

DHR Employee Benefits and Pension Division

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The Employee Benefits Division serves over 8200 Active Employees and 7100 Retirees with plans regarding Medical, Dental, Vision and Life Insurance. We also sponsor additional ancillary benefits, such as Short-Term Disability (AFLAC) and other benefits provided by MetLife (Hospitalization, Cancer, Sickness, etc.)



The benefits that are offered aid the city in:

- Recruitment and Retention
- Coverage for Dependents
- Retiree Benefits



BENEFIT PLANS

- The City of Atlanta currently offers coverage in the following Benefit Plans:
- Anthem BCBS Point of Service (POS) and HDHP
- Kaiser Permanente HMO and HDHP
- Anthem PPO Dental High Option and Low Option
- Aetna DHMO
- UHC Vision
- Greater Georgia Life Insurance (Anthem)



MEDICAL PLANS

Anthem Point of Service (POS) plan provides the following:

- In Network and Out-of-Network coverage
- Primary Care Physician (PCP) or Gatekeeper is required
- Specialist visits require a referral from the PCP
- Coverage outside the State of Georgia is regulated to Emergency Care or considered Out-of-Network
- Co-Pays for office visits with deductibles only being utilized for hospitalization or Advanced Imaging (MRI, CT Scan, etc.)



MEDICAL PLANS

Anthem HDHP provides the following:

- Wellness and Immunization covered at 100% (in network)
- Other covered services are paid for (out of pocket) up to the deductible (\$1,350 ind/\$3,900 Family In Network and \$2,500 ind/\$5,000 Family out-of-network). Once deductible is met, services are covered at 80% until the out-of-pocket maximum is met (\$3,500 ind/\$7,000 Family In-network and \$7,000 ind/\$14,000 out-of-network)
- Health Savings Account is attached to the HDHP to help pay for covered services. The city contributes seed money towards the H S A once a plan year (\$500 ind/\$750 Family). Individuals can contribute pre-taxed dollars towards their H S A through payroll up to the following limits (\$3,650 ind/\$7,300 Family with a \$1,000 catchup provision for members over age 55)
- H S A total dollars rollover from year to year (unlike the FSA Plans that have a “Use it or Lose it” clause)



MEDICAL PLANS

Kaiser HMO provides the following:

- In Network ONLY! No Out-of-Network coverage
- Primary Care Physician (PCP) is required
- Specialist visits require a referral from the PCP. Only in the Kaiser Network
- Coverage outside the State of Georgia is regulated to Emergency Care
- Co-Pays for office visits with deductibles only being utilized for hospitalization or Advanced Imaging (MRI, CT Scan, etc.)



MEDICAL PLANS

Kaiser HDHP provides the following:

- Wellness and Immunization covered at 100% (in network)
- Other covered services are paid for (out of pocket) up to the deductible (\$1,400 ind/\$4,200 Family in the Kaiser Network). Once deductible is met, services are covered at 90% until the out-of-pocket maximum is met (\$3,500 ind/\$7,000 Family)
- Health Savings Account is attached to the HDHP to help pay for covered services. The city contributes seed money towards the H S A once a plan year (\$500 ind/\$750 Family). Individuals can contribute pre-taxed dollars towards their H S A through payroll up to the following limits (\$3,650 ind/\$7,300 Family with a \$1,000 catchup provision for members over age 55)
- H S A total dollars rollover from year to year (unlike the FSA Plans that have a “Use it or Lose it” clause)



DENTAL PLANS

Anthem PPO High Option plan offers:

- Annual Benefit - \$2,000 maximum per person
- Annual Deductible \$500 ind/\$150 Family
- Diagnostic and Preventive Services covered at 100%
- Basic Services (fillings, extractions, periodontic scaling, etc.) covered at 80%
- Major Services (crowns, dentures, bridges) covered at 50%
- Orthodontic Services (Adult and Children) covered at 50% with a \$1,500 Lifetime maximum



DENTAL PLANS

Anthem PPO Low Option plan offers:

Everything the High Option offers, except for Orthodontic care

AETNA DHMO Plan offers:

- Dental Gatekeeper
- Referral for Specialists
- Provides a Summary of Benefits with a price list of what YOU pay for benefits



VISION PLAN

UHC Vision PPO Plan offers:

- Vision Exam (Refractive) every 12 months - \$15 co-pay In Network/\$40 Out-of-Network
- Eyeglass Lenses – 12 months – \$25 in network (Single, Bifocal, Trifocal, Lenticular); Out-of-Network Single (\$40), Bifocal (\$60), Trifocal (\$80), Lenticular (\$80)
- Eyeglass Frames – 12 months - \$130 In Network; Out-of-network Plan pays \$45
- Contact Lenses in lieu of eyeglasses – 12 months - \$25 and any amount over \$150; Out-of-network – Plan pays up to \$150 (Elective) and up to \$210 Necessary
- Visit myuhcvision for network locations
- Use your FSA dollars



FLEXIBLE SPENDING ACCOUNTS

How does it work?

- Offers you to save and pay for certain health and dependent care expenses with pre-tax dollars
- Reduces your taxable income, which means you owe less taxes and spend less for qualified expenses

Health Care Flex

- Currently can contribute up to \$2,750 for unreimbursed medical, dental and vision expenses
- Funds immediately loaded onto a debit card; ready for use upon disbursement
- Services must be rendered before the end of the calendar year
- Only \$550 can carryover to the next plan year (with enrollment)



FLEXIBLE SPENDING ACCOUNTS

Dependent Care

- You can contribute up to \$5,000
- To be utilized for Daycare, After-school care and Adult Day care expenses
- Participants must be 13 or younger or an Adult Dependent that can't take care of themselves
- Claim forms with documentation must be submitted for reimbursement
- You can only be reimbursed according to what you have in the account at the time of the claim submittal
- Services must be rendered before the end of the calendar year



LIFE INSURANCE

- Employer Sponsored Life \$40,000 – Provided by the City. 100% of the premiums are paid by the city.
- Basic Life (Optional) – The amount is equal to 1 time an employee's Annual Earnings. 100% of the premiums are paid by the employee.
- Supplemental Insurance (Optional) – Employees can purchase Supplemental Life Insurance in increments of \$10,000 not to exceed 3 times their annual earnings. Maximum \$210,000. 100% of the premiums are paid by the employee.
- In the Line of Duty Benefit – The payable amount of the benefit will be the Basic Life benefit plus an additional 50% of the AD&D benefit amount.

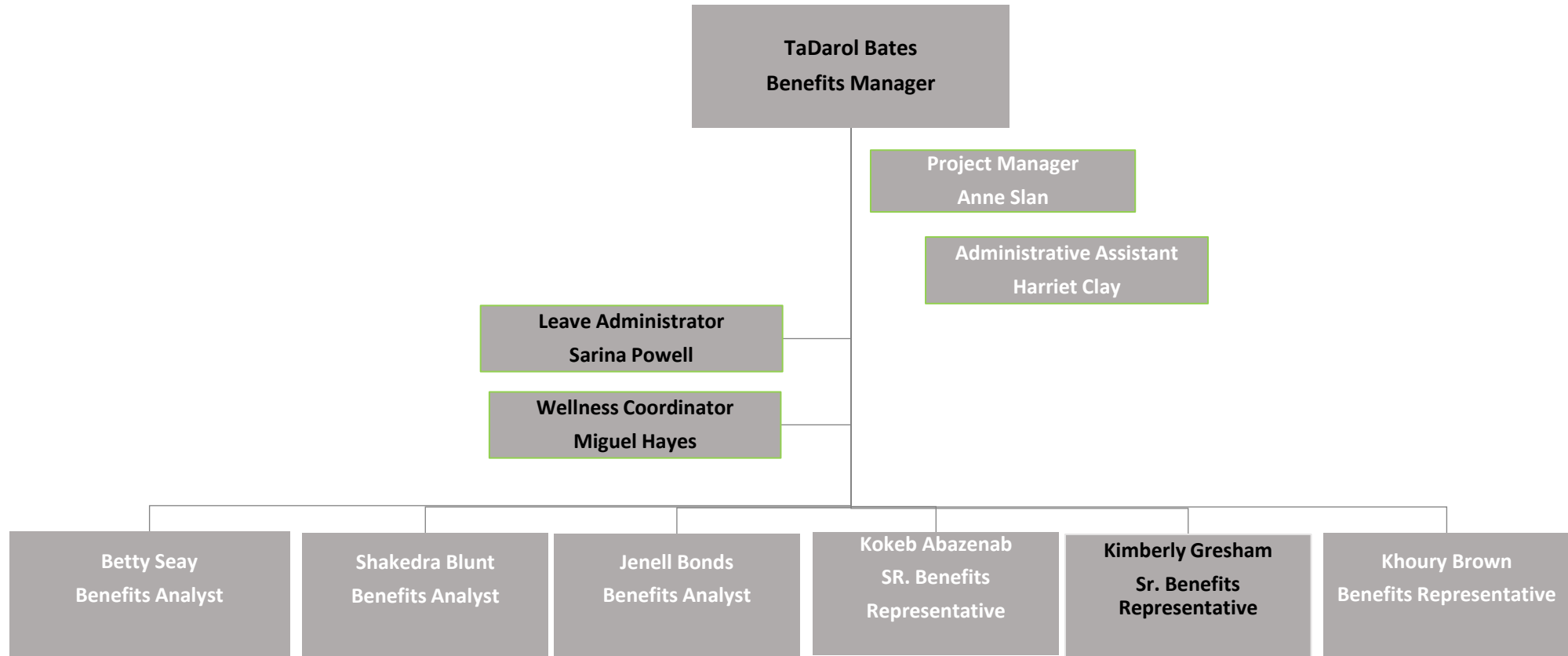


ROE v. WADE

- Reproductive Services are/were offered under our plans
- Trigger Laws – Heartbeat Law Appeal

WHAT WE DO KNOW:

- FSA and H S A dollars can be utilized to purchase Plan B (Morning After) medication, whether OTC or prescribed by a physician
- Plan B is covered under the Affordable Care Act (ACA)





CONTACT INFORMATION

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