

# Cobb EMC Employee Benefits At A Glance 2019

	Medical – Cigna			
	Cigna Low Plan	Cigna High Plan		
HRA (Administered by TASC)	4000	4000		
• Employee	\$300 \$300			
<ul> <li>Employee and 1 or more Dependents</li> </ul>	\$600	\$600		
Calendar Year Deductible				
<ul> <li>Single</li> </ul>	\$3,000 \$3,000			
<ul> <li>Family</li> </ul>	\$6,000 \$6,000			
Out-of-Pocket Maximum		4		
• Single	\$5,000	\$3,000		
• Family	\$10,000	\$6,000		
Coinsurance	80%	100%		
Preventive Care	100% (no copay)	100% (no copay)		
Office Visit Copay				
<ul> <li>Primary</li> </ul>	\$40	\$25		
<ul> <li>Specialist</li> </ul>	\$50	\$40		
Hospital Services				
<ul> <li>Inpatient</li> </ul>	20% after deductible	Subject to deductible		
<ul> <li>Outpatient</li> </ul>	20% after deductible	Subject to deductible		
Emergency Room	\$150 + 20%	\$150 + 20%		
Urgent Care	\$65 copay	\$40 copay		
Pharmacy (retail 30 days)				
<ul> <li>Generic</li> </ul>	\$10 copay	\$10 copay		
<ul><li>Brand</li></ul>	\$35 copay	\$35 copay		
<ul> <li>Non-Preferred</li> </ul>	\$60 copay	\$60 copay		
<ul> <li>Specialty</li> </ul>	25% to \$200	25% to \$200		
Mail Order (90 days)				
Generic	\$20 copay	\$20 copay		
<ul> <li>Brand</li> </ul>	\$70 copay	\$70 copay		
<ul> <li>Non-Preferred</li> </ul>	\$120 copay	\$120 copay		

2019 Wellness Program: Active employees have the ability to participate in the wellness program and receive a \$50 per month wellness premium credit to be used towards the cost of medical coverage or the cost of dental, vision or voluntary life if enrolled in the single coverage on the low plan. Participation in the wellness program consists of completing a Health Risk Assessment (HRA), completing a Biometric Screening, and attending bi-monthly health coaching sessions if you are deemed to have high risk health factors based on the results of your assessment and screening. Spouses of eligible employees that complete the HRA and Biometric Screening will receive a gift card incentive of \$100.00.

Waive Medical Program: Employees that choose to waive medical coverage will be eligible to receive \$298.22 bi-weekly as additional taxable income.

Dental – Cigna				
	Value Plan	High Plan		
Calendar Year Deductible • Single • Family Max	\$50 \$100	\$50 \$100		
Annual Benefit Maximum	\$1,000 Calendar Year	\$5,000 Calendar Year		
Diagnostic/Preventive Services	100% Coverage (no deductible)	100% Coverage (no deductible)		
Basic Treatment	80% Coverage (subject to deductible)	80% Coverage (subject to deductible)		
Major Treatment	50% Coverage (subject to deductible)	50% Coverage (subject to deductible)		
Orthodontia Services (Child Only)	50% Coverage Up To Lifetime Benefit Maximum of \$1,000	50% Coverage Up To Lifetime Benefit Maximum of \$1,500		
Vision — Anthem Blue Cross Blue Shield of GA				

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	In-Network	Non-Network	
Vision Exam	\$10 copay	Up to \$48 allowance	
Contacts Fitting	Member cost up to \$55 with 10% off retail price for premium.	Not Covered	

Contact Lenses	Up to \$100 allowance Covered in full	Up to \$87 allowance Up to \$210 allowance
Standard Plastic Lenses		allowarice
Single Vision	Covered in full	Un to \$36

Bifocal     Trifocal	after a \$10 copay	Up to \$54 Up to \$69
	Up to \$110	Up to \$64

Frames allowance; 20% allowance off additional cost

#### Benefit Frequency

- Exam Once every calendar year Lenses
- Once every calendar year Frames Once every other calendar year

#### **Bi-Weekly Payroll Deductions**

Coverage Tier	Cigna Low Plan	Cigna High Plan	Dental Value Plan	Dental High Plan	Vision
Employee	\$0.00	\$23.08	\$0.00	\$7.30	\$2.51
Employee + Spouse	\$86.02	\$134.51	\$12.43	\$26.64	\$4.39
Employee + Child(ren)	\$71.88	\$116.10	\$12.63	\$26.94	\$4.77
Employee + Family	\$175.30	\$245.64	\$28.74	\$52.00	\$7.28

Note: The payroll deductions listed above are not reflective of the spousal surcharge and do not reflect the \$50 wellness credit if applicable.

#### Basic Life - Cigna

Cobb EMC provides all eligible employees term life insurance as described below:

Employee: 3 x your annual salary up to \$500,000

#### Dependent Life - Cigna

Cobb EMC provides all eligible employees with term life insurance for their dependents as described below:

Spouse: \$2,500 Child(ren): \$1,000

#### Supplemental Life/AD&D - Cigna

Employee: Increments of \$25,000 to \$500,000 not to exceed 5 x your annual salary

Spouse: Increments of \$10,000 to \$250,000 not to exceed 50% of employee amount

Child(ren): \$5,000 or \$10,000

This year you can elect up to \$100,000 of coverage for your spouse without completing an Evidence of Insurability form.

#### Short Term Disability - Cigna

Benefit Percentage: 66 2/3% (percentage of pre-disability weekly earnings)

Maximum Benefit: Option 1: \$800 Option 2: \$1,600

Maximum Benefit Period: 13 weeks

Coverage Begins: 7 days after disability

#### Long Term Disability - Cigna

Benefit Percentage: 66 2/3% (percentage of pre-disability monthly earnings)

Maximum Benefit: \$10,000

Maximum Benefit Period: Social Security Normal Retirement Age

Coverage Begins: 90 days after disability

#### Flexible Spending Accounts - TASC

Healthcare Maximum Contribution:\$2,650Dependent Care Maximum Contribution:\$5,000Rollover Amount:\$500

#### Supplemental Benefits

Pet Insurance - Nationwide

Universal Life - Aflac Critical Illness - Aflac

Hospital Indemnity – Aflac

Accident - Aflac

#### **Spousal Surcharge**

A spousal surcharge of \$50.00 per pay period will apply to all employees that cover a spouse on the Cobb EMC medical plan while there is other coverage available to them through his/her employer. In order to avoid the spousal surcharge, you must certify that you are not covering a spouse on the Cobb EMC medical plan, you yourself are not enrolling in the Cobb EMC medical plan, or your spouse is not eligible for coverage under any other medical plan.

#### **Online Enrollment Portal**

Bswift is the platform for employee benefits enrollment. Here, you can enroll in your benefits, make changes to your demographic information or beneficiaries, update life events and get benefit information. Go to www.cobbemc.bswift.com, your username is your work email address. Your password is your 10-digit home phone number + your date of hire.

#### Benefit Resource Center Site

ShawHankins provides Cobb EMC employees with a Benefit Resource Center website that give you access to all of the plan details needed to make decisions on your benefit elections. The Benefit Resource Center contains information on all benefit offerings, qualifying life events, enrollment, and other resources. Visit <a href="https://www.shawhankinsbenefits.net/cobbemc">www.shawhankinsbenefits.net/cobbemc</a>.

#### **Benefit/Enrollment Questions**

1-833-783-6385
www.shawhankins.com

#### **Medical Benefits**

Cigna

1-800-244-6224

(non-members before enrollment

www.mycigna.com (for existing members)

#### **Dental Benefits**

Cigna

1-800-244-6224 www.cigna.com

#### **Vision Benefits**

Anthem Blue Cross Blue Shield

www.bcbsga.cor

#### **Life Benefits**

Cigna

1-800-362-4462 www.cigna.com

#### **Disability Benefits**

Cigna

1-800-362-4462 www.cigna.com

#### Universal Life, Critical Illness, Accident, & Hospital Indemnity

Aflac 💮

1-800-433-3036

www.aflacgroupinsurance.com

### Flexible Spending Accounts

TASC

1-800-422-4661

# Health Reimbursement Account

1-800-422-466

www.tasconline.cor

#### Pet Insurance

Nationwide 1-877-738-7<u>874</u>

www.petinsurance.com/cobbemc

## **Employee Assistance Program**

Beacon Health Options 1-800-435-1986

www.heaconhealthontions.com

#### **Human Resources**

Cobb EMC Ginger Johnson 678-355-3148

678-355-3648

benefits@cobbemc.com