

MADISON COUNTY COMMISSION

BENEFITS GUIDE 2025 EDITION

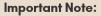




Madison County HR
Shaping the future together

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This document contains only highlights of the Madison County Commission benefit plans and programs. Receipt of this document does not guarantee eligibility for any Madison County Commission sponsored plan or program of benefits. Eligibility for and entitlement to a benefit is governed by the terms of the official plan document or summary. Madison County expects to continue offering the employee benefits plans noted in this document, but reserves the right to amend, cancel, or terminate the plans at any time.

If there is a discrepancy between this document and the official Plan Document(s), the official Plan Document(s) will govern.









Welcome to your benefits!

In order for the Madison County Commission to serve our community at our best, our people must be at their best. We provide our employees with strong benefits and wellness programs that help fuel their contributions and keep Madison County a great place to work.

What's different this year?

Health Insurance Premium Increase

| | 2024 | 2025 |
|--------|----------|----------|
| Single | \$61.00 | \$64.00 |
| Family | \$148.50 | \$155.75 |

New Prescription Benefit Provider

Prime Therapeutics replaces OptumRX as Local Gov's prescription benefit provider. Prime Therapeutics offers a tiered copay structure for prescription medications, ensuring access to affordable treatments.

Tier 1 - Generics

Member pays a \$15 copay or the full cost of the medication, whichever is less.

Tier 2 & Tier 3 - <u>Preferred and Non-Preferred Brands</u>

Member pays 100% of the cost of the drug at the point of sale and files for 80% reimbursement after \$200 deductible has been met.

Tier 4 - Certain high-cost specialty drugs and brand-name diabetic drugs Members are responsible for 20% coinsurance at the point of sale. The plan covers medications at 80%

Specialty Medications

Filled through designated specialty pharmacies, specialty medications can be found in multiple tiers and follow the benefit structure of that tier.



New Telehealth Provider

Doctor On Demand replaces Teladoc as Local Gov's FREE telehealth benefit

Doctor on Demand provides convenient, confidential, and highly-rated healthcare services for employees. With a 4.9/5 patient satisfaction rating, users have praised the care they received.

The platform offers 24/7 access to urgent care for conditions like colds, flu, and UTIs, and you can book appointments with therapists or psychiatrists anytime, even on weekends.

Doctor on Demand guarantees 100% confidentiality in a HIPAA-compliant online environment, offering peace of mind to employees and their dependents.



Health FSA Election Increase

Health Care Flexible Spending Account was raised from \$3,200 to

Health FSA account below \$660 in 2025 will roll over into the following

to Health Care Flexible Spending Accounts. The dependent Care remains at \$5,000 (for other than



Who is eligible to enroll?

Full-time and reduced full-time Madison County employees are eligible for benefits which are offered during Open Enrollment or within 30 days of a qualifying life event.

Dependent Eligibility

When you enroll in benefits, you can also enroll your family members:

- Your spouse
- Children up to age 26, including biological children, adopted children, children placed for adoption, legal guardianship, stepchildren, and children covered under a qualified medical child support order (note that Local Gov. automatically disenrolls children once they turn age 26)
- Disabled children age 26 or older*
- Legal and physical custody of a dependent allows coverage for a dependent, regardless of relationship, under the age of 19, for whom the participant, or his or her spouse, has been granted legal and physical custody by a court of competent jurisdiction.

All employees are responsible for determining whether their dependents meet the eligibility requirements to enroll in Madison County benefits.

*Approval required.

Making Changes to Your Benefits

If you have a qualifying life event during the year (marriage, birth, adoption of a child, divorce, spouse employment change, etc.), you can make changes to your benefits in the middle of the year.

You'll have **30 days** after the life event occurs to make changes. If you don't make your changes by the 30-day deadline, you must wait until the next Open Enrollment period to make changes, and those elections won't become effective until January 1st.

Contact HR for details on dependent eligibility and when you can enroll and disenroll dependents.

Planning to retire in 2025?

- Contact HR **90 days** prior to the expected retirement date.
- Retirements are always on the 1st of the month.
- Employees retiring who are eligible for Medicare must enroll in Part A and B to begin consistent with the 1st day of retirement.
- Review leave accrual balances on the employee portal.
- After Jan 2018, you must be at least 60 years old, have served 20 continuous years with Madison County, and be enrolled 10 years with Local Gov to maintain Health coverage.

Save for the future

It's never too soon or too late to thin about how much you're saving for retirement.

Contribute to either of the 457(b) plans: Nationwide or RSA-1

Learn more at: madisoncountyhr.org/retirement

Plus, with our FSA (Flexible Spending Account) plan, you can ensure that you are reducing the amount of tax you are paying for medical essentials.



Health

Local Gov provides Blue Cross Blue Shield health, dental, and prescription drug coverage for eligible employees. All eligible employees must enroll or decline by proof of other coverage.

LOCAL GOV health + wellness

Coverage Options

Single

Single coverage is the mandatory minimum coverage for eligible employees

Spouses **both working** for a Local Gov agency must enroll separately

\$64.00 Bi-Monthly

Family

Eligible Dependents: Spouse, Child, or Stepchild

Grandchild or Niece/Nephew or Incapacitated dependent over age 25

\$155.75

Bi-Monthly

Health Coverage Highlights

Ambulance

Covered at 80%, subject to the calendar year deductible

Emergency Room

Covered at 100% if services are provided within **72 hours** of accidental injury

Diagnostic X-Ray

Covered at 100%, subject to \$100 facility copay

Surgery

Covered at 100%, subject to \$100 facility copay

Physical Therapy

Covered at 80%, subject to the calendar year deductible, precertification required after the 15th visit

Inpatient Hospital Admission

\$200 admission deductible for day 1, \$50 facility copay days 2-5

Medical Emergency

\$200 facility copay

Lab Work

\$7.50 copay / test

Office Visit Copays

Nurse Practitioner, Physician's Assistant, Registered Dietician: \$20/visit

Physician and Doctor of Osteopathic: \$40/visit

Specialist: \$50/visit

Routine Care

Covered at 100%. No copay or deductible

Employee Clinic

Enjoy a \$15 copay at your Madison County Employee Health Clinic. Available to employees, retirees, & their dependents over age 12 on Madison County's health insurance plan.

(256) 265-0220

1963 Memorial Pkwy SW, Huntsville, AL 35801 Monday – Friday 7am – 4pm Calendar Year Deductible: \$200

Annual Out of Pocket Max:

\$9,100 individual / \$18,200 family

New Pharmacy Benefit, New Insurance Cards:

Be on the lookout for new Blue Cross Blue Shield Insurance cards to be mailed to you soon.

Prime Therapeutics pharmacy benefits will be accessible using your BCBS card!

To ensure your new cards get delivered, ensure your address in the **Employee Portal is up to date.**



Dental & Prescription Care

Included in the LGHIP Health Plan, the Blue Cross and Blue Shield of Alabama's Dental Network is a statewide dental network. This managed care program is designed to promote quality and cost effective dental care. Currently more than 2,532 dentists, approximately 92% of the dentists in Alabama, have joined this program.



In-Network Dental Coverage

Annual Deductible

\$25 per member; max of three deductibles per family

Basic & Major Services

Covered at 50%, subject to \$25 deductible

Orthodontic Services

Covered at 50%, only applies to dependent children under 19 years old

*Limited to \$1,000 lifetime max per person, unless deemed medically necessary

Diagnostic & Preventative Services

Covered at 100%, no deductible

Annual Benefit Max

Under age 19: No maximum Over age 19: \$1,500 per person



Prescription Coverage

Offered through Prime Therapeutics

Tier 1

Generics

Maximum \$15 copay per prescription, or the cost of the prescription, whichever is less

Tier 2/3

Preferred and nonpreferred brands

Member pays 100% of the cost of the drug at the point of sale and files for **80% reimbursement** after \$200 deductible has been met.

Tier 4

Certain high-cost specialty drugs and brand name diabetic drugs

Members are responsible tor 20% coinsurance at the point of sale. The plan covers medications at 80%.

Specialty medications

Filled through designated specialty pharmacies, specialty medications can be found in multiple tiers and follow the benefit structure of that tier.

Accredo Specialty Pharmacy

Your plan is committed to providing a specialty pharmacy that offers the medications and support needed to manage complex health issues. Members have access to: Simple communication, including refill reminders, through phone, email, text or web. A mobile app that allows you to track prescriptions, make payments and set reminders to take your medicines. 500 condition-specific pharmacists and 600+ nurses, all offering one-on-one counseling. Free standard delivery. 24/7 support.

What's Covered?

The current Prescription Drug Lis (Formulary) is available at www.lghip.org and madisoncountyhr.org.

The formulary includes the covered drugs available for the plan. Drugs not included in the formulary are not covered without prior authorization from Prime Therapeutics.



Vision Services Plan (VSP)

VSP offers comprehensive eye care plans. VSP partners with a large network of eye care professionals, giving members access to a variety of providers.

VSP focuses on promoting eye health, early detection of eye-related health issues, and making vision care more affordable and accessible.



Coverage Options

Single

Employee only- no dependents

\$2.88 Bi-Weekly

Who is covered?

No Card Required

Vision through age 26

Employee + One

Employee and one single dependent

\$6.06 Bi-Weekly

Family

Employee and eligible dependents

VSP Coverage Highlights

Well Vision Exam - \$20 co-pay / per calendar year

Focuses on your eyes and overall wellness

Lenses - \$20 co-pay / per calendar year

Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children

Frames - \$20 co-pay / per every other calendar year

\$220 featured frame brands allowance

\$200 frame allowance

20% savings on the amount over your allowance \$200 Walmart®/Sam's Club® frame allowance

\$110 Costco® frame allowance

Contacts (instead of glasses) - \$0 co-pay / as needed

\$120 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation)

Use in-network providers found at www.vsp.com



Pre-Tax Deductions

For employees enrolling in Local Gov Health Insurance or VSP Vision services, pre-taxing will allow the payroll deductions to be taken prior to taxes being withheld.



Lincoln Voluntary Life Insurance



Voluntary life insurance is an optional policy that individuals can choose to purchase, offering a death benefit of up to \$500,000 to their beneficiaries.

What Lincoln offers:

The Lincoln Term Life Insurance Plan provides a cash benefit to your loved ones in the event of your death or if you die in an accident. It also offers a cash benefit to you if you suffer a covered loss in an accident, such as losing a limb or your eyesight.

The plan features group rates for employees and includes LifeKeys® services, which provide access to counseling, financial, and legal support. Additionally, it offers TravelConnect® services, giving you and your family access to emergency medical assistance while traveling.

Employee Life Coverage:

- Coverage options available in increments of \$10,000.
- Maximum coverage is the lesser of 7 times annual earnings (rounded to the nearest \$10,000) or \$500,000.
- Minimum coverage: \$10,000.
- Guaranteed coverage: \$200,000.
- Coverage reduces by 35% at age 65, 25% at age 70, and 20% at age 75.

Spouse Life Coverage:

- Cannot exceed 100% of the employee benefit.
- Coverage options in increments of \$5,000.
- Maximum coverage is the lesser of 7 times annual earnings (rounded to the nearest \$5,000) or \$250,000.
- Minimum coverage: \$5,000.
- Guaranteed coverage: \$50,000.
- Coverage reduces by 35% at age 65, 25% at age 70, and 20% at age 75.

Dependent Child(ren) Life Coverage:

- Age 14 days to 6 months: \$250.
- Age 6 months to under 26 years: \$10,000.

Here's what you pay with group rates

Use the appropriate rate provided in the premium rate tables on this page to calculate your cost based on the amount of coverage you select. The following example calculates the monthly cost for a 36-year-old employee who would like to purchase \$100,000 in employee voluntary term life insurance coverage.

| Calculation | Calculation Example | | You |
|-------------|---|-----------|-----|
| Step 1 | Using the table above, enter the rate that corresponds with your age | \$0.100 | |
| Step 2 | Enter the desired coverage amount in dollars. | \$100,000 | |
| Step 3 | Enter the desired coverage amount in increments of \$1,000. To calculate, divide the coverage amount by \$1,000. | 100 | |
| Step 4 | Calculate the monthly/bi-weekly cost. Multiply Step 1 by Step 3. | \$10.00 | |

Employee / Spouse Group Life Rates:

| 0 - 29 \$0.060 30 - 34 \$0.080 35 - 39 \$0.100 40 - 44 \$0.120 |
|---|
| 35 - 39 \$0.100 40 - 44 \$0.120 |
| 40 - 44 \$0.120 |
| 75.11 |
| 45 40 |
| 45 - 49 \$0.180 |
| 50 - 54 \$0.290 |
| 55 - 59 \$0.520 |
| 60 - 64 \$0.730 |
| 65 - 69 \$1.290 |
| 70+ \$2.090 |

Child(ren) Life Premium Rate, per \$1,000

\$0.080

One monthly premium covers all of your eligible dependent children.



Lincoln Long-Term Disability & Sick Leave Bank



Madison County offers Long Term Disability from Lincoln Financial. As a full-time employee, you have the option to elect Long Term Disability coverage, and/or enroll in the Sick Leave Bank.

Lincoln Long-Term Disability Insurance

The Lincoln Long-Term Disability Insurance Plan offers a cash benefit for eligible employees who are unable to work for 90 days or more due to injury, illness, or surgery. This plan features group rates and includes EmployeeConnect Plus services, providing confidential access to counselors and personal, legal, and financial assistance for both employees and their families.

Monthly Benefit:

• 60% of your monthly salary, with a maximum of \$5,000 per month.

Elimination Period:

 90 days, which is the number of days you must be disabled before collecting disability benefits. This period can be satisfied by either total disability or partial disability.

Coverage Period for Your Occupation:

• 24 months, after which benefits may continue if your disability prevents you from any employment for which you are suited by training, education, or experience.

Maximum Coverage Period:

 Benefits can be collected until age 65 or your Social Security Normal Retirement Age (SSNRA), whichever is later. Benefits for mental illness and substance abuse are limited to 24 months. Please refer to the contract for details on other specified illnesses.

Sick Leave Bank

The Sick Leave Bank allows employees with a serious illness to request additional paid leave after using all personal accrued leave, pending approval by the Sick Leave Bank Committee. To join, employees must donate 8 hours of sick or annual leave within 30 days of completing their 6-month probation or during open enrollment. This donation is permanent, non-refundable, and cannot be reversed, even if participation is canceled.

Here's what you pay with group rates

This worksheet allows you to approximate your monthly contributions for voluntary long-term disability insurance coverage. Cost of insurance may change in the future due to age and/or coverage amount elected.

| Calculation Example | | | You |
|---------------------|--|---------|-----|
| Step 1 | Enter the monthly rate per \$100 of monthly covered payroll. | \$0.410 | |
| Step 2 | Enter your monthly earnings. Divide your annual earnings by 12. | \$2,950 | |
| Step 3 | If your monthly earnings are greater than the maximum monthly covered earnings of \$8,333, indicate \$8,333. Otherwise, indicate the amount from Step 2. | \$2,950 | |
| Step 4 | Calculate your monthly benefit. Multiply Step 3 by 0.50. | \$1,475 | |
| Step 5 | Enter your monthly earnings in increments of \$100 of monthly covered payroll. To calculate, divide the amount in Step 3 by \$100. | 29.5 | |
| Step 6 | Calculate your monthly cost. Multiply Step 1 by Step 5. | \$12.10 | |

Age-banded Rates

Use the table below to calculate how much you pay with group rates

| Age Range | Premium Rate |
|-----------|--------------|
| 0 - 29 | \$0.140 |
| 30 - 34 | \$0.240 |
| 35 – 39 | \$0.410 |
| 40 - 44 | \$0.620 |
| 45 - 49 | \$0.860 |
| 50 - 54 | \$1.120 |
| 55 - 59 | \$1.430 |
| 60 - 64 | \$1.190 |
| 65 - 69 | \$0.930 |
| 70+ | \$0.820 |

Lincoln **Short-Term Disability**



Comprehensive short-term disability coverage offering financial support for illness, injury, and recovery with flexible benefits

Lincoln Short-term Disability Insurance

The Lincoln Short-Term Disability (STD) Insurance Plan provides financial support for employees unable to work for up to 12 weeks due to injury, illness, surgery, or recovery from childbirth. The plan offers group rates and includes partial cash benefits if you're able to work part-time or perform only part of your job. Additionally, it features a straightforward, fast claims process to ensure timely assistance during your recovery.

Weekly Benefit:

• 60% of your weekly salary, up to a maximum of \$1,000 per week.

Sickness Elimination Period:

 You must be out of work for 7 days due to illness before collecting benefits, which begin on day 8.

Accident Elimination Period:

 You must be out of work for 7 days due to accidental injury, with benefits starting on day 8.

Maximum Coverage Period:

• Benefits can be collected for up to 12 weeks.

Recurrent Disability Benefits:

• If you become disabled for the same condition within 14 days, benefits continue under the same claim.

Evidence of Insurability:

 When first offered this coverage or during approved open enrollment periods, you may not need to provide proof of health.

Pre-existing Condition:

 If you have a condition that begins before coverage starts and receive treatment within 3 months prior, you may not be eligible until you have been covered by the plan for 12 months.

Short-term Disability Age-banded Rates:

| Age Range | Premium Rate |
|-----------|--------------|
| 0 - 24 | \$0.330 |
| 25-29 | \$0.330 |
| 30 - 34 | \$0.330 |
| 35 – 39 | \$0.330 |
| 40 - 44 | \$0.344 |
| 45 - 49 | \$0.353 |
| 50 - 54 | \$0.360 |
| 55 - 59 | \$0.368 |
| 60 - 64 | \$0.399 |
| 65 - 69 | \$0.414 |
| 70+ | \$0.430 |

Here's what you pay with group rates

Use the employee voluntary short-term disability premium rate table provided below to calculate your cost and benefit. The following example calculates the bi-weekly cost for a 36-year-old employee with annual earnings of \$35,400.

| Calculation | Calculation Example | | You |
|-------------|--|---------|-----|
| Step 1 | Enter the monthly rate per \$100 of monthly covered payroll. | \$0.410 | |
| Step 2 | Enter your monthly earnings. Divide your annual earnings by 12. | \$2,950 | |
| Step 3 | If your monthly earnings are greater than the maximum monthly covered earnings of \$8,333, indicate \$8,333. Otherwise, indicate the amount from Step 2. | \$2,950 | |
| Step 4 | Calculate your monthly benefit. Multiply Step 3 by 0.50. | \$1,475 | |
| Step 5 | Enter your monthly earnings in increments of \$100 of monthly covered payroll. To calculate, divide the amount in Step 3 by \$100. | 29.5 | |
| Step 6 | Calculate your monthly cost. Multiply Step 1 by Step 5. | \$12.10 | |

Voluntary Critical Illness Coverage



Lincoln Voluntary Critical Illness

The Voluntary Lincoln Critical Illness Insurance Plan is an optional policy that provides a lump-sum cash benefit if you or a covered family member is diagnosed with a covered critical illness, such as cancer or a heart attack. This extra financial support helps with medical expenses and other costs during a serious health crisis, supplementary your existing health coverage. The plan features group rates, no waiting periods, and access to a personal health advocate to assist with healthcare services for you and your family.

Critical Illness Insurance:

• Choose from guaranteed coverage amounts of \$10,000, \$15,000, or \$30,000.

Coverage for Your Spouse:

 You can secure Critical Illness Insurance for your spouse when you choose coverage for yourself.

Spouse Guaranteed Coverage Amounts:

• \$5,000, \$7,500, or \$15,000 (up to 50% of the employee coverage amount).

Coverage for Your Dependent Children:

 You can elect Critical Illness Insurance for your children when you choose coverage for yourself.

Children Guaranteed Coverage Amounts:

• \$5,000, \$7,500, or \$15,000 (up to 50% of the employee coverage amount).

Here's what you pay with group rates

Use the table below to calculate how much employees pay (bi-weekly) with group rates.

| Age Range | \$10,000 | \$15,000 | \$30,000 |
|-----------|----------|----------|----------|
| 0 - 24 | \$1.14 | \$1.71 | \$3.42 |
| 25-29 | \$1.57 | \$2.35 | \$4.71 |
| 30 - 34 | \$2.00 | \$3.00 | \$6.00 |
| 35 - 39 | \$2.55 | \$3.83 | \$7.66 |
| 40 - 44 | \$3.61 | \$5.41 | \$10.83 |
| 45 - 49 | \$4.79 | \$7.19 | \$14.37 |
| 50 - 54 | \$6.73 | \$10.09 | \$20.19 |
| 55 - 59 | \$9.20 | \$13.80 | \$27.60 |
| 60 - 64 | \$13.03 | \$19.55 | \$39.10 |
| 65 - 69 | \$17.97 | \$26.96 | \$53.92 |
| 70+ | \$33.99 | \$50.98 | \$101.96 |

The plan covers only conditions or losses that occur while the insurance is active. Benefits are not payable for conditions caused by suicide, self-inflicted injury, committing a felony, war, participation in riots or insurrections, or residing outside the U.S., its territories, Canada, or Mexico for over 12 months.

Additionally, no benefits are payable if the insured person is incarcerated, or if a heart attack or cardiac arrest occurs during a medical procedure. For a full list of exclusions, refer to the policy, as state variations may apply.

Covered Conditions:

100% coverage for heart attack, stroke, invasive cancer, end-stage

Supplemental Conditions:

100% coverage for advanced COPD, AIDS, ALS, Alzheimer's, Parkinson's, and 25%–50% for multiple sclerosis, benign brain tumors, and loss of sight, hearing, or speech.

Accidental Injuries:

100% coverage for severe burns,

Additional Childhood **Conditions:**

Spouse Age-banded Rates:

| Age Range | \$5,000 | \$7,500 | \$15,000 |
|--------------|---------|---------|----------|
| 0 - 24 | \$0.57 | \$0.86 | \$1.71 |
| 25-29 | \$0.78 | \$1.18 | \$2.35 |
| 30 - 34 | \$1.00 | \$1.50 | \$3.00 |
| 35 - 39 | \$1.28 | \$1.91 | \$3.83 |
| 40 - 44 | \$1.80 | \$2.71 | \$5.41 |
| 45 - 49 | \$2.40 | \$3.59 | \$7.19 |
| 50 - 54 | \$3.36 | \$5.05 | \$10.09 |
| 55 - 59 | \$4.60 | \$6.90 | \$13.80 |
| 60 - 64 | \$6.52 | \$9.78 | \$19.55 |
| 65 - 69 | \$8.99 | \$13.48 | \$26.96 |
| 70+ | \$16.99 | \$25.49 | \$50.98 |

Child Rates:

| Age Range | \$5,000 | \$7,500 | \$15,000 |
|--------------|---------|---------|----------|
| 0 - 26 | \$1.02 | \$1.53 | \$3.07 |

Voluntary Accident Coverage



Lincoln Voluntary Accident

The Lincoln Accident Insurance Plan provides cash benefits for off-the-job accidental injuries to employees or their covered family members. It features group rates and emphasizes family, safety, and accident prevention.

Emergency Treatments

 Provides cash benefits for treatments including \$225 for ambulance services, \$1,125 for air ambulance, \$150 for emergency care, \$75 for initial care visits, \$150 for major diagnostic exams, and \$30 for X-rays.

Fractures

 Amounts depend on the location and severity. Benefits range from \$100 for fractured fingers or toes to \$3,500 for a depressed skull fracture. Other examples include \$450 for an ankle or elbow fracture, \$1,025 for a foot or hand, and up to \$2,625 for a hip fracture. Surgical treatment is compensated at twice the nonsurgical benefit, and chip fractures receive 25% of the fracture benefit. The combined maximum for all fractures is two times the highest fracture payable.

Dislocations

Ranging from \$100 for fingers or toes to \$2,625 for a hip dislocation. Other examples include \$875 for an ankle or sternoclavicular collarbone dislocation, \$950 for a foot, and \$1,750 for a knee dislocation. Surgical treatment is compensated at twice the nonsurgical benefit, and partial dislocations receive 25% of the full benefit. The combined maximum for all dislocations is two times the highest dislocation payable.

Specific Injuries & Treatments

Examples include \$375 for blood or plasma transfusions, up to \$10,000 for 3rd-degree burns, \$150 for concussions, \$150 for dental crowns, and \$300 for eye surgical repairs. Laceration benefits range from \$450 to \$1,500 depending on severity, and severe traumatic brain injury is covered with \$5,000. Surgical benefits range from \$150 for arthroscopic procedures to \$1,875 for open abdominal or thoracic surgery, with surgical treatments paid at up to two times the highest benefit amount.

Hospitalization & Ongoing Care

The accident insurance plan provides cash benefits for hospitalization and ongoing care. These include \$1,000 for accident hospital admission, \$200 per day for hospital confinement, \$2,000 for intensive care admission, and \$400 per day for intensive care confinement. Additional benefits include \$65 for therapy sessions, \$140 for follow-up visits, \$85 for pain management injections, and up to \$600 for wheelchairs. Prosthetics are covered at \$750 per limb. Recovery assistance benefits include \$250 for family care, \$200 per day for companion lodging, and \$400 per trip for transportation over 100 miles.

Here's what you pay with group rates

As an employee, you can take advantage of this accident insurance plan. Plus, you can add loved ones to the plan for just a little more.

| Coverage | Bi-Weekly Premium |
|---|-------------------|
| Employee Only | \$3.61 |
| Employee + Spouse | \$5.92 |
| Employee + Child(ren) | \$6.33 |
| Employee + Family (Spouse & Child(ren)) | \$8.61 |

Accident insurance excludes coverage for injuries resulting from certain situations, including disease or medical treatment, suicide or self-inflicted injury, drug use unless prescribed, committing a felony, acts of war, participation in riots, military duty, non-commercial aircraft travel, intoxicated driving, cosmetic surgery, and injuries while incarcerated. Other exclusions include injuries from professional sports, racing, residing outside the U.S. for over 12 months, high-risk activities like bungee jumping and skydiving, and injuries sustained during employment for wage or profit. This is a partial list, with full details in the policy. State variations may apply.

Accidental Death & Dismemberment:

Included in the Accident Coverage, this provides financial protection for various accidental outcomes.

Accidental death pays \$25,000 for the employee, \$10,000 for a spouse, and \$5,000 for a child, with increased amounts for common carrier deaths (\$50,000 for the

benefits for dismemberment or loss of major functions, such as limbs, sight, or hearing, range up to \$20,000. Additional benefits include transportation of remains (\$10,000), safe driver bonuses for seatbelt, airbag, or helmet use (10% of the AD&D benefit), and

Cash Benefit:

of screenings and exams are

- receiving a completed claim form.
 \$50 Critical Illness Coverage
- \$75 Accident Coverage

Flexible Spending Accounts

A Benefit Strategies Flexible Spending Account (FSA) allow employees to set aside pre-tax dollars to be used for designated eligible expenses and is explained below.



Health Care Reimbursement Account (Health FSA)

The Health FSA is for out-of-pocket medical, dental, vision and hearing expenses incurred by the employee and the employee's qualifying eligible dependents. A qualifying eligible dependent is generally:

- A spouse
- A dependent that is claimed on the employee's taxes
- Adult child(ren) under the age of 26

Dependent Care Assistance Account (Dependent Care FSA)

The Dependent Care FSA is for employee expenses related to the cost of dependent care while the employee is at work (if married, the spouse must be employed or attending school full-time). Eligible dependents must be under the age of 13. Tax dependents age 13 and older are eligible if they are physically or mentally incapable of self-care and reside in the employee's home at least half the year.



On December 31, up to \$660 of the Health FSA rolls into the next year - any additional amount will be forfeited if it remains unused.



Dependent Care FSA funds can be used through March 15th and all claims must be submitted by March 31st. No excess funds roll over.

Minimum contribution to FSA is \$184

FSA Options & Eligible Expenses

| Health FSA | |
|------------------------------|-------------------------|
| Calendar Year Deductible | Medical Co-Pays |
| Generic Rx Co-Pays | Lab & Testing Fees |
| Dental Out of Pocket | Vision Out of Pocket |
| Orthodontics | Certain OTC Medicine |
| Feminine Hygiene Products | Testing Supplies |
| Annual Allowance: \$3.300 | |

| Dependent Care FSA | |
|---|--|
| Daycare for dependents up to age 13 | Elder care for seniors who reside with you 6 months a year |
| Before school or after school care | Day camp |
| Annual Allowance: \$5,000 | |

Need a new card? Contact Voya at (888) 401-3539 Learn More Scan the QR code below to visit our website and learn more:



Health and Wellness Programs

Employees enrolled in Local Gov Health/Dental Insurance can enjoy these wealth of healthy options provided **at no cost**!





Virta Health takes a personalized approach to managing type 2 diabetes, starting with tailored nutrition plans focusing on low-carbohydrate intake. Patients receive continuous remote monitoring via connected devices for tracking health metrics like blood glucose, weight, and ketone levels. Healthcare professionals, including physicians and coaches, offer ongoing support and adjustments to treatment plans, aiming to empower patients to improve metabolic health and potentially reverse type 2 diabetes progression.

wondr

Wondr is a personalized weight loss program that offers customized meal plans, exercise routines, coaching support, and behavioral modification techniques. It starts with an assessment to tailor the plan to your needs and goals, providing guidance, accountability, and tracking tools throughout your journey. The program aims to promote sustainable weight loss by addressing both physical and behavioral factors.

Hinge Health™

With Hinge Health, you'll have access to a comprehensive clinical care team equipped with advanced technology to effectively manage pain and break down barriers to recovery. Whether you're dealing with minor sprains or chronic pain, their team of doctors will provide personalized care tailored to your needs. From virtual and in-home assessments to cognitive behavioral therapy and surgery decision support, Hinge can support you every step of the way.

dr. on demand

Doctor on Demand provides convenient, confidential, and highly-rated healthcare services for employees. With a 4.9/5 patient satisfaction rating, users have praised the care they received. The platform offers 24/7 access to urgent care for conditions like colds, flu, and UTIs, and you can book appointments with therapists or psychiatrists anytime, even on weekends. Doctor on Demand also ensures 100% confidentiality in a HIPAA-compliant online environment, giving employees and their families peace of mind when receiving care.

Blue 365

Blue 365 is a health and wellness program available to Blue Cross Blue Shield members. It offers exclusive discounts and deals on various health-related products and services, including gym memberships, fitness classes, wearable fitness trackers, healthy eating programs, and other wellness products. Members can access these discounts through the Blue 365 website or mobile app, helping them save money while pursuing healthier lifestyles.

Learn More:

Scan the QR code below to visit our website and learn more about <u>all</u> of these FREE benefits.





Other Resources

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Athens State University

Madison County has partnered with Athens State University to enhance our employees' and their families' lives with education. Employees, along with their spouses and children, are eligible for special benefits such as:

10% TUITION DISCOUNT

On all classes, including certificates, adult degree completion, and graduate degrees, for all employees of Madison County, Alabama and their immediate families. Additionally, employees receive the following benefits:

- Waived application fee
- A complimentary evaluation of previously earned educational credits and training/professional certifications for consideration of transfer
- Complimentary access to lab tutors/specialists in our statistics, math, and writing labs.



Expectant Mother & Child Care

Baby YourselfBCBS's free maternity management program provides education, support services, and nurse consultations. Provider copays and hospital deductibles are waived for participants

Enrollment must be before the third trimester

Immunizations and Routine Well Child Visits

Covered at 100%, no deductible or copay

Allergy Testing and Treatment

Covered at 80%, subject to the calendar year deductible

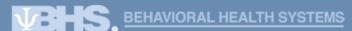
ABA Therapy

\$14 copay/visit for children on the Autism Spectrum, precertification is required

Employee EAP

Provided through Behavioral Health Systems, this EAP offers confidential counseling and referral services to <u>full-time employees</u> and their <u>dependents</u> (spouses/children).

It is a starting place for addressing personal and work-related issues. For employees, it is a resource to address work/life issues, promote a healthy lifestyle, and identify and resolve workplace challenges before they result in high medical/disability costs.





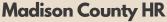
Learn More

Scan the QR code below to visit our website and learn more:



Contact information

Below, you will find information for our benefits providers as well as specific benefits available to Madison County Employees.



(256) 532-3614

www.madisoncountyhr.org

Local Gov (Local Government Health Insurance Plan)

(866) 836-9137

www.lghip.org

Blue Cross Blue Shield

(800) 321-4391

www.bcbsal.org

Behavioral Health Systems (EAP)

(800) 245-1150

www.behavioralhealthsystems.com

Employee Clinic

(256) 265-0220

1963 Memorial Pkwy SW, Huntsville, AL 35801

Monday - Friday 7am - 4pm

Employees' Retirement System / RSA-1

(877) 517-0020

www.rsa-al.gov

Hinge Health

(855) 902-2777

hinge.health/lghip-oe

Lincoln Financial Group (Life / LTD)

(877) 275-5462

www.lfg.com

Nationwide

(877) 677-3678

www.nrsforu.com

Prime Therapeutics

(855) 457-0007

www.myprime.com

Doctor On Demand

(800) 997-6196

doctorondemand.com

Vision Service Plan (VSP)

(800) 877-7195

www.vsp.com

Voya (FLEX / FSA)

(833) 232-4673

www.voya.com

