Understanding Your Benefits

The City of Atlanta Active Employee Enrollment Guide

September 1, 2015 – August 31, 2016

This Enrollment Guide Is Not A Contract

This guide provides a detailed summary of benefits available to City of Atlanta active employees and eligible dependents, as well as laws, procedures, and regulations required to obtain and use such benefits. However, if inconsistencies occur between the contents of this enrollment guide and the contracts, rules, or laws regulating administration of the various programs, the program contract terms and/or appropriate legislation supersede this guide. In some instances, limitations and exclusions may apply.

Should you have questions, please contact the benefit program's member services or the Department of Human Resources (DHR) Employee Benefits. Contact information is included in this booklet.

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How To Use This Booklet

This book presents basic information about a wide range of benefit options available to you as an employee of the City of Atlanta. It provides a summary of key plan provisions so you can make an informed decision. More information about the plans can be found on the benefits website, **benefits.atlantaga.gov**.

As you read this benefits booklet and explore the website, you will find guidelines designed to help you analyze your benefits. If you cannot find the answers in these resources, call your carrier and request additional information.

You should try to attend an Open Enrollment meeting (see the schedule posted in your facility and on the website, benefits.atlantaga.gov). Even if you already have coverage, you may desire a better understanding of that coverage. This booklet helps you compare the plan options. It also explains how to adjust your coverage to reflect major life changes such as a new baby, marriage, divorce, leaving the City, retirement, and/or the death of a loved one.

However, keep in mind that each section of this booklet should be considered separately, as there is no automatic connection between the sections. Your health and dental insurance providers may be different and most likely will be. Also, your life insurance carrier will differ from both your health and dental insurance carriers.

Getting the Most From Your Benefits

This year, the City is again offering two High-Deductible Medical Plan options, as well as one Health Maintenance Organization (HMO) and one Point of Service (POS). Because of constant changes and the rising cost of health care, employees need more information regarding health and life insurance benefits in order to deal with the variety of choices you are asked to make. This booklet provides the information necessary to answer your benefits questions by offering a clear picture of all benefits provided by the City of Atlanta for you—the employee. Once you understand your coverage, you will gain the confidence to take control of your benefits.

Pre-Tax Benefits/Payroll Deductions

City of Atlanta employee health/dental benefits are offered on a pre-tax basis through payroll deductions (after-tax basis for Domestic Partners). In some instances, the City will pay a portion of your benefits. Each pay period, the remaining portion will be taken out of your paycheck. This amount will be based upon the carrier and level of coverage you select. For life insurance, deductions are taken from your paycheck once a month.

Health Terms

Various health care terms and options are defined and explained throughout this guide, such as “deductibles,” “coinsurance,” “reasonable and customary,” and more. You will find other definitions on the City’s enrollment website, benefits.atlantaga.gov.

Select Carefully

Please review your booklet thoroughly and read the directions for enrolling in your benefits before making your final selection. Remember, only you are capable of making the decision that best suits your needs.

For details about your benefits, go to benefits.atlantaga.gov.

Plan Changes For FY16

BCBS Lumenos High-Deductible Health Plan

- Deductibles increase to $1,300 individual/$2,600 family.

BCBS POS

- Emergency room copay increases to $250 (from $150).
- Deductibles increase to $500 individual/$1,500 family.
- Out-of-pocket maximums increase to $2,500 individual/$7,500 family.
- Specialist copay increases to $40 (from $35).
- Prescription drug copays increase to $15 generic, $30 preferred brand (non-preferred brand stays at $40).

Kaiser Permanente High-Deductible HMO

- Deductibles increase to $1,300 individual/$2,600 family.

Kaiser Permanente HMO

- Primary care physician copay increases to $20 (from $15).
- Emergency room copay increases to $250 (from $150).
- Deductibles increase to $500 individual/$1,500 family.
- Out-of-pocket maximums increase to $2,500 individual/$7,500 family.
- Prescription drug copay for generic drugs increases to $15 generic.
- Ambulance copay is $250.

Dental Plan

- New Dental Plan providers for FY16: BCBS Dental PPO (High/Low options) and Delta Dental DHMO.
- **Because of the change in providers, you must enroll if you want dental coverage for the 2015 – 2016 benefit plan year.**

Life Insurance

- The City will provide each active employee with $40,000 basic life and AD&D insurance coverage.
- Active employees can purchase additional life and AD&D coverage of 1 x base salary (no City contribution).
- Active employees also can purchase up to $200,000 in supplemental life insurance coverage (no City contribution).

Short-Term Disability Plan

- Active employees can purchase Short-Term Disability Insurance from our new vendor, Colonial Life.
- Replace up to 60% of your gross income if you are disabled and can't work due to a covered accident or covered sickness.

Voluntary Insurance Products

- Products offered through Colonial Life will be available, in addition to those currently offered through Aflac.
- Coverages include accident, cancer, critical care, and hospital indemnity.
- You pay for coverage through payroll deductions, and most coverage is portable.

Important Contact Information

DHR - Employee Benefits 68 Mitchell St. SW Suite 2120 Atlanta, GA 30303 Phone: 404.330.6036 Fax: 404.658.6640	**Employee Wellness Center** 55 Trinity Ave SW 5TH Floor Atlanta, GA 30303 Phone: 404.865.8496 or 404.865.8497
GEM Group (General Pension Fund) 225 Peachtree St. Suite 1460 Atlanta, GA 30303 Phone: 404.525.4191 www.gemgrouplp.com	**Zenith American Solutions (Fire & Police Pension Fund)** 2187 Northlake Pkwy. Suite 106 Bldg. 9 Tucker, GA 30084 Phone: 770.934.3953 www.zenith-american.com
Pension Services 68 Mitchell St. SW Suite 2120 Atlanta, GA 30303 Phone: 404.330.6036	**Employee Assistance Program** 818 Pollard Blvd. Suite 301 B Atlanta, GA 30315 Phone: 404.658.7397

Benefits Providers

Blue Cross Blue Shield (POS) 1-800-368-0766 www.bcbsga.com	**Kaiser Permanente (HMO)** 1-888-865-5813 404-261-2590 www.kp.org
Blue Cross Blue Shield Dental 1-877-604-2158 www.bcbsga.com/mydental	**Delta Dental DHMO** 1-800-422-4234 www.deltadentalins.com
UnitedHealthcare Vision 1-800-638-3120 www.myuhcvision.com	**Aflac (Flex Spending & Supplemental Insurance)** 678-927-9578 www.aflac.com
Minnesota Life 1-866-293-6047 www.lifebenefits.com	**VOYA Financial Services** 1-800-584-6001 www.voyaretirementplan.com
Colonial Life 770-446-7201 www.visityouville.com/cityofatlanta	

Open Enrollment Information

This year's Open Enrollment period for the City of Atlanta will be Tuesday, July 21 through Tuesday, August 4, 2015. Last year's Medical Plans are still available. We encourage you to consider one of the two High-Deductible Medical Plan options introduced last year. There are new Dental Plan providers for the coming year (BCBS and Delta Dental). An additional voluntary benefit programs provider will be offered in the new plan year.

Review the plan offerings, and select which programs you and your dependents would like to enroll in. The options you select will be effective September 1, 2015. The changes you make during the Open Enrollment period will remain in effect until August 31, 2016, unless you have a qualifying life event. All Open Enrollment benefit changes are due to the Department of Human Resources (DHR) Employee Benefits office no later than August 4, 2015. If you are completing the application online, Open Enrollment will close at 11:59 p.m. ET on August 4, 2015.

Online Self-Service Access

Online self-service Open Enrollment access is available at the City's website, www.atlantaga.gov. Online access and self-service enrollment assistance is available throughout the OE period, at City Hall Tower, DHR, Suite 2120. The Office of Employee Benefits staff is available weekdays from 8:30 a.m. to 5:30 p.m.

Attend an Open Enrollment Period Information Forum

Would you like to know more about your 2015 – 2016 benefits? The Employee Benefits office will be on location to answer your questions. Speak with the benefit program providers face-to-face at an Open Enrollment Information Forum near you.

Enroll in Your COA Benefits Using Oracle Self-Service

Benefits Open Enrollment should be completed online. There are six main parts to this process.

1. Access the OAB Website at **www.atlantaga.gov**
2. Click on **Departments**, then click **Human Resources**
3. Click on **Employee & Retiree Benefits**
4. Click on the **Open Enrollment (OE) Quick Link**
5. Enter your username: **Employee ID** and **Password** (*If you need an Oracle password and your employee ID number, please contact the help desk at 404-865-8949*).
6. In the navigator tool, click **COA Employee Self Service,** then click **Benefits**

For step-by-step enrollment instructions, go online to benefits.atlantaga.gov.

Eligibility

Benefits Eligibility

Elected officials, appointed officials, full-time, and part-time permanent employees and their dependents are eligible to enroll in the City of Atlanta's health and dental plans. Dependents must meet certain eligibility criteria to be considered. The following is a list of eligible dependents:

- A spouse (a husband or wife who is joined in marriage to an employee by a ceremony recognized by the laws of the State of Georgia)
- A domestic partner (registered with the City of Atlanta)
- A legally adopted child under age 26 or a child for whom you have guardianship (permanent or deemed permanent for insurance purposes)
- A stepchild under age 26 permanently residing with the employee and supported by the employee
- A child under age 26 receiving court-ordered support
- A child 26 years or older who is incapable of self-support due to mental or physical disability; and who has a permanent disability

Please remember to submit supporting documentation when you add dependents. If the Employee Benefits office does not receive your documentation, your dependents will not be added.

Statement of Understanding

I understand that, after my initial 90-day eligibility period following the date of employment, I may change my elections (plans and coverage) only during an Open Enrollment period or within 31 days following a change in family circumstance such as:

- Change in marital status
- Change in the number of dependents following birth, adoption, placement for adoption, or death of a dependent
- Change in employment status for me, my spouse, or dependent
- Work schedule change resulting in an increase or reduction in hours of employment for me, my spouse, or dependent (e.g., part-time to full-time)
- Loss of or enrollment in other coverage;
- Change in unmarried dependent status that causes the dependent to become covered or lose coverage
- Change in residence or worksite for me, my spouse, or dependent.

I also understand that the type of change requested must be consistent with the change of family status.

Dependent Eligibility Documentation Requirements

Dependents	Documentation Required
For Spouse	Copy of marriage certificate. If previously married, death certificate or divorce decree.
For Removal of Spouse/Child	None at Open Enrollment. Court decree within 31 days of decree during the contract year.
For Natural Child(ren)	Child's birth certificate (showing the parent-child relationship to employee/retiree and/or spouse).
For Adopted Child(ren)	Placement papers signed by the courts.
For Disabled Child (26 years and older)	Physician verification of permanent disability.
Foreign Adoptions	Adoption papers signed by the courts; visa showing date of entry to USA.
For Stepchild(ren)	Child's birth certificate (showing parent-child relationship with employee/retiree's spouse); copy of marriage certificate.
For Court-Ordered Support	State affidavit; copy of signed court order requiring employee/retiree to provide support for health coverage.
For Guardianship	Court ordered guardianship deemed permanent for insurance purposes.
For Domestic Partner	City of Atlanta Affidavit of Financial Reliance (notarized) within 31 days of approval.
For Termination of Domestic Partner	None at Open Enrollment; City of Atlanta Notice of Termination within 31 days of termination during the contract year.

Social Security number and date of birth must be provided for all dependents. Failure to submit the dependent's Social Security number will result in termination/denial of coverage (exceptions: newborns age six months or less).

Documentation also applies to life insurance coverage.

No documentation is required at Open Enrollment to delete a dependent.

All documentation should contain the employee's name and Social Security number.

Changes In Coverage

Change in Family Status

You may change your health and/or dental insurance coverage during the Open Enrollment period. You can also change your coverage during the year but only if the application to change coverage is submitted within 31 days of your family status change because of:

- marriage;
- divorce*;
- birth, legal adoption, placement for adoption, or custody change of an eligible child;
- death of a spouse or eligible child, or a dependent's leaving the household as a result of a custody agreement; or
- changes in the spouse's employment that affects his/her eligibility for benefits under another employer's group benefits plan.

**Anyone removed from the policy is entitled to COBRA (see benefits.atlantaga.gov for more information).*

Coverage will be effective the date of the change in family status. An adjustment of the premium for the level of coverage change will be deducted from your paycheck. Ask your departmental payroll clerk for a Health Insurance Change Application. Both you and your spouse (if applicable) must sign the form. Return the form to your departmental payroll clerk.

Option Changes

Option changes are permitted only during the Open Enrollment period. Changes made during the Open Enrollment period become effective on September 1, 2015.

If you move out of the service area covered by the HMO in which you are enrolled, you must request a change to another plan within 31 days of your move or at the next Open Enrollment.

If a plan listed in this brochure ceases operation, during the plan year, employees will have a choice to move to another plan.

If You Are on Workers' Compensation or an Authorized Leave of Absence

If you are on Workers' Compensation or an Authorized Leave of Absence without pay due to military, maternity, sick, family, or study leave, you must pay—in advance—your share of coverage premiums directly to the DHR - Employee Benefits.

If you are on an Authorized Leave of Absence without pay for any reason other than a military, maternity, sick, family, or study leave, you may continue your City of Atlanta group insurance by paying—in advance—the total premium (your share and the City's share) directly to the DHR - Employee Benefits.

If you do not pay the premium on time, your coverage will end.

Termination of Coverage

If your coverage ends for you and your dependents due to termination of employment with the City of Atlanta or change to part-time no benefits status, you can choose to continue coverage for yourself and/or dependents at 102% of the total cost under The City of Atlanta Plan (COBRA) or you may convert to an individual policy.

The HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPAA), better known as the KASSEBAUM-KENNEDY LEGISLATION states:

If you terminate your employment, cease to be an eligible dependent, or your COBRA eligibility terminates, A CERTIFICATE OF GROUP HEALTH PLAN COVERAGE WILL BE MAILED by your Insurance Carrier to the last address on their file.

Facts About Your Insurance

No Insurance

If you do not want health and/or dental insurance during September 1, 2015 to August 31, 2016, you must select NO COVERAGE using Self-Service.

Coverage for Mental or Physically Disabled Dependent

To provide coverage for a dependent who is incapable of self-support because of a mental or physical incapacity, an employee must provide a completed Physician Verification of permanent disability. This form is available in the DHR - Employee Benefits.

Change of Address

You must submit a change of address to your payroll clerk or to the Department of Human Resources to correct the City of Atlanta records. Or log onto Employee Self-Service to update your address.

Payroll Deductions

As an employee, your share of health/dental insurance will be deducted from your paycheck every payday. However, in the case of late Open Enrollments, payroll deductions may be delayed. If this occurs, back premiums and/or refunds (if applicable) will be included in your paycheck as soon as possible.

ID Cards

After your Open Enrollment Application is processed and an eligibility file is sent to each insurance carrier, your ID card and member booklet will be mailed to your home address by the selected insurance company. The ID card should be placed in your wallet for easy access at all times. Be sure to read the member booklet carefully, and keep it in a safe place for easy reference. The member booklet will provide detailed information about how to use your insurance benefits. You will not receive a new ID card unless you make a change in your coverage. Reimbursable claims should be filed only with your insurance carrier, not the City of Atlanta.

NOTE: All members will receive separate cards for dental and vision coverage. If you need medical care prior to receiving your new ID card, use a physician and/or hospital on your new carrier list of providers.

PLEASE RETAIN A COPY OF YOUR EMPLOYEE SELF-SERVICE CONFIRMATION STATEMENT AND DOCUMENTATION THAT YOU HAVE SUBMITTED FOR YOUR RECORDS. ALWAYS PRINT YOUR NAME AND SOCIAL SECURITY NUMBER ON ALL DOCUMENTATION. MAKE A COPY AND ATTACH IT TO THE ENROLLMENT FORM.

Frequently Asked Questions

How do I enroll or update my information?

Visit the City's public website at www.atlantaga.gov. From the left navigation bar on your page, click on Departments – Human Resources – Employee/ Retiree Benefits home page. From the top navigation bar go to How Do I… – Employee/ Retiree Benefits Home Page. Employees may also go directly to the Employee Self-Service application within Oracle to enroll.

What is my user name?

Your user name is your employee ID number. If you are a retiree, you may find this number on your pension check. If you cannot locate your employee ID number, please call the Help Desk at 404-865-8949. The Help Desk representative will ask a series of questions for validation purposes. The Help Desk will provide you with your user name, which is usually your employee ID number.

What is my password?

If you need a password reset, contact the Help Desk at 404-865-8949.

What do I do if I forget my password?

You need to call the Help Desk at 404-865-8949 to reset the password or click "Forgot Your Password" online from the "Employee/Retiree Benefits" Home Page. A valid COA email address is required.

I have not received my enrollment package. What do I do?

You can go online to www.atlantaga.gov and click on Departments – Human Resources – Employee/ Retiree Benefits and choose the link for Active Employees Benefits Booklet or Retiree Benefits Booklet. You may also email the Employee Benefits office at COABenefits@atlantaga.gov.

How much time do I have to enroll?

The Open Enrollment period is from July 21, 2015 through 11:59 p.m. ET August 4, 2015 for all active and retired City of Atlanta employees. Because employees and retirees are enrolling online, you have access to the system 24 hours daily through August 4, 2015.

Oracle Self-Service will not be available on July 22, 2015, due to payroll processing and system updates.

If I enroll online, what will I have for my records to prove I have enrolled or confirmed my benefits?

You can print a confirmation statement when you have completed your online enrollment.

What should I do if I do not have access to Oracle or if I do not see the "COA Employee Self-Service" responsibility in my menu options when I log into the Oracle system?

Please call our Help Desk at 404-865-8949. The Help Desk will be able to authorize access.

Are there any major changes this year to be concerned about?

Yes. See page 4 for a listing of FY16 plan changes. IMPORTANT: If you want dental coverage in the 2015 - 2016 benefit plan year, you must enroll with one of the new Dental Plan providers.

What will be the effective dates of my new selections for coverage?

The options that you select will be effective September 1, 2015 and remain in effect until August 31, 2016 unless you have a qualifying life event. If there is a qualifying life event, you must enroll your dependent(s) within 31 days of the qualifying life event. Failure to do so may result in delayed benefits until Open Enrollment period for 2016.

Am I required to make changes to my benefits?

If you do not wish to make changes for the new benefit plan year, you must confirm your benefit selections for the next plan year through Oracle Self-Service.

What will happen if I don't select a dental carrier?

There are two new Dental Plan vendors for the new benefit plan year. You must select a vendor in order to have dental coverage. If you fail to select a carrier, you will not have dental coverage for the upcoming benefit plan year.

When does all information have to be submitted to the Employee Benefits office?

All Open Enrollment benefit changes are due to the Department of Human Resources (DHR) - Employee Benefits no later than August 4, 2015. If you are completing the application online, Open Enrollment will close at 11:59 p.m. ET August 4, 2015.

What are the time frames associated with my current coverage vs. new coverage plans?

Your current coverage continues through August 31, 2015. The next Coverage Plan Year is September 1, 2015 - August 31, 2016.

What is the worst that could happen if I don't comply with Open Enrollment period guidelines?

This is an active Open Enrollment and employees are required to review all benefit selections. Active employees who do not make benefit selections will be subject to no coverage for the 2015-2016 benefit plan year.

Do you have directions for enrolling online?

Yes. Please reference this document: Self-Service Instructions.

When will the Open Enrollment meetings be held this year?

Please see the schedule of Open Enrollment meetings posted in City faciilities and on the enrollment website, benefits.atlantaga.gov.

What are considered Qualifying Life Events?

Qualifying Life Events include newborn children, marriage, divorce, domestic partners, dependent loss of coverage, and leave-of-absence without pay.

Insurance premiums for the 2015-2016 plan year will be included in your benefit package or you may review them online at benefits.atlantaga.gov.

Wellness At Work

The Department of Human Resources (DHR) manages a comprehensive health and wellness program for the City's active and retired employees and their families. For more information about the activities listed below, contact the Employee Benefits office at 404-330-6036.

You should also log on to your healthcare provider's website and complete a Health Risk Assessment form. The assessment will assist you in determining which activity will suit your health care needs.

- Kaiser Permanente Members: www.kp.org
- Blue Cross Blue Shield Members: www.bcbsga.com

Employee Fitness Center

Free, state-of-the-art fitness centers are located at various City facilities. These facilities have modern cardio-vascular and weight equipment machines and aerobic equipment. Some of the facilities also have locker rooms and showers available.

Mobile Nurse Program

The Mobile Nurse Program is a city-wide health promotion campaign for employees. DHR encourages all employees to take an active role in their health care decision process and improve the quality of life for both themselves and their families. The primary initiative of this program is to focus on heightening health awareness, enhancing preventive health strategies for all employees, and decreasing absenteeism from work. This program provides onsite services to City of Atlanta field facilities by conducting preventive medical screenings and counseling, along with providing health education material that will assist with the management of costly chronic diseases like diabetes, hypertension, and COPD. Specific services provided are as follows:

- Presentation about the Benefits of Active Health Care
- Health and Wellness Surveys
- Blood Pressure Screenings
- Diabetes Screenings
- Cholesterol Screenings
- Medical Consultations

Lunch and Learn Series

DHR, in partnership with contracted health insurance vendors and community providers, sponsors a monthly lunch and learn series for employees. Monthly topics focus primarily on key health issues identified by the American Medical Association and the National Institutes of Health. Health insurance vendors provide nutritious lunches while employees discuss various medical concerns with leading medical professionals. Topics include breast cancer, cardiovascular health, HIV/AIDS awareness, blindness prevention, autism, hypertension, diabetes prevention and management, nutritious foods and healthy cooking, fitness training, and dental care.

Disease Management

Contracted insurance vendors manage chronic diseases such as diabetes, heart disease, coronary artery disease (including circulatory restrictions and strokes), musculoskeletal disorders (including lower back pain), and digestive disorders (the top five chronic diseases prevalent in our population). The department is working to reach not only active employees but also partnering with other agencies to reach out to retired employees. At the same time, DHR is educating employees to help them be more aware of these illnesses and the health disparities leading to earlier and more frequent prevalence of these diseases.

Health and Wellness Programs

The City will offer these programs during the 2015 – 2016 benefit plan year.

- Weight Management Program
- Line Dancing Classes
- City-wide Stress Reduction Program
- Employee Daily Step Challenge Program
- Personal Fitness Trainers and Corporate Challenge Fitness Program
- Tai Chi and Zumba
- BCBS POS and Kaiser Permanente HMO members can earn premium rebates at the end of the plan year (August 2016) for completing an online Health Risk Assessment ($50), obtaining an onsite biometric screening ($50), and for completing an annual physical examination with your PCP.

High-Deductible Medical Plan Options

Alongside the traditional Medical Plan options, the City of Atlanta is pleased to again offer two high-deductible Medical Plan options. These plan options are called "high-deductible" plans, because their initial deductibles are higher than under the traditional plans. In return, however, you pay a lower premium. They also have some special features not found in traditional plans.

This type of healthcare plan, also known as a "consumer-directed" type of health plan, has shown encouraging results in controlling costs for both participants and employers. More importantly, high-deductible plans achieve this goal by focusing on the individual's health, involving you more directly in the way you consume health care and helping you make more informed healthcare decisions.

There are two high-deductible plan options to choose from:

- **Lumenos with Health Savings Account**, offered by Anthem Blue Cross Blue Shield
- **Kaiser HMO High-Deductible Health Plan**

Using Your Health Savings Account

An HSA provides you with the opportunity to save money on a pre-tax basis to pay for medical expenses now or in the future. Unused HSA funds roll over from year to year, and can even be saved for use during your retirement years. Your HSA belongs to you—you can even take the account with you if you leave employment.

You will receive a debit card to pay for qualified medical expenses using your HSA. And, if you have money in your HSA, the plan will automatically draw from your HSA funds to pay for deductible-related expenses before billing you for health care services and supplies.

The HSA cannot be used in coordination with another major medical plan. It can only be used with one plan at a time. This plan is not offered under COBRA. If you have questions about your HSA, call Customer Service at 1-877-713-7712.

Important Features

- Both high-deductible plans include **Health Savings Accounts** (HSAs). You can contribute pre-tax dollars to your HSA and use them to help meet your annual deductible responsibility and other out-of-pocket health costs, and unused HSA dollars can be saved or invested and carried over into future years. In addition, **the City of Atlanta will contribute to your HSA each year** — $500 for individuals, and $750 for families (employee plus one or more dependents).
- Both plans cover 100% of in-network preventive care, even before you meet the deductible. Preventive care is paid by the plan, not with dollars from your HSA.
- Once you have satisfied the plan's out-of-pocket maximum, your in-network allowable expenses will be paid at 100% for the remainder of the year.
- Under the Lumenos plan, you may receive care from either in-network or out-of-network providers. To receive the highest level of reimbursement (80%), you should obtain services in-network. You will receive a lower level of reimbursement for out-of-network care (60%) and pay more of the costs.
- Under the Kaiser HMO plan, only in-network care is covered.
- Active employees can earn up to $250 in premium rebates at the end of the plan year (August 2016) from the City in their HSA: $150 for an annual physical exam with your primary care physician, $50 for completion of an online Health Risk Assessment (HRA), and $50 for obtaining a biometric screening, sponsored by the City of Atlanta.

Here is how the two high-deductible plans work. Covered services under the two plans are generally the same as those under the BlueChoice POS and Kaiser HMO plans.

Feature	Fact		
Health Savings Account First, use your HSA to pay for covered services. You can contribute pre-tax dollars and use them to help meet your annual deductible. ***Unused HSA funds roll over from year to year.***	**Contributions to Your HSA** For 2015, you can contribute up to the following: • $3,350 for individual coverage • $6,650 for family coverage Note: These limits apply to all combined contributions form any source, except rollover funds.		
City of Atlanta Contribution The City makes a contribution to help you get started.	**Employer Contribution** • $500 for individual coverage • $750 for family coverage		
Free Preventive Care To help you stay healthy, preventive care is covered at 100%, including certain screenings, immunizations, and physician visits.	**Preventive Care** There is no deduction from your HSA or any out-of-pocket costs for you if you receive your preventive care from in-network providers.		
Meet Your Deductible The deductible is the annual amount you pay, either out-of-pocket or using your HSA, before you reach the traditional health coverage portion of the plan.	**BCBS Lumenos with HSA**		**Kaiser HMO HDHP**
	In-Network • $1,300 individual • $3,900 family	**Out-of-Network** • $2,500 individual • $7,500 family	**In-Network Only** • $1,300 individual • $3,900 family
Traditional Health Coverage After you meet your deductible, the plans work like traditional PPO or HMO plans. You pay coinsurance (a percentage of charges), and the plan pays the rest.	**In-Network** • Plan pays 80% after deductible for network providers • Plan pays 80% after deductible for network pharmacies	**Out-of-Network** • Plan pays 60% after deductible for out-of-network providers • Plan pays 80% after deductible for out-of-network pharmacies	**In-Network Only** Plan pays 100% after deductible for covered services
Out-of-Pocket Maximum For your protection, the total amount you spend out-of-pocket is limited. Once you spend that amount, the plan pays 100% of the cost for covered services for the remainder of the year.	In-Network • $3,500 individual • $7,000 family Deductible counts toward maximum	Out-of-Network • $7,000 individual • $14,000 family Deductible counts toward maximum	**In-Network Only** Under the Kaiser plan, you meet your out-of-pocket maximum once you've met your annual deductible

Traditional Medical Plan Options

In addition to the high-deductible Medical Plan options, City of Atlanta also continues to offer two traditional options, the BlueChoice POS and the Kaiser Permanente HMO. These options have higher premiums than the high-deductible plans. Although the deductibles are lower, your out-of-pocket costs may be higher due to the higher premiums.

Terms You Should Know

Coinsurance: The fixed percentage of covered charges you must pay after any deductible has been subtracted. For example, if a plan pays 80 percent of covered charges (after applying any deductible), you would be responsible for the deductible and the 20 percent balance.

Copayment: A fixed dollar amount you must pay for a service or benefit provided by a plan.

Deductible: The amount of covered charges you must pay before the plan pays benefits, for example, calendar-year deductible and inpatient hospital deductible. Generally, no more than two or three family members must meet the calendar-year deductible. However, some plans have a family calendar-year deductible, which can be met by any or all of those covered.

Exclusions: Charges, services, or supplies that are not covered. A plan does not provide or pay for excluded items, nor do charges for them apply toward deductibles and catastrophic limits.

Reasonable and Customary: A maximum payment allowed for a given medical service based on a statistical formula calculated by an insurance company to determine the amount it will pay on a given medical service.

The chart below highlights key features and benefits under the traditional health plan options: BlueChoice POS and Kaiser Permanente HMO. See the plan summaries on the enrollment website, benefits.atlantaga.gov, and the Summary Plan Descriptions for more details.

Plan Provisions	BlueChoice POS In-Network	BlueChoice POS Out-of-Network	Kaiser Permanente HMO
Lifetime Maximum	Unlimited	Unlimited	Unlimited
Deductible (individual/family)	$500/$1,500	$800/$2,400	$500/$1,500
Annual Out-of-Pocket Maximum (individual/family)	$2,500/$7,500	$4,000/$12,000	$2,500/$7,500
Coinsurance	100%	70%	N/A
Preventive Care			
Immunizations	100% (no copay)	70% after deductible	100% (no copay)
Pap Smear/Mammography/ Prostate Screening	100% (no copay)	70% after deductible	100% (no copay)
Routine Physicals	100% (no copay)	70% after deductible	100% (no copay)
Office Visits			
Primary Care	$20 copay	70% after deductible	$20 copay
Specialist	$40 copay	70% after deductible	$30 copay
Emergency Services	$250 copay (waived if admitted)		
Inpatient Hospital	100% after deductible	70% after deductible	100% after deductible
Outpatient Hospital Services • Hospital charges • Diagnostic X-ray/lab services • Physician services	100% after deductible	70% after deductible	100% after deductible
Mental Health/Substance Abuse			
• Inpatient facility and physician fee • Inpatient substance abuse detoxification facility and physician fee • Partial hospitalization program	100% after deductible*	70% after deductible	100% after deductible
Outpatient Mental Health Treatment	$20 copay (unlimited visits)	70% after deductible	$20 copay (unlimited visits)
Ambulance Service	100% after $150 copay	70% after deductible	$250 copay
Skilled Nursing Facility (100-day max)	100% after deductible	70% after deductible	No Charge
Home Health Care	100% after deductible (40 visits per year max)	70% after deductible	No Charge (120 visits max)
Hospice Care	100% after deductible	70% after deductible	No Charge
Prescription Drugs**			
Generic (30-day supply)	$15	70% after deductible	$15 KP/$20 NWK
Preferred Brand (30-day supply)	$30	70% after deductible	$40 KP/$50 NWK
Non-Preferred Brand (30-day supply)	$40	70% after deductible	N/A
Mail Order (90-day supply)	2x retail copay	Not covered	2x retail copay
Vision			
Eye Exam (every 12 months)	$35 copay	70% after deductible	$30 copay
Frames and Lenses (every 24 months)	Discount plan	Discount plan	Discount plan

* BlueChoice POS covers intensive outpatient mental health/substance abuse programs at 100%.

** Medications with a generic equivalent will be filled as generic unless the physician indicates DAW (dispense as written). If DAW is not indicated, members who choose the brand over the generic will pay the applicable copayment plus the difference in cost between the brand name and the generic. All specialty medications must be filled through the Mail Order program.

Dental Plan Options

The City of Atlanta offers two PPO Dental Plan options (with and without orthodontia coverage) and one dental HMO. Please note that we have new Dental Plan providers, so you must enroll if you want dental coverage in the 2015 – 2016 benefits year.

Blue Cross Blue Shield of Georgia Dental PPO

The Blue Cross Blue Shield (BCBS) of Georgia Dental Plan lets you visit any licensed dentist or specialist you want, with costs that are normally lower when you choose a network provider. You pay the BCBS negotiated rate for covered services from participating dentists even if you exceed your annual benefit maximum. There is no deductible for diagnostic and preventive services.

BCBS Dental PPO	High Option (with orthodontia)	Low Option (without orthodontia)
Annual Benefit Maximum (per person)	$2,000	$2,000
Annual Deductible (individual/family)*	$50/$150	$50/$150
Dental Services	BCBS pays:	BCBS pays:
Diagnostic and Preventive Services (exams, cleanings, X-rays)	100%	100%
Basic Services (fillings, extractions, root canals, periodontic scaling, and root planning)	80%	80%
Major Services (crowns, dentures, bridges)	50%	50%
Orthodontic Services (adults and dependent children)	50%	Not Covered
Orthodontia Lifetime Maximum (per person)	$1,500	N/A

* Deductible waived for diagnostic/preventive services.

For more details, go to benefits.atlantaga.gov.

Delta Dental DHMO

With the Delta Dental DHMO program, you have coverage for preventive, basic, and major services, and you can take advantage of:

- Lowest payroll deduction option
- No deductibles
- Coverage is not applicable outside the State of Georgia
- No annual maximum
- Generally lower out-of-pocket expenses than a traditional program

Go to benefits.atlantaga.gov and click the link to the Delta Dental Description of Benefits and Copayments for more details.

Vision Plan

The Vision Plan is administered by UnitedHealthcare Vision. With UnitedHealthcare Vision you are able to choose from network private practice providers and retail chain providers. To identify a network provider, visit UnitedHealthcare Vision's website – www.myuhcvision.com – or call UnitedHealthcare Vision's Provider Locator Service at 1-800-839-3242 and follow the voice prompts.

ID cards will be issued to all enrollees or may be obtained online.

For details about Vision Plan coverage, go to benefits.atlantaga.gov.

Employee Life Insurance

The City of Atlanta provides you with a basic amount of Group Life insurance and Accidental Death and Dismemberment Insurance (AD&D) to help protect your loved ones in the event of your death. There is an additional "In the Line of Duty" Benefit for First Responders. The City of Atlanta also provides you with the opportunity to apply for additional life insurance from Minnesota Life Insurance Company.

Eligibility

To be eligible for this plan:

- You must be an active full-time or part-time permanent employee of the City of Atlanta.
- To enroll in the Voluntary Additional Life plan, you must be enrolled in the Basic Life plan.
- For Dependent Life insurance, your spouse or children must not be full-time members of the armed forces of any country.

Employee Coverage Amount

- The City provides each active employee with $40,000 in life and accidental death and dismemberment (AD&D) coverage.
- Active employees also can purchase Basic Life and AD&D insurance in the amount of 1 x base salary (no City contribution).
- The Voluntary Additional Life plan allows you to select increments of $10,000 up to $200,000 (no City contribution).
- Accidental Death and Dismemberment insurance (AD&D) is also provided in the amount that is equal to the Basic Life Insurance coverage.
- If you wish to add a dependent or change your coverage from no coverage to one times base salary (excluding the $40,000 basic life and AD&D coverage provided by the City) or increase your supplemental coverage by more than $20,000, you must complete an Evidence of Insurability form at any Open Enrollment meeting or you may make an appointment by calling the DHR Employee Benefits department at 404-330-6036. These changes are subject to the approval of Minnesota Life Insurance Company underwriters.

Spouse and Dependent Coverage Amount

- Dependents Life Insurance is also available and would provide the following coverage:
  - Spouse: $5,000
  - Child between birth and six months: $600
  - Child between six months and 26 years: $5,000
- A Surviving Spouse who is insured at the time an Employee or Retiree passes away will be eligible to continue his/her $5,000 Life Insurance coverage.

Short-Term Disability

Colonial Life's Short-Term Disability Insurance offers monthly benefit to replace up to 60% of your gross income if you are disabled and can't work due to a covered accident or covered sickness. Maternity, psychiatric, and psychological conditions are included.

With Colonial Life's guaranteed issue Short-Term Disability Insurance:

- You are paid regardless of any other insurance you may have with other insurance companies.
- Benefits are paid directly to you (unless you specify otherwise).
- You may choose the amount of your disability benefits to meet your needs (subject to income limits).
- You pay for coverage through convenient payroll deduction.
- Your coverage is portable at ported rates.

NOTE: Colonial Life is the exclusive provider of Short-Term Disability Insurance for City of Atlanta employees. Employees transferring prior group coverage to Colonial Life will receive credit for time insured.

For more information or to enroll, schedule a one-to-one meeting with your Colonial Life Benefits Counselor. Contact the Colonial Life District Office at 770-446-7201. Visit www.visityouville.com/cityofatlanta for more information on Colonial Life benefits or to help you select which products may be best for you and your family.

Supplemental Flexible Benefits Plan

The City of Atlanta is pleased to sponsor the Supplemental Flexible Benefits Plan so you can use your pre-tax dollars to pay for several different insurance and benefits programs according to your specific needs.

Flexible Spending Accounts

Section 125 of the Internal Revenue Code currently allows you, thru payroll deduction, to elect up to $5,000 per plan year for dependent care reimbursement and up to $2,500 for unreimbursed medical expenses.

All elected officials, appointed officials, as well as all full-time and part-time permanent employees are eligible to participate in the program from date of hire. The choices you make are for the full plan year.

All claims must be filed within 90 days of the end of the plan year.

PLEASE NOTE: FLEX SPENDING ACCOUNT/DEPENDENT CARE ACCOUNT PARTICIPATION

There is no automatic enrollment through Oracle Self-Service and participants currently enrolled in an FSA/DCR plan will not automatically be re-enrolled for the next benefit plan year. Changes to your FSA/DCR contributions can only be made during the Open Enrollment period.

Supplemental Insurance Plans

Our supplemental insurance plans are offered by Aflac and Colonial Life. You can chose the insurer you prefer. If you're sick or hurt, Aflac or Colonial Life Insurance pays benefits directly to you—not the hospital or doctor—to help with your expenses.

While you focus on recovery, the plan focuses on paying you quickly. Most claims are processed in about four business days.

Use benefits however you want. It's your decision how to use the cash—use it to help pay for rent, child care, or groceries.

Coverages are available for you and your family (for most products). You will pay for premiums through payroll deduction and you will have the ability to take most coverages with you if you change jobs or retire.

- **Lump Sum Critical Illness Insurance**—(Guaranteed issue) Provides a single cash benefit to you if you are diagnosed or treated for critical illness events. The benefit is triggered by a covered serious health condition such as heart attack, stroke, end-stage renal failure, major organ transplant, paralysis, coma, and more.
- **Cancer Care Insurance—(**Guaranteed issue) Pays benefits to help with the cost of cancer screening and cancer treatment including radiation, chemotherapy, surgery, and more.
- **Accident Indemnity Insurance**—(Guaranteed issue) Pays cash benefits to help with expenses in the event of a covered accidental injury, dismemberment, or death. Benefits help cover the costs that go beyond standard major medical coverage.
- **Hospital Indemnity Insurance**—(Guaranteed issue) Pays for out-of-pocket hospital expenses that may not be fully covered by major medical insurance, including hospitalization for injury or sickness, emergency room benefit, and more.
- **Critical Care and Recovery Insurance**—(Guaranteed issue) Pays cash benefits for a covered primary specified health event. The benefits can be used to help pay for medical treatment, living expenses, or other out-of-pocket expenses. Covered events include coma, heart attack, stroke, coronary bypass surgery, major organ transplant, third-degree burns, paralysis, end-stage renal failure, cardiac arrest, and more.

For more information or questions, contact the Aflac at 678-927-9578 or tierra_thomas@us.aflac.com, or contact Colonial Life at 770-446-7201 or www.visityouville.com/cityofatlanta.

Forms

In the pocket of this guide you will find these forms:

- City of Atlanta Retirement Checklist
- Minnesota Life Beneficiary Designation Form

Notes

Notes

You may now enroll online with Employee Self-Service.

See instructions in this guide. For details about your benefits, go to benefits.atlantaga.gov.

This open enrollment selection will be in effect from 9/01/2015 through 8/31/2016.

All employees who are not currently covered by an insurance plan, as well as those changing coverage, adding a dependent, or providing required documentation MUST complete and return an application.

City of Atlanta
Department of Human Resources
Employee Benefits
404.330.6036

For details about your benefits, go to benefits.atlantaga.gov.