# **SEDGWICK COUNTY**



2024

# EMPLOYEE BENEFITS GUIDE

# Sedgwick County Benefits

## **Your 2024 Employee Benefits Guide**

At Sedgwick County, we know our dedicated employees—YOU—are key to our overall success as an organization. As a way to reward you for your hard work, we provide a benefits package that is designed to help you reach your physical, financial, and mental health goals.

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## **Contact Information**

Plan	Phone	Website	
Medical United Healthcare and Optum RX Group # 902769	888-364-5089 Nurse line: 1-800-846-5089	www.myuhc.com	
Dental Delta Dental Group #90192	316-264-4511	www.deltadentalks.com	
Vision Vision Service Plan (VSP) Group #30078063	800-877-7195	<u>www.vsp.com</u>	
Supplemental Benefits Metlife/Amerilife Benefits Group #238768	833-633-1430	https://mybenefitsportal.com/sedgwickcounty	
Health Savings Account-HSA Optum Bank Group #902769	800-791-9361	www.optumbank.com	
Flexible Spending Accounts-FSA Surency Group Name: Sedgwick County	866-818-8805	www.surency.com	
Deferred Compensation 457 Empower Retirement	KeyTalk (customer service) 800-701-8255 Jon Horning 316-268-4551	www.sedgwickcounty457.com	
KPERS/KP&F 888-275-5737		www.kpers.org	
Employee Assistance Program EMPAC 12 Sessions	EMPAC 24 hr. Emergency Contact		
Division of Human Resources	316-660-7050	benefits@Sedgwick.gov	
Sedgwick County Helpdesk	316-660-9811		
Sedgwick County Payroll	316-660-7060		
Sedgwick County Security	316-660-7777		
Legal Notices and Summary of Benefits and Coverage (SBC)		Eline/Human Resources/Benefits/Benefit Documents	
Parking Company of America	316-264-0585		

## **Benefit Eligibility**

Your benefit plans have been designed to provide you with a package that is both comprehensive and responsive to the needs of all our employees. This booklet is designed to help you navigate your benefits choices.

#### **Benefit Eligible Employees**

If you are a benefit eligible employee, you are eligible to enroll in Sedgwick County's benefits if you work at least 30 hours per week.

#### When coverage begins

You must enroll in benefits within 30 days of your date of hire. Your coverage is effective the first of the month following your enrollment.

#### When coverage ends

If your employment with Sedgwick County terminates (voluntarily or otherwise), your benefits will end the last day of the month that you separate.

#### **Covering your family members**

Many of the plans offer coverage for your eligible family members, including:

Your legal spouse by marriage contract, your dependent children, including your step-children from present marriage, legally-adopted children, legal guardianship by court decree.

Dependent children are eligible for medical, dental, and vision insurance through the end of the month in which they turn age 26 (regardless of student or marital status). Married dependent children are not eligible to be covered under dependent life insurance.

Unmarried dependent children of any age may remain eligible if they are physically or mentally incapable of self-support. Please contact Human Resources for more information.

No individual can be insured as both an employee and as a dependent under the Medical, Dental, and/or Vision plan through Sedgwick County.

## **Benefit Enrollment**

#### **New employees-Initial Enrollment**

As a new employee, you must enroll in benefits through E-line within 30 days of your date of hire. If you do not enroll within 30 days, you will need to wait until the next open enrollment period to enroll. Coverage will begin the first of the month following the enrollment.

Sedgwick County will have a **dependent audit** in the future. At that time you will need to show documentation to verify all dependents covered under your Health Plans are eligible. Please be sure to review your covered dependents to ensure you are covering only those eligible.

#### **Current employees-Open Enrollment**

Open enrollment is the only time during the year that you can change your benefits unless you experience a qualifying life event. During the open enrollment period, you have the opportunity to newly enroll in coverage or make changes to your current coverage. Open enrollment occurs every year in the Fall and coverage begins on January 1<sup>st</sup>.

#### **Anytime Changes**

Anytime changes allow changes to Health Savings Account (HSA) contributions and Advance Life and AD&D beneficiaries.

# **Changing Your Benefits During the Year**

As stated above, you cannot change your benefits during the year unless you experience a qualifying life event. The most common qualifying life events are:

- · Marriage, legal separation, or divorce.
- Birth of a child (including adoption).
- Loss of other coverage (e.g., child turns 26 and loses coverage through parent's plan).

There are other, less common, life events that allow you to change your benefits. Please contact Human Resources for a complete list of qualifying life events.

If you experience a qualifying life event and wish to change your benefits, you must notify <a href="mailto:benefits@sedgwick.gov">benefits@sedgwick.gov</a> within 31 days of the life event. You will be required to provide proof of your life event, such as a hospital birth confirmation or marriage license. You can only change benefits that were impacted by the life event (e.g., if you get married, you can add your new spouse to the medical plan, but you cannot change medical plans).



#### **Online Enrollment**

Using either Chrome, Firefox, or Microsoft Edge, go to E-line, Employee Self Service (ESS), Benefits, Benefit Enrollment, Benefits Enrollment, Initial Enrollment.

Be sure to print off your confirmation statement. Changes CANNOT be made after Initial Enrollment unless you have a qualified family status event and must be made within 31 days.

If you want to access ESS from a non-County computer, you <u>must</u> give yourself access from a County computer FIRST:

- -From a County computer, go to E-line
- -Select Employee Self-Service (ESS)
- -Click on Remote Access
- -Click on Instructions for Remote Access and follow directions
- -After you have given yourself access, you can access ESS from a non-County computer:
- \*www.sedgwickcounty.org
- \*Under Government, Departments and Services, Human Resources
- \*Click on Employee Login



## Medical Insurance/Prescription Coverage-UnitedHealthcare (UHC)

<u>www.myuhc.com</u> or 888-364-5089 Group # 902769

Summary of Benefits and Coverage: <a href="https://eline.Sedgwick.gov/humanresources/benefit/benefits/forms/allitems.aspx">https://eline.Sedgwick.gov/humanresources/benefit/benefits/forms/allitems.aspx</a>

Sedgwick County offers three medical insurance plans through UnitedHealthcare (UHC). Please take the time to understand the features and differences of each plan so that you choose the coverage that is best for you and your family. Sedgwick County's medical plans are self-insured which means claims are paid from your paycheck deductions and the Sedgwick County's contribution to your medical plan.

Optum RX, a subsidiary of UHC, is the administrator for the prescription plans. The prescription drug benefit utilizes the Optum RX formulary, a list of pharmaceutical drugs that are safe, medically effective, and cost effective. Please go to <a href="https://www.myuhc.com">www.myuhc.com</a> to find a pharmacy and prescription drug listing.

Some medications may require prior authorization or step therapy. Step therapy helps you use less expensive, but equally effective medication for certain therapeutic conditions. Most therapeutic classes have multiple medication options. You are required to initially try a Step One prescription before a Step Two prescription will be covered. If you and your provider determine the treatment is ineffective, you may request a coverage review by UHC.

All three medical plans include In- and Out-of-Network benefits, which means you can choose any provider that you would like. However, you will pay less out of your pocket when you choose a UnitedHealthcare network provider. Locate a UnitedHealthcare network provider at www.myuhc.com.

The table on the following page summarizes the key features of the medical plans. Please refer to the official plan documents for additional information on coverage and exclusions.

Transparency of Coverage: www.sedgwickcounty.org/human-resources/employee-benefits/

## **Medical/Prescription Summary**

This chart shows In-Network benefit coverage. For Out-of-Network coverage visit www.myuhc.com

	Base PPO	Premier PPO	High Deductible (HDHP)
<b>Deductible (Annual)</b> Individual Two person/Family	\$1,250 \$2,500	\$750 \$1,500	\$3,200 \$6,400
Out-of-Pocket Maximum Individual Two person/Family	\$2,500 \$5,000	\$1,500 \$3,000	\$3,200 \$6,400
Co-insurance (Plan Pays after deductible)	80%	80%	100%
Co-pays Primary Care Physician Under age 19 Over age 19	\$10 \$20	\$10 \$20	100% (after deductible)
Specialist Tier 1 Provider Non-Premium Provider Urgent Care	\$20 \$50 \$50	\$20 \$50 \$50	100%
Emergency Room (co-pay waived if admitted)	\$350	\$300	(after deductible)
Preventive care	100%	100%	100%
Hospital-inpatient stay Lab, X-ray, Major Diagnostics	80% (after deductible)	80% (after deductible)	100% (after deductible)
Mental Health Inpatient Outpatient	80% (after deductible) 100% (after \$50 copay)	80% (after deductible)  100% (after \$50 copay)	100% (after deductible)
Retail Prescriptions (31 day supply) Generic Brand Non-Preferred Brand	\$10 \$40 \$70	\$10 \$40 \$70	100% (after deductible)
Mail Order Prescriptions (90 day supply through OptumRx Mail Delivery) Generic Brand Non-Preferred Brand	\$25 \$100 \$175	\$25 \$100 \$175	100% (after deductible)

## **Medical Definitions**

**Premium:** The amount you pay out of your paycheck to be covered by the plan.

#### **Deductible:**

- The annual deductible is the amount of eligible expenses, or the recognized amount when applicable, you must pay each calendar year for covered health services before you are eligible to begin receiving benefits. There are separate In-Network and Out-of-Network annual deductibles for these plans.
- Embedded deductible: If your spouse and/or children are covered by the plan, the individual deductible applies to each covered family member (capped at family amount).

**Out-of-Pocket maximum:** The most you will be required to pay out of your pocket for covered health care services in any one calendar year. The Out-of-Pocket maximum does not include premium payments taken from your paycheck. Plan deductibles and Out-of-Pocket maximums reset on January 1 each year.

**Co-pay (PPO plans):** Co-pay is a flat dollar amount and is paid at the time of service or when billed by the provider. Co-pays count toward the Out-of-Pocket maximum. Co-pays do not count toward the annual deductible.

**Co-insurance:** A set percentage of the total cost for a covered health care service that you pay after you have paid your deductible. For example, after your deductible is paid, PPO members pay 20% of covered services and the plan pays the remaining 80%.

**In-Network providers:** In-Network providers have contracted with UnitedHealthcare and have agreed to provide a discount to UnitedHealthcare plan members. You will pay less out of your pocket when you choose a UnitedHealthcare network provider.

**Out-of-Network providers:** Out-of-Network providers, facilities, and pharmacies can charge you the full price for services, which is typically much higher than the In-Network discounted rate. You will pay more out of your pocket when you choose an Out-of-Network provider.

**Preventive care:** Health care services that help keep you healthy by preventing diseases and other health conditions. The UnitedHealthcare medical plans pay 100% of the cost of preventive care when it is provided by a UnitedHealthcare provider. Some preventive care services that may be covered include: exams, screenings, and vaccinations. Please be aware that you may be billed for non-preventive care services that you receive at a preventive care exam. Learn more about preventive care at www.myuhc.com.

## Telehealth - UnitedHealthcare

#### Video chat diagnosis and treatment

Care 24/7 from your home, office, or anywhere! When you are feeling sick, the last thing you want to do is leave the house. With telemedicine, you never have to.

Doctors can treat many common health issues, including:

Sinus infection

- Skin rash
- Cold and flu
- Ear issues

- Urinary tract infection
- Pink eye
- Strep throat
- And many more!

#### Telehealth is easy to use!

- Book an appointment from anywhere, anytime at www.myuhc.com or the UnitedHealthcare app.
- Video chat with a board-certified doctor from your phone, tablet, or computer.
- A prescription can be sent to the pharmacy nearest you.
- Most consultations are completed in less than 20 minutes.

All three of the **UnitedHealthcare** medical plans include telemedicine benefits.

## AbleTo- UnitedHealthcare

#### AbleTo.com

#### On-demand access to self-help for stress and emotional well-being

Get access to self-care techniques, coping tools, meditations and more—anytime, anywhere. With Self Care, you'll get personalized content that's designed to help you boost your mood and shift your perspectives. Tap into tools created by clinicians that are suggested for you based on your responses to a short, optional assessment. Self Care is here to help you feel better—and it's available at no additional cost to you.



#### Daily mood tracking

Answer daily questions to record your current mood, identify patterns and self-assess your progress.



#### **Meditation tools**

Explore classic methods of relaxation—like deep breathing and positive visualization—in the moment when you need them.



#### Collections

Build life skills with curated content, tools and resources for the stuff that matters most to you—from work life balance to sleep, and much more.



#### Personalized roadmap

Track your progress, set goals and make strides through weekly check-ins—Self Care helps you create a roadmap to support your self-guided journey to better mental health.



#### Ready to get started?

- Visit ableto.com/begin
- > Have your health plan ID handy
- · Follow the steps to sign up
- Begin your self-care program

## Flexible Spending Accounts (FSA)-Surency

www.surency.com or 866-818-8805

#### Please read this page carefully before you make your FSA elections!

Sedgwick County offers two flexible spending account (FSA) options through Surency. The money that you put into an FSA is collected from your paycheck before taxes are withheld, which means you don't pay taxes on those dollars. FSAs are an annual contribution amount that cannot be changed. Contributions are prorated (i.e. annual contribution amount is divided by remaining deductions for that year). You must reenroll in FSA every open enrollment; it does not renew automatically. A few very important rules apply to FSAs.

- Incur expenses through March 15, 2025.
- File claims or submit receipts by May 14, 2025.
- Any funds left in the account as of May 15, 2025 are forfeited.
- You are required to submit itemized receipts to substantiate your qualified expenses to Surency
  regardless if using the debit card or submitting reimbursement. If you do not supply substantiation, you
  will be required to reimburse the plan or be subject to taxation per IRS regulations.
- If you receive employer contributions, they are subject to the same substantiation and taxation as employee contributions (see previous bullet).
- A full list of eligible expenses is available at www.irs.gov.publications/p502.

#### **Health Care FSA**

- You can contribute to the Health Care FSA if you are:
  - enrolled in Sedgwick County's Base Plan or Premier Plan (both are PPO plans) OR
  - not enrolled on the County's medical insurance AND not covered under another High Deductible Health Plan.
- Health care FSA funds can be used to pay for eligible Out-of-Pocket expenses such as deductibles, copays, and other health related expenses that are not reimbursed by the medical, dental, or vision plans.
- You may contribute \$50 \$3,200 (subject to the 2024 IRS announcement) to your health care FSA for the 2024 calendar year. The entire amount you elect is available to you on January 1 or your benefits effective date.
- You can also make FSA purchases at the FSAStore at <u>www.fsastore.com</u>.

#### **Dependent Day Care FSA**

- You can contribute to the Dependent Day Care FSA regardless of the plan you are enrolled in OR even if not enrolled on the County's medical insurance.
- Dependent day care FSA funds can be used to pay for eligible dependent care expenses that allow you and your spouse to work or attend school full time.
- Eligible expenses include day care, preschool, summer camp, before and after school care, and elder care.
- Funds can be used for care for: Children under 13 years of age; children over 13, spouse, and/or elderly parent who lives with you and is unable to care for themselves.
- You may contribute \$50-\$5,000 (subject to the 2024 IRS announcement) to the dependent day care FSA for the 2024 calendar year if you are married and file a joint return OR if you file a single OR head of household return.
- Funds are only available in the amount you have accrued in your account balance.
- Incur expenses through March 15, 2025.
- File claims or submit receipts by May 14, 2025.
- Any funds left in the account as of May 15, 2025 are forfeited.

## **Health Savings Account (HSA)-Optum Bank**

<u>www.optumbank.com</u> or 800-791-9361 Group #902769

A health savings account (HSA) is a bank account that allows you to save, spend, and invest your money on a pre-tax basis. You must be enrolled in the UnitedHealthcare High Deductible Health Plan (HDHP) in order to contribute to an HSA. HSA contributions can be changed anytime throughout the year by going to E-line, ESS, Benefits, Benefit Enrollment, Benefits Enrollment, Anytime Changes. You can use your HSA for qualifying medical, dental, and vision expenses.

You don't pay taxes on the money you contribute to your HSA from your paycheck.

Use the HSA contribution calculator at <a href="www.optumbank.com">www.optumbank.com</a> and check out the Optum Store for additional information and HSA eligible products.

- If you enroll in the UnitedHealthcare High Deductible Health Plan (HDHP), you agree to have a Health Savings Account (HSA) established in your name with Optum Bank regardless if you make a contribution to the account or not at the time of enrollment. If you decide not to make a contribution, you must enroll with a \$0.00 contribution.
- A \$2.00 monthly fee will be deducted from your balance.
- When you set up an HSA, it is important you select a beneficiary. This will ensure that your HSA money is
  immediately available to your beneficiary upon your death. If you don't select a beneficiary, the money will go to
  your estate and may be subject to taxation.
- You do not have to send in receipts to Optum Bank to verify eligible expenses. If you are audited by the IRS, you'll
  need to provide documentation showing you have had eligible health care expenses to cover any withdrawal from
  your HSA. Keep all health care receipts.

#### Contribute up to the IRS limits

Contributions to an HSA, including your exam attestation incentive and/or your sold vacation to your HSA, cannot exceed the annual IRS contribution limits. IRS rules state that contribution limits must be prorated by the number of months you are eligible to contribute to an HSA. If you don't have an HDHP/HSA for a full year, use the chart to determine your prorated contribution limit for the time you had an HDHP/HSA. Calculate how many months you'll have a HDHP/HSA for the plan year and find that number in the number of months column; that is how much you can contribute without getting a possible IRS tax penalty. For more information on prorated contribution limits, go to Eline, Human Resources, Benefits, Benefit Documents, HSA Prorated Contribution.

The 2024 IRS maximum contributions are: Single coverage: \$4,150.
Two person/Family: \$8,300.

Employees age 55+ by December 31 may contribute an additional \$1,000 catch-up contribution to their HSA.

Number of Months	Single	Family	Catch-up (Age 55+ only)
12 months	\$4,150	\$8,300	\$1,000
11 months	\$3,804	\$7,608	\$917
10 months	\$3,458	\$6,917	\$833
9 months	\$3,113	\$6,225	\$750
8 months	\$2,767	\$5,533	\$667
7 months	\$2,421	\$4,842	\$583
6 months	\$2,075	\$4,150	\$500
5 months	\$1,729	\$3,458	\$417
4 months	\$1,383	\$2,767	\$333
3 months	\$1,038	\$2,075	\$250
2 months	\$692	\$1,383	\$167
1 month	\$346	\$692	\$83

#### **HSA Eligibility Rules**

You cannot be covered by another non-HSA-eligible medical plan. You cannot be claimed as a dependent on someone else's tax return. You cannot be enrolled in Medicare, TRICARE, or TRICARE for Life.

Additional rules apply. Please see IRS Publication 969 for more information www.irs.gov/publications/p969

## **Dental Insurance- Delta Dental**

www.deltadentalks.com or 316-264-4511 Group #90192
Summary of Benefits and Coverage:

https://eline.Sedgwick.gov/humanresources/benefit/benefits/forms/allitems.aspx

There are no deductibles under the Delta Dental Plan for any eligible expenses. You can choose any dentist that you would like, however you will pay less out of your pocket when you choose an In-Network dentist. Locate a Delta Dental In-Network dentist at <a href="https://www.deltadentalks.com">www.deltadentalks.com</a>.

The table below summarizes the key features of the dental plan. The co-insurance amounts listed reflect the amount the plan pays. Please refer to the official plan document for additional information on coverage and exclusions.

	In-Network
Annual Benefit Maximum (per covered individual)	\$1,000
Diagnostic/Preventive Services (will not count towards the \$1,000 annual maximum) (i.e. cleanings, sealants)	100%
Basic Services (i.e. fillings, root canals)	80%
Major Services (i.e bridges, crowns)	50%
Orthodontics (\$1,500 lifetime maximum per covered individual)	50%

Two cleanings are covered each year per covered individual and there is no requirement to wait exactly six months between visits.

If you do not have at least one cleaning in the past 12 months, basic services reduce to 50 percent.

Only your covered basic & major services will count towards the \$1,000 annual maximum. Your diagnostic & preventive services will not count towards the \$1,000 maximum. This means that even if you reach your annual maximum throughout the plan year from basic and major services, you will still have coverage for your diagnostic and preventive services.

## Vision Insurance- Vision Service Plan (VSP)

www.vsp.com or 833-633-1430 Group #30078063

Summary of Benefits and Coverage: https://eline.Sedgwick.gov/humanresources/benefit/benefits/forms/allitems.aspx

Sedgwick County offers vision coverage through Vision Service Plan (VSP). This plan allows you to choose any eye care provider. However, you will maximize the plan benefits when you choose an In-Network provider. Locate a VSP In-Network provider at <a href="https://www.vsp.com">www.vsp.com</a>.

	Max Plan Pays	Co-pay	Frequency
Eye Exam		\$10	Every calendar year
Frames	\$180	\$0	Every other calendar year
Eye Glass Lenses	\$160	\$0	Every calendar year
Contacts (instead of eye glass lenses)	\$160	\$0	Every calendar year
Contact lens exam		\$40	Every calendar year
*Diabetic Eye Care Plus Program	\$20	\$0	As needed

<sup>\*</sup>Services related to diabetic eye disease, glaucoma, and age related macular degeneration. Retinal screening for eligible members with diabetes.

Limitations and coordination with medical coverage may apply.

#### **KidsCare Program**

This benefit is included in your vision plan. Enrolled dependent children under the age of 18 can receive two comprehensive eye exams and one new pair of frames and lenses every year.

## **Advance Life, Accidental Death and** Dismemberment (AD&D), and Dependent Life **Insurance**

Advance Life and Accidental Death and Dismemberment (AD&D) insurance provides financial protection for those who depend on you for financial support. Upon your death, your designated beneficiary(ies) will receive the life benefit. If you die as the result of an accident, your beneficiary(ies) will receive both the life and AD&D benefits.

Sedgwick County provides you with \$50,000 basic life and AD&D at no cost to you.

You can purchase optional voluntary Life and AD&D. Deductions will come out of the first two paychecks of each month. \*The amounts below include the \$50,000 provided by Sedgwick County.

Advance Life and AD&D		
\$75,000	\$2.25	
\$100,000	\$4.50	
\$125,000	\$6.75	
\$150,000	\$9.00	

Dependent Life: Dependent life insurance is for a legal spouse and/or unmarried children under the age of 26. Dependent life insurance coverage ends when the employee reaches age 75. Deductions will come out of the first two

paychecks of each month.

Dependent Life	
\$5,000 Spouse and Child(ren)	\$0.82
\$10,000 Spouse only	\$0.65
\$10,000 Child(ren) only	\$1.00
\$10,000 Spouse and Child(ren)	\$1.65

<sup>\*</sup>Federal laws state that life insurance amounts in excess of \$50,000 are taxable and is added to your W-2. These amounts are called imputed income.



## 2024 Premiums

## Medical - (First two paychecks of each month)

Base PPO	Total Cost	Employer Cost	Employee Cost
Single	\$318.54	\$298.68	\$19.86
Two-Person	\$637.07	\$597.36	\$39.71
Family	\$923.75	\$866.19	\$57.56

Premier PPO	Total Cost	Employer Cost	Employee Cost
Single	\$334.49	\$297.36	\$37.13
Two-Person	\$668.98	\$594.73	\$74.25
Family	\$970.02	\$862.36	\$107.66

High Deductible Health Plan (HDHP)	Total Cost	Employer Cost	Employee Cost
Single	\$293.24	\$286.09	\$7.15
Two-Person	\$586.49	\$572.20	\$14.29
Family	\$850.40	\$829.68	\$20.72

## Dental - (First two paychecks of each month)

	Total Cost	Employer Cost	Employee Cost
Single	\$17.08	\$13.66	\$3.42
Two-Person	\$34.15	\$27.32	\$6.83
Family	\$49.52	\$39.62	\$9.91

## Vision - (First two paychecks of each month)

	Total Cost	Employer Cost	Employee Cost
Single	\$3.86	\$0.00	\$3.86
Two-Person	\$7.72	\$0.00	\$7.72
Family	\$12.43	\$0.00	\$12.43



## **Supplemental Benefits**

#### **OUR BENEFITS PARTNER**

### Metlife/Amerilife Benefits

**Group #238768** 



Headquartered in Kansas City, Amerilife Benefits has a long history of partnering with our clients to create and manage innovative employee benefit programs that maximize their investment in human capital. Our organization has been in the employee benefit administration business for more than 50 years, and the depth of our team's experience lends itself to seamless new client on-boarding and ongoing administration.

Amerilife Benefits is proud to partner with Sedgwick County Government and MetLife to help communicate and educate employees on the MetLife Supplemental plans made available to all benefit eligible employees.

Our mission is to provide you the employee with useful tools and help educate you about your employee benefits. Keep in mind when you speak to a benefits representative on our team, they are non-commissioned. We are here to educate you on your options, not sell you something.

Contact us today if we may help you in any way with your employee benefit needs at Sedgwick County!

#### For help or assistance, we are always just a phone call or email away!

Telephone: 833 - 633 - 1430

Email: customersupport@amerilifebenefits.com

Website: <a href="https://mybenefitsportal.com/sedgwickcounty/">https://mybenefitsportal.com/sedgwickcounty/</a>

The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the guide and actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about the guide, please contact HR.



#### DISABILITY INCOME BENEFITS

## Metlife/Amerilife Benefits

Group #238768

Provider: MetLife

Eligibility: All active, full-time employees

At Sedgwick County, we want to do everything we can to protect you and your family. Sedgwick County provides employees with voluntary short-term disability income benefit plan options. Without disability coverage, you and your family may struggle to get by if you miss work due to an injury or illness.

In the event that you become disabled from a non-work-related injury or sickness, disability income benefits will provide a partial replacement of lost income. Please note, though, that you are not eligible to receive disability benefits if you are receiving workers' compensation benefits.

	Plan Option 1
Benefits Begin	For injury & sickness: 15 <sup>th</sup> day
Benefit Amounts Available	You may elect a monthly benefit in increments of \$25 from a minimum of \$50, up to a maximum benefit of \$1,000
Maximum Benefit	Your elected monthly benefit amount may not exceed 60% of your covered salary and will pay a maximum of 24 weeks.

Your monthly employee rates are outlined below:

Issue Age	Less than 50	50 – 59	60+
Rate per \$10 of weekly covered benefit	\$1.24	\$2.22	\$3.01

<sup>&</sup>quot;Please note this is a brief overview of coverage. It does not list all benefits, nor does it list exclusions and limitations. Please refer to your Evidence of Coverage or Summary Plan Description for list of benefit limitations and exclusions

## ACCIDENT INSURANCE Metlife/Amerilife Benefits MetLife



Group #238768 Provider: MetLife

Accidents can happen to anyone, anywhere, at any time! Paying for out-of-pocket medical costs or other indirect costs after an accidental injury can be stressful. That's why Sedgwick County offers a voluntary accident insurance plan that you may elect coverage for either you or the entire family.

Accident insurance helps pay for the unexpected costs of an accidental injury by providing you cash benefits for things such as initial care, specific injuries, treatment, facility care, and follow-up care visits. Any of the benefits you receive from the policy are paid directly to you and can help you cover deductibles, co-insurance, or whatever expenses you may choose to spend it on.

	Low Plan Benefits	High Plan Benefits
Fracture	\$100 - \$8,000	\$200 - \$10,000
Dislocation	\$100 - \$8,000	\$200 - \$10,000
Second- or Third-Degree Burns	\$75 - \$10,000	\$100 - \$15,000
Concussion	\$250	\$500
Coma	\$7,500	\$10,000
Laceration	\$50 - \$400	\$75 - \$700
Broken Tooth	Crown: \$200/ Filling: \$25 / Extraction: \$100	Crown: \$300/ Filling: \$50 / Extraction: \$150
Eye Injury	\$300	\$400
Ambulance	Ground: \$300/ Air: \$1,000	Ground: \$400/ Air: \$1,250
ER care	\$75 - \$150	\$100 - \$1,000
Non-Emergency Initial Care	\$75	\$100
Physician Follow-Up	\$75	\$100
Therapy Services	\$35	\$50
Medical Testing	\$150	\$200
Transportation	\$300	\$400
Medical Applicances	\$75 - \$750	\$150 - \$1,000
Transportation	\$300	\$400
Pain Management	\$75	\$100
Prosthetic Device	One device: \$750 More than One: \$1,500	One device: \$1,000 More than One: \$2,000
Modification	\$1,000	\$1,500
Blood/Plasma/Platelets	\$400	\$500
Surgical Repair	\$150 - \$1,500	\$200 - \$2,000
Exploratory Surgery	\$150	\$200
Other Outpatient Surgery	\$300	\$400
Health Screening Benefit	\$150	\$150
Lodging Benefit	\$100	\$200
Accidental Death Benefits	Basic Accidental Employee \$25,000 Spouse \$12,500 Child \$5,000	Basic Accidental Employee \$50,000 Spouse \$25,000 Child \$10,000
Dismemberment, Loss & Paralysis		

Accident Death & Dismemberment Category

	Low Plan Benefits	High Plan Benefits
A.:	Basic Accidental Death Employee \$25,000 Spouse \$12,500 Child \$5,000	Basic Accidental Death Employee \$25,000 Spouse \$12,500 Child \$5,000
Accidental Death Benefits	Accidental death on common carrier Employee \$75,000 Spouse \$37,500 Child \$15,000	Accidental death on common carrier Employee \$150,000 Spouse \$75,000 Child \$30,000
	Dismemberment/ Functional Loss \$750 - \$10,000 (employee, spouse & child)	Dismemberment/ Functional Loss \$1,000 - \$15,000 (employee, spouse & child)
Accidental Dismemberment, Loss & Paralysis	Catastrophic Dismemberment / Functional Loss \$20,000 (employee, spouse & child)	Catastrophic Dismemberment / Functional Loss \$40,000 (employee, spouse & child)
T al alysis	Paralysis \$10,000 - \$20,000 (employee, spouse & child)	Paralysis \$20,000 - \$40,000 (employee, spouse & child)

Your monthly employee rates are outlined below:

	Low Plan Cost	High Plan Cost
Employee	\$11.80	\$15.84
Employee & Spouse	\$23.39	\$31.26
Employee & Child(ren)	\$28.05	\$37.43
Employee & Spouse/Child(ren)	\$33.19	\$44.28



#### CANCER INSURANCE

## Metlife/Amerilife Benefits

Provider: MetLife

Group #238768

Most of us are not financially prepared for a medical crisis caused by a cancer diagnosis within our family. Out of pocket expenses can deplete our savings, home equity and retirement funds. Major medical insurance does not cover many non-medical expenses.

No one wants to experience a cancer diagnosis, but the fact is that the risk of getting cancer is great. In the United States, men have slightly less than a one in two lifetime risk of developing cancer; for women, the risk is a little more than one in three (Cancer Facts and Figures 2012, American Cancer Society). Your plan pays a lump-sum Initial Benefit upon the first verified diagnosis of a covered cancer. Your plan also pays a lump-sum Recurrence Benefit for a subsequent verified diagnosis of the same cancer as shown in the table below. A Recurrence Benefit is only available if an Initial Benefit has been paid for the same cancer.

Cancer Insurance Benefits

	Benefit Amount	Initial Benefit	Recurrence Benefit
Employee	\$15,000 - \$30,000	Invasive Cancer: 100% of benefit amount	Invasive Cancer: 100% of initial benefit amount
Spouse	50% of employee's initial benefit	Non-Invasive Cancer: 25% of Benefit Amount Skin Cancer: 5% of benefit	Non-Invasive Cancer: 100% of initial benefit
Dependent Child(ren)	50% of employee's initial benefit	amount	amount Skin Cancer: None

Your monthly employee rates per \$1,000 of Coverage are outlined below:

Issue Age	EO	ES	EC	Family
<25	\$0.32	\$0.53	\$0.46	\$0.66
25 – 29	\$0.39	\$0.63	\$0.52	\$0.76
30 – 34	\$0.48	\$0.77	\$0.62	\$0.90
35 – 39	\$0.62	\$0.97	\$0.75	\$1.11
40 – 44	\$0.88	\$1.36	\$1.01	\$1.49
45 – 49	\$1.16	\$1.78	\$1.29	\$1.92
50 – 54	\$1.51	\$2.32	\$1.64	\$2.45
55 – 59	\$1.88	\$2.88	\$2.01	\$3.01
60 – 64	\$2.22	\$3.39	\$2.35	\$3.52
65 – 69	\$2.28	\$3.49	\$2.42	\$3.63
70 – 74	\$2.00	\$3.06	\$2.13	\$3.20
75+	\$2.17	\$3.33	\$2.31	\$3.47

## MetLife

#### CRITICAL ILLNESS INSURANCE

## Metlife/Amerilife Benefits

Provider: MetLife

**Group #238768** 

Most of us are not financially prepared for a medical crisis caused by a critical illness diagnosis within our family. Out of pocket expenses can deplete our savings, home equity and retirement funds. Major medical insurance does not cover many non-medical expenses.

Your plan pays a lump-sum Initial Benefit upon the first verified diagnosis of a covered critical illness. Covered critical illnesses include cancer, heart attack, stroke, Alzheimer's, ALS & Parkinson's. Your plan also pays a lump-sum Recurrence Benefit for certain covered illness shown below.

Critical Illness Insurance Benefits

	Employee	Spouse & Dependent Children
Benefit Amounts	\$15,000 - \$30,000	50% of employee's initial benefit
Covered Diseases	Initial Benefit	Recurrence Benefit
Benign Brain Tumor	100% of Benefit Amount	100% of Initial Benefit Amount
Invasive	100% of Benefit Amount	100% of Initial Benefit Amount
Non-Invasive Cancer	25% of Benefit Amount	100% of Initial Benefit Amount
Skin Cancer	5% of Benefit Amount	None
Coronary Artery Bypass	50% of Benefit Amount	100% of Initial Benefit Amount
Childhood Disease (Cerebral Palsy, Cystic Fibrosis, Diabetes, Down Syndrome, Sickle Cell Anemia & Spina Bifida)	100% of Benefit Amount	None
Coma	100% of Benefit Amount	100% of Initial Benefit Amount
Functional Loss Category Loss of speech, hearing, sight, paralysis of 2 or more limbs)	100% of Benefit Amount	None
Heart Attack	100% of Benefit Amount	100% of Initial Benefit Amount
Sudden Cardiac Arrest	100% of Benefit Amount	None
Infectious Disease Category (Bacterial Cerebrospinal Meningitis, Diphtheria, etc.)		None
Kidney Failure	100% of Benefit Amount	None
Major Organ Transplant Category (Heart, Lung, Marrow, etc.)	100% of Benefit Amount	None
Progressive Disease Category (ALS, Alzheimer's, Parkinson's, etc.)	100% of Benefit Amount	None
Severe Burn	100% of Benefit Amount	100% of Initial Benefit Amount
Stroke	100% of Benefit Amount	100% of Initial Benefit Amount

Your monthly employee rates per \$1,000 of Coverage are outlined below:

Issue Age	EO	ES	EC	Family
<25	\$0.50	\$0.79	\$0.67	\$.96
25 – 29	\$0.63	\$0.98	\$0.80	\$1.15
30 – 34	\$0.81	\$1.26	\$0.98	\$1.43
35 – 39	\$1.07	\$1.65	\$1.24	\$1.82
40 – 44	\$1.56	\$2.39	\$1.73	\$2.56
45 – 49	\$2.10	\$3.20	\$2.27	\$3.37
50 – 54	\$2.78	\$4.23	\$2.95	\$4.40
55 – 59	\$3.52	\$5.36	\$3.69	\$5.53
60 – 64	\$4.30	\$8.54	\$4.47	\$8.71
65 – 69	\$4.64	\$7.05	\$4.81	\$7.22
70 – 74	\$4.53	\$6.88	\$4.70	\$7.05
75+	\$5.78	\$8.75	\$5.95	\$8.92



## HOSPITAL INDEMNITY:

#### Metlife/Amerilife Benefits

Provider: MetLife

**Group #238768** 

Focus on recovery during a hospital stay — not your out-of-pocket costs. A hospital confinement due to an illness or injury can happen to anyone. Chances are when it occurs you will have unplanned expenses to pay. Will you be prepared? Hospital Indemnity insurance benefit payments are made directly to you, no matter what other coverage you may have, and can be used however you choose.

These benefit payments can help pay for out-of-pocked healthcare costs or other household expenses which can pile up during a hospital stay. Hospital Indemnity insurance helps provide financial peace of mind

Hospital Indemnity Insurance Benefits

	Low Plan	High Plan
Admission (4 times a year)	\$500	\$1,000
ICU Supplemental Admission	\$500	\$1,000
Confinement Benefit (15 days per year)	\$100	\$200
ICU Supplemental Confinement	\$100	\$200
Newborn confinement (2 days per confinement)	\$25	\$50

Your monthly employee rates are outlined below:

	Low Plan Cost	High Plan Cost
Employee	\$10.47	\$20.72
Employee & Spouse	\$21.93	\$43.43
Employee & Child(ren)	\$16.67	\$33.02
Employee & Spouse/Child(ren)	\$28.14	\$55.72



## PET INSURANCE

## **Metlife/Amerilife Benefits**

**Group #238768** 

Provider: MetLife

Pets are a critical part of many employees' and their families' lives. They can provide much needed comfort and even make sure we get our daily exercise. But, if they get sick or have an accident and need veterinary care, the cost of potential life-savings procedures can be significant.

Sedgwick County provides a voluntary pet protection insurance option to help cover the cost of care and get you and your pet back on track.

Contact MetLife for a no obligation quote, and reference Sedgwick County for our discounted rates with savings up to This coverage can be purchased at any time through direct billing — no payroll deduction is available.

Phone Number: 1-800-GET-MET8

Website for a quote: <a href="https://www.metlife.com/getpetquote">https://www.metlife.com/getpetquote</a>

## New Hire Enrollment: Your Benefits!



Sedgwick County...
working for you



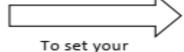
- Accident
- Critical Illness
- · Hospital Indemnity
- · Short Term Disability
  - Cancer
  - Pet Insurance

\*You MUST speak with a counselor within 30 days of your Date of Hire

How To Enroll in Your Benefits: Next Steps

All New Hires are required to set an appointment to waive or elect benefits

- Visit the benefit portal <a href="https://mybenefitsportal.com/sedgwickcounty/">https://mybenefitsportal.com/sedgwickcounty/</a> and review your benefit options.
- On the home page click "New Hire" or follow the QR code below to schedule an appointment with a benefit counselor.
- Click "I need to elect benefits or have questions about my current benefits –
   A Benefits Specialist will call you!"
- 5. Click "I need to enroll in Benefits"
- 6. Select a time that works for you and a benefit counselor will call you at the number you provide.



To set your appointment follow the QR Code!







## Employee Assistance Program (EAP)- EMPAC

#### www.empac-eap.com

When you or a household member need trusted, professional help, empac is just a phone call away. For more than 40 years, empac has been helping employees thrive in their personal and professional lives by providing caring and compassionate support.

Free, confidential, empac services include: phone, video, or in-person assistance with personal and professional needs such as:

- · Stress, depression, anxiety
- · Family and parenting concerns
- · Marital and relationship challenges
- Workplace conflicts
- Alcohol or drug dependency
- · Grief and loss

#### Work Life Services

- Financial consultation and resources for debt management and consolidation, identity theft, budgeting, and credit report information.
- Legal consultation with an attorney for issues relating to family law, estate planning, traffic citations, landlord conflicts, and many others
- Dependent care resources and referrals.
- Elder care resources and referrals.
- Self-help resources on a variety of topics via a member only website.
- · Monthly newsletters for employees and supervisors.

Get started. Make your free appointment.

316.265.9922 | 800.234.0630 | empac-eap.com

#### 12 Sessions per calendar year



## Deferred Compensation Plan 457-Empower

Jon Horning Retirement Plan Advisor: 316-350-6957 or jon.horning@empower.com https://jon\_horning.empowermytime.com/ Participant Services: 1-800-701-8255

Sedgwick County provides a 457 plan to benefit eligible employees who can contribute portions of their salary into their plan. Employees can choose to make contributions on either a pre-tax or a post-tax basis. If they choose the latter, the account compounds tax-free, essentially the same as a Roth IRA. If they opt for the pre-tax contributions, the plan money is not taxed until the employee withdraws their money.

Your Retirement Plan Advisor is available to provide you one-on-one counseling with personalized account services at no cost to you, such as:

- Enrollment
- Contributions
- · Retirement readiness
- Investment choices
- Account review
- Comparison of retirement plans
- Rollovers Consider all your options and their features and fees before moving money between accounts.

#### **New Employees**

## **Sedgwick County 457 Deferred Compensation Plan Automatic Enrollment Notice**

All newly hired full-time employees or newly eligible full-time employees will be automatically enrolled in the Sedgwick County 457 Plan. 1% of your gross pay will be deducted from your paycheck automatically each pay period and contributed to the Plan. Automatic deduction will increase by 1% automatically each year until a total of 6% is reached.

If you wish to contribute more than the standard 1%, you may elect to do so. If you do not want the automatic deduction you must opt out within 30 days of the date of the PIN letter you receive from Empower. If you do not opt out prior to this date, your first automatic deduction will be made.

# ONLINE access



For Active Members

#### **ENROLL NOW AT KPERS.ORG**

Sign up to track your membership and plan for retirement with your KPERS online account. First-time users need to enroll, but it only takes a few minutes.

#### **Click Member Login**



#### Click New User



#### **3 EASY STEPS**

- Confirm Your Identity
  Enter your name, Social Security number and date of birth.
- Create a User ID and Password

  Type your email address. This is your user ID. Then create a password. You can change your password once you login.
- Create Your Security Profile
  Choose your account image and unique phrase. Always make sure you see your correct image and phrase before entering your password. Next, choose your security questions and their answers. Then register your computer. This helps the system verify your information. If you login from a non-registered computer or forget your password, you'll need to verify your identity with your security questions.

#### **Protecting Your Info**

Your online account gives you secure access to all your account data. Enrollment lets us identify you and protects your personal information.

#### What You Can Do Online

Access your secure account for:

- Contributions and interest
- Service credit
- Membership date
- Final average salary
- Beneficiary designation
- Annual statements

#### **Personalized Benefit Estimator**

- Preloads your account info
- Shows your earliest retirement date
- Estimates your benefit and payment options
- Saves estimates for future use

#### **Questions?**

Email kpers@kpers.org Toll-free 1-888-275-5737 In Topeka 785-296-6166 kpers.org

6/23

## Vacation Leave, Sick Leave, Parental Leave, Holidays, Attestation, and Gym Membership

As a benefit eligible employee, you are eligible for paid leave in accordance to Sedgwick County policies.

#### **Vacation Leave**

Sedgwick County provides you with vacation leave accumulation per pay period based on how long you have been employed. For more information on procedures for usage, refer to policy 4.700, Vacation Leave.

#### 40 Hour employees:

- 0 to 5 years: 3.69 hours per paycheck
- 6 to 10 years: 4.61 hours per paycheck
- 11 to 15 years: 5.53 hours per paycheck
- 16 to 20 years: 6.46 hours per paycheck
- 21+ years: 7.38 hours per paycheck

#### **Sheriff 42.5 hour employees**

- 0 to 5 years: 3.92 hours per paycheck
- 6 to 10 years: 4.90 hours per paycheck
- 11 to 15 years: 5.88 hours per paycheck
- 16 to 20 years: 6.86 hours per paycheck
- 21+ years: 7.84 hours per paycheck

#### Fire District 40 hour employees

- 0 to 5 years: 3.69 hours per paycheck
- 6 to 10 years: 4.61 hours per paycheck
- 11 to 15 years: 5.53 hours per paycheck
- 16 to 20 years: 6.76 hours per paycheck
- 21+ years: 7.69 hours per paycheck

#### Fire District 56 hour employees

- 0 to 4 years: 4.61 hours per paycheck
- 5 to 9 years: 5.53 hours per paycheck
- 10 to 14 years: 6.46 hours per paycheck
- 15 to 19 years: 8.30 hours per paycheck
- 20 to 23 years: 9.23 hours per paycheck
- 24+ years: 10.15 hours per paycheck

#### **Emergency Medical 42 hour employees**

- 0 to 5 years: 3.87 hours per paycheck
- 6 to 10 years: 4.84 hours per paycheck
- 11 to 15 years: 5.81 hours per paycheck
- 16 to 20 years: 6.78 hours per paycheck
- 21+ years: 7.75 hours per paycheck

#### **Sick Leave**

Sedgwick County provides you with sick leave accumulation per pay period. Refer to policy 4.701, Sick Leave.

40 hour week: 3.69 hours

• 42 hour week: 3.87 hours

42.5 hour week: 3.92 hours

• 56 hour week: 5.53 hours

#### **Paid Parental Leave**

Sedgwick County provides you with the ability to bond with a child following birth, adoption, or foster care placement. Refer to policy 4.704, Paid Parental Leave.

#### **Paid Holidays Off**

- New Year's Day
- Martin Luther King
  - Day President's Day
- Memorial Day
- Juneteenth
- 4<sup>th</sup> of July
- Labor Day
- Veteran's Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Day

#### Sedgwick County's Contribution to Healthcare FSA or HSA - Exam Attestation

As an incentive for getting your FREE preventative physical, Sedgwick County will contribute to a Healthcare FSA or HSA on January 1, 2025. If you:

- Are enrolled in one of Sedgwick County's UnitedHealthcare Plans AND
- Have an annual physical exam from October 1, 2023 through September 30, 2024 AND
- Complete the preventative exam attestation on Eline, Employee Self Service (ESS), Benefits, Benefits Attestation Form no later than September 30, 2024.

If your spouse is enrolled in Sedgwick County's medical insurance and you wish to receive the maximum contribution, you both must have an annual physical exam and you must complete the online attestation on their behalf. The one-time annual amount that will be deposited into your account, the following January 1, is based off your medical coverage.

Single \$75 | Two-Person \$150 | Family \$220

#### **Gym Membership**

Gym membership reimbursement is an incentive program to benefit eligible employees. You can only apply for this during open enrollment. For more information and instructions, go to E-line, Human Resources, Benefits, Benefit Documents, Gym Membership Information.

## 2024 Pay Periods

Pay No.	Start Date	End Date	Pay Date
01 2024	12/17/23	12/30/23	01/05/24
02 2024	12/31	1/13	1/19
03 2024	1/14	1/27	2/2
04 2024	1/28	2/10	2/16
05 2024	2/11	2/24	3/1
06 2024	2/25	3/9	3/15
07 2024	3/10	3/23	3/29
08 2024	3/24	4/6	4/12
09 2024	4/7	4/20	4/26
10 2024	4/21	5/4	5/10
11 2024	5/5	5/18	5/24
12 2024	5/19	6/1	6/7
13 2024	6/2	6/15	6/21
14 2024	6/16	6/29	7/5
15 2024	6/30	7/13	7/19
16 2024	7/14	7127	8/2
17 2024	7/28	8/10	8/16
18 2024	8/11	8/24	8/30
19 2024	8/25	9/7	9/13
20 2024	9/8	9/21	9/27
21 2024	9/22	10/5	10/11
22 2024	10/6	10/19	10/25
23 2024	10/20	11/2	11/8
24 2024	11/3	11/16	11/22
25 2024	11/17	11/30	12/6
26 2024	12/1	12/14	12/20