



2024-2025 Employee Benefits

The information
in this booklet can also
be found at:



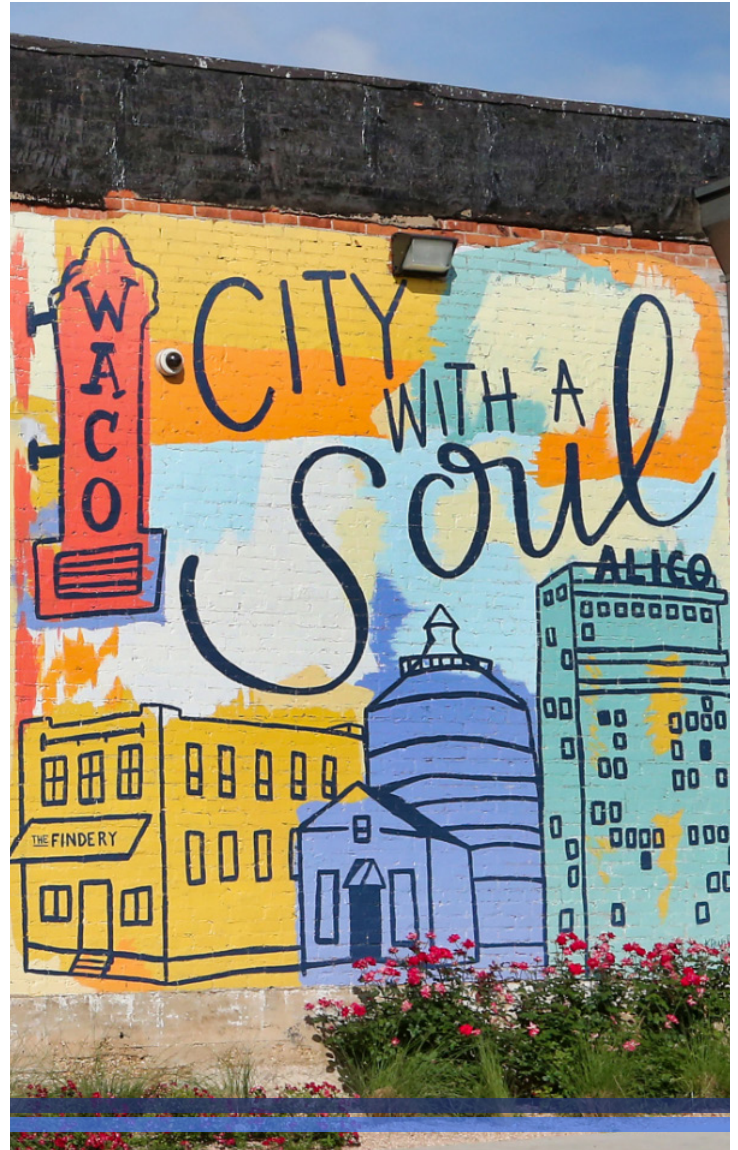
[www.waco-texas.com/Departments/
Human-Resources/HR-Careers](http://www.waco-texas.com/Departments/Human-Resources/HR-Careers)



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Working together makes the City of Waco a success, and this teamwork extends to your benefits. We provide options to support your family's overall wellbeing. This guide offers details on your 2024-2025 benefits. Contact the Human Resources Department with any questions.

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See page 27 for important information concerning Medicare Part D coverage. To view all notices, please visit the employee intranet.

In this Guide, we use the term company to refer to the City of Waco. This Guide is intended to describe the eligibility requirements, enrollment procedures, and coverage effective dates for the benefits offered by the company. It is not a legal plan document and does not imply a guarantee of employment or a continuation of benefits. While this Guide is a tool to answer most of your questions, full details of the plans are contained in the Summary Plan Descriptions (SPDs), which govern each plan's operation. Whenever an interpretation of a plan benefit is necessary, the actual plan documents will be used.

Welcome

The City of Waco’s Benefit Package is designed to provide a range of benefit options to meet the needs of you and your family. In addition to your salary and wages, the City offers a comprehensive benefits package. The benefit offerings are designed to improve your overall health, protect you from catastrophic medical expenses, and to invest in your future by funding your retirement.

This guide includes:

- An overview of your 2024-2025 benefits options
- Eligibility information
- Explanations of each benefit to help you make the best decisions for you and your family
- Contact information for all benefits providers
- Costs associated with your benefits

Benefits Overview

The City of Waco pays the full cost of some benefits while you share the cost or pay the full cost for others. Pre-tax means the cost comes out of your pay before taxes are deducted. After-tax means the cost comes out of your pay after taxes are deducted.

BENEFITS	AUTOMATIC	OPTIONAL	WHO PAYS	HOW YOU PAY
MEDICAL & PRESCRIPTION		X	You and City of Waco	Pre-tax
TELADOC - IF ENROLLED IN HEALTH PLAN	X		City of Waco	N/A
PLAN ADVISOR - IF ENROLLED IN HEALTH PLAN	X		City of Waco	N/A
VIRGIN PULSE - IF ENROLLED IN HEALTH PLAN	X		City of Waco	N/A
ONSITE FITNESS ROOMS	X		City of Waco	N/A
EMPLOYEE ASSISTANCE PLAN (EAP)	X		City of Waco	N/A
DENTAL		X	You	Pre-tax
VISION		X	You	Pre-tax
BASIC LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)	X		City of Waco	N/A
OPTIONAL LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)		X	You	After-tax
LONG TERM DISABILITY	X		City of Waco	N/A
SHORT TERM DISABILITY		X	You	After-tax
FLEXIBLE SPENDING ACCOUNTS		X	You	Pre-tax
457B DEFERRED COMPENSATION		X	You	Pre-tax
TMRS	X		You and City of Waco	Pre-tax

Any questions?

We’re here to help. Contact Human Resources Department at 254-750-5789 or email us at benefits@wacotx.gov.

Insurance Program Administration Policy

This policy defines the processes used to administer insurance benefits for City of Waco employees. All employees are encouraged to read the policy to familiarize themselves with definitions, responsibilities and procedures related to their benefits. Please refer to Policy BEN-1 on the Employee Intranet.



The information in this booklet can also be found at:
www.waco-texas.com/Departments/Human-Resources/HR-Careers

Important Contacts

Aetna Resources for Living - EAP

888-238-6232

www.resourcesforliving.com

Username: wacotx

Password: eap



Airrosti - Pain Management

800-404-6050

airrosti.com



Armor Up America - EAP

Civil Service: 206-459-3020

Coupon Code for Fire:

WFDTX23

Coupon Code for Police: WPDTX23

Civilian Service: 253-652-2820

Coupon Code for Civilians: WATX or

visit www.armorupamerica.com



Dearborn National - Disability

800-348-4512

www.dearbornnational.com



Dearborn National - Life and AD&D

800-348-4512

www.dearbornnational.com



Delta Dental - Dental

800-521-2651

www.deltadentalins.com

Group #: 17872



Livongo - Chronic Condition Management

800-835-2362

join.livongo.com



Navia Benefits - FSA

800-669-3539

www.naviabenefits.com

Employer code: WC1



QCD - Dental Discount

800-229-0304

www.qcdfamerica.com

Group #: WACO



Superior - Vision

800-507-3800

www.superiorvision.com

Group #: 29785



Teladoc - Telemedicine

800-835-2362

www.teladoc.com



Texas Municipal System (TMRS) - Retirement

800-924-8677

www.thrs.com



UMR - Medical

844-598-7542

Register today to access your member portal at:

www.umar.com

or by downloading the mobile app via the QR code.

Group #: 76416249



UMR / Optum - Pharmacy

877-559-2955

Register today to access your member portal at

www.optumrx.com or by

downloading the mobile app via the QR code.



Virgin Pulse - Online Wellness Portal

888-671-9395

www.wellnesswaco.com



City of Waco

Human Resources Department

254-750-5789

benefits@wacotx.gov

City of Waco Employee Hotline

24 hours a day. 7 days a week.

365 days a year.

833-309-2662

Waco.IntegraReport.com



Employee Premiums

	HEALTH PLAN WITH WELLNESS PARTICIPATION	HEALTH PLAN WITHOUT WELLNESS PARTICIPATION (ADDITIONAL \$75 PER MONTH)
HEALTH PLAN MONTHLY PREMIUMS		
EMPLOYEE ONLY	\$37.28	\$112.28
EMPLOYEE + SPOUSE	\$421.42	\$496.42
EMPLOYEE + CHILD(REN)	\$250.28	\$325.28
EMPLOYEE + FAMILY	\$547.26	\$622.26

	DELTA DENTAL PPO PLAN	QCD DISCOUNT DENTAL PLAN	SUPERIOR VISION PLAN
OPTIONAL DENTAL & VISION MONTHLY PREMIUMS			
EMPLOYEE ONLY	\$28.86	\$0.00	\$5.30
EMPLOYEE + SPOUSE	\$57.66	\$8.00	\$10.06
EMPLOYEE + CHILD(REN)	N/A	N/A	\$10.52
EMPLOYEE + FAMILY	\$82.20	\$12.00	\$16.12

EMPLOYEE OPTIONAL LIFE AND (AD&D) MONTHLY PREMIUMS (1X UP TO \$100K, 2X UP TO \$200K)			
1X ANNUAL SALARY	ELECTION	2X ANNUAL SALARY	ELECTION
\$10.20	\$34,000	\$20.40	\$68,000
\$10.50	\$35,000	\$21.00	\$70,000
\$10.80	\$36,000	\$21.60	\$72,000
\$11.10	\$37,000	\$22.20	\$74,000
\$11.40	\$38,000	\$22.80	\$76,000
\$11.70	\$39,000	\$23.40	\$78,000
\$12.00	\$40,000	\$24.00	\$80,000
\$12.30	\$41,000	\$24.60	\$82,000
\$12.60	\$42,000	\$25.20	\$84,000
\$12.90	\$43,000	\$25.80	\$86,000
\$13.20	\$44,000	\$26.40	\$88,000
\$13.50	\$45,000	\$27.00	\$90,000
\$13.80	\$46,000	\$27.60	\$92,000
\$14.10	\$47,000	\$28.20	\$94,000
\$14.40	\$48,000	\$28.80	\$96,000
\$14.70	\$49,000	\$29.40	\$98,000
\$15.00	\$50,000	\$30.00	\$100,000
\$15.30	\$51,000	\$30.60	\$102,000
\$15.60	\$52,000	\$31.20	\$104,000
\$15.90	\$53,000	\$31.80	\$106,000
\$16.20	\$54,000	\$32.40	\$108,000
\$16.50	\$55,000	\$33.00	\$110,000
\$16.80	\$56,000	\$33.60	\$112,000
\$17.10	\$57,000	\$34.20	\$114,000
\$17.40	\$58,000	\$34.80	\$116,000
\$17.70	\$59,000	\$35.40	\$118,000
\$18.00	\$60,000	\$36.00	\$120,000
\$18.30	\$61,000	\$36.60	\$122,000
\$18.60	\$62,000	\$37.20	\$124,000
\$18.90	\$63,000	\$37.80	\$126,000
\$19.20	\$64,000	\$38.40	\$128,000
\$19.50	\$65,000	\$39.00	\$130,000
\$19.80	\$66,000	\$39.60	\$132,000

Employee Premiums

EMPLOYEE OPTIONAL LIFE AND (AD&D) MONTHLY PREMIUMS			
1X ANNUAL SALARY	ELECTION	2X ANNUAL SALARY	ELECTION
\$20.10	\$67,000	\$40.20	\$134,000
\$20.40	\$68,000	\$40.80	\$136,000
\$20.70	\$69,000	\$41.40	\$138,000
\$21.00	\$70,000	\$42.00	\$140,000
\$21.30	\$71,000	\$42.60	\$142,000
\$21.60	\$72,000	\$43.20	\$144,000
\$21.90	\$73,000	\$43.80	\$146,000
\$22.20	\$74,000	\$44.40	\$148,000
\$22.50	\$75,000	\$45.00	\$150,000
\$22.80	\$76,000	\$45.60	\$152,000
\$23.10	\$77,000	\$46.20	\$154,000
\$23.40	\$78,000	\$46.80	\$156,000
\$23.70	\$79,000	\$47.40	\$158,000
\$24.00	\$80,000	\$48.00	\$160,000
\$24.30	\$81,000	\$48.60	\$162,000
\$24.60	\$82,000	\$49.20	\$164,000
\$24.90	\$83,000	\$49.80	\$166,000
\$25.20	\$84,000	\$50.40	\$168,000
\$25.50	\$85,000	\$51.00	\$170,000
\$25.80	\$86,000	\$51.60	\$172,000
\$26.10	\$87,000	\$52.20	\$174,000
\$26.40	\$88,000	\$52.80	\$176,000
\$26.70	\$89,000	\$53.40	\$178,000
\$27.00	\$90,000	\$54.00	\$180,000
\$27.30	\$91,000	\$54.60	\$182,000
\$27.60	\$92,000	\$55.20	\$184,000
\$27.90	\$93,000	\$55.80	\$186,000
\$28.20	\$94,000	\$56.40	\$188,000
\$28.50	\$95,000	\$57.00	\$190,000
\$28.80	\$96,000	\$57.60	\$192,000
\$29.10	\$97,000	\$58.20	\$194,000
\$29.40	\$98,000	\$58.80	\$196,000
\$29.70	\$99,000	\$59.40	\$198,000
\$30.00	\$100,000	\$60.00	\$200,000

ADDITIONAL OPTIONAL AD&D MONTHLY PREMIUMS*		
FAMILY	ELECTION	SINGLE
\$0.54	\$10,000	\$0.26
\$1.06	\$20,000	\$0.50
\$1.60	\$30,000	\$0.76
\$2.12	\$40,000	\$1.00
\$2.66	\$50,000	\$1.26
\$3.18	\$60,000	\$1.50
\$3.72	\$70,000	\$1.76
\$4.24	\$80,000	\$2.00
\$4.78	\$90,000	\$2.26
\$5.30	\$100,000	\$2.50
\$5.84	\$110,000	\$2.76
\$6.36	\$120,000	\$3.00
\$6.90	\$130,000	\$3.26
\$7.42	\$140,000	\$3.50
\$7.96	\$150,000	\$3.76

*Must be enrolled in Optional Employee Life to be eligible.

Employee Premiums

ADDITIONAL OPTIONAL AD&D MONTHLY PREMIUMS*		
FAMILY	ELECTION	SINGLE
\$8.48	\$160,000	\$4.00
\$9.02	\$170,000	\$4.26
\$9.54	\$180,000	\$4.50
\$10.08	\$190,000	\$4.76
\$10.60	\$200,000	\$5.00
\$11.14	\$210,000	\$5.26
\$11.66	\$220,000	\$5.50
\$12.20	\$230,000	\$5.76
\$12.72	\$240,000	\$6.00
\$13.26	\$250,000	\$6.26
\$13.78	\$260,000	\$6.50
\$14.32	\$270,000	\$6.76
\$14.84	\$280,000	\$7.00
\$15.38	\$290,000	\$7.26
\$15.90	\$300,000	\$7.50

*Must be enrolled in Optional Employee Life to be eligible.

DEPENDENT OPTIONAL LIFE AND AD&D MONTHLY PREMIUMS*		
SPOUSE \$10,000		\$3.90
CHILD(REN) \$10,000***		\$0.98
FAMILY \$10K/\$10K***		\$4.88
SPOUSE \$20,000		\$7.80
CHILD(REN) \$20,000**		\$1.96
FAMILY \$20K/\$20K**		\$9.76

***Child 14 days to 6 months \$500
 ***Child 6 months to 19/24 \$2,500
 **Child 14 days to 6 months \$1,000
 **Child 6 months to 24 \$5,000

*Must be enrolled in Optional Employee Life to be eligible.

OPTIONAL SHORT TERM DISABILITY MONTHLY PREMIUMS		
ANNUAL INCOME (ROUNDED UP TO NEXT \$1,000)	WEEKLY BENEFIT AMOUNT (70% OF WEEKLY EARNINGS)	\$750 - WEEKLY MAX BENEFIT COST PER MONTH
\$34,000.00	\$457.69	\$13.28
\$35,000.00	\$471.15	\$13.68
\$36,000.00	\$484.62	\$14.06
\$37,000.00	\$498.08	\$14.46
\$38,000.00	\$511.54	\$14.84
\$39,000.00	\$525.00	\$15.24
\$40,000.00	\$538.46	\$15.62
\$41,000.00	\$551.92	\$16.02
\$42,000.00	\$565.38	\$16.40
\$43,000.00	\$578.85	\$16.80
\$44,000.00	\$592.31	\$17.18
\$45,000.00	\$605.77	\$17.58
\$46,000.00	\$619.23	\$17.96
\$47,000.00	\$632.69	\$18.36
\$48,000.00	\$646.15	\$18.74
\$49,000.00	\$659.62	\$19.14
\$50,000.00	\$673.08	\$19.54
\$51,000.00	\$686.54	\$19.92
\$52,000.00	\$700.00	\$20.32
\$53,000.00	\$713.46	\$20.70
\$54,000.00	\$726.92	\$21.10
\$55,000.00	\$740.38	\$21.48
\$56,000 and up	\$750.00	\$21.76

Eligibility and Enrollment

Eligibility

Employees who work at least 30 hours a week can enroll in health insurance and Flexible Spending Accounts (FSAs). Employees who work 40 hours a week can enroll in other benefits, such as dental, vision, life insurance, and disability coverage.

Coverage Dates

Benefits start on the first day of the month after 30 days of employment. Benefits cannot change until the next open enrollment period unless you have a Qualifying Life Event.

Dependents

You can enroll your legal spouse, natural child, foster child, stepchild, legally adopted child, or any other child under your legal guardianship. This includes children who are past the age of 26 and are fully dependent on you for support due to a mental or physical disability.

Children can be covered up to their 26th birthday. If your child becomes ineligible for coverage or ages out (i.e. turning age 26), you need to notify Human Resources at 254-750-5789 or email us at benefits@wacotx.gov.

Verification of dependent eligibility is required upon enrollment.

Note: Newborns do not receive automatic coverage for the first 30 days following birth; they must be enrolled in the plan within 30 days after birth to receive coverage.

Qualifying Life Events

QUALIFYING EVENTS	DEADLINE TO ENROLL OR DISENROLL	DOCUMENTATION REQUIRED	CHANGE DATE
Marriage	30 days from date of event	Marriage license, common law certificate	Date of event
Birth/Adoption	30 days from date of event	Birth certificate, adoption agreement	Date of event
A spouse/dependent's loss or gain of other coverage	30 days from effective date of coverage or loss of coverage	Certificate of coverage from other coverage	Effective date of coverage or loss of coverage
Your loss or gain of other coverage	30 days from effective date of coverage or loss of coverage	Certificate of coverage from other coverage	Effective date of coverage or loss of coverage
Spouse's Open Enrollment resulting in a change of coverage	30 days from enrollment period	Certificate of coverage from other coverage	Effective date of coverage on the spouse's new plan
Death	30 days from date of death	Death certificate	Date of death
Divorce	30 days from date of event	Divorce decree	Date of event
CHIP/Medicare enrollment	60 days from date of event	Notice from CHIP or Medicare	Date of event/notice

Note

Open Enrollment is your annual chance to choose your benefits. If you have a Qualifying Life Event, you can make changes outside of open enrollment.

Employee Wellbeing

It's never too late to better your wellness. City of Waco is pleased to offer additional wellness benefits.

Wellness Incentive: Premium Discount On Health Insurance

Employees can receive a monthly premium discount on health insurance by completing an annual physical exam between August 1, 2024 - July 31, 2025.

The premium discount is for the 2025-2026 plan year.



Earning Your Wellness Incentive Is Easy

1. Contact your doctor and schedule an annual physical exam.

If you don't have a doctor, go online to umr.com or contact Member Services by phone at 844-598-7542 to find an in-network provider.

2. Complete your annual physical exam by July 31st.

Take the bottom portion of the Wellness Incentive Form (page 10 of this booklet or on the intranet) with you to provide to your doctor.

3. Follow up as recommended.

Keep in contact with your doctor and follow up as recommended. The City of Waco does not have access to your individual health information.

Employee Fitness Rooms

The Employee Fitness Rooms are located at:

- Operations Center
1415 North 4th Street
- City Hall
300 Austin Avenue
- Mae Jackson/Water Office
425 Franklin Ave

Fitness rooms are available for use 7 days a week from 5am to 8pm.

Employee Wellbeing

Wellness Incentive: Annual Physical Exam



Tips & Resources for Your Annual Physical Exam

Scheduling Your Appointment

If you don't have a doctor, go online to umr.com or member services with UMR at 844-598-7542 to find an in-network provider.

Inform the doctor's office staff that you are scheduling an annual physical exam to be covered as a preventive care appointment at a \$0 copay.

Preparing for Your Appointment

To ensure a smooth appointment:

- Take a list of current medications with you to your appointment.
- Consult with your doctor's office if any lab orders can be requested and completed in advance of your appointment in order for the results to be available for discussion during your appointment.

Attending Your Appointment

- Check in at the doctor's office and confirm your appointment as your annual physical exam.

Cut along the dotted line and provide the BOTTOM PORTION of this page to the doctor's office to explain the City of Waco's Wellness Incentive.

City of Waco Annual Physical Exam Incentive Medical Provider Information

The City of Waco is taking steps to encourage employees to live healthier lives by actively engaging with a healthcare provider using preventive services available under the City's Health Plan. To promote this healthy behavior, enrolled employees receiving an annual physical exam during the designated date range will receive a monthly premium discount on their health insurance.

The lower monthly premium rate will apply for employees who receive a complete annual physical or a well woman visit as evidenced by a diagnosis code of Z00.00, Z00.01, Z01.419, Z01.411 or a similar code appearing as one of the codes on the submitted UMR claim.

While annual physical exams often include such things as a blood pressure check, cholesterol test, glucose test, and/or a body mass index check, no specific tests are required. Your judgment as a medical professional should determine which tests to administer based on the patient age, gender, medical history, and physical condition.

Questions pertaining to the Wellness Exam Incentive claim coding or submission should be directed to the UMR directly at 844-598-7542.

Employee Wellbeing



Online Wellness Portal

Employees enrolled in the City's health plan can access our online wellness portal through Virgin Pulse.

Virgin Pulse helps employees build healthy habits, achieve wellness goals, and improve overall wellbeing. A mobile app is available for easy access to challenges, health tracking, wellness tips, and more!

Employees can earn wellness incentives throughout the year by participating in wellness challenges.

How to Register:

- Go to <https://www.wellnesswaco.com>
- Click on "Register"
- Enter last name, first name and date of birth
- Select a username & password
- For future logins, you'll click on "Already a Member/ Login Link" in the upper right corner and enter the username and password you selected at registration.



Virgin Pulse

(WELLNESSWACO.COM)

Participation and engagement in the Virgin Pulse portal is optional.

Keep track of your personal stats by syncing a fitness tracker or your mobile phone. The Virgin Pulse platform is compatible with some of the most popular health and wellness apps and devices.

Email: support@virginpulse.com

Phone: 888-671-9395

Representatives are available
7 a.m. – 8 p.m. CST, Monday – Friday.

Live Chat: Representatives available
1 a.m. – 8 p.m. CST, Monday – Friday.



Wellbeats

Through the Virgin Pulse website and app, you have access to Wellbeats. Wellbeats offers a range of fun, challenging workouts to users anytime anywhere. Access Wellbeats through the Programs tab on Virgin Pulse.



Wondr Health

Employees who are enrolled in the City's health plan have access to Wondr Health.

Wondr Health™ is an online behavioral change program focused on weight management that helps participants improve their physical and mental wellbeing through simple, interactive, and clinically-proven skills and tools. By treating the root cause of obesity through behavioral science, Wondr reduces risk factors to prevent chronic diseases like diabetes and hypertension, helps enhance employee productivity and engagement, decreases claims costs, and improves overall physical and mental wellbeing.

A master class of sorts, Wondr Health's team of renowned doctors and scientists teaches practical, data-backed skills that empower participants to stress less, sleep better, and feel better. The highly personalized program has helped hundreds of thousands of people by flipping diet culture upside down and teaching employees the science of eating the foods they love so they can still lose weight. Through the app, online community, certified coaches, and series of weekly videos that offer a new perspective on better health, participants enter a world where weight loss is a science, small steps lead to big changes, perspectives are flipped, possibilities are infinite, and good habits last.

Learn more at www.wondrhealth.com/CityofWaco.

Notice Regarding Wellness Program

UMR Group Health Plan is a voluntary wellness program available to all medical enrolled employees. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve participant health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others.

However, individuals who choose to participate in the wellness program may qualify for the premium discount by earning program credit by completing an annual physical exam. See medical rates for details.

Additional incentives may be available for participants who participate in certain health-related activities or achieve certain health outcomes. If you are unable to participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting 800-521-2227.

Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and City of Waco may use aggregate information it collects to design a program based on identified health risks in the workplace, UMR Group will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. In order to provide you with services under the wellness program, your personally identifiable health information may be shared with one or more of the following: Lockton Companies.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact 800-521-2227.

Employee Wellbeing



Employee Assistance Program (EAP)

We're here for you when you need help. Our Employee Assistance Program (EAP) through Aetna Resources for Living helps manage your total health, including mental, emotional, and physical. This benefit is provided to you, your dependents, and anyone living in your household. There's no cost to you — whether or not you're enrolled in a company-sponsored medical plan.

Through the EAP, you have access to mental health assistance and legal and financial help from professionals. You also have 24-hour access to helpful resources by phone, and the EAP benefit includes eight face-to-face visits per issue with a licensed professional. All services provided are confidential and will not be shared with City of Waco.

Anytime Support

All services are completely confidential

Call: 888-238-6232 (TTY:711)
Online: resourcesforliving.com

Username: waco tx
Password: eap

Download the app on the App Store or from Google Play



EMOTIONAL WELLBEING SUPPORT	DAILY LIFE ASSISTANCE	LEGAL SERVICES	FINANCIAL SERVICES
<p>You can access up to 8 counseling sessions per issue each year. You can also call us 24 hours a day for the in-the-moment emotional wellbeing support.</p> <p>Counseling sessions are available for face to face, via televideo or chat therapy. Services are free and confidential. We're always here to help with a wide range of issues including:</p> <ul style="list-style-type: none"> • Anxiety • Relationship Support • Depression • Stress Management • Work/Life Balance • Family Issues • Grief and Loss • Self-Esteem and Personal Development • Substance Misuse and More 	<p>Competing day-to-day needs can make it tough to know where to start. Call us for personalized guidance. We'll help you find resources for:</p> <ul style="list-style-type: none"> • Child care, parenting, and adoption • Care for older adults • Caregiver support • School and financial aid research • Special needs • Pet care • Community resources/basic needs • Home repair and improvement • Summer programs for kids • Household services and more 	<p>You can get a free 30-minute consultation with a participating attorney for each new legal topic related to:</p> <ul style="list-style-type: none"> • General • Family • Civil/Criminal law • Elder law and estate planning • Divorce • Wills and other document preparation • Real estate transactions • Mediation services <p>If you opt for services beyond the initial consultation you can get a 25% discount. You also have free access to legal documents and forms on your member website.</p> <p>Note: Services must be related to the employee and eligible household members. Work-related issues are not covered. Discount does not include flat legal fees, contingency fees, and plan mediator services.</p>	<p>You can get a free 30-minute consultation with a participating advisor for each new financial topic related to:</p> <ul style="list-style-type: none"> • Budgeting • Retirement or other financial planning • Mortgages and refinancing • Credit and debt issues • College funding • Tax and IRS questions <p>You can get a 25% discount on tax preparation services. You also have access to financial articles, calculators and a financial assessment on your member website.</p> <p>Note: Services must be for financial matters related to the employee and eligible household members.</p>

Online Resources

Your member website offers a full range of tools and resources to help with emotional wellbeing, work/life balance and more. You'll find:

- Articles and self-assessments
- Adult care and child care provider search tool
- Stress resource center
- Video resources
- Live and recorded webinars
- Mobile app

Chat Therapy

Once you have established a care plan, you can send a secure text message to your counselor, who will respond within one working day, up to five days a week. A week of texting counts as one session. You can also schedule to meet online for 30-minute televideo sessions. Each televideo session counts as one visit. Work on the same kinds of issues you'd see a counselor face-to-face to talk about.



Armor Up America / Responder Health

Every day across our great nation, essential workers keep our community thriving. Armor Up America / Responder Health stands tall, offering robust support and resources tailored specifically for those who keep our communities running. Visit www.armorupamerica.com or call one of the numbers provided below.

Civil Service: 206-459-3020

- Fire Coupon Code: WFDTX23
- Police Coupon Code: WPDTX23

Civilian Service: 253-652-2820

- Civilian Coupon Code: WATX

AUA Resources for You

Tailored Assistance

Designated contacts for civilian and public safety employees to ensure you receive the specific care you need.

Confidential Support Line

A confidential helpline where essential workers can share their concerns, seek advice, and find solace, round-the-clock.

Wellness & Resilience Initiatives

A range of online programs, workshops, and resources, all aimed at enhancing the mental, physical, and emotional wellbeing of our essential workers.

Mobile App

Download the Responder Health app for quick access to AUA and Responder Health services.

Responder Health University

Responder Health University provides you access to all the Responder Health training. To access the training, go to www.responderhealth.com and click on the Courses tab on the top. When you go to sign up, use your specific code to access all information.

The Responder Health Blog

The Responder Health blog offers support and resources specifically for first responders, focusing on the challenges and traumas they face. Our services are tailored by first responders, for first responders, providing confidential assistance, peer support, and education on wellness and resilience. This holistic approach aims to improve the mental health, wellness, and quality of life of first responders, acknowledging the high cost their essential work can have on their wellbeing. Scan the QR code or visit <https://responderhealth.com/blog>



Monthly Newsletter

Sign up for the monthly newsletter to receive high-value content, promotions and upcoming events by simply visiting responderhealth.com and entering your email.

Health Plan Benefits



A UnitedHealthcare Company

Health Plan benefits are provided through UMR.

The City of Waco’s health plan is an Exclusive Provider Organization (EPO) plan. With an EPO plan, you are covered for services received from in-network providers only. If you see a doctor outside of the network, the services will not be covered (except in emergencies).

		UMR EPO HEALTH PLAN
		IN-NETWORK
ANNUAL DEDUCTIBLE		
	INDIVIDUAL	\$1,500
	FAMILY	\$3,000
ANNUAL OUT-OF-POCKET MAXIMUM (MAXIMUM INCLUDES DEDUCTIBLE)		
	INDIVIDUAL	\$4,500
	FAMILY	\$9,000
COPAYS/COINSURANCE		
	COINSURANCE	20%
	PREVENTIVE CARE	\$0 copay
	PRIMARY CARE (BSW)	\$0 copay
	PRIMARY CARE (NON-BSW)	\$50 copay
	SPECIALIST SERVICES	\$75 copay
	MENTAL HEALTH OFFICE VISIT	\$25 copay
	DIAGNOSTIC CARE	Deductible/Coinsurance
	URGENT CARE	\$75 copay
	EMERGENCY ROOM	\$250 copay
	PHYSICAL, OCCUPATIONAL AND SPEECH THERAPY	\$50 copay
	AIRROSTI VISIT	\$15 copay

The individual deductible amount must be met by each member enrolled under your medical coverage. If you have several covered dependents, all charges used to apply toward a “per individual” deductible amount will also be applied toward the “per family” deductible amount. When the family deductible amount is reached, no further individual deductibles will have to be met for the remainder of that plan year. No member may contribute more than the individual deductible amount to the “per family” deductible amount.

Our Plan Is Self-Funded

Our medical and pharmacy plans are self-funded. What does that mean? Rather than paying premiums to an insurance carrier as with fully insured plans, the Company pays fixed costs to use the carrier’s network and variable costs for members’ claims. Self-insured plans allow for more freedom in plan design. Together, the Company and employees share the cost of healthcare.

Healthcare Cost Transparency

There are so many different providers and varying costs for healthcare services — how do you choose? Online services called healthcare cost transparency tools can help. Available through UMR, these tools allow you to compare costs for services, from prescriptions to major surgeries, to make your choices simpler. Visit www.umar.com to learn more.

Note

Deductibles and Out-of-Pocket maximums start over every plan year on October 1st.

Where to Go for Care

The City's health plan offers many cost effective options for care.



Teladoc - 800-835-2362

When to Use

You need care for minor illnesses and ailments but would prefer not to leave home. These services are available by phone and online (via webcam).

Types of Care*

- Cold & flu symptoms
- Allergies
- Bronchitis
- Urinary tract infection
- Sinus problems

Costs and Time Considerations**

- \$0 copay
- Usually immediate access to care
- Prescriptions through telemedicine or virtual visits not allowed in all states



Primary Care Center - visit www.umar.com to find an in-network primary care physician (doctor).

When to Use

You need routine care or treatment for a current health issue. Your primary doctor knows you and your health history, can access your medical records, provide routine care, and manage your medications.

Types of Care*

- Routine checkups
- Immunizations
- Preventive services
- Manage your general health

Costs and Time Considerations**

- Office visit copays are \$0 for BSW physicians and \$50 for non-BSW physicians. Preventive care and preventive routine immunizations are no cost to you.
- Normally requires an appointment
- Usually little wait time with scheduled appointment



Urgent Care Center



Emergency Room & Free Standing ER

Do Your Homework

What may seem like an urgent care center could actually be a free standing ER. These facilities come with a higher cost, so ask for clarification if the word "emergency" appears in the company name.

When to Use

You need care quickly, but it is not a true emergency. Urgent care centers offer treatment for non-life-threatening injuries or illnesses.

Types of Care*

- Strains, sprains
- Minor broken bones (e.g., finger)
- Minor infections
- Minor burns
- X-rays

Costs and Time Considerations**

- \$75 copay when using an in-network urgent care
- Walk-in patients welcome, but waiting periods may be longer (urgency decides order)

When to Use

You need immediate treatment for a serious life-threatening condition. If a situation seems life threatening, call 911 or your local emergency number right away.

Types of Care*

- Heavy bleeding
- Chest pain
- Major burns
- Spinal injuries
- Severe head injury
- Broken bones

Costs and Time Considerations**

- \$250 copay
- Open 24/7, but waiting periods may be longer because patients with life-threatening emergencies will be treated first
- Ambulance charges, if applicable, will be separate and may not be in-network
- If not a true emergency, the visit will apply to deductible and coinsurance.

*This is a sample list of services and may not be all inclusive.

Prescription benefits are provided through UMR/OptumRx.

You will only have one ID card for both medical care and prescriptions. Information on your benefits coverage and a list of network pharmacies is available online at www.umar.com or by calling the Plan Advisor number on your ID Card. Your cost is determined by the tier assigned to the prescription drug product. Products are assigned as Generic, Preferred, Non-Preferred, or Specialty Drugs.

UMR EPO PRESCRIPTION PLAN	
IN-NETWORK	
RETAIL RX (30-DAY SUPPLY)	
GENERIC	\$0 copay
PREFERRED	\$30 copay
NON-PREFERRED	\$75 copay
SPECIALTY DRUGS	25% of actual cost, up to \$175 maximum
DIABETIC SUPPLIES	20% coinsurance
DIABETIC TEST STRIPS	\$0 (no cost to you!)
MAIL ORDER RX (90-DAY SUPPLY)	
GENERIC	\$0 copay
PREFERRED	\$60 copay
NON-PREFERRED	\$150 copay
SPECIALTY DRUGS	N/A

Prescription Medication Programs

The City currently has Step Therapy and Prior Authorization programs in place. By implementing these programs, the City is helping to keep down the rapidly rising cost of prescription medications. The medication you take can affect your out-of-pocket costs.

Step Therapy

Step Therapy involves trying less expensive options before “stepping up” to drugs that cost more. This ensures that you get the safest, most effective and reasonably priced drug available.

Prior Authorization (PA)

The PA program encourages safe and cost-effective drug use. The program applies to certain high-cost drugs and those that can be misused. Before medicines included in the PA program can be covered under your pharmacy benefit plan, your doctor will need to get approval through UMR.

If you are taking or are prescribed a drug that is part of the PA program, your doctor will need to submit a PA request for coverage to keep receiving coverage for that drug.

- If the prior authorization request is approved: You will pay your share for the medicine based on your pharmacy benefit plan.
- If the prior authorization request is not approved: The medicine will not be covered. You can still fill your prescription, but you may have to pay for the full amount charged based on your benefit plan.

Your doctor can find a PA request form on the provider portal at www.umar.com.

UMR Added Benefits

Available to those enrolled in the City of Waco's health plan.

Virtual Care

UMR provides a virtual medicine benefit through Teladoc for you and your dependents.

Teladoc doctors can treat many medical conditions, including:

- Cold & flu
- Allergies
- Bronchitis
- Bladder infection/
urinary tract infection
- Respiratory infection
- Pink eye
- Sore throat
- Stomachache
- Sinus problems

Virtual Care for Your Mental Health

Teladoc Health licensed therapists and psychiatrists are here for you no matter what you are facing, whether it's big or small. They can help you improve your mood with things like:

- Learning to stay calm in stressful moments
- Managing and understanding depression
- How to handle relationship and family problems
- Controlling anxiety caused by work or personal issues
- Working through past trauma
- Overcoming burnout which could be causing mental or physical exhaustion and irritation

Access Virtual Visits

Call 1-800-835-2362

Visit www.TeladocHealth.com

Download the Teladoc Health mobile app



CareSearch Reward\$

Using the CareSearch Reward\$ program will lower the cost of your claim, and we'll pass that savings on to you via a single-use prepaid Reward Card that you can use on future medical expenses.

The Program Is Simple

When you're ready to schedule an eligible procedure, visit umr.com and use the Health Cost Estimator tool to find a qualifying Tier 1 physician and below average cost facility. Then make your appointment. Receive your qualifying procedure with a Tier 1 provider and below average cost facility within 2 months of your Health Cost Estimator search and you'll be rewarded after your claim is processed through UMR.

CareSearch Reward\$ Qualifying Procedures

This list reflects some common procedures and how much you can earn:

- Colonoscopy: \$250
- CT Scan: \$150
- Endoscopy: \$250
- Hip Replacement: \$500
- Knee Arthroscopy: \$250
- Knee Replacement: \$500
- Mammogram: \$50
- MRI: \$150
- Shoulder Arthroscopy: \$250
- Sleep Apnea/Sleep Study: \$75
- Stress Test: \$150
- Ultrasound: \$50
- PET Scan: \$150
- Spinal Fusion: \$500



UMR Added Benefits

Available to those enrolled in the City of Waco's health plan.

Airrosti



Airrosti's conservative approach to care leads to rapid recovery and lasting results while helping patients avoid imaging, pharmaceuticals, surgeries and other unnecessary procedures. Also, Airrosti visits are just a **\$15 copay** for employees, spouses, and dependents on the City of Waco's health plan.

Every Airrosti visit is a full hour-long appointment. At each visit, the patient will receive a thorough, detailed assessment, hands-on manual therapy, and active care exercises/stretchers designed to restore function and eliminate pain. Airrosti resolves most soft tissue pain or injury in 3.2 visits.

City of Waco employees now have access to Airrosti Remote Recovery. Airrosti is able to bring their effective and efficient care to you as a convenient, affordable, and effective digital solution. Through advanced technology, Airrosti Remote Recovery connects you virtually with an experienced provider who will help you understand your condition, prescribe an individualized recovery plan, and give you the tools you need to live pain-free!

Additionally, Airrosti offers no-cost, no-obligation VIP Chats. Airrosti providers are available to help you understand why you are in pain, what's happening in your body, and your options for getting out of pain as quickly as possible. This comfortable and relaxed conversation is designed to help you make informed decisions about your care and help you get on the road to recovery.

To schedule in-clinic or Airrosti Remote Recovery visits, call the Airrosti Patient Advocate Team at 800-404-6050, or visit airrosti.com/schedule.

For more information about Airrosti and Airrosti Remote Recovery, visit airrosti.com or airrosti.com/remoterecovery/.

Livongo



Eligible members enrolled into the City of Waco's Health Plan are eligible for Livongo — at no cost!

Diabetes Management

- Advanced glucose meter
- Personalized tips with each blood glucose check
- Real time support when you're out of range
- Optional family alerts keep everyone in the loop
- Automatic uploads
- Strip ordering right from your meter
- Unlimited strips and lancets
- Connected scale
- Expert guidance

Hypertension Management

- Advanced blood pressure monitor
- One-on-one coaching

Additional Resources

- Health experts
- Personalized Plans

Get Started

Join by visiting join.livongo.com

Or by calling 800-945-4355



Flexible Spending Accounts

Flexible Spending Accounts (FSAs), administered by Navia Benefit Solutions, allow you to pay for eligible healthcare and dependent care expenses using tax-free dollars, reducing your taxable income. There are two types of FSAs – the Healthcare FSA and the Dependent Care FSA:

Healthcare Flexible Spending Account

Used to pay for services not covered by your medical, dental or vision plan such as copays, coinsurance, deductibles, prescription expenses, lab exams and tests, contact lenses and eyeglasses.

Dependent Care Flexible Spending Account

Used to pay for daycare expenses associated with caring for elder or child dependents that are necessary for you or your spouse to work or attend school full-time. You cannot use your Healthcare FSA to pay for Dependent Care expenses. Unused funds for Dependent Care FSA will be forfeited.

Rollover (CARRYOVER) Provision – Healthcare FSA

If you are enrolled in the Healthcare Flexible Spending Account benefit and have a balance of \$640 or less at the end of the plan year (December 31), the unused dollars may be carried over to the following plan year.

Funds eligible for the carryover from a previous plan year will be available to you after the end of the claims run-out period (March 31). You do not have to re-enroll in the new plan year to have unused Healthcare FSA dollars carry over to a new plan year.

Important: There is a “use it or lose it” rule imposed by the IRS. Any funds over \$640 after the deadline will be forfeited.

Healthcare FSA

Dependent Care FSA

Contribute up to \$3,200 per year, pre-tax



Contribute up to \$5,000 per year, pre-tax

Receive a preloaded debit card to pay for eligible medical expenses.



Debit cards can be used for expenses up to the amount in your Dependent Care FSA fund balance.

Eligible expenses include medical copays, coinsurance, deductibles, eyeglasses and medications prescribed by your doctor.



Can only be used to pay for eligible dependent care expenses including day care, after-school programs and elder care programs.

Submit claims up to March 31 of the following year for expenses from January 1 to December 31 of the prior year.



If you do not spend all the money in this FSA by March 31, per IRS regulations, unused dollars over \$640 will be forfeited for pre-tax contributions

Submit claims up to March 31 of the following year for expenses from January 1 to December 31 of the prior year.

If you do not spend all the money in this FSA by March 31, per IRS regulations, unused dollars will be forfeited for pre-tax contributions.

Dental & Vision Benefits

Dental Benefits

		DELTA DENTAL PPO PLAN	QCD DISCOUNT PLAN
		DELTA DENTAL PPO	QCD DISCOUNT PLAN
ANNUAL DEDUCTIBLE			
	INDIVIDUAL	\$50	None
	FAMILY	\$150	None
ANNUAL MAXIMUM			
	PER PERSON	\$1,500	N/A
COVERED SERVICES			
	PREVENTIVE SERVICES Oral Exams, Routine Cleanings, Bitewing X-rays, Fluoride Applications, Sealants, Space Maintainers, Panoramic X-rays	100%	Member fees vary depending on type of services provided. Always confirm benefits with your Provider prior to receiving services.
	BASIC SERVICES Full Mouth X-rays, Fillings, Oral Surgery, Simple Extractions	You pay 20%*, Sealants covered at 100%	
	MAJOR SERVICES Oral Surgery, Complex Extractions, Denture Adjustments and Repairs, Root Canal Therapy, Periodontics, Crowns, Dentures, Bridges	You pay 50%* (no waiting period)	
	ORTHODONTICS Covered for adults and children	50%	All treatments provided by a QCD of America affiliated Orthodontics provider will be given a 20% discount from the affiliated dentist's usual and customary fee for the treatment.
	ORTHODONTIC LIFETIME MAXIMUM	\$1,000	N/A

*After deductible

Vision Benefits

SUPERIOR OPTIONAL VISION PLAN

		PARTICIPATING PROVIDER	NON-PARTICIPATING PROVIDER	FREQUENCY
EXAMS				
	COPAY	\$10	Ophthalmologist: \$42 reimbursement/ Optometrist: \$37 reimbursement	Once every 12 months
LENSES				
	SINGLE VISION	\$25 copay	Up to \$26 reimbursement	Once every 12 months
	BIFOCAL	\$25 copay	Up to \$34 reimbursement	
	TRIFOCAL	\$25 copay	Up to \$50 reimbursement	
CONTACTS (IN LIEU OF LENSES AND FRAMES)				
	FITTING AND EVALUATION*	\$25 fitting fee	Not covered	Once every 12 months
	ELECTIVE	Up to \$150 allowance	Up to \$100 reimbursement	
FRAMES				
	ALLOWANCE	\$130	Up to \$68 reimbursement	Once every 24 months

*Fitting and Evaluation fee applied to contact lens allowance.

Life and Accidental Death & Dismemberment (AD&D) Insurance

The City of Waco offers Basic Life and AD&D insurance for you and your eligible dependents through Dearborn National.

LIFE AND AD&D INSURANCE - FOR YOU

BASIC EMPLOYEE LIFE AND AD&D PROVIDED BY THE CITY

BASIC LIFE AND AD&D	1x your annual salary up to \$50,000 max
EVIDENCE OF INSURABILITY (EOI) REQUIRED	No

OPTIONAL EMPLOYEE LIFE AND AD&D

COVERAGE AMOUNT	1x your annual salary up to \$100,000 OR 2x your annual salary up to \$200,000
EVIDENCE OF INSURABILITY (EOI) REQUIRED	If you wish to enroll or increase your coverage after your initial eligibility, any new amount you elect will be subject to Evidence of Insurability.

Annual base earnings do not include overtime.

LIFE AND AD&D INSURANCE - FOR YOUR DEPENDENTS

Optional Life insurance for your dependents can help protect your family during difficult times. You must purchase employee Optional Life/AD&D to purchase additional spouse and/or child(ren) coverage.

SPOUSE

COVERAGE AMOUNT	\$10,000 or \$20,000
EVIDENCE OF INSURABILITY (EOI) REQUIRED	If you wish to enroll or increase your spouse's coverage after your initial eligibility, any new amount you elect will require Evidence of Insurability (EOI) to be completed.

CHILD(REN)

COVERAGE AMOUNT	\$10,000 or \$20,000
EVIDENCE OF INSURABILITY (EOI) REQUIRED	None

ADDITIONAL Optional AD&D INSURANCE - FOR EMPLOYEE + FAMILY (only available to elect if you enroll in Optional Life 1x or 2x)

EMPLOYEE

COVERAGE AMOUNT	Increments of \$10,000 to \$300,000 Amounts equal to or greater than \$150,000 cannot exceed 10 times your covered annual earnings.
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SPOUSE

COVERAGE AMOUNT	100% of your Optional AD&D coverage amount
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CHILD(REN)

COVERAGE AMOUNT	10% of your Optional AD&D coverage amount
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Note

Please note that when you name a beneficiary, they will be assigned for your Basic Employee Life and AD&D and your Voluntary Life and AD&D (if elected). You can update your beneficiary assignment at any time by reaching out to Human Resources.

Disability Insurance

Disability coverage is administered through Dearborn National.

Optional Short Term Disability (STD) Insurance

Short Term Disability (STD) benefits are available for purchase on an optional basis. This insurance replaces 70% of your income up to the weekly maximum benefit if you become partially or totally disabled for a short time. Certain exclusions, along with pre-existing condition limitations, may apply. See your plan documents for details.

WEEKLY MAXIMUM BENEFIT	\$750
ELIMINATION PERIOD	15 days
MAXIMUM BENEFIT PERIOD	168 days
ELECTION REQUIRED	Yes, this is an optional benefit.

Long Term Disability (LTD) Insurance

Long Term Disability (LTD) benefits are provided by the City of Waco for all eligible employees. This insurance replaces 60% of your income if you become partially or totally disabled for an extended time. Certain exclusions, along with pre-existing condition limitations, may apply. See your plan documents for details.

MONTHLY MAXIMUM BENEFIT	\$9,000
ELIMINATION PERIOD	180 days
MAXIMUM BENEFIT PERIOD	Payments will last for as long as you are disabled or until you reach your Social Security Normal Retirement Age, whichever is sooner.
ELECTION REQUIRED	No, the City of Waco automatically provides eligible employees with Long Term Disability (LTD).



HOW STD AND LTD WORK TOGETHER

FIRST 14 DAYS	Elimination Period. Employees must use their accrued time. This period may extend beyond 14 days depending on accrued time.
NEXT 24 WEEKS	After 14 days of sickness or injury, approved STD pays a portion of your income, after accrued time is exhausted.
AFTER 24 WEEKS	LTD begins, if approved. STD will automatically convert to LTD (if elected).

Note

Around 30% of Americans ages 35-65 will suffer a disability lasting at least 90 days during their careers. (Source: Million Dollar Round Table)

City of Waco employees who work at least 1,000 hours per year enjoy the benefits of participating in a statewide retirement system through Texas Municipal Retirement System (TMRS) with other municipalities in Texas.

Retirement Highlights

- 7% of your gross compensation deducted each pay period.
- The City of Waco matches employee contributions at a ratio of 2:1.
- Vested when you have 5 years of service credit.
- Eligible to retire after 20 years of service credit or 5 years of service and 60 years of age.
- TMRS recognizes time in which you were employed with other TMRS cities, military time or any public agency created by a state of the U.S.
- If, at any time, you leave city service and choose to refund your deposits and interest, you will not receive the City's matching funds.

Earning Service Credits

While employed by the City, you will receive a service credit for every month in which there is a contribution. If you were employed as a full-time employee of any United States agency, government, military, or another branch of the United States, you may be able to apply for restricted prior service credit.

Schedule a Counseling Session

TMRS allows you to schedule a counseling session with a TMRS representative to help answer your TMRS benefits questions, estimate your monthly retirement benefit, or discuss your retirement options. They offer both in person counseling at their offices or online counseling. For online counseling, you will need a mobile device or computer. A webcam or camera phone is not required, but will allow you to see the representative and any documentation they share with you. Family members and financial advisors are welcome to attend. To schedule your Counseling session, visit: <https://www.tmr.com>.

Deferred Compensation Plans (457b)

Participation in Deferred Compensation is available for employees who want to save additional money for retirement and not pay taxes on the money until it is withdrawn at retirement. The City of Waco offers three deferred compensation plans: Metlife, MissionSquare, and Nationwide.

To set up an account and begin investing in your future, contact a plan representative from the list below for more information.

METLIFE	Matthew Williams	248-982-1844	mwilliams@financialguide.com
MISSION SQUARE	Jason L Boyd	202-759-7017	jboyd@missionsq.org
NATIONWIDE	Wilson Heacock	877-677-3678	wilson.heacock@nationwide.com

Additional Benefits

Education Assistance	Savings Bonds
Employee Loan Program	School Conference Policy
Longevity Pay	Service Awards
Military Leave	Social Security
Paid Time Off <ul style="list-style-type: none"> • Vacation • Holidays • Sick Leave • Paid Parental Leave • Catastrophic Leave 	Waco Federal Credit Union



Refer to the Employee Intranet for more information about these programs.

Glossary

Balance Billing – When you are billed by a provider for the difference between the provider’s charge and the allowed amount. For example, if the provider’s charge is \$100 and the allowed amount is \$60, you may be billed by the provider for the remaining \$40.

Coinsurance – Your share of the cost of a covered healthcare service, calculated as a percent of the allowed amount for the service, typically after you meet your deductible.

Copay – The fixed amount you pay for healthcare services received, as determined by your insurance plan.

Deductible – The amount you owe for healthcare services before your insurance begins to pay its portion. For example, if your deductible is \$1,000, your plan does not pay anything until you’ve paid \$1,000 for covered services. This deductible may not apply to all services, including preventive care.

Explanation of Benefits (EOB) – A statement from your insurance carrier that explains which services were provided, their cost, what portion of the claim was paid by the plan, and what portion is your liability, in addition to how you can appeal the insurer’s decision.

Flexible Spending Accounts (FSAs) – A special tax-free account you put money into that you use to pay for certain out-of-pocket healthcare costs. You’ll save an amount equal to the taxes you would have paid on the money you set aside. FSAs are “use it or lose it,” so funds not used by the end of the plan year will be lost. Some Healthcare FSAs do allow for a grace period or rollover into the next plan year.

- **Healthcare FSA** – A pre-tax benefit account used to pay for eligible medical, dental, and vision care expenses that aren’t covered by your insurance plan. All expenses must be qualified as defined in Section 213(d) of the Internal Revenue Code.
- **Dependent Care FSA** – A pre-tax benefit account used to pay for dependent care services. For additional information on eligible expenses, refer to Publication 503 on the IRS website.

Healthcare Cost Transparency – Also known as market transparency or medical transparency. Online cost transparency tools, available through health insurance carriers, allow you to search an extensive national database to compare varying costs for services.

Network – A group of physicians, hospitals, and healthcare providers that have agreed to provide medical services to a health insurance plan’s members at discounted costs.

- **In-Network** – Providers that contract with your insurance company to provide healthcare services at the negotiated carrier discounted rates.
- **Out-of-Network** – Providers that are not contracted with your insurance company. If you choose an out-of-network provider, services will not be covered.

Open Enrollment – The period set by the employer during which employees and dependents may enroll for coverage.

Out-of-Pocket Maximum – The most you pay during the plan year before your health insurance begins to pay 100% of the allowed amount. This does not include your premium, out-of-network provider charges beyond the Reasonable & Customary, or healthcare your plan doesn’t cover. Check with your carrier to confirm what applies to the maximum.

Over-the-Counter (OTC) Medications – Medications available without a prescription.



Prescription Medications – Medications prescribed by a doctor. Cost of these medications is determined by their assigned tier: generic, preferred, non-preferred, or specialty.

- **Generic Drugs** – Drugs approved by the U.S. Food and Drug Administration (FDA) to be chemically identical to corresponding preferred or non-preferred versions. Usually the most cost-effective version of any medication.
- **Preferred Drugs** – Brand-name drugs on your provider’s approved list (available online).
- **Non-Preferred Drugs** – Brand-name drugs not on your provider’s list of approved drugs. These drugs are typically newer and have higher copayments.
- **Specialty Drugs** – Prescription medications used to treat complex, chronic, and often costly conditions. Because of the high cost, many insurers require that specific criteria be met before a drug is covered.
- **Prior Authorization** – A requirement that your physician obtain approval from your health insurance plan to prescribe a specific medication for you.
- **Step Therapy** – The goal of a Step Therapy Program is to steer employees to less expensive, yet equally effective, medications while keeping member and physician disruption to a minimum. You must typically try a generic or preferred-brand medication before “stepping up” to a non-preferred brand.

Reasonable and Customary Allowance (R&C) – The amount paid for a medical service in a geographic area based on what providers in the area usually charge for the same or similar medical service. The R&C amount is sometimes used to determine the allowed amount. Also known as the UCR (Usual, Customary, and Reasonable) amount.

Summary of Benefits and Coverage (SBC) – Mandated by healthcare reform, you are provided with a summary of your benefits and plan coverage.

Summary Plan Description (SPD) – The document(s) that outline the rights, obligations, and material provisions of the plan(s) to all participants and their beneficiaries.



Required Notices

Important Notice from City of Waco About Your Prescription Drug Coverage and Medicare under the UMR Group Health Plan(s)

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with City of Waco and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. City of Waco has determined that the prescription drug coverage offered by the UMR Group Health Plan(s) is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th to December 7th.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current City of Waco coverage may not be affected. For most persons covered under the Plan, the Plan will pay prescription drug benefits first, and Medicare will determine its payments second. For more information about this issue of what program pays first and what program pays second, see the Plan's summary plan description or contact Medicare at the telephone number or web address listed herein.

If you do decide to join a Medicare drug plan and drop your current coverage, be aware that you and your dependents may not be able to get this coverage back.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with City of Waco and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information about This Notice or Your Current Prescription Drug Coverage...

Contact the person listed at the end of these notices for further information. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through City of Waco changes. You also may request a copy of this notice at any time.

For More Information about Your Options under Medicare Prescription Drug Coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- » Visit www.medicare.gov
- » Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- » Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Medicare Part D notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date:	October 1, 2024
Name of Entity/Sender:	City of Waco
Contact—Position/Office:	Human Resources Department
Address:	300 Austin Avenue Waco, TX 76701
Phone Number:	254-750-5789

Women's Health and Cancer Rights Act

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- » All stages of reconstruction of the breast on which the mastectomy was performed;
- » Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- » Prostheses; and
- » Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. For deductibles and coinsurance information applicable to the plan in which you enroll, please refer to the summary plan description. If you would like more information on WHCRA benefits, please contact Human Resources Department at 254-750-5789.

HIPAA Privacy and Security

The Health Insurance Portability and Accountability Act of 1996 deals with how an employer can enforce eligibility and enrollment for healthcare benefits, as well as ensuring that protected health information which identifies you is kept private. You have the right to inspect and copy protected health information that is maintained by and for the plan for enrollment, payment, claims and case management. If you feel that protected health information about you is incorrect or incomplete, you may ask your benefits administrator to amend the information. For a full copy of the Notice of Privacy Practices, describing how protected health information about you may be used and disclosed and how you can get access to the information, contact Human Resources Department at 254-750-5789.

HIPAA Special Enrollment Rights

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to later enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage).

Loss of eligibility includes but is not limited to:

- » Loss of eligibility for coverage as a result of ceasing to meet the plan's eligibility requirements (i.e. legal separation, divorce, cessation of dependent status, death of an employee, termination of employment, reduction in the number of hours of employment);
- » Loss of HMO coverage because the person no longer resides or works in the HMO service area and no other coverage option is available through the HMO plan sponsor;
- » Elimination of the coverage option a person was enrolled in, and another option is not offered in its place;
- » Failing to return from an FMLA leave of absence; and
- » Loss of coverage under Medicaid or the Children's Health Insurance Program (CHIP).

Unless the event giving rise to your special enrollment right is a loss of coverage under Medicaid or CHIP, you must request enrollment within 31 days after your or your dependent's(s') other coverage ends (or after the employer that sponsors that coverage stops contributing toward the coverage).

If the event giving rise to your special enrollment right is a loss of coverage under Medicaid or the CHIP, you may request enrollment under this plan within 60 days of the date you or your dependent(s) lose such coverage under Medicaid or CHIP. Similarly, if you or your dependent(s) become eligible for a state-granted premium subsidy towards this plan, you may request enrollment under this plan within 60 days after the date Medicaid or CHIP determine that you or the dependent(s) qualify for the subsidy.

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.

To request special enrollment or obtain more information, contact Human Resources Department at 254-750-5789.

