

2021 City of Akron Employee Benefits Guide



DANIEL HARRIGAN, MAYOR

Open Enrollment begins Monday, November 9, 2020 and ends Friday, November 20, 2020. This is your opportunity to enroll or make changes to your benefit elections for 2021.

If you do not want to make any changes, your current benefit elections will remain the same for the following benefit year, 2021, with the exception of Flexible Spending Accounts. You must re-enroll for Flexible Spending Accounts each year. If you cover a spouse on the Medical/Prescription plan, you must complete and return the Spousal Provision Form no later than Friday, December 11, 2020. See details on page 5.

This enrollment guide provides information on benefit changes, the enrollment process, and where to go for additional information. Details are available at www.mycityofakronbenefits.com



Visit the Employee Benefits Division Website!

www.mycityofakronbenefits.com

Visit this site to access additional Open Enrollment materials, download forms, and to learn more about your Open Enrollment benefit options.

All enrollments and changes made to the Employee Benefit Program, Optional Life or Aflac benefits during this Open Enrollment period will take effect January 1, 2021.

If you are making any changes, you must return the Enrollment/Change Form by Friday, November 20, 2020.

If you cover a spouse on the Medical/Prescription plan, you must return the Spousal Provision Form by Friday, December 11, 2020.



This is a summary of benefit information and does not guarantee benefits. It is not intended as a detailed overview of benefits. Some limitations and/or exclusions may apply.

Overview of programs for 2021

<p>If you want to make changes</p>	<p>If you want to make changes, you must complete and return the Enrollment/Change form available at www.mycityofakronbenefits.com. If you do not want to make any changes, your current benefit elections will remain the same for the following benefit year, with the exception of Flexible Spending Accounts. You must re-enroll for Flexible Spending Accounts each year. If you cover a spouse on the Medical/Prescription plan, you must complete and return the Spousal Provision Form no later than Friday, December 11, 2020.</p>									
<p>Employee Contributions for Medical</p>	<table border="1"> <thead> <tr> <th></th> <th><u>Per Pay</u></th> <th><u>Per Month</u></th> </tr> </thead> <tbody> <tr> <td>Single</td> <td>\$15.00</td> <td>\$60.00</td> </tr> <tr> <td>Family</td> <td>\$30.00</td> <td>\$120.00</td> </tr> </tbody> </table>		<u>Per Pay</u>	<u>Per Month</u>	Single	\$15.00	\$60.00	Family	\$30.00	\$120.00
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Single	\$15.00	\$60.00								
Family	\$30.00	\$120.00								
<p>Flexible Spending Account</p>	<p>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! YOU MUST RE-ENROLL annually by completing the Enrollment/Change form for 2021. See page 6 for details.</p>									
<p>Paladina Health</p>	<p>Paladina Health is a direct primary care program offering patient-focused care and lower costs. You have the option to choose Paladina Health as your Primary Care provider. You can enroll at any time! See page 7 for details.</p>									
<p>Medical Mutual</p>	<p>The City will continue to offer one Medical plan with low out-of-pocket costs, administered by Medical Mutual. There are no benefit changes for the 2021 benefit year. See page 8 for plan details.</p>									
<p>CVS Caremark</p>	<p>The City will continue to offer a Prescription Drug plan administered by CVS Caremark. There are no copay changes for the 2021 benefit year. See page 9 for plan details.</p>									
<p>Dental</p>	<p>There are no changes to your Dental plan through Guardian. See page 10 for the dental benefit summary.</p>									
<p>Vision</p>	<p>There are no changes to your Vision plan through Medical Mutual. See page 11 for the vision benefit summary.</p>									
<p>Life Insurance</p>	<p>Life insurance is administered through MedMutual Life. See page 12 for your life insurance enrollment opportunities.</p>									
<p>AFLAC Benefits</p>	<p>Optional benefits will continue to be offered through Aflac on a guarantee issue basis. See page 13 for details.</p>									
<p>Open Enrollment Information</p>	<p>To download forms and for additional information regarding Open Enrollment please visit, www.mycityofakronbenefits.com/virtualbenefitfair.</p>									

HOW TO ENROLL OR MAKE CHANGES YOUR 2021 BENEFITS

Forms and Documents Required for this Open Enrollment:

- ♦ ***Open Enrollment Form January 1, 2021*** Forms are available at www.mycityofakronbenefits.com, from your manager, or e-mail your request to benefits@akronohio.gov. Forms only need to be returned if you are making changes or wish to enroll in Flexible Spending Accounts for 2021.
- ♦ ***Spousal Provision Form*** Form must be returned if you currently cover a spouse or are adding a spouse on the Medical/Prescription plan.
- ♦ ***MedMutual Optional Life Insurance Application*** Form needs to be returned only if you are increasing or newly electing the Optional Life Insurance with MedMutual.
- ♦ ***Life Insurance Beneficiary Form*** Form needs to be returned only if you want to change your life insurance beneficiary.

Documents for dependent coverage (if you are adding a new dependent at Open Enrollment):

Spouse—copy of marriage certificate and proof establishing current marital status. See page 4 for details.

Child—copy of birth certificate, adoption papers, or court document awarding custody. See page 4 for details.

Enrollment/Change Forms must be returned by 4:30 p.m. on Friday November 20 , 2020.

Spousal Provision Forms must be returned by 4:30 p.m. Friday December 11, 2020.

Forms can be mailed, faxed, or e-mailed to:

***City of Akron
Employee Benefits Division
166 South High Street, Room 703
Akron, Ohio 44308***

***Fax to (330) 375-2239
E-mail to benefits@akronohio.gov***

In person visits or delivery of forms are by appointment only.

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 or changes during this open enrollment for a January 1, 2021, effective date. If you do not enroll or make changes during this Open Enrollment period, you must wait until the next Open Enrollment period unless you experience a Qualifying Life Event. If you experience a Qualifying Life Event (i.e., birth or adoption of a child, marriage, divorce, loss of other coverage, etc.), **you must report changes within 31 days of the Qualifying Life Event.**

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.

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 and Disability Verification Form

Documents are only required if you are adding a new dependent

BENEFIT CHANGES AFTER OPEN ENROLLMENT

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

Qualifying Life Events must be reported to the Employee Benefits Division 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.

SPOUSAL PROVISION

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

\$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 spouse 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 Friday, December 11, 2020.

If the spouse is working (even if they are not offered benefits), the 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 plan contribution rates. See the Spousal Form for more details.

FLEXIBLE SPENDING ACCOUNTS

Enrollment required annually to participate each year!

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 continue to be the administrator of the FSA in 2021.

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, 2021, and can be accessed using a debit card that will be provided to you by TASC.

**2021 MAXIMUM
HEALTH CARE FSA
CONTRIBUTION**

\$2,750

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.

**2021 MAXIMUM
DEPENDENT CARE FSA
CONTRIBUTION**

\$5,000

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.

Rules you need to



Expenses: MUST be incurred between January 1, 2021 and December 31, 2021, plus the grace period.

Grace Period: If you have funds left over as of December 31, 2021, you will have up through March 15, 2022 to incur additional expenses.

Reimbursements: All expenses must be submitted to TASC for reimbursement no later than March 31, 2022.

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

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

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 continuing to offer 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, Paladina Health providers can treat up to 90% of your health care needs in one place, 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.

You and your family can enroll in Paladina Health at any time.

After enrolling, you can schedule an appointment with the clinic you enrolled with:

Akron West Market Street 400 W Market St Akron, OH 44303 <i>[Adjacent to the I Promise School]</i>	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 memberservices@paladinahealth.com or call 866-808-6005. Additional information is also available on the Paladina Health website at www.paladinahealth.com

MEDICAL 2021 PLAN COVERAGE



Medical Benefit Summary

Benefit Period January 1, 2021 through December 31, 2021

	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 co-pays)		
Single	\$1,500	\$3,000
Family	\$3,000	\$6,000
Office Visit		
PCP	\$15	30%/70%*
Specialist	\$40	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	\$15.00	\$60.00
Family	\$30.00	\$120.00

*After Deductible

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. Out-of-Pocket maximums 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.

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

- ◆ Click on “Find a Doctor.”
- ◆ Click on Group, click Next.
- ◆ Click on your plan year, then click on Medical.
- ◆ Under Choose a Network, Click on SuperMed PPO. Enter your location, and click Next.
- ◆ Search by doctor name or place, or browse by type.

PRESCRIPTION 2021 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

**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.

Mandatory Maintenance Choice: All maintenance medications 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 www.mycityofakronbenefits.com or in the Employee Benefits Office.

Specialty Medications: Specialty medications are supplied by CVS Specialty pharmacy. See the CVS Specialty document that is available at www.mycityofakronbenefits.com or in the Employee Benefits Office.

Quantity and Duration limitations: 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 2021 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, 2021 through December 31, 2021		
	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		
Orthodontic Lifetime Maximum		\$2,500
Annual Yearly Maximum (Per Person)		\$1,500

VISION 2021 PLAN COVERAGE



Your vision 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, 2021 through December 31, 2021.	
Examinations (one per Benefit Period)	\$50 Allowance
Lenses (per pair, one pair per Benefit Period)	
Single Vision	\$40 Allowance
Bifocal	\$60 Allowance
Trifocal	\$76 Allowance
Lenticular	\$92 Allowance
Contact Lenses	
After cataract surgery	\$116 Allowance
For visual acuity not correctable to 20/70 in the better eye by use of conventional lenses	\$116 Allowance
Other contacts	\$60 Allowance
Frames (per frame, one frame per every Two Benefit 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 2021 PLAN COVERAGE

Basic Life Insurance

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

Optional Life Insurance

In addition to the Basic Life and AD&D, employees may elect Optional Life Insurance. 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 for him/her self.

- ⇒ Optional Spouse Life Insurance: available in \$5,000 increments, amount cannot exceed 50% of 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 employee elected amount.

For employees currently enrolled with Optional Life Insurance, you may increase your benefits by one increment of \$10,000 up to five (5) times your annual salary or a maximum \$250,000, whichever is less, on a Guarantee Issue basis. This is only available during Open Enrollment .

If you wish to increase more than \$10,000 or for more than the Guaranteed Issue amount, you must submit Evidence of Insurability to MedMutual Life and be approved prior to any increases taking effect. Rates for the Optional Life Insurance are available at www.mycityofakronbenefits.com.

If you were eligible last year and did not elect optional life, you may elect optional life this year but must provide Evidence of Insurability and be approved by MedMutual Life.

Evidence of Insurability forms may be obtained at www.mycityofakronbenefits.com or in the Employee Benefits Office.

***For Optional Life rate sheets, Life Insurance Enrollment Form, Evidence of Insurability Form, and other information please visit:
www.mycityofakronbenefits.com***

Optional Benefits

Aflac 2021 BENEFITS



The City of Akron offers optional benefits through Aflac. Below are some highlights of the plans:

- *Guaranteed Issue—employees cannot be declined coverage*
- *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

If you are currently enrolled in these benefits, there is nothing you need to do. If you would like to add coverage or make any changes to your current coverage, you can schedule an appointment with the benefit counselors. Go to this link to set a time convenient for you:

<https://openenrollmentschedule.as.me/>

If you have questions about enrollment or any of the policies, call The Worksite Group:
614-987-0193


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
Optional 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