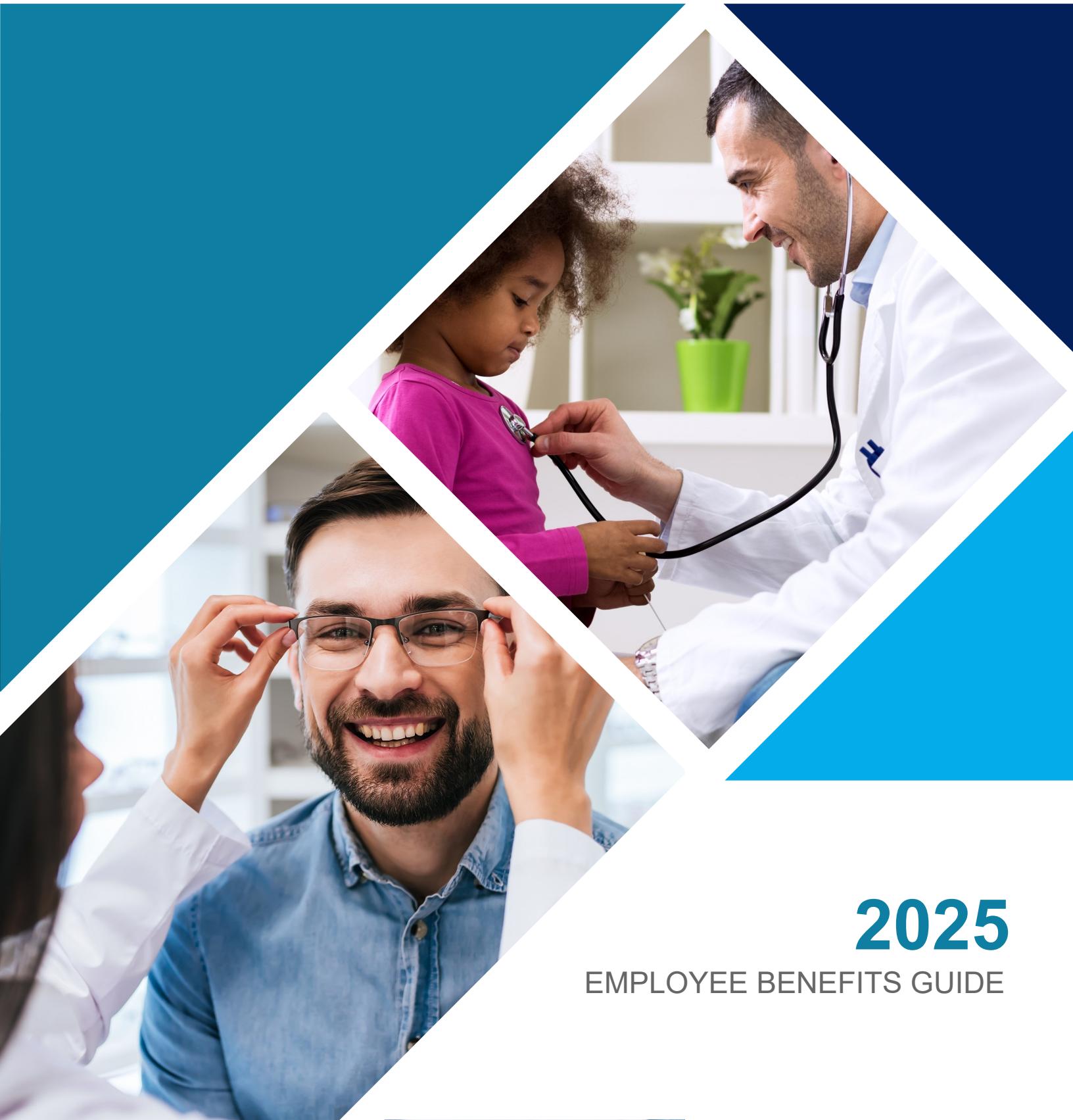




CITY OF MAUMELLE



2025
EMPLOYEE BENEFITS GUIDE



Welcome to Your Benefits

Contents

Eligibility and Benefits Changes	3
How to Enroll	4
Medical	5
Where to Go Guide	6
Flexible Spending Accounts	7
Dental	10
Vision	11
Basic Life & Voluntary Life & AD&D	12
Employee Assistance Program	13
Disability	16
Benefit Costs & Resources	17
Voluntary Benefits	18
Terms to Know	32

Your Benefits Program

The City of Maumelle's most important asset is our people. That's why we offer you an exceptional benefits program with many options, designed to meet your needs and the needs of your family. In this booklet, you will find summaries of City of Maumelle's medical, dental, vision, life and disability, group accident, critical illness, cancer and whole life plans.

This booklet contains important information about your benefits. Please take the time to review it and share the information with your family.

Claim Questions or Issues

1

Call your insurance carrier's customer service department. Phone numbers can be found on your ID cards and on page 20 of this booklet.

2

If the carrier does not resolve your problem, contact Karey Forster at 501-661-4835 or by email at karey.forster@mcgriff.com.

3

If you are still not satisfied after steps 1 and 2, please contact Doreen Mattes at City of Maumelle at 501-851-2500 x233 or dmattes@maumelle.org.

This booklet provides a summary of plan highlights. Please consult the carrier's contract for complete information on covered charges, limitations, and exclusions. This is not a binding contract. The carrier's contract will prevail. If you have further questions, please contact the carrier or McGriff.



► Benefits Eligibility

Full-time employees are eligible for benefits on the first of the month following 30 days of Full-time employment for medical, dental, vision, life, disability, voluntary life and voluntary benefits.

Spouses and dependent children of the employee are also eligible to participate in our benefit plans. Dependent children include natural children, legally adopted children, stepchildren, and children for whom the employee has been appointed guardian.

You can enroll the following dependents in our group benefit plans:

- Your legal spouse
- Children under age 26 no matter marital or student status
- Unmarried children of any age if totally disabled and claimed as a dependent on your federal income tax return (documentation of handicapped status must be provided)

Other dependents who may live with you, but are NOT eligible to be added to your benefit plans:

- Grandchildren, nieces, nephews or other children who do not meet specifications listed above
- Common law spouses or domestic partners (same or opposite sex)
- Ex-spouses, unless required via court order (documentation required)
- Parents, step-parents, grandparents, aunts, uncles, or other relatives who are not qualified legal dependents (even if they live in your house)

Making Changes to Your Benefits

Most benefit deductions are withheld from your paycheck on a pre-tax basis (medical, dental, vision) and therefore your ability to make changes to these benefits is restricted by the IRS. Once enrolled, most pre-tax benefit elections cannot be changed until the next annual Open Enrollment period, unless you have a qualifying life status change.

Open Enrollment will be begin December 1st through December 14th with plan changes effective from January 1, 2025 through December 31, 2025.

To make benefit changes as a result of a Life Status Change as allowed under Section 125 of the IRS Code, you must:

- Notify Human Resources within 30 days of the date of the qualifying event
- Provide proof of your life status event



The Most Common Life Status Changes

- Marriage, divorce, legal separation
- Birth or adoption
- Change in your or your spouse's work status that affects your benefits or an eligible dependent's benefits
- Change in health coverage due to your spouse's annual Open Enrollment period
- Change in eligibility for you or a dependent for Medicaid or Medicare
- Receipt of a Qualified Medical Child Support Order or other court order



2025 Open Enrollment—*December 1-14, 2024*



How to Enroll in Benefits for 2025

1. Log in to your UKG dashboard.



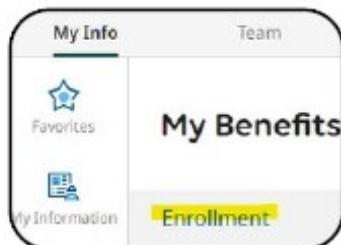
2. Select **Menu**



3. Select **My Benefits**

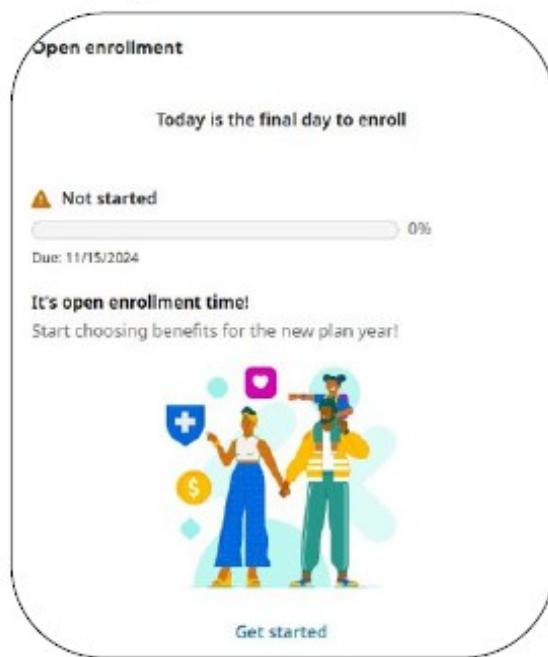


4. Select **Enrollment**



5. Select **Get Started**, and complete your enrollment.

6. Be sure to submit your elections once you complete enrollment.



Should you encounter any difficulties, HR is happy to help! You can reach us at MaumelleHR@Maumelle.org or 501-851-2500.



Medical Benefits

Provided through



Your Health Partner

Cigna is not just a health plan. They are also a team of health care providers — including doctors, nurses, pharmacists, and specialists — all working together to provide the right care for you and your family. Access the Cigna website at www.cignaaccess.com search for doctors and facilities and use the cost-transparency and quality rating tools.

We encourage you and your dependents to have annual wellness exams. Most in-network preventive exams and well-child exams (including immunizations) are 100% covered by our plans. Preventive exams can detect if you are at risk for or already have a chronic disease such as heart disease, diabetes, hypertension and certain cancers, which are preventable. Talk to your health care provider to find out which screenings are recommended for you and when you need them.

Medical Plan Overview

Cigna	In-Network:	Out-of-Network:
Deductible (Individual/Family)	\$1,000/\$2,000	\$3,000/\$6,000
Coinsurance	20%	Varies
Doctor/Specialist	\$25 copay/\$50 copay	Deductible + Coinsurance
Urgent Care	\$50 Copay	Deductible + Coinsurance
Emergency Room:	\$350 copay	\$350 copay
Retail Prescriptions:	Tier 1: \$10 Tier 2: \$35 Tier 3: \$60	Deductible + Coinsurance
Maximum Out-of-Pocket: (Individual/Family)	\$3,000/\$6,000	\$7,500/\$15,000

*Rates can be found on page 18



Where to Go Guide

The cost for care and time you wait can vary greatly depending on where you go. Below is a simple guide to choosing the right place to go for health care. In addition to clinical settings, you have access to Virtual Medicine for virtual visits.

Conditions Treated*	Your Cost & Time	
Emergency Room		
<p>For the immediate treatment of critical injuries or illness. If a situation seems life-threatening, call 911 or go to the nearest emergency room. Open 24/7.</p>	<ul style="list-style-type: none"> ■ Sudden numbness, weakness ■ Uncontrolled bleeding ■ Seizure or loss of consciousness ■ Shortness of breath ■ Chest pain ■ Head injury/major trauma ■ Blurry or loss of vision ■ Severe cuts or burns ■ Overdose 	<ul style="list-style-type: none"> ■ Costs are highest ■ No appointment needed ■ Wait times may be long, averaging over 4 hours
Urgent Care Center		
<p>For conditions that are not life threatening. Staffed by nurses and doctors and usually have extended hours.</p>	<ul style="list-style-type: none"> ■ Minor cuts, sprains, burns, rashes ■ Fever and flu symptoms ■ Headaches ■ Chronic lower back pain ■ Joint pain ■ Minor respiratory symptoms ■ Urinary tract infections 	<ul style="list-style-type: none"> ■ Costs are lower than an ER visit ■ No appointment needed ■ Wait times vary
Doctor's Office		
<p>The best place to receive routine or preventive care, track medications, or get a referral to see a specialist.</p>	<ul style="list-style-type: none"> ■ General health issues ■ Preventive services ■ Routine checkups ■ Immunizations and screenings 	<ul style="list-style-type: none"> ■ May include coinsurance and/or deductible ■ Appointment usually needed ■ May have little wait time
Convenience Care Clinic		
<p>Staffed by nurse practitioners and physician assistants. Treat minor medical concerns that are not life threatening. Located in retail stores and pharmacies, they're often open nights and weekends.</p>	<ul style="list-style-type: none"> ■ Common cold/flu ■ Rashes or skin conditions ■ Sore throat, earache, sinus pain ■ Minor cuts or burns ■ Pregnancy testing ■ Vaccinations 	<ul style="list-style-type: none"> ■ Costs are same or lower than office visit ■ No appointment needed ■ Wait times typically 15 minutes or less
Virtual Medicine		
<p>Virtual visits with a doctor anytime 24/7/365 via computer with webcam capability or smartphone mobile app.</p>	<ul style="list-style-type: none"> ■ Cold and flu symptoms such as a cough, fever and headaches ■ Allergies ■ Sinus infections ■ Family health questions 	<ul style="list-style-type: none"> ■ Cost is lower than office visit ■ No appointment needed ■ Immediate, private, and secure visits

GREATER

Cost & Time

LOWER

*List is not all inclusive. To find a specific health care facility or doctor, go to your medical carrier's website or call the number on your ID card. The listing of a health care professional or facility in the online directory does not guarantee that the services rendered by that professional or facility are covered under your specific medical plan. Check your official plan document for information about the services covered under your plan benefits. The information provided here is for informational purposes only. During a medical emergency, you should always visit the nearest hospital or call 911 for assistance.

► Medical Flexible Spending Account

Why should I choose a Medical Flexible Spending Account (FSA)?

A Medical FSA is a benefit that allows you to choose how much of your paycheck you'd like to set aside, before taxes are taken out, for healthcare expenses. This saves you money by reducing your taxable income.

Funds on Day 1

Schedule that surgery, buy those eyeglasses or finally get those braces. All of your FSA funds are available to spend right away. Use your benefits debit card at the point of purchase.

Discount

Think of it like a discount on healthcare expenses at stores such as Amazon, Target, CVS, Walmart, Walgreens and more. Dollars you contribute are taken out of your paycheck before tax which means a \$100 purchase would actually cost you over \$130 without a Medical FSA.*

Plan ahead

Think about the money you spent on healthcare expenses last year. Plan ahead and set those funds aside in a Medical FSA and save 30%.*

What does it cover?

There are thousands of eligible items, including:

- Copays and coinsurance
- Doctors visits and surgeries
- Over-the-counter medications
(first-aid, allergy, asthma, cold/flu, heartburn, etc.)
- Prescription drugs
- Birthing and Lamaze classes
- Dental and orthodontia
- Frames, contacts, prescription sunglasses, etc.

CAS

Consolidated Admin Services
www.consolidatedadmin.com
info@consolidatedadmin.com
877-941-5956

Can I enroll?

Yes, as long as you or your spouse aren't actively enrolled and contributing to a Health Savings Account (HSA).

**Based on a 30% tax bracket.*



Flexible Spending Account

Real Savings. Real Simple.

Using a Flexible Spending Account (FSA) is great way to stretch your benefit dollars. You use before-tax dollars in your FSA to reimburse yourself for eligible out-of-pocket medical and dependent care expenses. That means you can enjoy tax savings and increased take-home pay—all with the convenience of a prepaid benefits card. Plus you can rollover \$640 from one year to the next, reducing your risk of losing dollars at the end of the plan year.

What is an FSA?

With an FSA, you elect to have your annual contribution (up to the \$3,300 limit set by the IRS) deducted from your paycheck each pay period, in equal installments throughout the year, until you reach the yearly maximum you have specified. The amount of your pay that goes into an FSA will not count as taxable income, so you will have immediate tax savings. FSA dollars can be used during the plan year to pay for qualified expenses and services.

- A Healthcare FSA allows reimbursement of qualifying out-of-pocket medical expenses.
- A Dependent Care FSA allows reimbursement of dependent care expenses, such as daycare incurred by eligible dependents.

With all FSA account types, you'll receive access to a secure, easy-to-use web portal where you can tract your account balance, view your claims history and submit requests for reimbursements.

In addition, you'll receive a convenient **CAS benefits card** to make it easy to pay for eligible services and products not covered by your health insurance. When you use the card, payments are automatically withdrawn from your account. Just swipe the card and go. Most expenses can be validated through the card transaction but you may be prompted to provide a copy of the receipt for certain transactions in accordance to IRS regulations. When required, receipts can be easily sent uploaded to either the consumer portal online or, through the mobile app.

With an FSA You Can:

An FSA is a great way to pay for expenses with pre-tax dollars.

- **Enjoy significant tax savings** with pre-tax deductible contributions and tax-free reimbursements for qualified plan expenses
- **Quickly and easily access funds** using the prepaid benefits card at point of sale, or request to have funds directly deposited to your bank account via online or mobile app
- **Reduce filling hassles and paperwork** by using your prepaid benefits card
- **Enjoy secure access** to accounts using a convenient Consumer Portal available 24/7/365
- **Manage your FSA “on the go”** with an easy-to-use mobile app
- **File claims easily online** (when required) and let the system determine approval based on eligibility and availability of funds
- **Stay up to date on balances** and action required with automated email alert and convenient portal and mobile home page messages
- **Get one-click answers** to benefits questions
- **Use it or Roll it Over.** And now up to \$640 of your unused healthcare Flexible Spending Account balance can be carried over into the next plan year instead of you “losing it” - making enrollment in an FSA much less risky. This gives you more flexibility to spend your FSA money when you need it. You can use it for necessary out-of-pocket healthcare expenses, rather than feeling pressured to engage in last minute and potentially unnecessary spending at the end of the year.



► Flexible Spending Account

Real Savings. Real Simple.

Is An FSA Right for Me?

An FSA is a great way to pay for expenses with pre-tax dollars.

A Healthcare FSA could save you money if you or your dependents:

- Have out-of-pocket expenses like co-pays, coinsurance, or deductibles for health, prescription, dental or vision plans
- Have a health condition that requires the purchases of prescription medications or over the counter medications on an ongoing basis
- Wear glasses or contact lenses or are planning LASIK surgery
- Need orthodontia care, such as braces, or have dental expenses not covered by your insurance

A Dependent Care FSA provides pre-tax reimbursement of out-of-pocket expenses related to dependent care. This benefit may make sense if you (and your spouse, if married) are working or in school, and:

- Your dependent children under age 13 attend daycare, after-school care or summer day camp
- You provide care for a person of any age whom you claim as a dependent on your federal income tax return and who is mentally or physically incapable of caring for himself or herself

Plan Ahead

Before you enroll, you must first decide how much you want to contribute to your account(s). You will want to spend some time estimating your anticipated eligible medical and dependent care expenses for the 2025 calendar year and know that you don't have to worry about losing unused medical funds (up to \$640). (Dependent care funds do not rollover.)

Throughout the year, you'll likely find yourself with expenses for yourself and your family that insurance won't cover. By taking advantage of an FSA, you can actually reduce your taxable income and reduce your out-of-pocket expenses when you use your FSA to pay for the things you'd purchase anyway.



*The amount you save in taxes with a Flexible Spending Account will vary depending on the amount you set aside in the account; your annual earnings; whether or not you pay Social Security taxes; the number of exemptions and deductions you claim on your tax return; your tax bracket and your state and local tax regulations. Check with your tax advisor for information on how participation will affect your tax savings.



Above: With the convenience of a mobile device, you can see your available balance anywhere, anytime as well as file claims and upload receipts.

CAS

Consolidated Admin Services

www.consolidatedadmin.com

info@consolidatedadmin.com

P: 877-941-5956

F: 877-641-5956

Finding a Provider

Cigna's online directory makes it easy to find in-network dentists. Just follow these easy steps:

- Visit www.mycigna.com
- Search for a PPO network provider by location

It's About More Than a Pretty Smile

Our oral health affects our ability to speak, smell, taste, chew, and swallow. However, oral diseases, which can range from cavities to oral cancer, cause pain and disability for millions of people each year.



Visit Your Dentist Regularly

Regular preventive visits to your dentist can help protect your health, and we are talking about more than just your mouth. Recent studies have linked gum disease to damage elsewhere in the body. According to the Centers for Disease Control and Prevention, there may be associations between oral infections and diabetes, heart disease, stroke, and preterm, low-weight births. Research is underway to further examine these connections.

Our plan covers preventive services at 100% in-network, with no deductible for preventive services.

Cigna Dental Plan Description	In-Network:	Out-of-Network
Calendar Year Deductible	\$50 individual \$150 family	\$50 individual \$150 family
Dental Plan Reimbursement	Based on Contracted Fees	R&C 90th Percentile
Preventive Services Oral exams, dental cleanings, routine X-rays, fluoride treatments, sealants, space maintainers, non-routine X-rays	100% no deductible	100% no deductible
Basic Services Fillings, emergency care to relieve pain, simple oral surgery, minor/major periodontics, brush biopsy	80% after deductible	80% after deductible
Major Services Oral surgery (all except simple extraction), anesthetics, endodontics, crowns, inlays, onlays, dentures, bridges, repairs, implants, orthodontics	50% after deductible	50% after deductible
Orthodontia Lifetime Maximum (Child Only)	\$1,500	\$1,500
Maximum Annual Benefit (Per individual per calendar year)	\$1,750	\$1,750

*Rates can be found on page 18



Cigna members can take care of their vision and have routine eye exams, while saving money on all of their eye care needs. To start using your benefit, visit www.mycigna.com to find a provider or call the number on the back of your ID card.

Importance of Eye Health

Don't overlook the importance of maintaining your vision health. Annual visits to an eye care professional for routine exams can help detect common vision problems or prescription changes, as well as eye diseases such as diabetic retinopathy, glaucoma, cataract, and age-related macular degeneration.



Did you know?

Taking care of your vision can also mean early detection for symptoms of:

- Diabetes
- Hypertension
- High cholesterol
- Tumors
- Thyroid disorders
- Neurological disorders

A qualified vision care professional can help treat and manage:

- Cataracts
- Corneal diseases
- Diabetic retinopathy
- Eye infections
- Glaucoma
- Macular degeneration

Cigna Vision Plan Description	In-Network	Out-of-Network
Exam	\$0 copay	Up to \$45
Standard Plastic Lenses <ul style="list-style-type: none">■ Single Vision■ Bifocal■ Trifocal■ Lenticular	\$0 copay	Up to \$32 Up to \$55 Up to \$65 Up to \$80
Frames (any frame available at provider location)	\$130 allowance + 20% off remaining balance	Up to \$71
Contact Lenses* <ul style="list-style-type: none">■ Elective■ Medically Necessary	\$130 allowance Covered in Full	Up to \$105 Up to \$210
Frequency <ul style="list-style-type: none">■ Examination■ Frames■ Lenses and Contact Lenses	Once every 12 months Once every 24 months Once every 12 months	Once every 12 months Once every 24 months Once every 12 months

*Contacts are in lieu of lenses and frames benefits.

*Rates can be found on page 18

► Basic Life and AD&D & Voluntary Life Insurance

Why buy Voluntary Life coverage?

Voluntary Life provides a lump sum cash benefit to surviving dependents to cover immediate costs such as funeral expenses or ongoing living expenses. Voluntary life insurance benefits often help survivors adjust to the loss of income related to the death of a wage earner, or provide funds for college or retirement for the survivors.



Basic Life and AD&D

The City of Maumelle provides all employees a benefit equal to \$50,000 of basic employee life insurance and basic employee accidental death and dismemberment insurance at **NO COST TO YOU** through One America.

Voluntary Life Insurance

In addition to the insurance provided at no cost to you by City of Maumelle, you can purchase additional voluntary life coverage for yourself, and additional life for your spouse and child(ren). You must purchase employee coverage to be able to purchase coverage for your spouse and/or child(ren). The life amount and AD&D principal sum will reduce to 45% of the amount when the employee reaches age 70.

EMPLOYEE VOLUNTARY LIFE

\$10,000 increments up to 5x's salary not to exceed \$500,000. Guaranteed issue: \$150,000

SPOUSE VOLUNTARY LIFE

\$5,000 increments up to \$250,000 or 50% of the EE amount. Guaranteed issue: \$25,000

CHILD VOLUNTARY LIFE

\$10,000 – 6 months to age 19, 25 if full time student

\$1,000 – life birth to 6 months of age



Employee Assistance Program (EAP)

Contact Us... Anytime, Anywhere

No-cost, confidential solutions to life's challenges.

Confidential Emotional Support



Our highly trained clinicians will listen to your concerns and help you or your family members with any issues, including:

- Anxiety, depression, stress
- Grief, loss and life adjustments
- Relationship/marital conflicts

Work-Life Solutions



Our specialists provide qualified referrals and resources for just about anything on your to-do list, such as:

- Finding child and elder care
- Hiring movers or home repair contractors
- Planning events, locating pet care

Legal Guidance



Talk to our attorneys for practical assistance with your most pressing legal issues, including:

- Divorce, adoption, family law, wills, trusts and more

Need representation? Get a free 30-minute consultation and a 25% reduction in fees.

Financial Resources



Our financial experts can assist with a wide range of issues.

Talk to us about:

- Retirement planning, taxes
- Relocation, mortgages, insurance
- Budgeting, debt, bankruptcy and more

Online Support



GuidanceResources® Online is your 24/7 link to vital information, tools and support. Log on for:

- Articles, podcasts, videos, slideshows
- On-demand trainings
- "Ask the Expert" personal responses to your questions

Free Online Will Preparation



EstateGuidance® lets you quickly and easily create a will online.

- Specify your wishes for your property
- Provide funeral and burial instructions
- Choose a guardian for your children

Your ComPsych® GuidanceResources® program offers someone to talk to and resources to consult whenever and wherever you need them.

Call: 855.387.9727

TDD: 800.697.0353

Your toll-free number gives you direct, 24/7 access to a GuidanceConsultant™, who will answer your questions and, if needed, refer you to a counselor or other resources.

Online: guidanceresources.com

App: GuidanceResources® Now

Web ID: ONEAMERICA3

Log on today to connect directly with a GuidanceConsultant about your issue or to consult articles, podcasts, videos and other helpful tools.

24/7 Support, Resources & Information



Contact Your GuidanceResources® Program

Call: 855.387.9727

TDD: 800.697.0353

Online: guidanceresources.com

App: GuidanceResources® Now

Web ID: ONEAMERICA3

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Employee Assistance Program (EAP) (cont.)



Your ComPsych® GuidanceResources® Program

Personal issues, planning for life events or simply managing daily life can affect your work, health and family. Your GuidanceResources program provides support, resources and information for personal and work-life issues. The program is company-sponsored, confidential and provided at no charge to you and your dependents. This flyer explains how GuidanceResources can help you and your family deal with everyday challenges.

Confidential Counseling

3 Session Plan

This no-cost counseling service helps you address stress, relationship and other personal issues you and your family may face. It is staffed by GuidanceConsultants™—highly trained master's and doctoral level clinicians who will listen to your concerns and quickly refer you to in-person counseling (up to 3 sessions per issue per year) and other resources for:

- › Stress, anxiety and depression
- › Relationship/marital conflicts
- › Problems with children
- › Job pressures
- › Grief and loss
- › Substance abuse

Financial Information and Resources

Discover your best options.

Speak by phone with our Certified Public Accountants and Certified Financial Planners on a wide range of financial issues, including:

- › Getting out of debt
- › Credit card or loan problems
- › Tax questions
- › Retirement planning
- › Estate planning
- › Saving for college

Legal Support and Resources

Expert info when you need it.

Talk to our attorneys by phone. If you require representation, we'll refer you to a qualified attorney in your area for a free 30-minute consultation with a 25% reduction in customary legal fees thereafter.

Call about:

- › Divorce and family law
- › Debt and bankruptcy
- › Landlord/tenant issues
- › Real estate transactions
- › Civil and criminal actions
- › Contracts

Work-Life Solutions

Delegate your "to-do" list.

Our Work-Life specialists will do the research for you, providing qualified referrals and customized resources for:

- › Child and elder care
- › Moving and relocation
- › Making major purchases
- › College planning
- › Pet care
- › Home repair

GuidanceResources® Online

Knowledge at your fingertips.

GuidanceResources Online is your one stop for expert information on the issues that matter most to you...relationships, work, school, children, wellness, legal, financial, free time and more.

- › Timely articles, HelpSheets™, tutorials, streaming videos and self-assessments
- › "Ask the Expert" personal responses to your questions
- › Child care, elder care, attorney and financial planner searches

Free Online Will Preparation

Get peace of mind.

EstateGuidance® lets you quickly and easily write a will on your computer. Just go to www.guidanceresources.com and click on the EstateGuidance link. Follow the prompts to create and download your will at no cost. Online support and instructions for executing and filing your will are included. You can:

- › Name an executor to manage your estate
- › Choose a guardian for your children
- › Specify your wishes for your property
- › Provide funeral and burial instructions





Employee Assistance Program (EAP) (cont.)



SWEAPConnections

**Stress? Anxiety?
Worry? Grief?
Contact your EAP!**

You and your household have access to free, confidential, professional counseling and coaching provided by SWEAP Connections. No issue is too small, stress happens and research shows that talking about it helps!

Don't wait to take advantage of this FREE benefit, reach out to see how SWEAP can help you today.

You have access to:



EAP Counseling
Free and Confidential



Employee and
Supervisor Training



Mental Health
Resources and
Support



Online Support,
Training
and Resources

Free and Confidential



**Help is
Always Available**

Using the EAP is easy;
501-663-1797
or 1-800-777-1797
or info@sweap.com
to schedule an appointment.

In case of a mental health emergency or crisis, call anytime. A counselor is always available.

Online resources available on demand at sweapconnections.com, use code "sweap"

www.sweapconnections.com | info@sweap.com | 800-777-1797

► Short-Term and Long-Term Disability

Why is Disability Insurance is important?

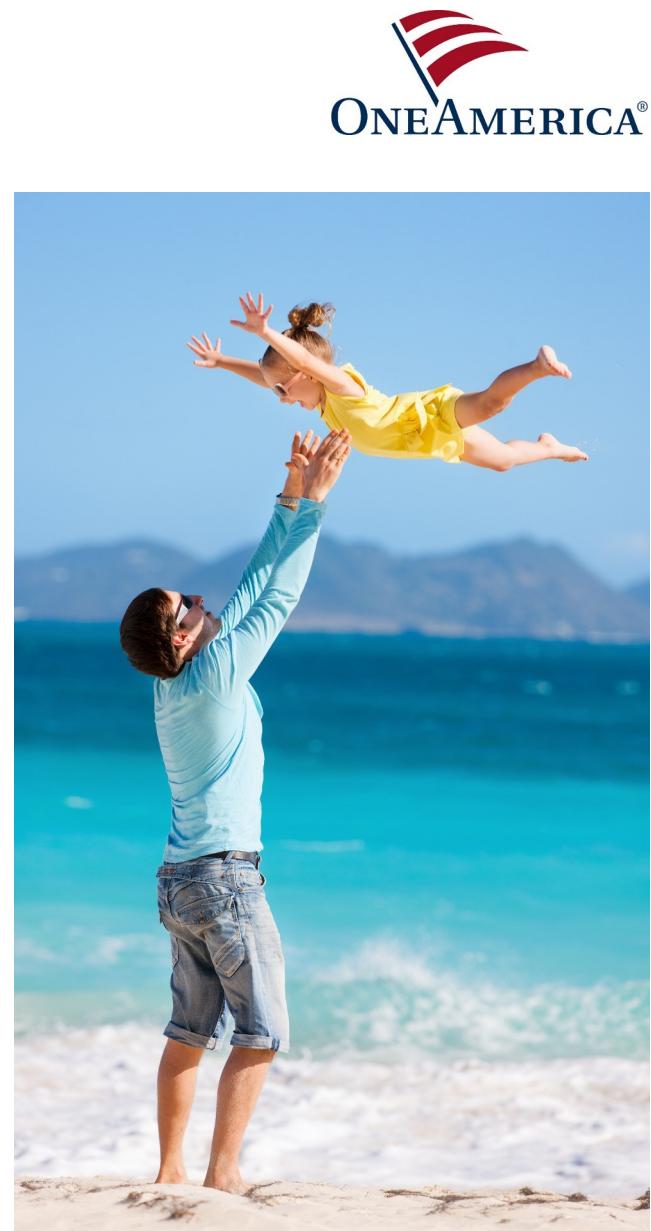
One third of all Americans between the ages of 35 and 65 will become disabled for more than 90 days, according to the American Council of Life Insurers. City of Maumelle provides the ability for employees to enroll into short-term disability through One America, which provides income continuation if you are ever unable to work due to an accident or illness.

Short-Term Disability (up to 24 weeks)

Your short-term disability (STD) insurance provides coverage of 60% of gross wages up to a maximum of \$1,500 per week for a qualified disability. Benefits are payable on the 15th day of a disability or illness for a maximum of 24 weeks, including the elimination period.

The cost for Short-Term disability coverage is based on your salary and age and will be calculated when you make your elections through the Enrollment Portal.

Age	Semi-Monthly Rate Per \$10 Weekly Benefit
0-39	\$0.270
40-44	\$0.290
45-49	\$0.360
50-54	\$0.445
55-59	\$0.570
60-64	\$0.660
65-69	\$0.715
70+	\$0.765



Long-Term Disability (beyond 180 days)

Your long-term disability (LTD) benefit provides a benefit of 60% of your monthly salary up to a maximum of \$5,000 per month after 180 consecutive days of total disability. **The monthly premiums are paid for by the City of Maumelle.**

Short & Long-Term Disability Pre-existing Condition Exclusions:

*The pre-existing period is 3/12. Benefits will not be paid if the person's disability begins in the first 12 months of coverage; and the disability is caused by, contributed to, or the result of a condition, whether or not that condition is diagnosed at all or is misdiagnosed, for which the person received medical treatment, consultation, care or services, including diagnostic measures, or was prescribed medicines in the 3 months just prior to the individual's effective date of insurance.



Benefits Semi-Monthly Costs & Resources

Medical	Employee Only	Employee + Family
Rates Per Pay Period:	\$0.00	\$202.64
Dental	Employee Only	Employee + Family
Rates Per Pay Period:	\$0.00	\$9.00
Vision	Employee Only	Employee + Family
Rates Per Pay Period:	\$3.44	\$8.89

Benefit Descriptions	Funding	Description
Medical (PPO) – Cigna	City of Maumelle pays 100% of the Employee Rate and 60% of the difference between employee and family coverage	Provides benefits for office visits, preventive care, prescription drugs, and hospital service
Dental – Cigna	City of Maumelle pays 100% of the Employee Rate and 60% of the difference between employee and family coverage	Provides benefits for preventive services, restorative care, periodontics, root canals and majors services
Vision – Cigna/EyeMed	Employee Paid	Provides benefits for yearly eye exam, lenses, frames or contacts
Short-Term Disability – One America	Employee Paid	Benefits pays 60% of weekly
Long-Term Disability – One America	The City of Maumelle pays 100% of the premium for LTD	Benefits pays 60% monthly salary
Voluntary Term Life Insurance & AD&D – One America	Employee paid	\$150,000 guarantee issue coverage for you the employee, \$25,000 guarantee issue coverage for Spouse, \$10,000 guarantee issue coverage for child(ren)
Voluntary Worksite – MetLife	Employee paid	Voluntary Coverage for Accident, Hospital Indemnity, and Critical Illness

Benefit—Carrier	Carrier Website
Medical - Cigna	www.cignaaccess.com
Dental - Cigna	www.mycigna.com
Vision - Cigna	www.mycigna.com
Flexible Spending Accounts - Consolidated Admin Services	www.consolidatedadmin.com
Life Insurance - One America	www.oneamerica.com
Disability - One America	www.oneamerica.com
Voluntary Benefits - MetLife	www.metlife.com



**IMPORTANT: This is a fixed indemnity policy,
NOT health insurance**

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- Visit HealthCare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.

Voluntary benefits can help offset costs caused by sudden illness, accident, cancer, or hospital confinements. They can also cover some non-medical expenses that your current insurance might not.

Meeting Your Needs

Life can be unpredictable and full of surprises. Sometimes your circumstances change and you need coverage that can help meet your needs. With MetLife's wide range of products, you can rest easy knowing your future is a little more secure.

Budget Friendly

Sometimes, receiving proper healthcare can be difficult if money is tight. Our supplemental benefits can provide valuable coverage at an affordable price. Supplemental health insurance can help alleviate worry and help keep your finances strong.

Putting You First

The quality of your health shouldn't be undermined by unaffordable care. Voluntary benefits are designed to supplement any insurance you may already have and can help offset medical expenses not paid by other coverage you may have. Take action now to help protect yourself and your family from future uncertainty; apply for your coverage today!

Advantages to you:

- Benefits are Guaranteed Issue **at initial enrollment only**
- Different coverage options available*
- Benefits paid directly to you unless assigned
- Benefits paid in addition to any other coverage
- Individual or family coverage*
- Affordable premium rates

*Varies by product, state and group size.



Group Voluntary Accident

Accident Coverage provides cash benefits for out-of-pocket expenses associated with an accidental injury and can help protect hard-earned savings should an on- or off-the-job accidental injury occur. No one plans to have an accident, but it can happen at any moment throughout the day.

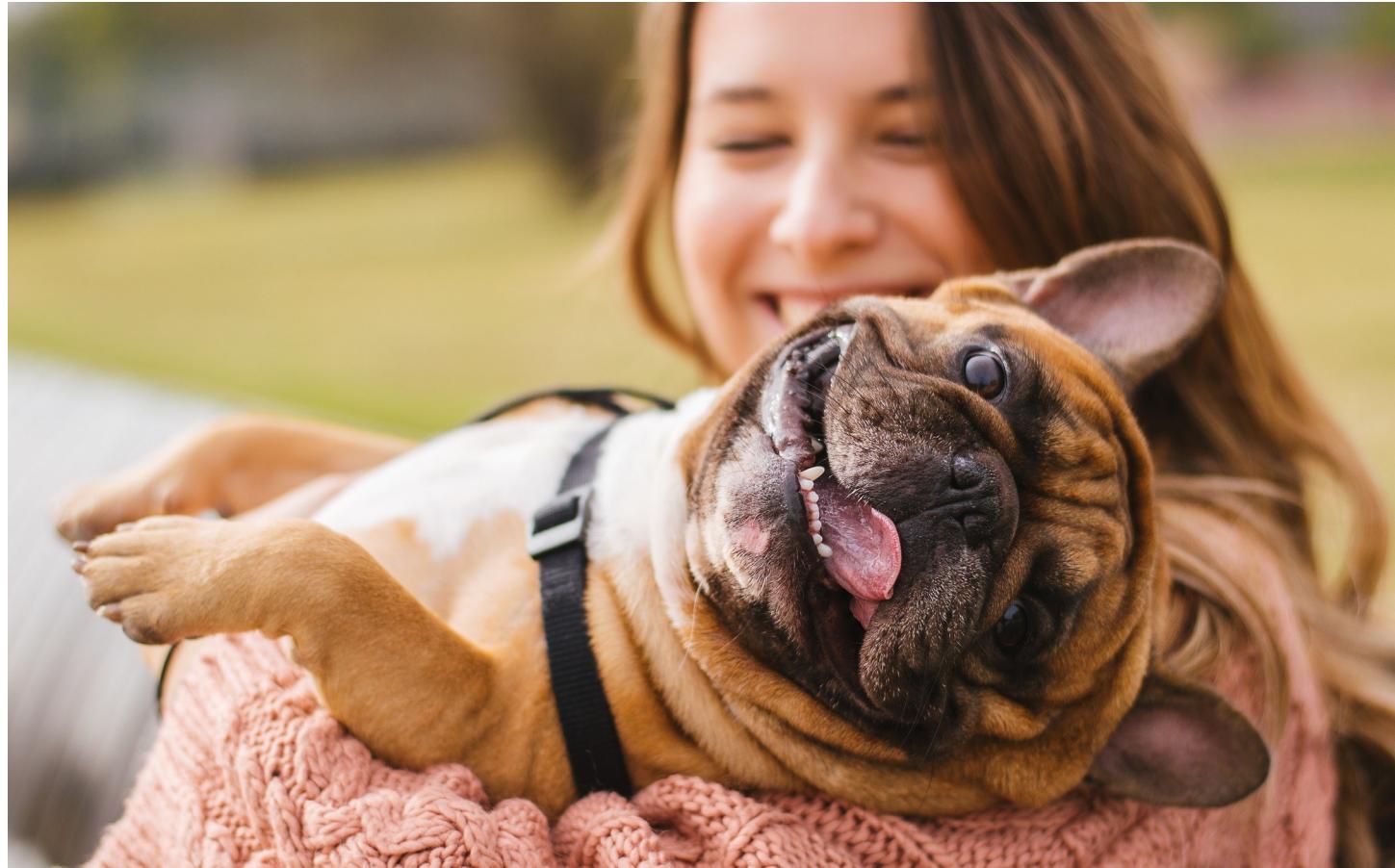
Accident coverage from MetLife can help pick up where other insurance leaves off.

- Guaranteed Issue coverage; no medical exams or tests to take **at initial enrollment only**
- 24-hour coverage for yourself or your entire family
- Coverage is portable at the same benefit level and premium amount, as long as premiums are paid to MetLife
- Benefits that correspond with treatment for on- or off- the-job accidental injuries including hospitalization, emergency treatment, and intensive care, plus more
- Pays benefits for open and closed fractures

Group Voluntary Critical Illness

Critical Illness insurance from MetLife pays benefits that can be used for non-medical, critical illness-related expenses that your health insurance might not cover. This benefit is in the form of a lump-sum payment, which is paid to you at diagnosis.

- Benefits paid directly to you, unless you assign benefits to someone else
- Available for you or your entire family
- Supplements your present coverage
- Additional riders may be available to enhance coverage
- Coverage is portable
- Guaranteed Issue coverage; no medical exams or tests **at initial enrollment only**



Accident Insurance

Benefits that may help cover costs such as those not covered by your medical plan.

Accident Insurance Benefits

With MetLife, you'll have a choice of two plans (called the "Low Plan" and the "High Plan") that provide payments in addition to any other insurance payments you may receive¹. Here are just some of the covered events/services².

Accidental Injury Benefits	Low Plan Benefits	High Plan Benefits
Fracture Benefit*	\$100 – \$8,000 depending on the fracture and type of repair	\$200 – \$10,000 depending on the fracture and type of repair
Dislocation Benefit*	\$100 – \$8,000 depending on the dislocation and type of repair	\$200 – \$10,000 depending on the dislocation and type of repair
Second or Third Degree Burn Benefit	\$500 – \$20,000 depending on the degree of the burn and the percentage of burnt skin	\$750 – \$30,000 depending on the degree of the burn and the percentage of burnt skin
Concussion Benefit	\$250	\$500
Coma Benefit	\$7,500	\$10,000
Laceration Benefit	\$50 – \$400 depending on the length of the cut and type of repair	\$75 – \$700 depending on the length of the cut and type of repair
Broken Tooth Benefit	Crown \$200 Filling \$25 Extraction \$100	Crown \$300 Filling \$50 Extraction \$150
Eye Injury Benefit	\$300	\$400
Accident - Medical Services & Treatment Benefits	Low Plan Benefits	High Plan Benefits
Ambulance Benefit	Ground: \$300 Air: \$1,000	Ground: \$400 Air: \$1,250
Emergency Care Benefit	\$75 – \$150 depending on location of care	\$100 – \$200 depending on location of care
Non-Emergency Initial Care Benefit	\$75	\$100
Physician Follow-Up Visit Benefit	\$75	\$100
Therapy Services Benefit (including physical therapy)	\$35	\$50
Medical Testing Benefit	\$150	\$200
Medical Appliance Benefit	\$75 – \$750 depending on the appliance	\$150 – \$1,000 depending on the appliance
Transportation Benefit	\$300	\$400
Pain Management Benefit (for epidural anesthesia)	\$75	\$100
Prosthetic Device Benefit	One device: \$750 More than one device: \$1,500	One device: \$1,000 More than one device: \$2,000
Modification Benefit	\$1,000	\$1,500
Blood/Plasma/Platelets Benefit	\$400	\$500
Surgical Repair Benefit	\$150-\$1,500 depending on the type of surgery	\$200-\$2,000 depending on the type of surgery

Accident Insurance

Exploratory Surgery Benefit	\$150	\$200
Other Outpatient Surgery Benefit	\$300	\$400
Hospital Benefits	Low Plan Benefits	High Plan Benefits
Admission Benefit	\$1,000 for the day of admission	\$1,500 for the day of admission
ICU Supplemental Admission Benefit	\$1,000 for the day of admission	\$1,500 for the day of admission
Confinement Benefit (paid for up to 15 days per accident)	\$200 per day	\$300 per day
ICU Supplemental Confinement Benefit (paid for up to 15 days per accident)	\$200 per day	\$300 per day
Inpatient Rehabilitation Benefit (paid for up to 15 days per accident)	\$150 per day	\$200 per day
Accidental Death Benefit	Low Plan Benefits	High Plan Benefits
Accidental Death Benefit*	\$25,000 \$75,000 for accidental death on common carrier	\$50,000 \$150,000 for accidental death on common carrier
Accidental Dismemberment, Functional Loss & Paralysis Benefits	Low Plan Benefits	High Plan Benefits
Dismemberment/Functional Loss	\$750 – \$20,000 depending on the injury	\$1,000 – \$40,000 depending on the injury
Paralysis	\$10,000 - \$20,000 depending on the number of limbs	\$20,000 - \$40,000 depending on the number of limbs
Other Benefits	Low Plan Benefits	High Plan Benefits
Health Screening Benefit* - benefit provided for certain screening/prevention tests Lodging Benefit* - for a companion of a covered person who is hospitalized	\$50 Paid 1 time per calendar year \$100 per day	\$50 Paid 1 time per calendar year \$200 per day

Organized Sports Activity Injury Benefit Rider

This coverage includes an Organized Sports Activity Benefit Rider. The rider increases the amount payable under the Certificate for certain benefits by 25% for injuries resulting from an accident that occurred while participating as a player in an organized sports activity. The rider sets forth terms, conditions and limitations, including the covered persons to whom the rider applies.

* Notes Regarding Certain Benefits

- Fracture and Dislocation benefits – Chip fractures are paid at 25% of the applicable fracture benefit and partial dislocations are paid at 25% of the applicable dislocation benefit.
- Accidental Death Benefit – The benefit amount will be reduced by the amount of any accidental dismemberment/functional loss/paralysis benefits and modification benefit paid for injuries sustained by the covered person in the same accident for which the accidental death benefit is being paid.
- Common Carrier Benefit - Common Carrier refers to airplanes, trains, buses, trolleys, subways and boats. Certain conditions apply. See your Disclosure Statement or Outline of Coverage/Disclosure Document for specific details. Be sure to review other information contained in this booklet for more details about plan benefits, monthly rates and other terms and conditions.
- Lodging Benefit – The lodging benefit is not available in all states. It provides a benefit for a companion accompanying a covered insured while hospitalized, provided that lodging is at least 50 miles from the insured's primary residence.
- Organized Sports Activity Injury Benefit Rider – The rider is not available in all states. Proof of registration in an Organized Sports Activity in which an Accident occurred is required at time of claim. See your certificate for details.
- Health Screening Benefit – The Health Screening Benefit is not available in all states.

Accident Insurance

Benefit Payment Example – High Plan

Kathy's daughter, Molly, was riding her bike to school. On her way there she fell to the ground, was knocked unconscious, and was taken to the local emergency room (ER) by ambulance for treatment. The ER doctor diagnosed a concussion and a broken tooth. He ordered a CT scan to check for facial fractures too, since Molly's face was very swollen. Molly was released to her primary care physician for follow-up treatment, and her dentist repaired her broken tooth with a crown. Depending on her health insurance, Kathy's out-of-pocket costs could run into hundreds of dollars to cover expenses like insurance co-payments and deductibles. MetLife Group Accident Insurance payments can be used to help cover these unexpected costs.

Covered Event ³	Benefit Amount
Ambulance (ground)	\$400
Emergency Care	\$200
Physician Follow-Up (\$100 x 2)	\$200
Medical Testing	\$200
Concussion	\$500
Broken Tooth (repaired by crown)	\$300
Benefits paid by MetLife Group Accident Insurance	\$1,800

Benefit amount is based on a sample MetLife plan design. Actual plan design and benefits may vary.

Questions & Answers

- Q. Who is eligible to enroll for this accident coverage?**
- A.** You are eligible to enroll yourself and your eligible family members!⁴ You need to enroll during your Enrollment Period and to be actively at work for your coverage to be effective.
- Q. How do I pay for my accident coverage?**
- A.** Premiums will be paid through payroll deduction, so you don't have to worry about writing a check or missing a payment.
- Q. What happens if my employment status changes? Can I take my coverage with me?**
- A.** Yes, you can take your coverage with you.⁵ You will need to continue to pay your premiums to keep your coverage in force. Your coverage will only end if you stop paying your premium or if your employer offers you similar coverage with a different insurance carrier.
- Q. Who do I call for assistance?**
- A.** Contact a MetLife Customer Service Representative at 1 800- GET-MET8 (1-800-438-6388), Monday through Friday from 8:00 a.m. to 8:00 p.m., EST.

Accident Low Plan 24 Per Pay Period Rates	
Employee Only	\$5.04
Employee + Spouse	\$9.95
Employee + Children	\$11.58
Employee + Spouse & Children	\$14.14

Accident High Plan 24 Per Pay Period Rates	
Employee Only	\$7.26
Employee + Spouse	\$14.28
Employee + Children	\$16.56
Employee + Spouse & Children	\$20.24



Critical Illness Insurance

Benefits that may help cover expenses that are not covered by your medical plan.

City of Maumelle

Eligible Individual	Benefit Amount	Requirements
Coverage Options		
Employee	Increments of \$5,000 up to \$30,000	Coverage is guaranteed provided you are actively at work. ¹
Spouse/Domestic Partner ²	50% of the Employee's Initial Benefit	Coverage is guaranteed provided the employee is actively at work and the spouse is not subject to a medical restriction as set forth on the enrollment form and in the Certificate. ¹
Dependent Child(ren) ³	50% of the Employee's Initial Benefit	Coverage is guaranteed provided the employee is actively at work and the dependent is not subject to a medical restriction as set forth on the enrollment form and in the Certificate. ¹

Benefit Payment

Your plan pays a lump-sum **Initial Benefit** upon the first verified diagnosis of a Covered Condition. Your plan also pays a lump-sum **Recurrence Benefit**⁴ for a subsequent verified diagnosis of certain Covered Conditions as shown in the table below. A Recurrence Benefit is only available if an Initial Benefit has been paid for the same Covered Condition. There is a Benefit Suspension Period that applies to Recurrence Benefits. In addition, there is a Benefit Suspension Period that applies to Initial Benefits for different conditions.

Plan Design – Covered Conditions
Initial Benefit means the benefit that is payable for a covered condition the first time that it occurs while coverage is in effect. The Initial Benefit amount is expressed as a percentage of the elected Benefit Amount.
Recurrence Benefit means the benefit that is payable for another occurrence of the same covered condition for which MetLife has already paid a benefit. The Recurrence Benefit amount is expressed as a percentage of the Initial Benefit amount.

<u>Covered Conditions</u>	<u>Initial Benefit</u>	<u>Recurrence Benefit</u>
Benign Tumor Category		
Benign Brain Tumor	100% of Benefit Amount	100% of Initial Benefit
Cancer Category		
Invasive Cancer	100% of Benefit Amount	100% of Initial Benefit
Non-Invasive Cancer	25% of Benefit Amount	100% of Initial Benefit
Skin Cancer	5% of Benefit Amount, but not less than \$250	NONE
Cardiovascular Disease Category		
Coronary Artery Bypass Graft (CABG) - where surgery involving either a median sternotomy or minimally invasive procedure is performed	50% of Benefit Amount	100% of Initial Benefit
Childhood Disease Category		
Cerebral Palsy	100% of Benefit Amount	NONE

Critical Illness Insurance

Cleft Lip or Cleft Palate	100% of Benefit Amount	NONE
Cystic Fibrosis	100% of Benefit Amount	NONE
Diabetes (Type 1)	100% of Benefit Amount	NONE
Down Syndrome	100% of Benefit Amount	NONE
Sickle Cell Anemia	100% of Benefit Amount	NONE
Spina Bifida	100% of Benefit Amount	NONE
Functional Loss Category		
Coma	100% of Benefit Amount	100% of Initial Benefit
Loss of: Ability to Speak; Hearing; or Sight	100% of Benefit Amount	NONE
Paralysis of 2 or more limbs	100% of Benefit Amount	NONE
Heart Attack Category		
Heart Attack	100% of Benefit Amount	100% of Initial Benefit
Sudden Cardiac Arrest	100% of Benefit Amount	NONE
Infectious Disease Category		
Bacterial Cerebrospinal Meningitis	25% of Benefit Amount	NONE
Diphtheria	25% of Benefit Amount	NONE
Encephalitis	25% of Benefit Amount	NONE
Legionnaire's Disease	25% of Benefit Amount	NONE
Malaria	25% of Benefit Amount	NONE
Necrotizing Fasciitis	25% of Benefit Amount	NONE
Osteomyelitis	25% of Benefit Amount	NONE
Rabies	25% of Benefit Amount	NONE
Tetanus	25% of Benefit Amount	NONE
Tuberculosis	25% of Benefit Amount	NONE
Kidney Failure Category		
Kidney Failure	100% of Benefit Amount	NONE
Major Organ Transplant Category		
Major Organ Transplant <i>For bone marrow, heart, lung, pancreas, and liver</i>	100% of Benefit Amount	NONE
Progressive Disease Category		
ALS	100% of Benefit Amount	NONE
Alzheimer's Disease	100% of Benefit Amount	NONE
Multiple Sclerosis	100% of Benefit Amount	NONE
Muscular Dystrophy	100% of Benefit Amount	NONE
Parkinson's Disease (Advanced)	100% of Benefit Amount	NONE
Systemic Lupus Erythematosus (SLE)	100% of Benefit Amount	NONE
Severe Burn Category		
Severe Burn	100% of Benefit Amount	100% of Initial Benefit
Stroke Category		
Stroke	100% of Benefit Amount	100% of Initial Benefit

Critical Illness Insurance

* Notes Regarding Covered Conditions

MetLife will not pay a benefit for a Covered Condition that is diagnosed prior to the coverage effective date.

In most states there is a preexisting condition limitation. If advice, treatment or care was sought, recommended, prescribed or received during the three months prior to the effective date of coverage, we will not pay benefits if the covered condition occurs during the first six months of coverage. The preexisting condition limitation may not apply to all covered conditions and may vary by state. Refer to the Disclosure Document/Outline of Coverage for details.

- Alzheimer's Disease – Please review the Outline of Coverage/Disclosure Document for specific information about Alzheimer's disease.
- Cancer – Please review the certificate for specific information about cancer benefits. In most states, not all types of cancer are covered.
- Coronary Artery Bypass Graft – In certain states, the Covered Condition is Coronary Artery Disease.
- Heart Attack – The Heart Attack Covered Condition pays a benefit for the occurrence of a myocardial infarction, subject to the terms of the certificate. A myocardial infarction does not include sudden cardiac arrest.
- Major Organ Transplant – In most states, we will not pay a Major Organ Transplant benefit if a covered person is placed on the organ transplant list prior to coverage taking effect and subsequently undergoes a transplant procedure for the same organ while coverage is in effect. Covered organs may vary by state; refer to the Certificate for details. In some states, the condition is Major Organ Failure.
- Stroke – In certain states, the Covered Condition is Severe Stroke.
- The following benefits are not available in all states. Please review the Disclosure Statement or Outline of Coverage/Disclosure Document for details.
 - Coma
 - Loss of: Ability to Speak; Hearing; or Sight
 - Paralysis
 - Severe Burn

Health Screening Benefit MetLife will provide an annual benefit of \$50 per calendar year for taking one of the eligible screening/prevention measures. The Health Screening Benefit is not available in certain states. Please review your Disclosure Statement or Outline of Coverage/Disclosure Document for specific state variations and exclusions around this benefit.

Example of How Benefits are Paid

The example below illustrates an employee who elected a Benefit Amount of \$15,000.

Illness – Covered Condition	Payment
Heart Attack — first verified diagnosis	Initial Benefit payment of \$15,000 or 100%
Kidney Failure – first verified diagnosis, two years later	Initial Benefit payment of \$15,000 or 100%
Heart Attack — second verified diagnosis, four years later	Recurrence Benefit payment of \$15,000 or 100%

This example is for illustrative purposes only. The MetLife Group Policy and Certificate are the governing documents with respect to all matters of insurance, including coverage for specific illnesses. The specific facts of each claim must be evaluated in conjunction with the provisions of the applicable Policy and Certificate to determine coverage in each individual case.

Questions & Answers

Q. Who is eligible to enroll for this critical illness coverage?

A. You are eligible to enroll yourself and your eligible family members.⁵ You need to enroll during your Enrollment Period and to be actively at work for your coverage to be effective.

Q. How do I pay for my critical illness coverage?

A. Premiums will be paid through payroll deduction, so you don't have to worry about writing a check or missing a payment.

Q. What happens if my employment status changes? Can I take my coverage with me?

A. Yes, you can take your coverage with you.⁶ You will need to continue to pay your premiums to keep your coverage in force. Your coverage will only end if you stop paying your premium or if your employer offers you similar coverage with a different insurance carrier.

Q. Who do I call for assistance?

A. Contact a MetLife Customer Service Representative at 1 800- GET-MET8 (1-800-438-6388), Monday through Friday from 8:00 a.m. to 8:00 p.m., EST.

Critical Illness Rates 24 Per Pay Period Rates

	Semi-Monthly Premium for: \$15,000 of Coverage			
	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse + Child(ren)
<25	\$3.60	\$5.70	\$5.48	\$7.58
25-29	\$4.05	\$6.53	\$5.93	\$8.40
30-34	\$4.88	\$7.80	\$6.75	\$9.68
35-39	\$6.08	\$9.53	\$7.95	\$11.40
40-44	\$8.10	\$12.68	\$9.98	\$14.55
45-49	\$11.33	\$17.48	\$13.20	\$19.28
50-54	\$16.73	\$25.05	\$18.60	\$26.93
55-59	\$24.00	\$35.10	\$25.88	\$36.98
60-64	\$34.05	\$49.13	\$35.85	\$51.00
65-69	\$48.00	\$68.63	\$49.88	\$70.50
70-74	\$64.28	\$92.10	\$66.08	\$93.98
75+	\$87.08	\$126.38	\$88.95	\$128.25

Critical Illness Rates 24 Per Pay Period Rates

	Semi-Monthly Premium for: \$10,000 of Coverage			
	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse + Child(ren)
<25	\$2.40	\$3.80	\$3.65	\$5.05
25-29	\$2.70	\$4.35	\$3.95	\$5.60
30-34	\$3.25	\$5.20	\$4.50	\$6.45
35-39	\$4.05	\$6.35	\$5.30	\$7.60
40-44	\$5.40	\$8.45	\$6.65	\$9.70
45-49	\$7.55	\$11.65	\$8.80	\$12.85
50-54	\$11.15	\$16.70	\$12.40	\$17.95
55-59	\$16.00	\$23.40	\$17.25	\$24.65
60-64	\$22.70	\$32.75	\$23.90	\$34.00
65-69	\$32.00	\$45.75	\$33.25	\$47.00
70-74	\$42.85	\$61.40	\$44.05	\$62.65
75+	\$58.05	\$84.25	\$59.30	\$85.50

	Semi-Monthly Premium for: \$5,000 of Coverage			
	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse + Child(ren)
<25	\$1.20	\$1.90	\$1.83	\$2.53
25-29	\$1.35	\$2.18	\$1.98	\$2.80
30-34	\$1.63	\$2.60	\$2.25	\$3.23
35-39	\$2.03	\$3.18	\$2.65	\$3.80
40-44	\$2.70	\$4.23	\$3.33	\$4.85
45-49	\$3.78	\$5.83	\$4.40	\$6.43
50-54	\$5.58	\$8.35	\$6.20	\$8.98
55-59	\$8.00	\$11.70	\$8.63	\$12.33
60-64	\$11.35	\$16.38	\$11.95	\$17.00
65-69	\$16.00	\$22.88	\$16.63	\$23.50
70-74	\$21.43	\$30.70	\$22.03	\$31.33
75+	\$29.03	\$42.13	\$29.65	\$42.75

Hospital Indemnity Insurance

Coverage to help pay for expenses such as hospitalization expenses that may not be covered under your medical plan.

City of Maumelle

Hospital Indemnity Insurance Benefits

With MetLife, you'll have access to a comprehensive plan which provides lump sum cash payments in addition to any other payments you may receive from your medical plan. Here are just some of the covered benefits/services, when an accident or illness puts you in the hospital.^A

Covered Benefits^B

Please contact MetLife for detailed definitions and state variations of covered benefits.

In most states there is a preexisting condition limitation for hospital sickness benefits. If advice, treatment or care was sought, recommended, prescribed or received during the three months prior to the effective date of coverage, we will not pay benefits if the sickness occurs during the first twelve months of coverage.

Please contact MetLife for detailed definitions and state variations of covered benefits.

Hospital Benefits			
Subcategory	Benefit Limits (Applies to Subcategory)	Benefit	Benefit Amounts
Admission Benefit	1 time(s) per calendar year	Admission	\$500
		ICU Supplemental Admission (Benefit paid concurrently with the Admission benefit when a Covered Person is admitted to ICU)	\$500
Confinement Benefit	15 days per calendar year ICU Supplemental Confinement will pay an additional benefit for 15 of those days	Confinement ²	\$100
		ICU Supplemental Confinement (Benefit paid concurrently with the Confinement benefit when a Covered Person is admitted to ICU)	\$100
Newborn Confinement Benefit	2 day(s) per confinement	Newborn Confinement ³	\$25
Other Benefits			
Health Screening Benefit	1 time(s) per calendar year per covered person	Health Screening	\$50

² If the Admission Benefit is payable for a Confinement, the Confinement Benefit will begin to be payable the day after Admission.

³ The period of newborn confinement, immediately following the child's birth.

Hospital Indemnity Insurance

Benefit Payment Example for Low Plan

Susan has chest pains at home, and after contacting her doctor, she is instructed to head to her local hospital. Upon arrival, the doctor examines Susan and advises that she requires immediate admission to the Intensive Care Unit for further evaluation and treatment. After two days in the Intensive Care Unit, Susan moves to a standard room and spends two additional days recovering in the hospital. Susan was released to her primary care physician for follow-up treatment and observation. Her primary doctor is now keeping a close watch over Susan's overall health. Depending on her health insurance, Susan's out-of-pocket costs could run into hundreds of dollars to cover expenses like insurance co-payments and deductibles. MetLife Group Hospital Indemnity Insurance payments can be used to help cover these unexpected costs or in any other way Susan sees fit.

Covered Benefit	Benefit Amount
Regular Hospital Admission (1x)	\$500
ICU Supplemental Admission (1x)	\$500
Regular Hospital Confinement (3 total days)	\$300
ICU Supplemental Confinement (1 day)	\$100
Benefits paid by MetLife Group Hospital Indemnity Insurance	\$1,400

Benefit amount is based on a sample MetLife plan design. Plan design and plan benefits may vary.

Questions & Answers

Q. How do I enroll?

A. Enroll for coverage via your Employer.

Q. Who is eligible to enroll for this Hospital Indemnity coverage?

A. You are eligible to enroll yourself and your eligible family members.^c You need to enroll during your Enrollment Period and be actively at work for your coverage to be effective. Dependents to be enrolled may not be subject to a medical restriction as set forth in the Certificate. Some states require the insured to have medical coverage.

Q. How do I pay for my Hospital Indemnity coverage?

A. Premiums will be paid through payroll deduction, so you don't have to worry about writing a check or missing a payment.

Q. What happens if my employment status changes? Can I take my coverage with me?

A. Yes, you can take your coverage with you. You will need to continue to pay your premiums to keep your coverage in force. Your coverage will only end if you stop paying your premium or if your employer cancels the group policy and offers you similar coverage with a different insurance carrier.^d

Q. What is the coverage effective date?

A. The coverage effective date is 01/01/2021

Q. Who do I call for assistance?

A. Please call MetLife directly at 1-800-GET-MET8 (1-800-438-6388) and talk with a benefits consultant.

^a Hospital does not include certain facilities such as nursing homes, convalescent care or extended care facilities. See your Disclosure Statement or Outline of Coverage/Disclosure Document for full details.

^b Covered services/treatments must be the result of an accident or sickness as defined in the group policy/certificate. See your Disclosure Statement or Outline of Coverage/Disclosure Document for more details.

^cCoverage is guaranteed provided (1) the employee is actively at work and (2) dependents to be covered are not subject to medical restrictions as set forth in the Certificate. Some states require the insured to have medical coverage.

^d Eligibility for portability through the Continuation of Insurance with Premium Payment provision may be subject to certain eligibility requirements and limitations. For more information, contact your MetLife representative.

Hospital Indemnity Plan 24 Per Pay Period Rates	
Employee Only	\$5.84
Employee + Spouse	\$14.90
Employee + Children	\$10.26
Employee + Spouse & Children	\$19.32

► Terms to Know

Deductible - Amount an employee pays out of pocket prior to the insurance company paying a percentage of the provider charges.

Coinsurance - The amount of payment split between the employee and the insurance company. Example: Insurance company pays 80% and employee pays 20% of the charges after the deductible is met.

Out of Pocket Maximum - The maximum an employee is responsible for paying out of pocket in any one calendar year prior to the insurance company paying the entire eligible amount for the remaining of the calendar year.

Network Providers - Doctors, Hospitals and other healthcare providers who have an agreement/contract with insurance companies agreeing to charge a discounted amount for services they render.

Pre-Authorization - Certain procedures or hospitalizations may require that the provider receive authorization. The provider is typically the one to go through this process with the insurance company and obtain pre-authorization.

Pre-Determination - If you are having a major procedure done, your doctor or dentist can submit a pre-determination to the insurance company so you can know in advance of treatment how much of the bill you will be responsible for.

Explanation of Benefits (EOB) - The EOB is mailed to the employee after a claim is received and processed by the insurance company. The EOB will describe how the claim was processed and outline what portion of the charges are applied to the deductible, what portion the employee is responsible for, and explain if there is a denial or error processing the claim.

Appeal - If your health insurance company doesn't pay for a specific health care provider or service, you have the right to appeal the decision and have it reviewed by an independent third party.

Guaranteed Issue - The maximum amount of voluntary life insurance you can choose when making your initial election that does not require the answering of medical questions.

Evidence of Insurability (EOI) - The form containing medical questions that are required to be answered if you decide to elect voluntary life insurance after you have previously declined coverage, or if you decide to increase your current coverage. This may also be needed if you decide to add disability coverage after you have previously declined.



Insurance Company Websites and Apps

Registering on your insurance company websites and downloading the smart phone apps gives you instant access to valuable resources. In most cases you can access:

- Specific plan details
- ID cards
- In-network provider search
- Your claims history
- And other tools and resources



Notes