individual/Family	\$500 / Individual \$1,000 / Family	\$1,000 / Individual \$2,000 / Family
Out-of-Pocket Max Individual/Family	\$1,750 / Individual \$3,500 / Family	\$3,500 / Individual \$7,000 / Family
Coinsurance	90%	80%
Physician Services PCP Specialist Virtual Visits	\$0 Copay Under age 19/\$0 copay \$0 copay \$0 copay	\$0 Copay Under age 19/\$25 copay \$50 copay \$50 copay
Preventive Care	Covered at 100%	Covered at 100%
Hospital Services Inpatient Outpatient Emergency Room Urgent Care	Deductible, 10% Deductible, 10% \$250 copay \$0 copay	Deductible, 10% Deductible, 10% \$250 copay \$75 copay
Lab/X-Ray Diagnostic Lab/X-Ray, MRIs, CT scans, etc.	Deductible, 10%	Deductible, 20%
Prescriptions - Retail Tier 1/Tier 2/Tier 3 Specialty	30 to 31 Day Supply \$10 / \$35 / \$60 SmithRX Connect 360 Program	30 to 31 Day Supply \$10 / \$35 / \$60 SmithRX Connect 360 Program
Mail Order Prescriptions Tier 1/Tier 2/Tier 3	90 Day Supply \$25 / \$87.50 / \$150	90 Day Supply \$25 / \$87.50 / \$150

YOUR NEW PHARMACY PARTNER BENEFITS



What is a PBM and how do I get my medications?

PBM is your Pharmacy Benefit Manager.

PBMs coordinate the interaction between your employer, physician and pharmacy.



Your PBM powers your pharmacy experience by:

- Making sure you're charged the correct copay at the pharmacy
- Setting up your medications to be covered according to your plan design
- Managing clinical requirements related to your prescriptions.

How do I get coverage?

You're automatically covered when you enroll in your health plan.

How will my pharmacy experience change?



Member ID Card

For most plan members, there will be no change. You can go to your usual pharmacy and get your drugs.

Don't forget to present your new member ID card at the pharmacy or you might be incorrectly charged!



Medication Coverage

PBMs like SmithRx cover medications based on lists of preferred drugs called formularies. The formulary with SmithRx may differ from your prior PBM. We'll notify you if a change is required for your medication.



Member Support

Our dedicated Member Support team is available via chat on our website www.smithrx.com or on M-F from 8am-8pm ET, and Saturdays from 11am-4pm ET. Call us at 844.454.5201.

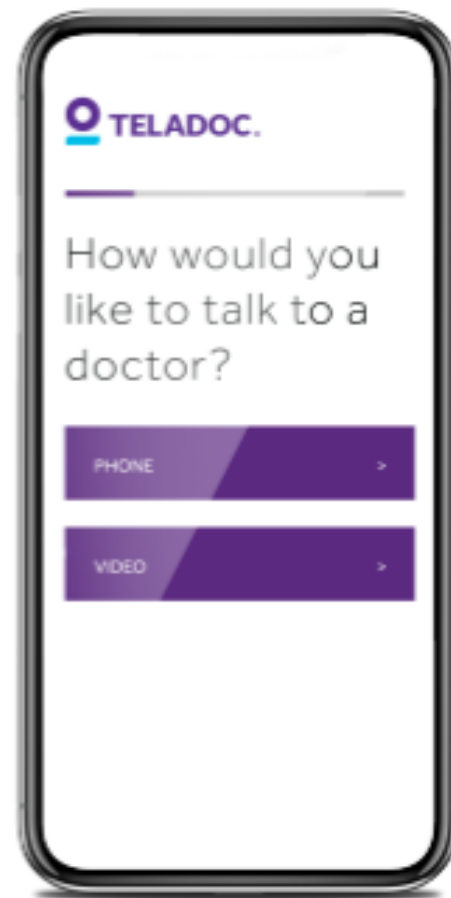
General Medical: What to know about this benefit

What services does Teladoc Health provide?

Teladoc Health provides healthcare for the whole you and can help you with everyday, non-emergency health needs like prescription refills, coughs, colds, UTIs, sinus, allergies and much more. Teladoc Health helps you get healthy and live healthy.

Teladoc Health is available in all 50 U.S. states, so the service can be used even if you are traveling. Some restrictions may apply.

Teladoc Health doctors do not prescribe controlled substances, drugs like Viagra and Cialis, and/or other drugs that have a higher risk of abuse. If a prescription is not needed, the Teladoc Health doctor may give you instructions for managing symptoms



Telehealth Urgent Care: \$25 member copay

Behavioral Health Consult: \$50 member copay

Talk Therapy Consult Fee: \$50 member copay

BJC HealthSolutions Concierge Line

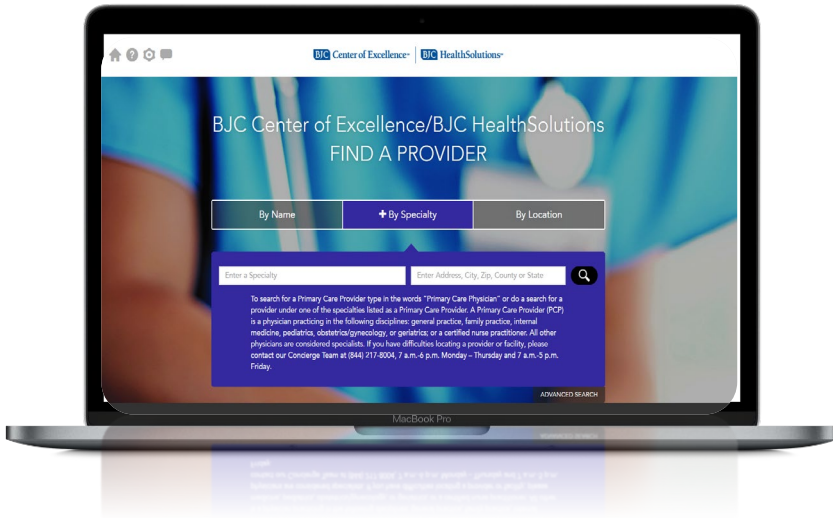


BJC HealthSolutions is committed to providing top-notch customer service for our members. Did you know you can call our Concierge Line with any of your health plan questions? Our knowledgeable professionals are available to ensure you're getting the best service possible.

BJC HealthSolutions members can call our Concierge Line about:

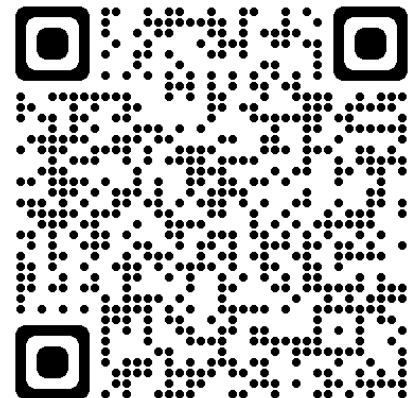
- Coverage and claims questions
- Information on pharmacy or mental health benefits
- Questions about providers including help selecting one
- Technical issues or assistance setting up your online account
- Assistance with our wellbeing program
- And more

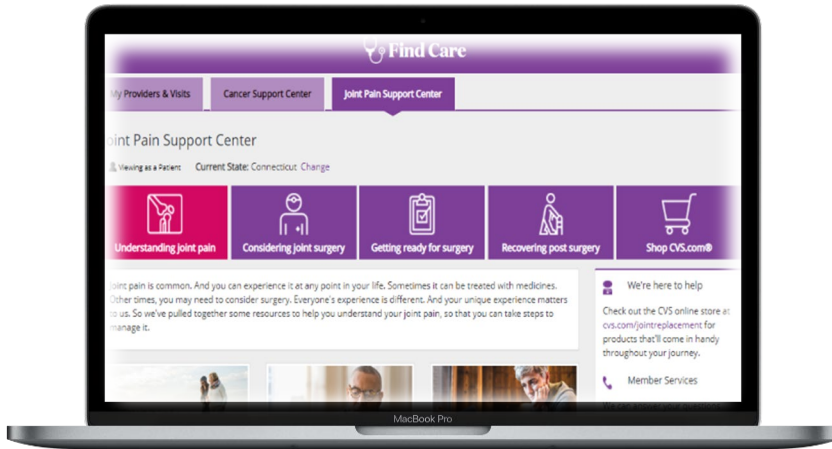
If you have any questions about your health plan, call the BJC HealthSolutions Concierge Line at 844.217.8004 between 7 a.m.-6 p.m. Monday - Thursday and 7 a.m.-5 p.m. Friday. Our team can help.



You can access information regarding your network providers in your area in two ways:

- Search the BJC HealthSolutions Directory by scanning the code below.
- Contacting the Concierge at 844.217.8004 and requesting the names of providers in your area.



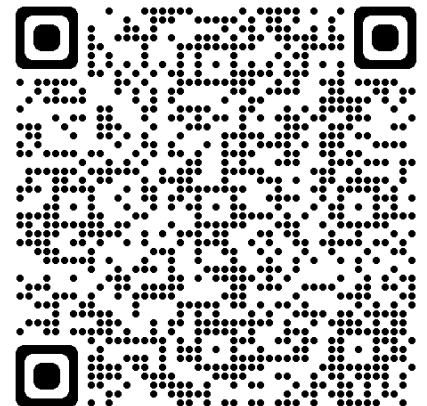


You can access information regarding your network providers in your area in two ways:

- Search the Aetna Directory by scanning the code below.
- Contacting the Concierge at 844.217.8004 and requesting the names of providers in your area.



Scan Here for
Directory



Flexible Spending Accounts (FSA)

Flexible Spending Accounts save you money on medical and childcare expenses. Most people save at least 25% on each dollar that is set aside in the program. City of Florissant partners with Paylocity to administer the following accounts:

■ Health Care FSA

The health care FSA allows you to set aside money from your paycheck before income taxes. Federal, Social Security, and state taxes, (if allowed) are withheld to pay for eligible expenses, such as copayments, deductibles, eye glasses, contact lenses, and other health-related expenses that are not reimbursed by the insurance plans.

You may participate in the health care FSA annually. Remember that your FSA election is fixed once your election period has closed. Take your time when determining your annual election. FSA accounts are year-to-year commitments, and you will want to spend all funds you have set aside each year. Unused funds are forfeited. The City of Florissant's plan *does include a grace period*. With a grace period, you have until March 15th to file expenses deemed to have been incurred during such plan year.

■ Dependent Care FSA

The dependent care FSA allows you to set aside money from your paycheck on a pre-tax basis for day care expenses to allow you and your spouse to work or attend school full time. Eligible dependents are children under 13 years of age, or a child over 13, spouse, or elderly parent residing in your home who is physically or mentally unable to care for himself or herself.

Under the dependent care FSA, if you are married and file a joint return, or if you file a single or head of household return, the annual IRS limit is \$5,000. If you are married and file separate returns, you can each elect \$2,500 for the plan year. You and your spouse must be employed or your spouse must be a full-time student to be eligible to participate in the dependent care FSA. FSA accounts are year-to-year commitments, and you will want to spend all funds you have set aside each year.

City of Florissant offers dental coverage through Delta Dental of Missouri utilizing the PPO & Premier Networks. You may use the provider of your choice, however, you will experience less out-of-pocket expense by seeing a Delta Dental PPO or Premier Network participating provider. Delta Dental Network providers agreed to discounted services. Non-Participating providers do not have discounted services and reserve the right to balance bill you for the difference between Delta Dental's accepted fee and the provider's actual charge. To search for a Delta Dental network provider, visit www.deltadentalmo.com.

SUMMARY OF BENEFITS

Dental Plan

Annual Deductible (Calendar Year)
Individual/Family

Applies to Basic & Major Services
\$50/\$150

Maximums

\$1,000 per person per Calendar Year
(Non-orthodontics)
\$1,000 per person per Lifetime
(Orthodontics to age 19)

Preventive Services

(exams, cleanings, fluoride, space maintainers, bitewing x-rays)

PPO: 0%

Premier: 0%

Out-of-Network: 0%

Basic Dental Services

(fillings, sealants, simple extractions, oral surgery, endodontics, periodontics, stainless steel crowns)

PPO: Deductible, 10%

Premier: Deductible, 20%

Out-of-Network: Deductible, 20%

Major Dental Services

(prosthetics, bridges, dentures, crowns, implants, bone grafts, inlays, onlays, general anesthesia)

PPO: Deductible, 40%

Premier: Deductible, 50%

Out-of-Network: Deductible, 50%

Orthodontia

(up to age 19)

PPO: 50%

Premier: 50%

Out-of-Network: 50%

	PPO	Premier	Out-of-Network
Annual Deductible (Calendar Year) Individual/Family	Applies to Basic & Major Services \$50/\$150		
Maximums	\$1,000 per person per Calendar Year (Non-orthodontics) \$1,000 per person per Lifetime (Orthodontics to age 19)		
Preventive Services (exams, cleanings, fluoride, space maintainers, bitewing x-rays)	0%	0%	0%
Basic Dental Services (fillings, sealants, simple extractions, oral surgery, endodontics, periodontics, stainless steel crowns)	Deductible, 10%	Deductible, 20%	Deductible, 20%
Major Dental Services (prosthetics, bridges, dentures, crowns, implants, bone grafts, inlays, onlays, general anesthesia)	Deductible, 40%	Deductible, 50%	Deductible, 50%
Orthodontia (up to age 19)	50%	50%	50%

City of Florissant offers a full-scale vision plan through Delta Vision. Locate the network provider by visiting their website at www.deltadentalmo.com/vision.



Vision Plan

SUMMARY OF BENEFITS

	In-Network	Out-of-Network
Vision Exam (every 12 months)	\$10 copay	Up to \$40 allowance
Lenses (every 12 months)	\$20 copay	Up to \$100 allowance (depending on lens)
Frames (every 12 months)	\$10 copay; \$130 allowance; 20% off balance	Up to \$52 allowance
Contacts (every 12 months in lieu of frames) Elective	\$20 copay; \$130 allowance; 15% off balance	Up to \$78 allowance
Medically Necessary	\$20 copay; \$250 allowance	Up to \$250 allowance

Basic Life and Accidental Death and Dismemberment (AD&D)

- Employee: 2x Basic Annual Earnings
 - 100% paid by City of Florissant

Supplemental Life and AD&D – **DURING OPEN ENROLLMENT, FOR EMPLOYEES CURRENTLY ENROLLED YOU MAY INCREASE YOUR LIFE INSURANCE AMOUNT EVERY YEAR BY \$10,000 UNTIL YOU REACH THE GUARANTEE ISSUE.**

Employees may purchase additional term life and AD&D coverage via payroll deduction

- Employee benefit: \$10,000 increments to lesser of 5x annual salary to a maximum of \$500,000
 - Guarantee Issue: 3x basic annual earnings to \$150,000
- Spouse Benefit: \$5,000 increments up to 100% of employee amount to a maximum of \$250,000
 - Guarantee Issue: \$30,000
- Child(ren) Benefit, ages 14 days to 26 years old: \$10,000
 - Guarantee Issue: \$10,000
- Employees must first elect coverage on themselves in order to purchase insurance on their dependents.
- Employees who elect supplemental life automatically receive matching AD&D amount.
- Premiums are based on age and benefit amount.
- During Open Enrollment, if you are currently enrolled, you can increase your life amount by \$10,000 a year up to the Guarantee Issue amount for employee only.
- **If not elected when initially offered, you can enroll now but you must provide Evidence of Insurability to be approved by the carrier.**

Voluntary Short-Term Disability

Employees may purchase short-term disability coverage via payroll deduction

- 60% of post-tax basic earnings to a maximum of \$500 per week
- Benefit may pay 30 days after disability for accident and illness
- 100% paid by employee
- **If not elected when initially offered, you can enroll now but you must provide Evidence of Insurability to be approved by the carrier.**

Long Term Disability

Employee provided benefit, paid for 100% by City of Florissant

- 60% of basic earnings to a maximum of \$5,500 per month
- Benefit may pay after 90 days of disability

Voluntary Accident

Employees may purchase Accident insurance coverage via payroll deduction

- Receive payments associated with a covered injury and related services. Use the payments any way you chose: mortgage, deductible, utility bills, etc.
- 100% paid by employee

What is an EAP?



An Employee Assistance Program (EAP) is a pre-paid benefit funded completely by your employer and free to you and your dependents.

We're Personal Assistance Services or PAS, and all our services are completely free AND confidential!

Personalized for You

We all juggle demands at work and in our personal lives—whether it's family, finances, hobbies, or social time. Balancing it all comes down to having the right tools, resources, and support.



PAS customizes counseling, coaching and consultations to your needs and your goals, no cookie cutters in sight.

We're here to help with life's changes like:

- Becoming a parent
- Planning for eldercare
- Managing a chronic illness
- Preparing for retirement
- Relationship challenges
- Starting a nicotine free life
- Living on your own
- Coping with grief and loss



Connect With Us



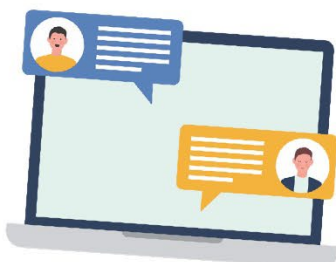
Call us anytime 24/7 to speak to a masters-level clinician or arrange services

800-356-0845

Text or live chat with our clinicians
Monday - Friday from 9AM - 5PM CST

314-451-5727

mypaseap.com





Husk Marketplace

Achieving optimal health and wellness doesn't have to be complicated or expensive. Access exclusive best-in-class pricing with some of the biggest brands in fitness, nutrition, and wellness with HUSK Marketplace.

YOUR LANDING PAGE:

Marketplace.huskwellness.com/paretohealth

Click on Activate Benefit to register for the program and unlock your discounts and exclusive offers.

Be sure to use the provided "Eligibility ID" to register.

Florissant ID: HS00427

Have questions? Reach out to our Customer Support team at customerservices@huskwellness.com or call 800-294-1500

As part of the HUSK Marketplace program, you are eligible for exclusive discounts on :



GYMS & FITNESS CENTERS



HUSK NUTRITION



HOME EQUIPMENT & TECH

B



MENTAL HEALTH

ON-DEMAND FITNESS

Voluntary Worksite Benefits - Aflac



- > Voluntary Worksite benefits are offered through Aflac.
- > To learn more about the benefits and the cost, please contact our Aflac representative, Shirley Vejvoda – [Shirley vejvoda@us.Aflac.com](mailto:Shirley_vejvoda@us.Aflac.com) 314-541-5920
- > Paid 100% by Employees

Contacts

Human Resources Contact Information

Sonya Brooks-White	(314) 839-7623	swhite@florissantmo.com
Kim Pemberton	(314) 595-3640	kpemberton@florissantmo.com

Carrier Contact Information

Medical Plans BJC HealthSolutions Concierge	1-844-217-8004	www.MyBJCHealthSolutions.org
Prescription Drug SmithRx Mail Order	1-844-454-5201	www.smithrx.com
Dental Plan Delta Dental of Missouri	1-800-355-8266	www.deltadentalmo.com
Vision Plan Delta Dental of Missouri	1-800-355-8266	www.deltadentalmo.com/vision
Life & Disability Mutual of Omaha	1-800-775-8805 1-800-877-5176	www.mutualofomaha.com
Flexible Spending Accounts	1-844-217-8004	www.consociate.fsa.com
Employee Assistance Plan	800-356-0845	Mypaseap.com
Aflac Shirley Vejvoda Dave Schmidt	(314) 541-5920 (636) 219-7185	Shirley_vejvoda@us.Aflac.com david_schmidt@us.aflac.com

This overview is published for employees of City of Florissant, and is only a highlight of your benefits. Official plan and insurance documents actually govern your rights and benefits under each plan. If any discrepancy exists between this bulletin and any of the official documents, the official documents will prevail.