# City of Akron Employee Benefits Guide

# 2020 BENEFITS

A NEW APPROACH TO HEALTHCARE

OPEN ENROLLMENT IS
NOVEMBER 4, 2019—NOVEMBER 22, 2019

YOU MUST ENROLL ONLINE BY FRIDAY, NOVEMBER 22, 2019, AT 6 P.M.



### A NEW APPROACH TO HEALTHCARE

<b>WHAT'S HAPPENING IN 20</b>	)20 <b>?</b>		
Paladina Health  New for 2020!	Paladina Health is a direct primary care program offering patient-focused care and lower costs. In 2020, you'll have the option to choose Paladina Health as your Primary Care provider. This is not required and does NOT replace Medical Mutual. You'll still have access to the same health plan and benefits. See page 7 for details.		
Flexible Spending Account New for 2020!	Health Care and Dependent Care Flexible Spending Accounts offer you the opportunity to be reimbursed for health-related and dependent-care related expenses on a pre-tax basis! See page 8 for details.		
Online Enrollment New for 2020!	All employees <u>must</u> complete enrollment this year using the new online enrollment system, even if you are not making any changes. Enrollers will be available to assist each employee. Someone in your division will contact you to get scheduled with an enroller.		
Employee Contributions for Medical	Per Pay         Per Month           Single         \$13.75         \$55           Family         \$27.50         \$110		
Medical Mutual	The City will continue to offer you one competitive Medical plan with low out-of-pocket costs, administered by Medical Mutual. Review changes to benefits on page 9.		
CVS Caremark	The City will continue to offer a Prescription Drug plan with competitive copays and a broad network. There are changes to copays, the formulary and how to fill 90-day maintenance medications. See page 10 for details.		
Dental	There are no changes to your Dental plan through Guardian. See page 11 for the dental benefit summary.		
Vision	There are no changes to your Vision plan through Medical Mutual. See page 12 for the vision benefit summary.		
Life Insurance	Life insurance is administered through MedMutual Life. Guaranteed Issue Opportunities during this Open Enrollment only! Please review the life insurance information on page 13.		
AFLAC Benefits New for 2020!	NEW voluntary benefits through Aflac will be offered during open enrollment! These plans will replace the Aflac and Unum plans made available in the past. See page 14 for details.		
Open Enrollment Information Meetings	The Employee Benefits Division is hosting Open Enrollment meetings. See page 15 for a list of meetings. Can't attend a meeting? A video will be available after November 4, 2019 at <a href="https://www.mycityofakronbenefits.com">www.mycityofakronbenefits.com</a> .		

# BENEFITS

### IT'S DECISION TIME

#### Benefit decisions are important for you and your family.

That's why all employees must complete the Open Enrollment process this year. The City is switching to an electronic, online enrollment system for the first time, and we need all employees to log in and verify their information and complete the enrollment process.

### \$150 SPOUSAL SURCHARGE: DOES IT APPLY TO YOU?

#### Situations when the surcharge would apply:

- The employee does not return the Spousal Provision Form.
- Spouse is offered employer sponsored coverage that does not meet the waiver criteria and spouse does not elect that coverage and remains on the City of Akron plan as primary.

#### Situations when the surcharge would NOT apply:

- The spouse does not work, or works but is not offered or not eligible for benefits.
- The spouse has primary coverage at his/her place of employment and is enrolled in the City of Akron plan on a secondary coordination of benefit basis (Medical Only). The City does not pay secondary on prescriptions.
- A spouse whose employer charges monthly single contributions greater than or equal to \$150 can remain on the City's plan without the surcharge. If the employer offers multiple plans with lower contributions, then the \$150 spousal surcharge would apply regardless of plan selected.
- A spouse whose net single deductible is greater than or equal to \$1,000 can remain on the City's plan without surcharge. If the employer offers multiple plans with a net deductible lower than \$1,000, then the \$150 spousal surcharge would apply.

#### **REQUIRED SPOUSAL FORMS**

Employee must complete and return the Spousal Provision Form by November 22, 2019. If the spouse is working, spouse must provide a completed and signed Spouse's Employer Certification of Coverage and, if applicable, must submit all plan designs (SBC's) and all employee contributions. See the Spousal Form for more details.

#### **IMPORTANT REMINDERS**

If you enroll your lawful spouse on the Medical and Prescription plan, you must complete and return the Spousal Provision form.

#### **ELIGIBLE EMPLOYEE**

To be eligible for the City of Akron's Employee Benefits Program, you must be a permanent full-time active employee who has met the eligibility period requirements.

Eligible employees must make their benefit elections by November 22, 2019, for a January 1, 2020, effective date.

#### **ELIGIBLE DEPENDENTS**

- Your Lawful Spouse.
- Your Child under age 26. A child is defined as natural child, stepchild, adopted child, or child for whom the employee has legal guardianship or legal custody.
- · Your disabled child age 26 or older.

#### **BENEFIT CHANGES**

Benefit changes are generally limited to Open Enrollment. There are a few exceptions to this rule. Change in family status rules allow you to make some related benefit changes during the plan year due to a Qualifying Life Event, such as marriage, birth of a child, etc.

Qualifying Life Events must be reported within 31 days of the event. Failure to report changes in a timely manner may result in a delay of coverage until the next Open Enrollment period.

#### **NEW DEPENDENTS?**

If you're enrolling dependents for the first time, remember to submit required documentation.

- Spouse: Marriage Certificate and one form of documentation establishing current marital status such as jointly filed tax return, joint mortgage/lease, joint bank account, etc.
- Dependent Child Under 26: Birth certificate or adoption decree naming the employee or employee's lawful spouse as the parent OR copy of court order naming the employee as the child's legal guardian or custodian
- Disabled Dependent: Birth certificate or adoption decree naming the employee or employee's lawful spouse as the parent OR copy of court order naming the employee as the child's legal guardian or custodian <u>and</u> Disability Verification Form

Documents are only required if you are adding a new dependent during this Open Enrollment.

### **Your Top Three Tasks for Open Enrollment**

- Schedule an appointment with an enroller to review and make changes to your benefit elections by November 22, 2019.
- Review your dependent and beneficiary information and update if necessary.
- Print a copy of your benefit elections for your records. If you cannot print a copy, not a problem. All employees will receive a Confirmation Statement mailed to their home once Open Enrollment is completed.

# How to Enroll

### YOUR 2020 BENEFITS

#### **4 Simple Steps:**

**Meet with an Enroller** Your division will schedule you with an enroller who will assist you with the online enrollment process and help answer some questions.

**Login** Your Social Security Number OR your 5 digit Employee ID and PIN are your credentials. PINs are defaulted to the last four digits of your social plus the last two digits of your birth year. See example below.

You can update/change your password by selecting "Change My PIN" from the "You & Your Family" drop down.

Please remember your password for future changes or enrollments.

Note: Employees will be required to provide an e-mail address with the initial login.

Login Page: https://www.aflacatwork.com/cityofakron

Example: Jane Smith, 123-45-6789, Employee ID 12345, DOB 01/01/1975

Login: 123456789 or 12345

PIN: 678975

**Review/Elect Benefits** By using the "Next" button, you will be taken through each phase of the enrollment process. ALL EMPLOYEES MUST REVIEW AND CONFIRM BENEFIT ELECTIONS AND DEPENDENTS.

**Sign & Submit** On the Sign & Submit page, enter your PIN to finalize the enrollment. Once you see the "Congratulations!" on the screen, the enrollment is complete.

You can print a copy of your benefit summary for your records. A benefit summary will be printed and mailed to all employees at the end of Open Enrollment.

# BENEFITS

### A NEW APPROACH TO HEALTHCARE

#### Healthcare is complicated today.

Our new approach lessens that complexity and keeps the focus on YOU! For 2020, we are rolling out a new Direct Primary Care Program through **Paladina Health** to help you navigate the complex healthcare system.



# PALADINA HEALTH

### PRIMARY CARE PROGRAM FOR CITY OF AKRON EMPLOYEES

As part of the City of Akron's continued commitment to the health and well-being of our employees, we are expanding our current benefit offerings to include Direct Primary Care with Paladina Health!

Paladina Health is a unique health care program that is available as part of the medical benefit. Eligible employees and dependents must have



primary medical coverage with the City of Akron to enroll. The program offers unlimited primary care services to you and your family, through Paladina Health providers, at little to no cost to you.

By using primary care as a "one-stop shop" for your health, <u>Paladina Health providers can treat up to 90% of your health care needs in one place</u>, including primary and preventive care, chronic conditions, urgent needs, and specialty referrals.

#### With Paladina Health you can:

- Save money Most services are at little to no cost with no co-pays and no co-insurance.
- Avoid expensive trips to Urgent Care Your provider is available via phone 24/7 for all urgent medical needs.
- Save time Complete lab work and fill some prescriptions onsite and wait an average of less than 4 minutes for the start of your appointment.

#### Starting on November 1, 2019, you and your family will be eligible to enroll in Paladina Health.

After enrolling, you can schedule an appointment at any Northeast Ohio area clinic:

Akron West Market Street 400 W Market St Akron, OH 44303 [Adjacent to the I Promise School]	Seven Hills Lombardo 5700 Lombardo Ctr Independence, OH 44131
Akron White Pond Drive 789 White Pond Dr Akron, OH 44320	Beachwood Science Park 25700 Science Park Drive, Suite 120 Beachwood, OH 44122
North Canton Lauby Road 5399 Lauby Rd, Suite 220 North Canton, OH 44720	Mentor Great Lakes Plaza 22801 St Clair Avenue Euclid, OH 44117
	Avon Sheffield 5445 Detroit Rd Sheffield Village, OH 44054

**How to Enroll:** To take advantage of the **Paladina Health** program, you can enroll the following ways:

Online: www.paladinahealth.com/enroll

Phone: 866-808-6005 (Select option 3)

Paper: Download a paper enrollment form on www.mycityofakronbenefits.com

**Questions?** Please email <a href="mailto:memberservices@paladinahealth.com">memberservices@paladinahealth.com</a> or call 866-808-6005. Additional information is also available on the Paladina Health website at <a href="https://www.paladinahealth.com">www.paladinahealth.com</a>.

# NEW for 2020 FLEXIBLE SPENDING ACCOUNTS

Flexible Spending Accounts (FSA) are benefit programs that allow you to use your pre-tax dollars to pay for eligible healthcare and dependent care expenses. TASC (FlexSystem) will be administering the FSA in 2020.

#### HEALTH CARE FLEXIBLE SPENDING ACCOUNT

A Health Care FSA is a pre-tax benefit account used to pay for eligible out-of-pocket healthcare expenses.

- Eligible contributions will be deducted from your paycheck on a pre-tax basis and placed into a separate account.
- Eligible expenses include copayments, deductibles, dental, and vision expenses not covered by existing insurance.
- You elect the amount you would like in your FSA during Open Enrollment. Those
  funds are then available on January 1, 2020, and can be accessed using a debit
  card that will be provided to you by TASC.

2020 MAXIMUM HEALTH CARE FSA CONTRIBUTION

\$2,700

#### DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT

A Dependent Care FSA is a pre-tax benefit account used to pay for eligible dependent care services so you (or your spouse) can work, look for work or attend school full time.

- Eligible contributions will be deducted from your paycheck on a pre-tax basis and placed into a separate account.
- Eligible expenses include preschool, summer day camp, before or after school programs, and child or adult care.
- You elect the amount you would like in your Dependent FSA during Open Enrollment.

With each paycheck, money will be deposited into your Dependent Care FSA account. Dependent Care FSAs are not preloaded like a Health FSA. The amount available is what has been accrued at the time of your claim request.

2020 MAXIMUM
DEPENDENT CARE FSA
CONTRIBUTION

\$5,000

#### **Rules you need to know**

Expenses: MUST be incurred between January 1, 2020 and December 31, 2020, plus the grace period.

**Grace Period:** If you have funds left over as of December 31, 2020, you will have up through March 16, 2021 to incur additional expenses.

Reimbursements: All expenses must be submitted to TASC for reimbursement no later than March 31, 2021.

<u>USE IT OR LOSE IT:</u> Plan very carefully! If you do not incur the anticipated expenses, <u>your contributions are</u> forfeited at the end of the year.

For more information regarding FSAs, please review IRS Publications 502 & 503 or contact Employee Benefits.

# MEDICAL 2020 PLAN COVERAGE



Medical Benefit Summary Benefit Period January 1, 2020 through December 31, 2020			
		In-Network	Out-of-Network
Deductible	Single	\$150	\$300
	Family	\$300	\$600
Coinsurance		20%/80%*	30%/70%*
Out-of-Pocket Maximum			
(includes deductible, medical copays, and rx	copays)		
	Single	\$1,500	\$3,000
	Family	\$3,000	\$6,000
Office Visit	PCP Specialist	\$15 \$40	30%/70%* 30%/70%*
Office Visit - Preventive/Routine services ONLY		100%	30%/70%*
Emergency Room (waived if admitted)		\$125	\$125
Non-Emergency use of Emergency Room		\$200 copay, then 20%/80%*	\$200 copay, then 30%/70%*
Urgent Care		\$45	30%/70%*
Diagnostic Lab, X-Ray, and Medical Tests		20%/80%*	30%/70%*
Employee Premiums		Per Pay	Monthly
Single		\$13.75	\$55.00
Family		\$27.50	\$110.00

### To find a Provider: Go to medmutual.com

- Click on Find Now under "Find a Doctor."
- Click on 2020 Plans under "Just Looking Around?"
- Click on Group
- Under Available Network, Click on SuperMed PPO
- Select Provider
   Type, enter your
   zip code, and Click
   Search Providers
- On previous screen you can search by Provider Name or Specialty.

For the family deductible and coinsurance out-of-pocket maximum, one individual on the plan will never pay more than the Single Deductible/Out-of-Pocket maximum, and the whole Family combined will never pay more than the Family Deductible/Out-of-Pocket maximum. As of January 1, 2020, out-of-Pocket maximum will include medical copays and Rx copays in addition to coinsurance and the deductible.

Office visit copayments are based on the type of provider that performs the office visit. PCP (Primary Care Physician) is a practitioner that specializes in general practice, family practice, internal medicine, obstetrics and gynecology (OB/GYN), psychiatry, psychology, and certain licensed counselors. Specialists are practitioners, other than a Primary Care Physician, who provide services within a designated specialty area of practice such as dermatologists, cardiologists, chiropractor, endocrinologist and podiatrists to name a few.

<sup>\*</sup>After Deductible

# **PRESCRIPTION**

### 2020 PLAN COVERAGE



CVS Caremark Copays			
	Retail	Retail CVS Pharmacies Only	Mail Order
Day Supply	34 Days	90 Days	90 Days
Generic	\$10 copay	\$20 copay	\$20 copay
Preferred Brand	\$20 copay	\$40 copay	\$40 copay
Non-Preferred Brand	\$40 copay	\$80 copay	\$80 copay
Specialty Drugs	\$50 copay	n/a	n/a
Non-Preferred ED Drugs	\$50 copay	n/a	n/a
Prilosec OTC **	\$10 copay	n/a	n/a
Claritin OTC **	\$10 copay	n/a	n/a
Nexium	\$100 copay	\$200 copay	\$200 copay

<sup>\*\*</sup>In order to be charged the \$10 copay for these medications, you must have your doctor write a prescription for the medication and present it to the pharmacy like any other prescription.

<u>Advanced Control Formulary</u>: *NEW IN 2020.* The Formulary, or list of covered medications, is changing effective 1/1/2020. Some medications may be excluded on the new formulary or may have a different copay. CVS will notify any member who will be directly impacted by the new formulary changes to discuss alternate medication options.

Mandatory Maintenance Choice: NEW IN 2020. Effective January 1, 2020, all maintenance meds must be filled in 90-day supplies through CVS Mail Order or at a CVS Retail Pharmacy. It's easy to get enrolled in the CVS Mail Order prescription program. Employees can complete the Mail Order Form and submit it with a 90-day prescription from their physician. Mail order forms are available at <a href="https://www.mycityofakronbenefits.com">www.mycityofakronbenefits.com</a> or in the Employee Benefits Office.

<u>Specialty Medications</u>: Specialty medications will be supplied by CVS Specialty pharmacy. See the CVS Specialty document that is available at <u>www.mycityofakronbenefits.com</u> or in the Employee Benefits Office.

<u>Quantity and Duration limitations</u>: Some medications are only covered up to a certain limit. If your medication has a quantity limit, you, your doctor, or your pharmacist can call CVS Caremark at (888) 202-1654 to begin the review process.

# DENTAL 2020 PLAN COVERAGE



Your dental coverage is currently through Guardian and the dental network is Dental Guard Preferred. Network dentists agree to accept Guardian's usual, customary & reasonable (UCR) amounts as payment in full for covered services. Non-network dentists will bill you for any difference in cost between the Guardian scheduled amount and the dentist's fee. This is called balance billing. Please utilize network dentists to receive the higher level of benefits and to avoid balance billing. Frequency limitations apply to certain services.

You can visit www.guardiananytime.com to locate a Guardian dentist in the Dental Guard Preferred Network, or call Guardian Customer Service at the number on your ID Card. Go to www.mycityofakronbenefits.com for additional resources regarding your dental benefits.

Dental Benefit Summary			
Benefit Period January 1, 2020 through December 31, 2020			
	PPO		
Dental Benefit Provision	Network	Non-Network	
Calendar Year Deductible (Single/Family)	NONE		
Class I – Preventive			
Oral Exams, Prophylaxis (dental cleaning), Bitewing X-rays, Full Mouth X-Rays, Sealants	100%	100% of UCR	
Class II - Basic			
Fillings (one surface), General Anesthesia, Scaling & Root Planing (per quadrant), Simple Extractions	100%	100% of UCR	
Class III - Major			
Dentures, Single Crowns, Implants	60%	60% of UCR	
Class IV - Orthodontic Procedures	60%	60% of UCR	
Orthodontic Lifetime Maximum	\$2,500		
Annual Yearly Maximum (Per Person)	\$1,500		

# VISION 2020 PLAN COVERAGE



Your vison provider continues to be Medical Mutual. You may receive services at any provider for vision services. Certain frequency limits may apply to the services listed below.

Vision Plan			
Benefit Period January 1, 2020 through December 31, 2020.			
Examinations (one per Benefit Period)	\$50 Allowance		
Lenses (per pair, one pair per Benefit Period) Single Vision Bifocal Trifocal Lenticular	\$40 Allowance \$60 Allowance \$76 Allowance \$92 Allowance		
Contact Lenses  After cataract surgery For visual acuity not correctable to 20/70 in conventional lenses Other contacts	\$116 Allowance the better eye by use of \$116 Allowance \$60 Allowance		
Frames (per frame, one frame per every Two Benefi	t Periods) \$60 Allowance		

#### **Vision Benefit Limitations:**

No benefit will be made for expenses incurred for:

- Medical or surgical treatment of the eye.
- Lenses which are not medically necessary and are not prescribed by an Optometrist or Ophthalmologist, or frames for such lenses.
- Sunglasses, whether or not prescribed.
- Replacement of lenses unless an examination shows that, using the existing prescription, a visual defect
  equal to at least one-half of one diopter in strength exists or a change of at least 10% in axis for astigmatism is required.
- Care not listed in the schedule.
- Tinted lenses prescribed by the examiner when over Rose Tints No. 1 or No. 2.
- Charges for the excess cost of lenses over 65 millimeters in diameter.

# LIFE INSURANCE

### 2020 PLAN COVERAGE

#### **Basic Life Insurance**

The City of Akron provides all permanent full-time active employees with \$50,000 of Basic Life & Accidental Death and Dismemberment (AD&D) at no cost to you!

#### Optional Life Insurance

MedMutual Life is offering a special opportunity during this Open Enrollment for employees to elect Optional Life Insurance on a Guaranteed Issue Basis.

During the 2020 Open Enrollment, employees and their dependents may apply for Optional Life amounts, up to the Non-Medical Maximums listed below, without providing Evidence of Insurability.

#### Non-Medical Maximum:

Employee: \$250,000 Spouse: \$25,000 Child: \$10,000

Evidence of Insurability will be required for any elected Optional Life amount that exceeds the Non-Medical Maximums listed above and for employees who have previously had an application for Optional Life declined.

Optional Employee Life Insurance may be elected in \$10,000 increments up to 5 times your basic annual earnings (rounded to the next higher \$10,000) not to exceed \$500,000.

Optional Life Insurance coverage is available for spouse and dependent children as long as the employee elects Optional Life Insurance.

- ⇒Optional Spouse Life Insurance: available in \$5,000 increments, amount cannot exceed 50% of the employee elected amount.
- ⇒Optional Child Life Insurance: available in choice of \$5,000 or \$10,000, dependent coverage includes unmarried children from live birth through age 25, insurance rates cover ALL of your dependent children for one price (you do not multiply the rate by the number of children). Amount cannot exceed 50% of the employee elected amount.

Rates for the Optional Life Insurance are available at www.mycityofakronbenefits.com or contact Employee Benefits.

For Optional Life rate sheets, Evidence of Insurability Forms, and other information please visit: www.mycityofakronbenefits.com

## Voluntary Benefits Affac.



### Aflac 2020 BENEFITS

The City of Akron is excited to announce that we will be offering new voluntary benefits through Aflac! These plans will replace the Aflac and Unum plans that have been available in the past.

Highlights of the new plans:

- Guaranteed-Issue employees cannot be declined coverage
- More affordable than most of the old Aflac & Unum plans
- Portable take coverage with you when you leave employment
- Benefits paid directly to you as the policyholder

#### **Benefits Available**

#### Short-Term Disability

- Paycheck insurance pays you for lost income while unable to work for up to 6 months
- Benefits begin after you've been unable to work at least 14 days
- Covers illness, pregnancy, routine surgeries, off-the-job accidents

#### Accident

- Covers treatment for injuries on & off the job
- Dependent coverage also available
- \$50 claim check for routine annual exams for each person covered

#### Critical Illness

- Covers Catastrophic Illnesses: Cancer, Heart Attack, Stroke, Organ Failure & many more
- Choose \$5,000 \$30,000 in Coverage for employees no medical questions asked!
- Spouses are eligible for a benefit that is 50% of the employee amount
- Children are covered on this plan at no additional cost!

#### Whole Life Insurance

- Guaranteed-Issue (no medical questions) up to \$150,000 for employees
- Builds cash value and pays a benefit to your beneficiary at time of death

Benefit enrollers will be onsite during Open Enrollment to explain the new Aflac benefits and get you enrolled.

To schedule a meeting or if you have questions about enrollment: call Andy Stein, The Worksite Group, at 614-987-0193

### **Open Enrollment Meeting Schedule**

The Employee Benefits Division will be hosting a series of Open Enrollment information meetings.

Please plan to attend and have your benefit questions answered!

Employees should obtain permission from their supervisor before attending a meeting.

In addition to the group meetings, all employees will have the opportunity to meet with an enroller who will help you get enrolled in the new on-line enrollment system. Someone from your division will contact you to schedule you to meet with an enroller.

DATE	TIME	LOCATION	
November 5, 2019	11am-12pm	Ocasek Auditorium, 161 S. High Street	
November 5, 2019	1pm-2pm	Ocasek Auditorium, 161 S. High Street	
November 6, 2019	11am-12pm	Ocasek Auditorium, 161 S. High Street	
November 6, 2019	1pm-2pm	Ocasek Auditorium, 161 S. High Street	
November 7, 2019	11am-12pm	Ocasek Auditorium, 161 S. High Street	
November 7, 2019	1pm-2pm	Ocasek Auditorium, 161 S. High Street	
November 12, 2019	2pm-3pm	2460 Akron Peninsula Rd.	
November 13, 2019	10am-11pm	220 S. Balch St.	
November 13, 2019	1pm-2pm	1460 Triplett Blvd. Conference Room B, Second Floor	
November 13, 2019	2:30pm-3:30pm	1460 Triplett Blvd. Conference Room B, Second Floor	
November 14, 2019	7:30am-8:30am	2460 Akron Peninsula Rd.	
November 14, 2019	2pm-3pm	1570 Ravenna Rd, Kent Water Plant	
November 19, 2019	7am-8am	1460 Triplett Blvd. Conference Room B, Second Floor	
November 20, 2019	8am-9am	2460 Akron Peninsula Rd.	
November 20, 2019	11am-12pm	1460 Triplett Blvd. Conference Room B, Second Floor	
November 20, 2019	1pm-2pm	1460 Triplett Blvd. Conference Room B, Second Floor	

### ■ IMPORTANT CONTACT INFORMATION

Program	Provider	Group Number	Website	Phone
Medical	Medical Mutual	500878	medmutual.com	877-328-6664
Prescription	CVS Caremark	RX1896 (Group #) 004336 (RxBin)	caremark.com	888-202-1654
Dental	Guardian	434378	guardiananytime.com	800-541-7846
Vision	Medical Mutual	500878	medmutual.com	800-362-5729
Life	MedMutual Life	500878	medmutuallife.com	866-925-2542
Direct Primary Care	Paladina Health	N/A	paladinahealth.com	866-808-6005
Flexible Spending Account	TASC	N/A	tasconline.com	800-422-4661
Voluntary Benefits	AFLAC	25873	aflacgroupinsurance.com	800-433-3036
Employee Assistance Program	Ease@Work	N/A	easeatwork.com Username: Akron Password: EASE	800-521-3273
Employee Benefits Office	166 S. High St Room 703 Akron, OH 44308	N/A	mycityofakronbenefits.com	330-375-2700 Fax: 330.375-2239 benefits@akronohio.gov