



Naperville

2023 EMPLOYEE BENEFITS GUIDE



Welcome to your City of Naperville 2023 Benefits!



Your needs, and those of your family, are unique to you. That's why the City of Naperville provides a comprehensive and flexible benefits program that you can customize to fit your personal situation. Our program offers you and your family important healthcare coverage and financial security.

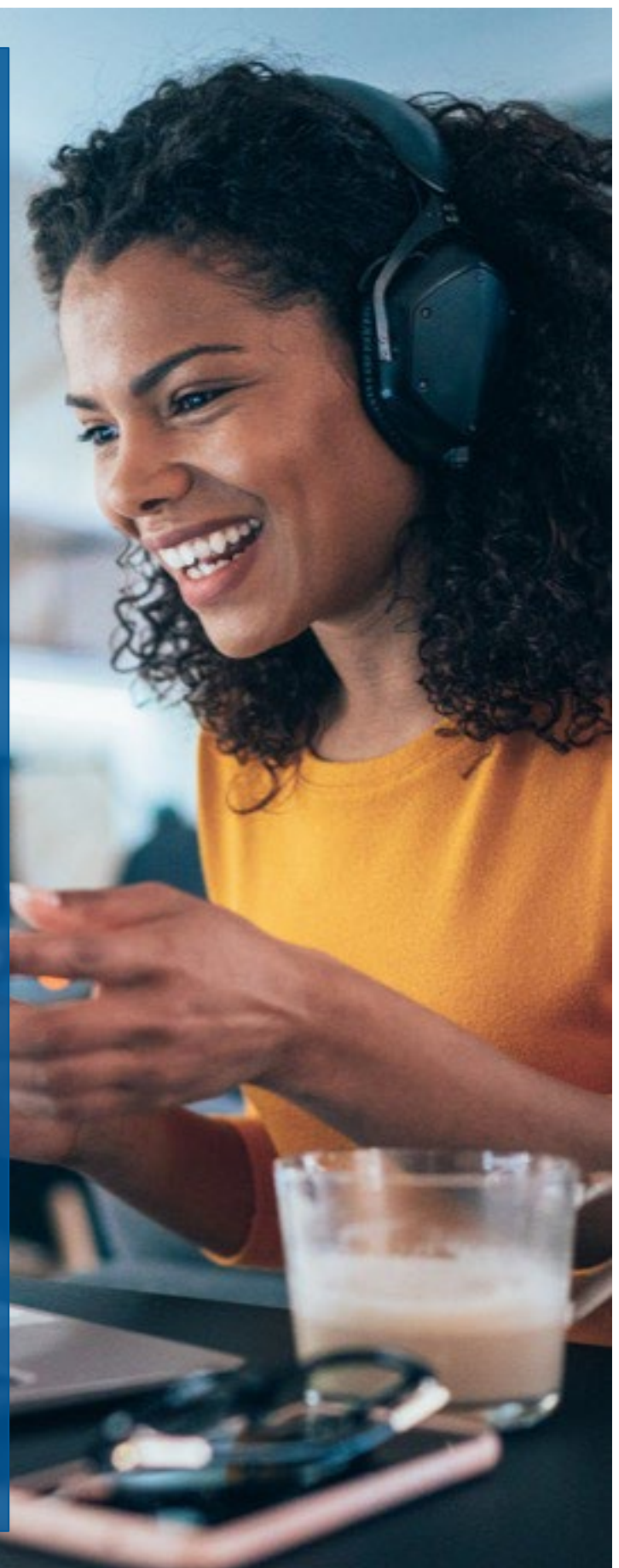
Some of the benefits we offer are paid for in full by the City of Naperville. For others, it is a shared contribution between you and the City. Other benefits are also available to you at reasonable group rates.

Your benefits are an important part of your total compensation at the City of Naperville. Please take the time to review and evaluate all the options available to you and your family.

This guide is not intended to be a complete description of the insurance coverage offered, nor is it a binding contract. Controlling provisions are provided in each benefit plan policy. This guide also serves as a Summary of Material Modifications ("SMM") and includes updates that affect City of Naperville Summary Plan Descriptions. Please keep this guide with your Summary Plan Descriptions for future reference. If there is any discrepancy between this guide, the Summary Plan Descriptions and the Plan document, the Plan document will control. City of Naperville reserves the right to end, suspend, or amend their plans or the benefits provided thereunder, at any time, for any reason, in whole or in part.

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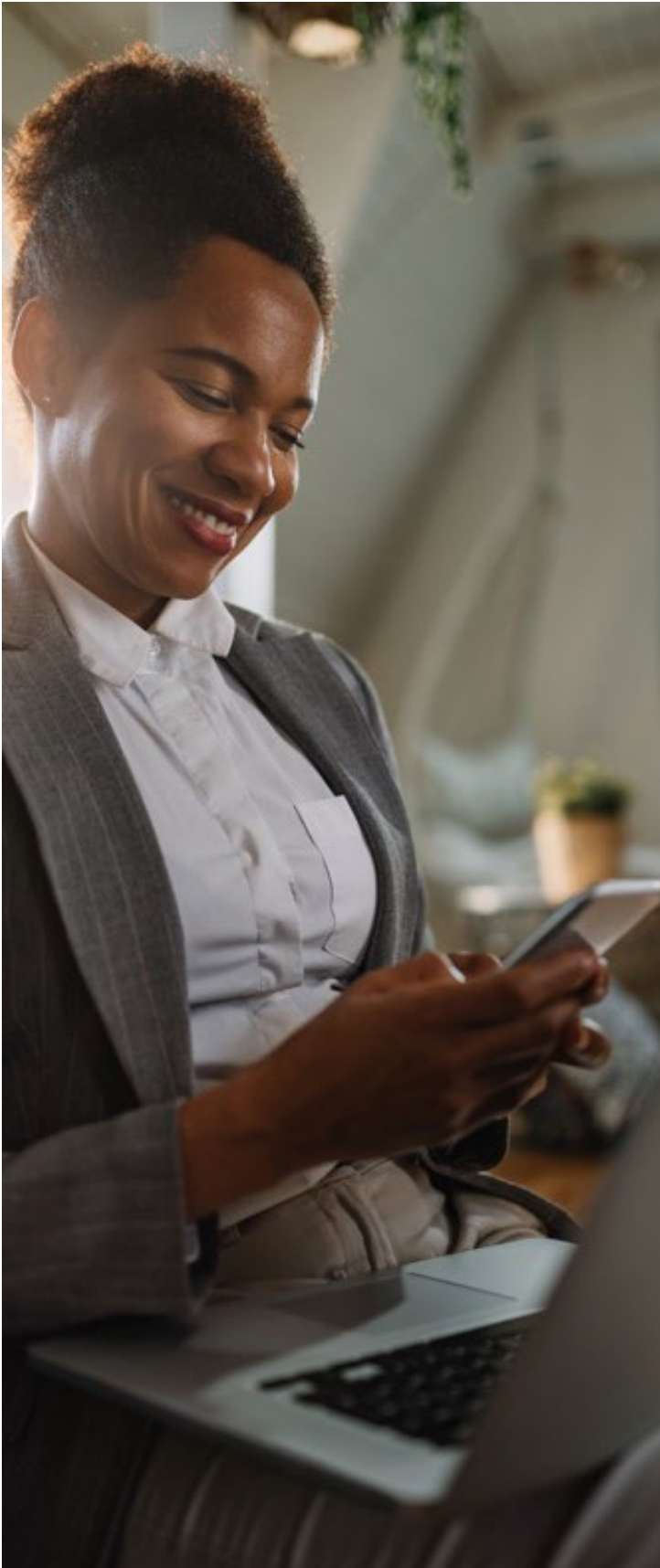
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Resources/Contact Information

Benefit	Provider	Phone	Website / Email
Medical	BCBSIL Network: BlueAdvantage HMO Networks: BlueChoice Options (BCO); PPO	(800) 892-2803 – HMO (800) 828-3116 – PPO	www.bcbsil.com
Prescription (HMO)	Prime Therapeutics	(877) 794-3574	https://www.myprime.com/en.html
Prescription (PPO/PPOHD)	CVS Caremark	(888) 202-1654	https://www.caremark.com/
Health Savings Account (HSA)	HSA Bank	(800) 357-6246	https://www.hsabank.com/
Dental	Delta Dental of Illinois	(800) 323-1743	https://www.deltadentalil.com/
Vision	EyeMed Network: SELECT	(866) 299-1358	www.eyemed.com
Flexible Spending Accounts (FSA)	WEX (formerly Discovery Benefits)	(866) 451-3399	https://wexhealthinc.custhelp.com/
Life	Voya	(800) 955-7736	https://www.voya.com/
Optional Protection Benefits	UNUM	(866) 679-3054	https://www.unum.com/
Employee Assistance Program (EAP)	SupportLinc	(888) 881-LINC [5462]	www.supportlinc.com (Username: naperville)
Pet Insurance	Nationwide	(877) 738-7874	www.petsnationwide.com
Identity Theft Protection	Allstate Identity Pro (InfoArmor)	(800) 789-2720	https://www.infoarmor.com/
Legal Services	Legal Shield	(815) 570-4599	https://www.legalshield.com/
ZERO Card	Zero Health	(855) 816-0001	https://zero.health/members/
Retirement Resources	Nationwide	(888) 401-5272	www.Naperville457.com
Human Resources	Benefits Team	(630) 420-6029	benefits@naperville.il.us
Benefit Enrollment	Munis ESS		https://napervilleil.munisselfservice.com/

Benefits Overview



Company Paid Benefits

- Basic Life and AD&D – Voya
- Employee Assistance Program – Support Linc (CuraLinc)

Benefit Options Requiring Employee Contributions

- Medical (Plan Options) – BlueCross BlueShield of Illinois
 - BlueAdvantage HMO
 - BCO PPO
 - BCO PPO High Deductible
 - ✓ Plans include prescription drug coverage
- Health Savings Account (HSA) – HSA Bank
- Dental – Delta Dental of Illinois
- Vision – EyeMed
- Voluntary Life and AD&D – Voya
- Flexible Spending Accounts (FSA) – WEX Benefits
 - General Purpose Healthcare FSA (not available for those enrolled in the PPO High Deductible plan who open an HSA)
 - Limited Purpose Healthcare FSA (for those enrolled in the PPO High Deductible plan)
 - Dependent Care FSA
- 457 Retirement Savings Plan – Nationwide
- Pet Insurance – Nationwide
- Group Legal Insurance – Legal Shield
- Optional Protection Benefits [Whole Life, Individual Short-Term Disability, Accident Insurance, Critical Illness Insurance] – Unum

Benefit Definitions

What is a premium?

A premium (also referred to as a contribution) is the cost you pay for health insurance, whether you use medical services or not. Premiums are deducted directly from your paycheck.

What is a deductible?

A deductible is the amount you pay out of your pocket before your insurance pays.

Deductibles typically run from **January – December** each year. Once you have met that dollar amount, you have met the requirements for the plan year.

What does a copay pay for?

Copayments, or copays, are pre-set dollar amount you are expected to pay for office visits, procedures or prescription drugs under your insurance plan.

Once the copay has been met, the insurance Company pays all remaining costs.

What does coinsurance mean?

Coinsurance is a set percentage of service costs that you will be expected to pay once you have met your annual deductible.

When your annual deductible is met, your insurance provider pays for their portion of the full cost of the service and you pay the coinsurance, or remaining percentage.

What counts toward my out-of-pocket maximum?

An out-of-pocket maximum is an annual cap on the dollar amount you are expected to pay out of your own pocket for services (including deductibles, copays, and coinsurance) throughout the plan year.

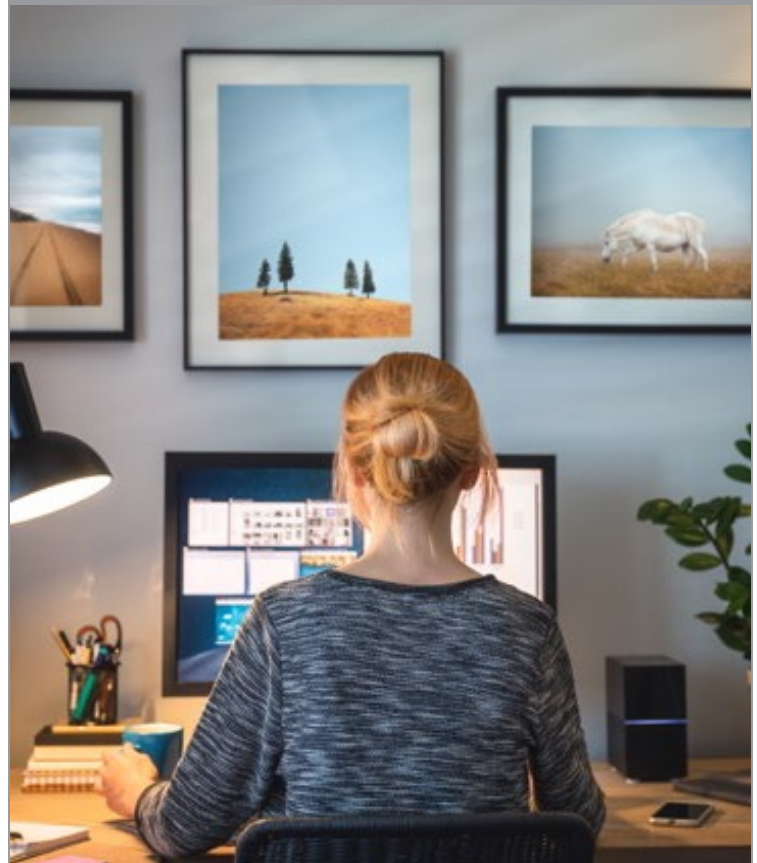
Once you meet the out-of-pocket amount, your insurance provider will cover 100% of remaining medical expenses for the year.

What is an HMO, PPO and PPO High Deductible?

HMO – When enrolled in an HMO plan, all care is directed by your selected Primary Care Physician (PCP). Referral is needed by PCP for any other care.

PPO – When enrolled in a PPO plan, you may seek treatment from any provider. Higher benefits are paid when using Blue Choice Options (BCO) and PPO network providers.

PPO High Deductible – On this plan, you may also seek treatment from any provider. Higher benefits are available when seeking treatment with BCO and PPO network providers. With this plan you also have the ability to open and make contributions to a Health Savings Account (HSA).





Eligibility

Who is Eligible?

You are eligible for City of Naperville benefits if you are an active employee working 30 or more hours per week. Part-time employees working 20 hours or more per week may also be eligible for benefits such as the EAP and MSA.

Your dependents are eligible if they are:

- Your legal spouse or civil union partner
- Your child(ren)* up to age 26
- Your disabled child(ren) up to any age (if disabled prior to age 19)*

** Includes natural, step, legally adopted/or a child placed for adoption, or a child under your legal guardianship.*

Termination of Coverage

If you or a covered dependent no longer meet the eligibility requirements or if your employment ceases, your medical, dental, vision, and Health Care FSA coverage will end on either the 15th or the last day of the month in which you become ineligible (depending on your last paycheck).

You may be eligible to elect COBRA for yourself and your eligible dependents for medical, dental, and vision coverage.

Life and AD&D coverage will end on the day you become ineligible. Your life coverages are convertible.

You are responsible for informing Human Resources within 30 days if any of your dependents become ineligible for benefits.



Enrollment

When Can I Enroll in Benefits?

You can enroll for benefits:

- Within **30** days of first becoming eligible for benefits
- During the annual Open Enrollment period
- During the plan year, if you experience a Qualifying Life Event

When Does Coverage Begin?

Benefits for new hires, unless explained otherwise, will become effective on the first of the month following date of hire.

How Do I Enroll in Benefits?

You must actively enroll in all benefits that require employee contributions. You will be automatically enrolled in all Company paid benefits.

To enroll (or make changes) to your benefits, you must log onto **Munis ESS** at <https://napervilleil.munisselfservice.com/>.

Please Note:

Federal regulations require City of Naperville to obtain the following information during enrollment:

- Social Security numbers for your dependents covered by the medical plan
- Dates of birth and your relationship to your dependents

Open Enrollment

Open Enrollment is your once-a-year opportunity to review your benefit plan elections and make adjustments that meet the needs of you and your family.

Changes to medical, HSA, FSA, dental and vision benefits made during Open Enrollment will go into effect January 1.

Flexible Spending Accounts run on a calendar year. Open Enrollment for these plans is typically held in November with changes effective January 1.

Making Benefit Changes During the Plan Year

The benefit elections you make during your initial enrollment period will be in effect through December 31. If you have a “qualifying life event,” you may make changes to certain benefits if you apply for the change and provide supporting documentation to Human Resources within **30/60[^]** days of the event. Proof of life events is subject to approval by City of Naperville. Changes are effective retroactive to the date of the event.

Qualifying life events include, but are not limited to:

- Your marriage
- Your divorce or legal separation
- Birth, adoption or placement for adoption of an eligible child
- Death of your spouse/civil union or covered child
- Change in you or your spouse/civil union’s work status that affects benefits eligibility (for example, starting a new job, leaving a job, changing from part-time to full-time, starting or returning from an unpaid leave of absence, etc.)
- Your spouse’s Open Enrollment
- A change in your child’s eligibility for benefits
- Relocation
- [^]Gain or loss of Medicare or Medicaid during the year

Other qualifying events may also apply. Please contact Human Resources.

You are responsible for informing Human Resources within 30 days if any of your dependents become ineligible for benefits.

Ask Alex

Get help choosing your benefits!

The City of Naperville has partnered with Jellyvision to provide you with a decision-making tool called ALEX.

ALEX asks you a series of questions to assist you in selecting the best plan for you and your family. ALEX is confidential and only you will see your responses to the series of questions.

You will want to set aside 20 – 30 minutes to complete the full benefit review session. Once you complete the session, you still have to complete your enrollment in Munis ESS.

Use the link here to get started: <https://www.myalex.com/city-of-naperville/2023>

Medical Plans

City of Naperville offers three medical plans through BlueCross BlueShield of Illinois with the following features:

- The HMO plan offers the ability to choose a primary care physician (PCP) from the BlueAdvantage HMO network.
- The PPO and PPO High Deductible plans offer the option to receive care from Blue Choice Options (BCO) network, PPO network or out-of-network providers. Higher benefits are paid when using BCO network providers.
- Preventive care is covered at 100% when using an in-network provider.
- Includes prescription drug coverage.
- Deductibles and out-of-pocket maximums accumulate on a plan year which runs January 1 – December 31.
- If you enroll in the High Deductible PPO plan, you can open and contribute to a Health Savings Account (HSA) to help cover some of your medical plan costs. For additional details, refer to the HSA section.
- For a comparison of the plans, please refer to the Medical Plans Comparison Chart. Specific benefit levels and limitations can be found in the plan summaries and Summary of Benefits and Coverage (SBC).

A Note About Health Care Reform

If you choose to purchase individual coverage through the Marketplace, you should know that because the City of Naperville's medical insurance meets specific ACA requirements, you may not be eligible to receive a federal subsidy.

Additional information is available at www.healthcare.gov.

Finding In-Network Providers

To search for in-network medical providers, log onto <https://www.bcbsil.com/>. When prompted to select a plan, select either Blue Advantage HMO or Blue Choice Options [BCO].

Access to Your Healthcare

After you are enrolled in a City of Naperville medical plan, log into or create your Blue Access for Members (BAM) account at www.bcbsil.com/member to access self-service tools and resources to help manage your medical benefits.



Medical Plan Options

BlueCross BlueShield of Illinois	HMO Plan	PPO Plan	PPO High Deductible Plan
Plan Year Company HSA Contribution (Individual / Family)	N/A	N/A	\$1,250 (E); \$2,500 (ES); \$2,500 (EC); \$2,800 (F)
<u>In-Network Name</u>	Blue Advantage HMO You Pay	BlueChoice Options You Pay	BlueChoice Options You Pay
Plan Year Deductible (Individual / Family)	N/A	\$500 / \$1,500	\$2,500 / \$5,000
Coinsurance	0%	15%	15%
Plan Year Out-of-Pocket Max ¹ (Individual / Family)	\$2,500 / \$5,000	\$3,000 / \$9,000	\$5,000 / \$10,000
Preventive Care	0%	0%	0%
Primary/Specialty Care Office Visit	\$25 / \$50	\$20 / \$40, then 15%	15% * ^
Emergency Room Care	\$300	15% * ^	15% * ^
Inpatient Hospital	\$250/day (1 st 3 days/calendar year)	15% * ^	15% * ^
Outpatient Surgery	\$0 copay	15% * ^ Pre-authorization required	15% * ^
<u>PPO Network</u>	You Pay	You Pay	You Pay
Plan Year Deductible (Individual / Family)	N/A	\$1,000 / \$3,000	\$2,500 / \$5,000
Coinsurance	N/A	35%	35%
Plan Year Out-of-Pocket Max ¹ (Individual / Family)	N/A	\$4,000 / \$12,000	\$5,000 / \$10,000
Primary/Specialty Care Office Visit	N/A	\$30 / \$50, then 35%	35% * ^
<u>Out-of-Network</u>	You Pay	You Pay	You Pay
Plan Year Deductible (Individual / Family)	N/A	\$2,000 / \$6,000	\$3,000 / \$6,000
Coinsurance	N/A	50%	50%
Plan Year Out-of-Pocket Max ¹ (Individual / Family)	N/A	\$6,000 / \$18,000	\$10,000 / \$15,000

Limitations and maximums may apply. Please refer to the plan summaries and Summary of Benefits and Coverage for more information.

¹ Plan Year Out-of-Pocket Maximum includes deductibles, copays and coinsurance

[^]Empower Wellbeing Management Program: Prior authorization required. Examples of services included in this requirement: in-patient hospital admissions, CT/PET scans, MRI, x-rays, bloodwork, etc...

* After Deductible

Prescription Drugs

When you enroll in a medical plan, you receive comprehensive prescription drug coverage through the indicated vendor.

HMO: Prime Therapeutics

To review your Rx formulary:

- Go to bcbsil.com
- Click “Prescription Drugs” then “Prescription Drug Lists”
- The HMO plan utilizes the “Performance Drug List”

Note: To review your specific benefits, please log-in to Blue Access for Members.

PPO and PPO High Deductible: CVS/Caremark [with a separate ID card]

How do I find which tier my prescription is in?

- Register at Caremark.com/startnow or via the app
- Under “Plan & Benefits” select “Check Drug Cost & Coverage”
- Enter your prescription name and dosage
- You will then be able to review your options, and the associated prices.

Some medications may be subject to prior authorization, quantity limits or step therapy requirements to be approved for coverage.

	Prime Therapeutics	CVS Caremark	
	HMO Plan	PPO Plan	PPO High Deductible Plan
Retail (up to 30-day supply)	You Pay	You Pay*	You Pay**
Tier 1 copay	\$10	20% (\$10 max)	20% after deductible
Tier 2 copay	\$40	20% (\$40 max)	20% after deductible
Tier 3 copay	\$60	20% (\$60 max)	20% after deductible
Specialty	\$100 (retail only)	20% (\$100 max; retail only)	20% after deductible
Mail Order (up to 90-day supply)	You Pay	You Pay	You Pay
Tier 1 / Tier 2 / Tier 3 copays	\$20 / \$80 / \$120	20% to \$20 / \$80 / \$120 max	20% after deductible

**PPO: When a generic is available, but the pharmacy dispenses the brand-name medication for any reason, you will pay the difference between the brand-name medication and the generic plus the brand copayment.*

***HDHP: Generic prescriptions on the Preventive Therapy Drug List are 20% before deductible.*

Where to Seek Care

MD Live (BCBSIL)

PPO and PPO High Deductible plans include MD Live visits, which provide 24-7-365 access to board-certified primary care doctors and pediatricians by secure video chat or phone. **For an illness or injury that is not an emergency**, MD Live's telemedicine program offers a **convenient, cost-effective alternative** to hospital emergency rooms and urgent care clinics.

MD Live is not intended to replace your relationship with your doctor, but rather provides access to healthcare when reaching the doctor is difficult or inconvenient.

Doctors in **MD Live** can diagnose, recommend treatment and write short-term prescriptions for minor, non-life-threatening conditions including, but not limited to:

- Acne
- Allergies
- Bronchitis
- Cold/Flu Symptoms
- Ear Infections
- Fever
- Headaches/Migraines
- Insect Bites
- Nausea/Stomach Aches
- Pink Eye
- Rash
- Sinus Infections
- Sore Throat
- Upper Respiratory Infections

Behavioral Health Support

You can also access licensed therapists through **MD Live** for confidential counseling seven days a week to help with depression, anxiety, stress, family difficulties and more. Behavioral health telemedicine appointments must be scheduled.

How to Use MD Live

1. Download the **MD Live** app, go online at **MDLIVE.com/bcbsil** or call **(888) 676-4204**.
2. Register and complete your account profile, including a brief medical history, for you and your enrolled family members. Note: You'll need your BCBSIL member ID card if registering on MDLIVE's website or by phone.
3. Video chat or talk with a doctor from home, work or when traveling.



There is no charge to set up your account, but you may have a charge for your visit, depending on your benefit plan.

You can register for and access MD Live services via:

Online: MDLIVE.com/bcbsil

Phone: (888) 676-4204

Text: BCBSIL 635-483

App: Download the app



Benefits of Telemedicine Visits

- Less time away from home and work
- No travel expenses or time
- Less interference with child or elder care responsibilities
- No exposure to other potentially contagious patients

Where to Seek Care (continued)

Emergency Care vs. Urgent Care

When you need help in a hurry, you have choices. Of course, when it's a **life-threatening problem, you should call 911 or go straight to the nearest hospital emergency room (ER).**

In the ER, true emergencies are treated first, so unless your life is in danger, you'll wait – sometimes for hours. The ER is also the most expensive option for care.

For non-life-threatening problems, call your doctor, access **MD Live** telemedicine services or go to an urgent care center.



Go to Emergency Room

Heart attack or stroke

Chest pain or intense pain

Shortness of breath

Severe abdominal pain

Head injury or other major trauma

Loss of consciousness

Major burns or severe bleeding

One-sided weakness or numbness

Open fractures

Poisoning or suspected overdose

or



Go to Urgent Care

Moderate fever

Colds, cough or flu

Bruises and abrasions

Cuts and minor lacerations

Minor burns and skin irritations

Eye, ear, or skin infections

Sprains or strains

Possible fractures

Urinary tract infections

Respiratory infections

Health Savings Account (HSA)

Only available for those enrolled in the PPO High Deductible medical plan(s)

A Health Savings Account (HSA) is a tax-advantaged savings vehicle available to individuals covered by a High Deductible Health Plan (HDHP). Funds in the account are used to pay for qualified medical, dental and vision expenses.

An HSA is a great way to save for the future. You can set aside money from each paycheck now and save funds to cover healthcare expenses that come up later. Plus, your contributions are free from federal income tax, so you're stretching your healthcare dollars while lowering your taxable take-home pay amount.

City of Naperville will also make contributions to your HSA if you enroll in the **PPO High Deductible** plan. This is "free money" for you to use to pay for eligible healthcare expenses.

HSA funds can only be used for yourself, your spouse/civil union and your taxable dependents. Expenses for civil unions and/or other dependents who do **not** qualify as tax dependents are not reimbursable under the HSA.



Advantages of an HSA

- Balance rolls over each year so you won't lose your contributions
- Tax savings — you do not pay federal tax* on:
 - Contributions to the account
 - Spending on qualified expenses
 - Interest that accrues
- Account is portable, so the funds are yours even if you change medical plans next year or leave the City of Naperville
- Use the funds (now or in the future) for eligible medical, dental or vision expenses, including coinsurance costs, prescriptions, glasses, orthodontia and more
- Use funds for over the counter medications
- Convenience – You can pay for medical, dental, and prescription expenses for any family member with a debit card, check, online bill payment or withdraw money from an ATM. The administrator, HSABank offers a great website and tools to help you take advantage of this account.

<http://www.hsabank.com/hsabank/members>
- Incentives – The City helps you build your account by offering a generous contribution in January and July and offers a matching contribution program. Matching Contribution is an annual election that will begin with your first contribution in 2023.

*Tax treatment of HSAs for state tax purposes may vary by state.

Health Savings Account (HSA)

(continued)

Funding and Enrolling in an HSA

You have the option to contribute to your HSA through pre-tax payroll contributions if you enroll in an HSA through HSABank.* You can change the amount you contribute to your HSA at any time during the plan year by logging into Munis ESS.

To enroll in an HSA, you must enroll in the **PPO High Deductible** medical plan. You will have to open your HSABank health savings account. You will receive instructions following enrollment on how to activate your account and establish a login and password. It is important to note that expenses are not eligible for reimbursement until your HSA has been established.

Once your HSA is opened, remember to designate a beneficiary for this account.

** You also can choose to open an HSA through another financial institution. However, you would have to make after-tax contributions; they would not be automatically deducted from your paycheck, and you would need to claim those contributions as a tax deduction when you file your taxes.*

Who Can Open an HSA?

You can contribute to an HSA if you:

- Are covered under an HSA-qualified high deductible health plan (HDHP).
- Are not enrolled in Medicare*, TRICARE or TRICARE for Life.
- Cannot be claimed as a dependent on someone else's tax return.
- Have not received Veterans Affairs (VA) benefits within the past 3 months.
- You (or your spouse) do not contribute to a Healthcare FSA.

** Enrollment in Medicare Part A may be retroactive by up to 6 months when you begin taking social security retirement after your Social Security Normal Retirement Age (SSNRA). This may affect your HSA eligibility.*

Other restrictions and exceptions may also apply. For more information, visit www.irs.gov/publications/p969/.

2023 HSA Contributions and Limits

Each year, you can contribute up to the IRS annual limit for HSAs (which includes City of Naperville's contribution). **2023 HSA annual contribution limits are \$3,850 for single coverage and \$7,750 for family coverage.*** City of Naperville will contribute to your HSA in January and July (this amount is prorated for new hires) and offers a matching contribution program. Matching Contribution is an annual election that will begin with your first contribution in 2023.

	City's Contribution	Employee's Contribution	Matching City Contribution	Total Annual Contribution
Employee Only	\$1,250	\$700	\$700	\$2,650
Employee + Spouse	\$2,500	\$1,300	\$1,300	\$5,100
Employee + Children	\$2,500	\$1,300	\$1,300	\$5,100
Family	\$2,800	\$1,500	\$1,500	\$5,800

* If you are age 55 or older, you may contribute an additional \$1,000 in catchup contributions.

IMPORTANT! If you use your HSA funds for non-qualified expenses, the purchase amount will be subject to tax, plus a 20% penalty if you are younger than age 65. To view a list of qualified expenses, visit <https://www.hsabank.com/hsabank/learning-center/irs-qualified-medical-expenses>

Flexible Spending Accounts (FSA)

Flexible Spending Accounts (FSA) allow you to set money aside for certain eligible expenses and draw from it throughout the year to pay for those expenses. The money is set aside pre-tax, reducing your taxable income. Three types of FSAs are available:

- Health Care
- Limited Purpose Health Care—HSA plan participants only
- Dependent Care

Money cannot be transferred between the accounts (i.e., you cannot use money from your Health Care FSA to pay for dependent care expenses and vice versa).

Health Care FSA

Not available to HSA plan participants

This FSA allows you to submit eligible **medical, dental and vision** expenses for reimbursement. You can deposit up to **\$3,050** to the Health Care FSA for the **2023** calendar year.

Limited Purpose Health Care FSA

Available to HSA plan participants only

Using this account in conjunction with the HSA gives you the opportunity to save additional pre-tax money. You can use the Limited Purpose Health Care FSA for eligible **dental and vision** expenses only. You can contribute up to **\$3,050** for the **2023** calendar year in this account.

FSA “Use It or Lose It”

All FSAs follow the “Use It or Lose It” rule. If you do not use the funds prior to the end of the plan year, you will forfeit the money.

Dependent Care FSA

Available to all benefit eligible employees

Dependent Care FSAs are used to pay for the costs of dependent care that enable you to work. This care may be for a child under age 13 and for older dependents, including children, spouses and parents who are physically or mentally unable to care for themselves and who live with you for more than half the year. Eligible expenses include daycare, before-school and after-school care, babysitters and elder daycare. For the **2023** calendar year, you can deposit up to **\$5,000** to a Dependent Care FSA (\$2,500 if you are married and filing separately).

How the FSA Works

As a new hire (and again during Open Enrollment), you select the amount of money you wish to deposit into the Health Care (or Limited Purpose Health Care) Account and/or the Dependent Care Account for the entire plan year. The plan year for the FSA benefit is **January 1 to December 31**. The full elected amount is available on the first day of benefit eligibility for the Health Care and Limited Purpose FSAs. The total amount is then equally divided by the number of pay periods remaining in that year and that amount is deducted from each paycheck. The money is set aside in your FSA account(s).

As you incur eligible expenses, you file a simple claim form (along with copies of your receipts) and are reimbursed for such expenses from the account. Employees who enroll in the Health Care (or Limited Purpose Health Care) FSA will receive an FSA debit card to pay for qualified purchases, eliminating the need to submit a paper claim and wait for reimbursement.

The FSA plans are administered by **WEX Benefits**. To register and log into your FSA account, go to <https://wexhealthinc.custhelp.com/>.

How To Save \$\$\$!

When Using Your Medical and Prescription Plans

Use In-Network Doctors

By using in-network doctors, clinics, hospitals and pharmacies, you pay the lowest cost for care. When you visit out-of-network doctors, our health plan covers less of the cost.

Choose the Right Type of Care

When you need care, know your options. Urgent care centers, online doctor visits or a call to the medical plan nurse line can help save time and money.

Utilize **BlueAccess for Members** to determine the facility (freestanding imaging centers for MRIs, CT scans and other imaging) that would be the most cost effective.

Use Your Preventive Care Benefits

Most preventive care services are covered at 100% when you use in-network providers. Getting regular exams, screenings and immunizations can save you a lot of money in the long run by catching problems early or preventing them altogether.

Use Mail Order Rx Program

Rather than visiting a pharmacy month after month, save time by having the medication delivered to your home.

Through Prime Therapeutics (HMO) or CVS/Caremark (PPO/HDHP), you can also save money by getting up to a 90-day supply for less than what you would pay through a retail pharmacy. And because shipping is free, you'll also save on gas money!

Ask Your Doctor for Generic Drugs

The next time you need a prescription, ask your doctor if it is appropriate to use a generic drug rather than a brand name drug. Generic drugs contain the same active ingredients, are identical in dose, form and administrative method AND are less expensive than their brand name counterparts.

If you must take a brand name drug, ask your doctor for samples or coupons. Also check the drug manufacturer's website for available rebates and discounts.

Use Your ZERO Health Card

Use ZERO and save your cash by never paying a copay, coinsurance or deductible on select procedures and services. Zero will help match you up with local providers delivering the best combination of cost, quality and convenience. Visit <https://zero.health/members/>.

Ask Your Pharmacy for the Cash Price

Call and ask your pharmacy for the cash price* of a prescription drug. Sometimes these prices are lower than the prescription drug plan copay.

Naperville CRX

Naperville CRX is a mail order option for certain maintenance medications. This program is available to members enrolled in the HMO and PPO plans (this does not include the PPO High Deductible plan). For more information, go to www.napervillecrx.com.

* If you pay the lower cash price, the amount you pay will not apply toward your deductible or out-of-pocket maximum.

Dental

City of Naperville offers a dental plan through **Delta Dental of Illinois**. Your choice of dentists can determine the cost savings you receive. PPO and Premier Network providers are paid directly by Delta Dental of Illinois and agree to accept negotiated fees as “payment in full” for services rendered.

When you use out-of-network providers, Delta Dental of Illinois will apply the applicable percentage of the allowed amount and you are responsible for paying the balance of the bill.

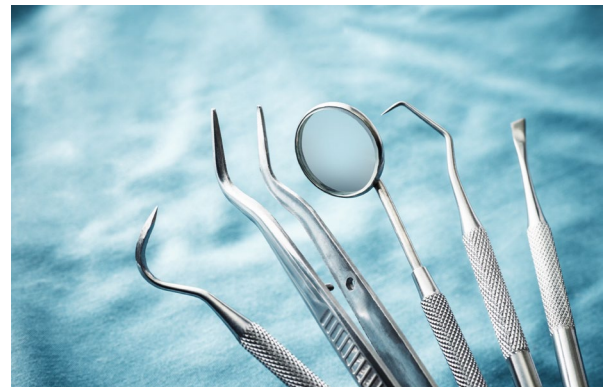
PPO and Premier network coverage is provided when you use Delta Dental of Illinois providers. To search for network providers, go to <https://www.deltadentalil.com/> and click on **Find a Provider > Dental**.

Delta Dental of Illinois	Dental Plan		
	PPO Network	Premier Network	Non-Network
Calendar Year Maximum * (plan pays)	\$2,000	\$1,500	\$1,000
	Plan Pays	Plan Pays	Plan Pays
Calendar Year Deductible * (applies to Basic and Major Services)	\$50 Individual / \$150 Family		
Preventive Services (no deductible)	100%	100%	100%
Basic Services (after deductible)	90%	80%	80%
Major Services (after deductible)	60%	50%	50%
Orthodontia	50%	50%	50%
Orthodontia Lifetime Maximum (per person)	\$2,000	\$1,500	\$1,000

* Plan deductibles and maximums accumulate on a calendar year (January 1 – December 31). These amounts reset on January 1 of each year.

Additional Features

- **To Go Carryover Feature:** Your plan allows you and your covered dependents to carry-over qualified, unused portions of your annual maximum from one year to the next.
- **Enhanced Benefits Program:** This plan provides additional cleanings and/or applications of topical fluoride to people with specific health conditions that put them at risk for oral health disease. The costs of the additional cleanings and fluoride treatments will be applied to your annual maximum.



Vision

Routine eye exams are important for maintaining good vision and can also provide early warning of other health conditions. The **EyeMed** vision plan provides coverage for exams, glasses and contact lenses, as shown below.

In-network coverage is provided when you use **EyeMed** providers. To search for providers, log onto www.eyemed.com and select the **SELECT Network**, or call **(866) 299-1358**.

- Employees pay the full cost of vision coverage.



EyeMed	Frequency	In-Network	Out-of-Network
		You Pay	Plan Allowance / Reimbursement
Eye Exam	Once every 12 months	\$20 Copay	Up to \$30
Lenses	Once every 12 months		
Single Vision		\$20 Copay	Up to \$25
Bifocal		\$20 Copay	Up to \$40
Trifocal		\$20 Copay	Up to \$60
Progressive (Standard)		\$85	Up to \$40
Frame	Once every 12 months	\$0 Copay; \$130 allowance; 80% over \$130	Up to \$65
Contacts—instead of glasses	Once every 12 months		
Conventional		\$0 Copay; \$100 allowance; 85% of charge over \$100	Up to \$80
Medically Necessary		\$0 Copay; Paid in Full	Up to \$200
Laser Vision Correction		15% off retail price or 5% off promotional price	N/A

EyeMed Freedom Pass: With Freedom Pass, members get a special offer at **Target Optical**: \$0 out-of-pocket cost for their choice of frames. That means you incur no cost for frames from top leading brands.

Life Insurance

Basic Life/AD&D

Having appropriate life insurance coverage is a critical part of planning for your family's current and future financial needs. Proceeds from life insurance can help with salary replacement, mortgage protection, cost of childcare, debt repayment and children's education expenses.

City of Naperville provides Basic Life and AD&D insurance coverage of **1.5 times your salary** at no cost to you. The Basic Life and AD&D insurance program is administered by **Voya** and is paid for by City of Naperville. You are automatically enrolled in these benefits.

(According to federal law, only the first \$50,000 of employer-paid life insurance is not taxable. Premium paid by City of Naperville for coverage levels over \$50,000 will be taxable to you and will be included on your year-end W-2 statement.)

Voluntary Life

A new hire can purchase Voluntary Life insurance for you, your legal spouse and dependent children (age 14 days to 19 years, and full-time students less than 23 years) **without providing medical information up to certain guarantee issue (GI) amounts** (see chart). If you leave the Company, this coverage can be taken with you.

Employee and spouse amounts applied for over the GI as a new hire will require you to provide Evidence of Insurability (EOI) for review and approval by Voya.

Benefit amounts reduce at age 65. Please refer to the benefit summary for details.

If you elect not to enroll within 30 days of your date of hire, you will still be able to purchase coverage in the future. However, ALL amounts elected will be subject to the EOI requirements provision. At that time, if your EOI is not satisfactory to Voya Financial, you will not have Voluntary Life coverage.

Voluntary Life/AD&D Amounts Available

Employee	Increments of \$10,000 up to \$500,000 Guarantee Issue*: \$150,000; \$80,000 age 60 and over
Spouse	Increments of \$10,000 up to \$250,000 Guarantee Issue*: \$40,000
Child (14 days to 19 years)	Increments of \$2,000 up to \$10,000 Guarantee Issue*: \$10,000

To enroll in Voluntary Spouse and/or Child Life, you must be enrolled in Basic Employee Life.

**Guarantee issue is the amount of coverage you or your dependents can elect up to without medical questions. Guarantee issue is only available to newly benefit eligible employees.*

Who do I contact with questions?

For more information, please call the Voya Employee Benefits Customer Service Team at (800) 955-7736.



Optional Protection Benefits

City of Naperville offers additional voluntary benefit plans through **UNUM**. These plans are **not medical insurance** and do not replace your medical coverage, but rather pay cash directly to you in addition to any benefits you receive from your health plan. These benefits are not available for new hires. Enrollment in this coverage is **only available during the annual open enrollment period**.

Insurance policies available for purchase (through after-tax payroll deductions) include **Whole Life Insurance, Individual STD, Critical Illness, and Accident**. These benefits may help fill the gap until you meet your medical plan deductible.

All UNUM benefit plans are portable, which means you can take these benefits with you if you leave the City of Naperville.

Rates are based on age, tobacco status and policy elected.

Whole Life Insurance

Whole life insurance can provide benefits to your loved ones if you die prematurely – and it provides coverage into your retirement years.

Please refer to the UNUM benefit plan summaries for details and rates.

Individual Short-Term Disability

Short term disability (STD) insurance can replace a portion of your income while you are disabled.

STD benefits become payable when you are unable to work due to an injury or illness unrelated to work. If you remain disabled and meet the plan's disability requirements, you will continue to receive a percentage of your weekly earnings until the benefit duration has ended.

Critical Illness Insurance

This insurance **pays a lump-sum cash benefit** directly to the insured following the diagnosis of a covered critical illness or event, including (but not limited to), heart attack, kidney failure, stroke and major organ transplants.

The plan also provides a \$75 annual wellness benefit (per calendar year) for eligible health screenings and prevention measures. Since these screenings are often paid at 100% under the medical plan, you could walk away with cash in your pocket for practicing good preventive care.

Please refer to the UNUM benefit plan summaries for details and rates.



Accident Insurance

Accident insurance **pays lump-sum benefit (based on type of injury sustained and treatment needed)** when you or your covered family members suffer injuries sustained in an accident. Covered injuries include fractures, burns, concussions, tears, lacerations, broken teeth and eye injuries.

Please refer to the UNUM benefit plan summaries for details and rates.

Mental Well-being Benefits

Struggling but not sure where to turn?

Reach out to SupportLinc, the Employee Assistance Program, for guidance on how to work through your challenges.

Dealing with a mental health problem?

Schedule a session at Thriveworks, through a new program offering — you'll meet with a provider quickly.

Remember: You also have access to mental health benefits through your medical plan, Blue Cross Blue Shield.

If HMO: Must work through your primary care doctor.
If PPO or HDHP PPO, you're able to self-refer.



Employee Assistance Program (EAP)

We understand how challenging it can be to balance your work and personal life, and we are committed to helping you do just that.

At some point in each of our lives, we face a problem or situation that is difficult to resolve. When these instances arise, **SupportLinc** will be there to help. The SupportLinc Employee Assistance Program (EAP) is a **FREE** and **confidential** resource that helps you deal with life's challenges, and the demands that come with balancing home and work. SupportLinc provides confidential, professional referrals and up to six free face-to-face counseling sessions for a wide variety of concerns, including anxiety, depression, marriage and relationship problems, grief and loss, substance abuse, anger management, work-related pressures, stress and more.

To get started, call: **(888) 881-LINC [5462]**

Online resources are also available by logging onto www.supportlinc.com (You will need to create a personal username)

Thriveworks

Get access to in-person and online care quickly. Thriveworks providers specialize in many different areas, enabling them to help your diverse needs.

Thriveworks specializations include trauma and PTSD, anxiety and depression, relationship issues, stress and life transitions, anger management, sleep or insomnia, coping skills, mindfulness and meditation, grief and loss.

To get started, call **(855) 762-0182** or visit <https://thriveworks.com/partners/city-naperville/>

Financial Wellness

Financial Guidance

Work with a financial expert at **MySecureAdvantage** to achieve your financial goals. Finances can feel overwhelming. Connect with a Money Coach and take advantage of their action plans, online video courses, and more. Build a stronger and more secure future no matter where you are in your financial journey.

The confidential service is free to employees and their family members for all stages of life.

Topics include:

- Debt & Credit
- Spending & Saving
- Student Loans
- Taxes
- Getting Married
- Large Purchases
- Home Buying
- Estate Planning
- Retirement Savings
- More!

Visit Naperville.mysecureadvantage.com or call (888) 724-2326 to set up an appointment.



Nationwide 457 Plan

Enroll with Nationwide to contribute to a deferred compensation plan through payroll deductions for both pre-tax or after-tax Roth 457 options. There are a wide variety of investment options available.

Enrolling is a two-step process.

1. Enroll with Nationwide at www.Naperville457.com.
2. Elect your contribution amount in Munis ESS.



Additional Benefits (continued)

Legal Services

As a City of Naperville employee, you have access to enroll in pre-paid legal services through **Legal Shield**.

Common legal services include estate documents (wills and trusts), real estate matters, identity theft defense, traffic offenses, document review, adoptions, name changes and debt collection defense.

To obtain additional information, call **(815) 570-4599**.



Pet Insurance

Nationwide Pet Insurance Pet insurance makes it a little easier to be financially prepared for the costs of your pet's healthcare needs.

Nationwide pet insurance provides benefits for veterinary treatments related to accidents and illnesses, including cancer. Medical policies cover diagnostic tests, X-rays, prescriptions, surgeries, hospitalization and more. Wellness coverage also can be added.

Rates for this insurance are based on your pet's breed, age and location. You can enroll at **www.petsnationwide.com**.

Nationwide Pet Insurance is direct-billed — this benefit is not paid through payroll deduction.

Identity Theft Protection

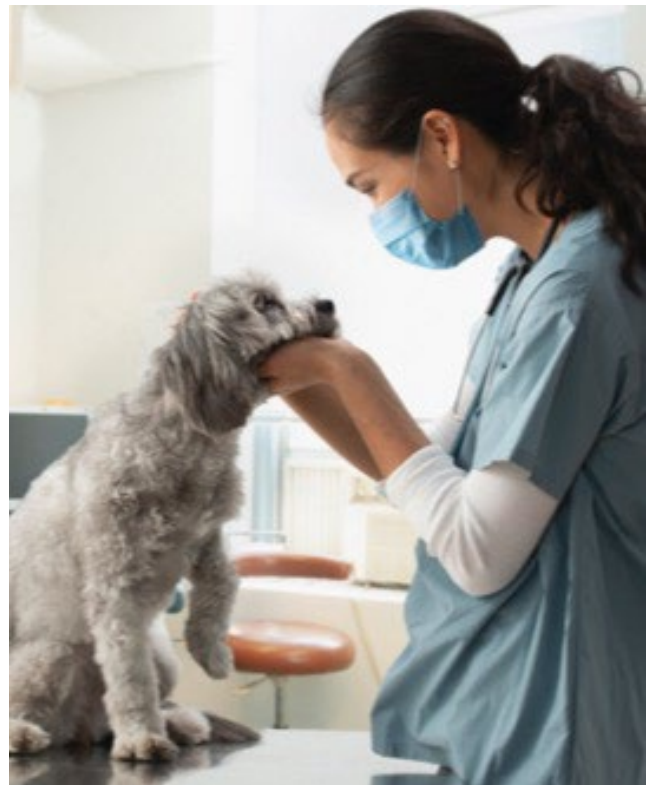
Identity theft is when thieves steal your personal information in order to take over or open new accounts, file fake tax returns, rent or buy properties or commit other crimes in your name. **Allstate Identity Pro (InfoArmor)** can help you avoid identity theft and, in the worst-case scenario, get your life back after a breach of your secure personal information.

To enroll in coverage, call **(800) 789-2720**.

Home and Auto Insurance

Offered through **Farmers Group Select**, City of Naperville employees have access to home and auto insurance.

To obtain additional information and a quote, call **(855) 605-2659**.



Required Notices

The U.S. government requires companies offering certain employee benefit plans to inform covered employees and their dependents about laws/provisions that affect the governance and/or coverage within those plans.

The City has full details available for you concerning the following laws/provisions:

Notice of HIPAA Special Enrollment Rights

Medicare Part D Notice

Children's Health Insurance Program (CHIP) Notice

Notice of Patient Protection Provisions

COBRA Notice

Medical Child Support Order Notice

Women's Health and Cancer Rights Act

Summary of Benefits and Coverage

Mental Health Parity and Addiction Equity Act (MHPAEA) Notice

Each of these notices can be found by visiting:

bit.ly/EmployeeBenefitsNaperville





Naperville

