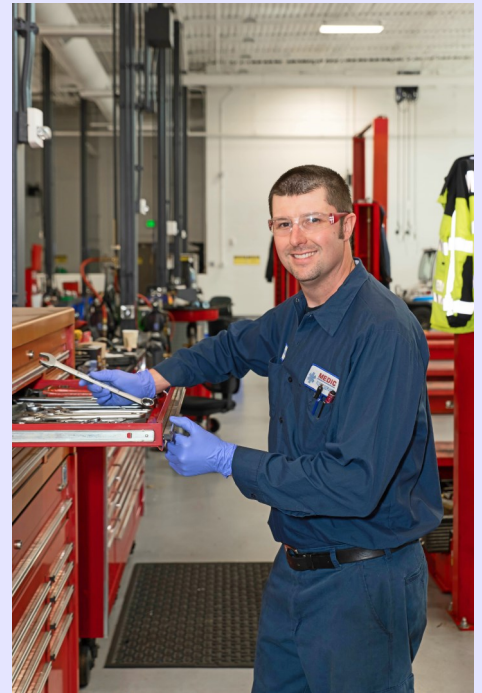
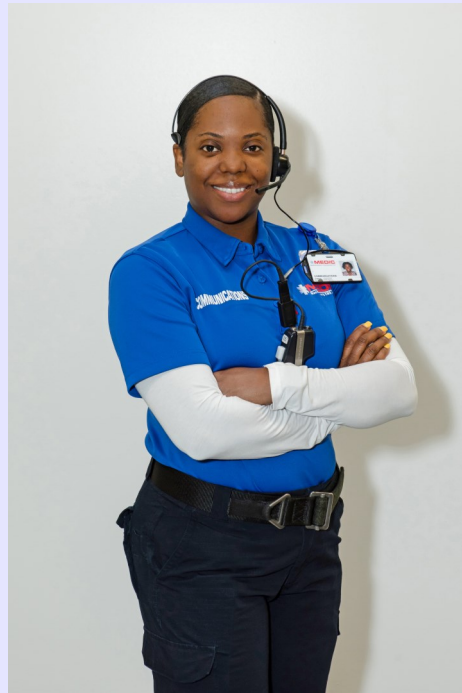


Benefits Brochure

2023

Mecklenburg EMS Agency Open Enrollment



Action Items for Employees

- **Open Enrollment (OE) Information & Requirements**

- **October 3, 2022** through **October 28, 2022**
- Enrollment this year is passive—you **do not** need to complete open enrollment unless you are making changes, adding/removing dependents or wish to change your FSA, LPFSA or HSA deductions
- Complete through **on-line payroll portal (UKG)**
- Contact HR at HumanResources@medic911.com if unable to log into payroll portal

- **Wellness Initiatives for Discounted Premiums**

- For **discounted wellness rates**, you must complete:
 - **Flu vaccination or declination**
 - **Biometrics** (conveniently held on-site **October 10—October 13**)
 - **October 10 & October 12 from 2PM—7PM**
 - **October 11 & October 13 from 9AM—2PM**
 - **Online HRA questionnaire** through www.blueconnectnc.com
 - **Open Enrollment** through the on-line payroll portal (UKG)
- HR will be on-site the week of October 10th to answer benefit questions

- **Flu Shots—REQUIRED**

- Flu Shot Clinic on-site **October 10—October 13** in **Outdoor Sound Stage**
 - **October 10 & October 12 from 2PM—7PM**
 - **October 11 & October 13 from 9AM—2PM**
- **Must make an appointment and wear proper PPE**
- **Appointment links** can be found on the extranet **“Health Fair & Benefit Info”**
- Bring your **Medical Insurance card** to receive vaccine at Post 100
- Obtain vaccine at local pharmacy or primary physician, and submit verification to R&S via email (HumanResources@medic911.com) or HR lockbox by **October 28, 2022**.

Common Benefit Vendor Contact Information

⇒ **Blue Cross/Blue Shield of North Carolina** for health insurance

- 877-224-3305 or www.bluecrossnc.com

⇒ **CIGNA Dental** for dental coverage

- 800-244-6224 or www.mycigna.com

⇒ **CVS Health** for prescription drug coverage

- 855-298-2457 or www.caremark.com

⇒ **EyeMed with 360** for vision coverage

- 866-804-0982 or www.eyemed.com

⇒ **Health Equity HSA** for health savings accounts

- 866-346-5800 or www.healthequity.com



Be Healthy-Live Well-Retire Strong

Save **\$1000 annually** on medical premiums by completing these wellness activities:

1. Open Enrollment through payroll portal
2. Complete Biometrics
3. Online Health Risk Assessment (HRA) at www.blueconnectnc.com
4. Submit flu shot vaccine confirmation or declination

* **Bring your Medical Insurance card to Post 100!**

All of the above items must be completed with proper documentation by **October 28, 2022** to receive the discounted rates! Documentation can be submitted via email or the HR lockbox.



HR COVID Policies



HR COVID policies are available on the extranet. These give guidance on exposure and contraction, benefit leave as it pertains to quarantine and isolation, travel and face covering use.

Be sure to review, checking for updates as we continue to adapt to evolving information that is applicable to our processes: <https://www.medic911.com/covid19/>



What's Not Changing?

- **INSURANCE PREMIUMS!** No increase in medical, dental or vision premiums.
- Medical options and rates remain the same —PPO and Q-HDHP plans
 - As a reminder, you are only eligible for the PPO plan if you were hired prior to 01/01/2017 and have remained in a full time status
- 100% preventative care coverage, no medical lifetime max and no pre-existing condition limits
- Medic will provide discounted wellness rates when employees complete required items (pg. 2)
- Coverage for adult children up to the age of 26 for medical, dental, vision and life. Be prepared to verify dependent when requested.
- PPO plan—deductibles and co-pays continue to count towards the out-of-pocket maximum
- Married couples, regardless of gender, are eligible for benefits with proper documentation
- Both plans are affiliated with Novant and Atrium, offering network benefits to include physician services, emergency care, inpatient and outpatient hospitalization and prescription coverage
- If you have other medical coverage, you may choose to opt out/waive coverage and Medic will contribute \$400 to a medical flexible spending account. Employees hired during the year receive a prorated FSA contribution for opting out. We reserve the right to request proof of coverage of other medical coverage at any time.
- New hires will receive a pro-rated seed amount into their Health Savings Account.
- Dental plan remains with CIGNA—no plan changes
- Vision plan remains with EyeMed—no plan changes
- Prescription plan remains with Caremark
- Health Savings seed money for employees enrolling in a QHDHP plan





You need to Know

Key Things

Coverage for Eligible Family Members

Medic employees may cover eligible family members by electing appropriate plans with semi-monthly payroll deductions. Eligible family members include:

- Your legally married spouse
- Your biological, foster, adopted or step-child/ren up to age 26, or a disabled dependent child over age 26.

To comply with the Affordable Care Act reporting, we require dependent social security numbers be provided for dependents covered by our insurance plans.

Mecklenburg EMS Agency participates in an ongoing dependent verification process. Employees covering dependents may be asked to provide verification documentation.

Do you have a [change in Family Status](#) and/or [Financial Situation](#)?

It is the employee's responsibility to advise the Human Resources Department **within 31 days** of a qualifying family status change (birth/adoption, marriage/divorce, death, etc.) if a dependent needs to be added or removed.

After the 31 day period, dependents cannot be added or removed from plans until there is another qualifying event or open enrollment. Premium refunds will not be made and coverage will end as soon as the dependent becomes ineligible for coverage.

What types of changes can I make throughout the year?

- ◆ Add or remove dependent coverage, if a qualifying event occurs (such as marriage, birth of a child or dependent has reached maximum age, etc.)
- ◆ Change or update your life insurance beneficiary information
- ◆ Enroll or change participation level in the 401K or 457 defined contribution plan
- ◆ Start, stop or change Health Savings Account contributions

IF THIS HAPPENS



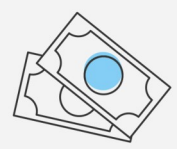
Loss of health coverage



Changes in household



Changes in residence

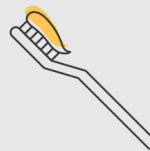


Other circumstances

YOU CAN CHANGE THIS



Health insurance



Dental insurance



Vision insurance



Life insurance



Bi-Weekly Rates 24 Pay Periods	Employee	Employee + Child(ren)	Employee + Spouse	Family
Discounted Wellness Rates				
PPO	\$51.81	\$136.62	\$181.26	\$297.32
High Deductible (HSA)	\$26.92	\$93.15	\$125.21	\$208.54
Non Discounted Rates				
PPO	\$93.48	\$178.28	\$222.92	\$338.99
High Deductible (HSA)	\$68.58	\$134.82	\$166.87	\$250.20

Medical Plan Choices for 2023		
	PPO Plan	High Deductible Plan
Deductible (Single/Family)		
<i>In-Network</i> Deductible (Single/Family)	\$600/\$1,200	\$1,600/\$3,200
<i>Out-of-Network</i> Deductible (Single/Family)	\$1,500/3,000	\$3,200/\$6,400
HSA Seed (Single/Family)	N/A	\$500/\$1,000
Coinsurance		
<i>In-Network</i>	30%	30%
<i>Out-of-Network</i>	40%	40%
<i>In-Network</i> OOP Max (includes deductible)	\$5,000/\$10,000	\$5,000/\$10,000
<i>Out-of-Network</i>	\$10,800/\$21,600	\$7,100/\$14,200
Lifetime Maximum Benefit	Unlimited	Unlimited
Physician Services		
Office Visits (PCP/Specialist)	\$25/\$40	30% after deductible
Preventative Care	Covered at 100%	Covered at 100%
Allergy Injection (by non-physician)	Covered at 100%	30% after deductible
Surgery	30% after deductible	30% after deductible
Hospital/Facility		
Inpatient/Outpatient Hospital	30% after deductible	30% after deductible
Emergency Room	\$225 copay then 30% after deduct	30% after deductible
Urgent Care	\$60	30% after deductible
CVS Prescription Drug Plan		
Retail Prescription Drugs		
Generic Preventive	100%	100%
Retail Generic	\$15	30% after deductible
Retail Preferred Brand	30% \$30 min, \$90 max	30% after deductible
Retail Non-Preferred Brand	40% \$60 min, \$120 max	30% after deductible

Medical Plan Opt Out/Waive

If you waive the medical plan options for 2023, you will receive a \$400 FSA or Limited Purpose FSA (depending upon current healthcare plan). The opt out/waive status will remain in effect the entire year unless you have a qualifying family status change. Employees hired during the year that opt/waive receive a prorated FSA amount. **Mecklenburg EMS Agency reserves the right to request proof of coverage of other medical coverage at any time.**



BCBS offers several health and wellness programs that are free to employees who are enrolled in the medical insurance plan through Medic.

My Pregnancy Program

My Pregnancy offers tools, resources and support such as Nurse assistance 24/7, Baby Boost relaxation tool, Kick counter, risk surveys, symptom searches, etc. Download the app titled "My Pregnancy Blue Cross NC" or contact BCBS at 877-275-9787.

Healthy Outcome Condition Care

This suite of health management programs focuses on meeting specific health care needs such as Case Management (high risk members), Condition Care (disease management), Maternity and overall Wellness. For more information, call 877-275-9787 or visit BlueCrossNC.com



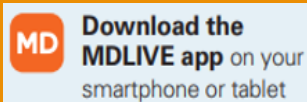
Healthline Blue

Specially trained nurses are available 24/7 to answer any questions you may have about health symptoms and refer you to appropriate care. Call 877-477-2424.

Telehealth

Now you can connect with a doctor via secure video chat or phone, without leaving your home or office.

MDLIVE 888-726-3171



Mental Health Substance Abuse

BCBS has integrated mental health into primary care to support collaborative teams at the local level. This integrated model will improve access to mental health care and substance abuse programs, with the intent to improve patient health outcomes. For more information, please visit BlueCrossNC.com or call 877-275-9787.

Why is BCBS calling me? Medic offers BCBS programs to help you get healthy and live well. BCBS is excited to get to know you, so they call you at home to talk about ways to work together to help you manage your health.



CVS Health—Prescription Drugs

- CVS is the preferred pharmacy vendor but you may go to any retail pharmacy vendor that accepts CVS Health.
- The plan continues to provide a 4-tier structure outlined as follows:
 - Tier 1 = Preventative Generics
 - Tier 2 = Other Typical Generics
 - Tier 3 = Retail Preferred Brand
 - Tier 4 = Retail Non-preferred Brand
- Tier 1 drugs for **Preventative Generics** are covered at 100% of the cost when prescribed for conditions that require on-going, preventative treatment.
- Mail-order pharmacy continue to be available with the plan.
- The plan has a “Dispense As Written” (DAW) mandate which requires you to fill your prescription as written by the provider, or you will incur additional cost.
- Questions about formulary, drug costs, pharmacy locations and any other questions you may have can be answered by calling CVS Health at **855-298-4257** or visiting **www.caremark.com**.



Flu Shot Reminder!

Must bring: Medical Insurance Card!

Flu shots will be administered in the Outdoor Sound Stage **October 10—October 13**. If unable to attend, you may obtain the flu shot through your physician or any retail pharmacy at no or low cost by filing a claim with your insurance provider.

Clinic dates/times are October 10 and October 12, 1400-1900; October 11 and October 13, 0900-1400.

Per 2.15 Infectious Disease Policy, all Medic employees are required to comply.

Submit vaccination or declination documents into **Risk & Safety** by **October 28, 2022** via email **HumanResources@medic911.com** or dropping in HR lockbox.

Telehealth



Download the MDLIVE app on your smartphone or tablet



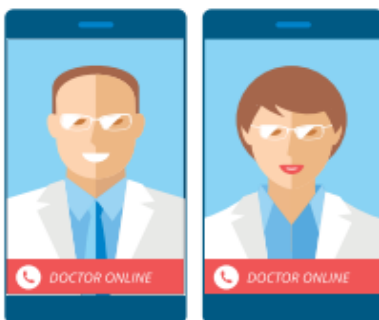
Go to
mdlive.bcbsnc.com
and click **"Activate Now"**
(and watch a video on how it works)



Call 1-888-910-9722



Text "bcbsnc" to MDLIVE (635483)
to connect with Sophie,
MDLIVE's personal
health assistant



Skip the waiting room

- + Video consults available 24 hours a day, seven days a week (even holidays)
- + Low wait times let you see a doctor within minutes¹
- + No appointment required
- + Pediatricians available
- + Prescriptions sent electronically to your local pharmacy if needed²
- + From the couch to the beach — use it anywhere in the U.S.

Consults cost only \$45 (or less)

- + Paid like a doctor's office visit
- + Most major credit and debit cards accepted — and it's a qualified expense for HSAs, HRAs and FSAs



Bi-Weekly Rates	Employee	Employee + Child(ren)	Employee + Spouse	Employee + Family
Standard	\$3.36	\$17.47	\$14.35	\$27.47
Enhanced	\$5.52	\$28.71	\$23.58	\$45.14

Note: Dental cards will NOT be issued to employees as part of this plan.

Dental Plan Choices for 2023		
	Standard Plan	Enhanced Plan
Calendar Year Maximum (Class I, II, and III Expenses) (per individual)		
In-Network	\$1,000	\$1,500
Out-of-Network	\$1,000	\$1,500
Calendar Year Deductibles (Individual/Family)		
In-Network	\$75/\$225	\$50/\$150
Class I Expenses - Preventive & Diagnostic Care (In-Network/Out-of-Network)	100% /80% No Deductibles	100% /100% No Deductibles
Oral Exams		
Cleanings		
Routine X-Rays		
Fluoride Application		
Sealants		
Space Maintainers (limited to non-orthodontic treatment)		
Non-Routine X-Rays		
Emergency Care to Relieve Pain		
Histopathologic Exams		
Class II Expenses - Basic Restorative Care (In-Network/Out-of-Network)	70% /50% After Deductible	80% /80% After Deductible
Fillings		
Oral Surgery - Simple Extractions		
Oral Surgery - All Except Simple Extractions		
Surgical Extraction of Impacted Teeth		
Anesthetics		
Major Periodontics		
Minor Periodontics		
Root Canal Therapy/Endodontics		
Relines, Rebases, and Adjustments		
Repairs - Bridges, Crowns, and Inlays		
Repairs - Dentures		
Class III Expenses - Major Restorative Care (In-Network/Out-of-Network)	40% / Not Covered After Deductible	50% / 50% After Deductible
Crowns/Inlays/Onlays		
Dentures		
Bridges		
Class IV Expenses - Orthodontia (In-Network/Out-of-Network)		
Coverage for Eligible Children Only (up to age 19)	Not Covered	50% / 50% No Separate Deductible
Lifetime Maximum	Not Covered	\$1,500
Missing Tooth Provision	Teeth missing prior to coverage under the CIGNA Dental plan are not covered	
Treatment Review	Available on a voluntary basis when extensive work in excess of \$200 is proposed	
Student Age	26	



Employees have two options in selecting a dental plan: Standard or Enhanced plan. Below are just a few of the differences between the two plans:

Standard

- Must go to a Network dentist
- Calendar year maximum of \$1,000 per individual
- No Orthodontic coverage

Enhanced

- May go to any dentist
- Calendar year maximum of \$1,500 per individual
- Orthodontic Coverage (life time max \$1,500 per individual)

NOTE: Dental cards will NOT be issued to employees. To print a dental card or to locate a provider, please go to www.cigna.com.





Bi-Weekly Rates	Employee	Employee + Child(ren)	Employee + Spouse	Employee + Family
Standard	\$2.43	\$5.29	\$5.03	\$8.30
Enhanced	\$5.75	\$11.06	\$10.78	\$16.81

Medic offers regular full-time employees a choice of two voluntary vision plans for a minimal premium which provides coverage for exams, lenses, frames, contacts, etc. at reduced costs.



Note: Vision cards will be issued to employees to the address HR has on file.

Vision Plan Choices for 2023

	In-Network PLUS	Standard Plan	Enhanced Plan
Services	Providers	eye exam every 12 months	
Comprehensive Ex- am	\$0 copay	\$10 copay	\$0 copay
Contact Lens Fit/ Follow-up	\$20 copay	Lenses every 12 months \$20 copay, lens fit and two follow-up visits	
Conventional Contact Lenses	\$0 copay; 15% off balance over \$150 allowance		
Disposable Contact Lenses	\$0 copay; 100% off balance over \$150 allowance		
Medically Necessary Contact Lenses	\$0 copay; paid in full		
Frames		Frames every 24 months	
	\$0 copay, 20% off balance over \$180 allowance	\$0 copay; 20% off balance over \$130 allowance	
Lenses and Lens Options	PLUS Providers Standard/Enhanced	Standard	Enhanced
Single Vision	\$20 copay/\$0 copay	\$20 copay	\$0 copay
Bifocal	\$20 copay/\$0 copay	\$20 copay	\$0 copay
Trifocal	\$20 copay/\$0 copay	\$20 copay	\$0 copay
Lenticular	\$20 copay/\$0 copay	\$20 copay	\$0 copay
Progressive, Standard	\$75 copay/\$0 copay	\$75 copay	\$0 copay
Progressive, Tiers 1-3	\$105-195 copay/\$0- 0 copay	\$105-195 copay	\$0-0 copay
Anti-Reflective,	\$45 copay/\$0 copay	\$45 copay	\$0 copay
Anti-Reflective, Tiers	\$57-85 copay/\$12- 85 copay	\$57-85 copay	\$12-85 copay
Photochromic	\$75 copay/\$0 copay	\$75 copay	\$0 copay
Polycarbonate, Stand- ard	\$40 copay/\$0 copay	\$40 copay	\$0 copay
Polycarbonate, Stand- ard <19 years	\$0 copay/\$0 copay	\$0 copay	\$0 copay
Scratch Coating	\$0 copay/\$0 copay	\$0 copay	\$0 copay
Tint	\$15 copay/\$0 copay	\$15 copay	\$0 copay
UV Treatment	\$15 copay/\$0 copay	\$15 copay	\$0 copay
All Other Options	20% off retail	20% off retail	20% off retail

LASIK/PRK and Hearing Care

EyeMed has partnership with U.S. Laser Network to provide our members with access to discounted laser vision correction providers. 1-800-988-4221. Discounts are offered for hearing exams and aids through Amplifon Network. 1-877-203-0675.

Out of Network Reimbursement

Standard and Enhanced Plan benefits are the same for out of network reimbursement.

Up to
Comprehensive Exam \$40

Lenses

Single Vision	\$30
Bifocal	\$50
Trifocal	\$70
Lenticular	\$70
Progressive	\$50

Frames \$91

Contact Lenses (in lieu of eyeglasses)

Elective	\$105
Necessary	\$210

Please review the out-of-network coverages on the EyeMed hand-outs provided as supplement to this benefit brochure.



Health Savings Account paired with QHDHP

What is a Health Savings Account (HSA)?

A Health Savings Account (HSA) is an account that you can place either pre-tax (via payroll deduction) or post-tax money into to save for future eligible expenses. You may use it to pay for eligible expenses for you or your qualified dependents. Money you do not spend carries forward to future years. You can even use the money penalty-free after age 65 for any purpose you want.

HSAs are offered in conjunction with a high deductible health plan. The money in your HSA belongs to you. You decide how you want to pay for your health care expenses.

Health Equity is our BCBS Health Savings Account Administrator and Medic will contribute seed money into eligible HSAs as of 01/01/2023.



Eligibility

- Must be enrolled into Qualified High Deductible Plan
- Not covered by any other health plan including Medicare, TRICARE, or TRICARE for Life
- Not in receipt of VA benefits within the past 3 months
- Not claimed as a dependent on someone else's tax return
- Not covered by a **Flexible Spending Account (FSA)**

How do I use my HSA?

Use your debit card, checkbook, auto pay, or online bill pay for any out of pocket health care expenses.

2023 Medic Seed Contributions

- Employee Only = **\$500**
- Employee + Family = **\$1,000**

2023 Contribution Limits

- Individual - \$3,850
- Family - \$7,750
- Catch-up—additional \$1,000*

*Only for age 55 and up

What are the benefits of an HSA?

- Account ownership—You own your account. You can use it, invest it, save it and move it as you see fit.
- Portability—Accounts are completely portable, meaning you can keep your HSA even if you:
 - * Change jobs or retire
 - * Change medical coverage
 - * Become unemployed
 - * Move to another state
 - * Change your marital status
- Money can be used to pay for out of pocket IRS-qualified expenses. For a list of qualified expenses, please refer to Section 213(d) of the **Internal Revenue code** or visit **www.healthequity.com**.
- There are no “use it or lose it” rules for HSAs.

When you have questions, we've got answers!

Health Equity offers you live customer service 24 hours a day, seven days a week, 365 days a year—that includes weekends and holidays. Call 1-866-346-5800.



Flexible Spending & Dependent Care Accounts

For 2023, two FSA plans are being offered:

A **traditional Flexible Spending Account** can only be elected if you have PPO coverage. These pre-tax dollars can be used for eligible medical, dental and vision expenses. For this plan, your funds may only be used for expenses that occur or have a date of service within the current plan year. There is an extension on the plan that allows any remaining funds to be used for claims incurred through March 31, 2024.

A **Limited Purpose Flexible Spending Account** has available for those enrolling in the Q-HDHP. This can be used for eligible dental and vision expenses only. These contributions are pre-tax and with the extension the plan that allows any remaining funds to be used for claims incurred through March 31, 2024.

Important Note: If you currently have a traditional FSA and enroll into the Q-HDHP for 2023, you **MUST** use all funds by December 31, 2022.

- You may also use your FSA funds at www.fsastore



What is a Dependent Care Account (DCA)?

You can place pre-tax payroll deductions into this account to pay for eligible day care expenses. Your dependent child(ren) must be under the age of 13.

Creating Your Login for the FSA System:

Go to <https://letscatapult.org/services/benefit-solutions/benefit-administration/>

Click on "Participants Login"

Register for your account.

Registration ID is your FSA debit card number. Employee ID is your SSN.

Create a username and password, along with the security questions requested.

Make sure you write this information down for future use.

Annual Maximum Contributions to each plan are:

Medical: \$2,850*

Dependent Day Care: \$5,000*

To participate in one or both accounts, you must make your selection during **open enrollment**. Debit cards are only issued to NEW participants and their dependents. Please keep your debit card from the prior year as it will be loaded for the 2023 calendar year.

*IRS will release 2023 annual maximums mid-November.

How do I contact Catapult (formerly TEA)?

Online access to your account information is available 24 hours a day, 7 days a week at <https://letscatapult.org/services/benefit-solutions/benefit-administration/>

You can also call Catapult to request information about your account Monday through Friday, 8:00 a.m. to 5:30 p.m. at **704.522.8011 or 866.440.0302**. Forms and other FSA information can be accessed on letscatapult.org.



Aflac Insurance



Employees can purchase Hospital, Cancer and/or Accident Insurance Policies through Aflac Insurance. These policies deliver cash benefits directly to the employee, regardless if there is other insurance. These policies are designed to assist employees with out-of-pocket expenses due to an accident or cancer. If enrolled during open enrollment your deductions are deducted on a pre-tax basis. Contact our Aflac agent **Tina Blue** at **704-467-5257** or tina_blue@us.aflac.com.



Savings and Retirement

NC Retirement System

Mecklenburg EMS Agency regular full-time employees are automatically enrolled into the North Carolina Local Government Retirement System upon employment. Employees contribute 6% of gross wages and are vested after 5 years of service.



NC Local Governmental Employees Retirement System (LGERS)

Contact www.myncretirement.com 1-877-627-3287

All full-time Agency employees are automatically contributing members of the North Carolina Local Government Employees' Retirement System (LGERS) and begin to earn service credit the first day of employment.

Employee contributes **6%** of gross wages deducted from paychecks. Agency contributions of **12.12%** are also deposited on behalf of the employee each month into their retirement account.

After five years of service, employees are vested for purposes of retirement benefits. Death Benefit ranges from \$25,000 - \$50,000, dependent upon salary.

You can now change your beneficiaries online at: <https://orbit.myncretirement.com/orbit/Common/Pages/BPASLogin.aspx> if you have less than 10 years of service.

401(K) AND 457 MATCHING PLANS

Mecklenburg EMS Agency offers a match to regular full-time employees who participate in the 401(k) and/or 457 supplemental retirement plans. The match is currently:

- Dollar for Dollar Match up to 5%
- **100% Vested Immediately**
- Participate month after hire
- Start and stop any time

Retirement

NEXT EXIT ➔

Employees are able to choose to contribute either pre-tax or after-tax Roth. Medic's match is always contributed on a pre-tax basis. The 5% matching funds from the Agency apply to employee contributions in any one or a combination of plans for a total of 5%.

The NC 401(k) plan is administered by Empower Retirement.

The Choice of 457 plans offered through Medic:

- IMCA-Retirement Corporation 457 plan.
- NC 457 plan administered by Empower Retirement.

Changes can be made to your plans at any time, so start small and increase when you can. Enrolling is fast and easy and the plans work hard to make the investing simple. Local, personal help is available to all Medic employees.



Firemen's and Rescue Squad Workers' Pension Fund - An additional pension fund is also administered by the Retirement Systems Division of the NC Department of State Treasurer. First Responders receive a \$170 monthly payment at retirement after 20 years of service (Agency Paid). You can begin receiving the benefit at age 55 if you have been in the fund for the full 20 years.



NC Retirement System
877-627-3287

www.myNCretirement.com



NC 401(k) Plan and NC 457 Plan
Client Services: 866-627-5267

Robert Sipprell, CRC
Robert.sipprell@empower.com

www.ncplans.retirepru.com



457 Plan ICMA-RC
Client Services: 800.669.7400

Daisy Jones
djones@icmarc.org
866.266.7310

Supplemental and Dependent Life Insurance



Supplemental Life Insurance - The Hartford provides supplemental life insurance separate from the Agency provided policy. You may purchase coverage for yourself, spouse, and/or children. You may purchase supplemental life for yourself in increments of \$10,000 up to 5 times your salary and max of \$300,000. For your spouse, you may purchase in increments of \$10,000 and cannot be more than \$150,000 or 50% of your supplemental life insurance. You may purchase \$10,000 of child(ren) supplemental life insurance. This policy is portable and can convert to an individual policy if you leave employment. www.theHartfordAtWork.com

This plan comes with added Worldwide Travel Assistance giving you 24-hour emergency access when you and your dependents travel 100 miles or more from home for 31 consecutive days or less to include medical evacuation/return home, traveling companion assistance, dependent children assistance, visits by a family member or friend, return of mortal remains. www.worldwideassistance.com 800-243-6108



Basic Term Dependent Life (Unum) - Employees may purchase \$10,000 of coverage per dependent (spouse and/or children) for the nominal cost of \$2.00 per month regardless of number of dependents enrolled.

Agency Paid Benefits: You are already enrolled in....



Basic Term Life and AD&D Insurance (Unum) - Medic pays the full cost of the premium for individual coverage for all regular full-time employees. The amount of coverage is equal to your annual salary (rounded to the next highest dollar) and two times that amount for accidental death and dismemberment coverage. Unum offers value-add programs associated with life insurance to include identity theft, secure travel, will preparation, healthy rewards, & beneficiary support services.



Short Term Disability Insurance (STD) (Unum) – Paid to an employee after 25 calendar days, if verified as medically disabled due to a non-work related illness or injury, is under the care of a licensed physician and unable to work. STD is equal to 60% of the employee's basic weekly earnings and will be paid to the employee for up to 26 weeks.



Temporary Long Term Disability (LTD) Insurance (The Standard) - Paid to an employee after 26 weeks of STD if verified as still medically disabled due to a non-work related illness or injury. LTD is equal to 60% of the employee's basic weekly earnings and will be paid to the employee for up to 26 weeks.



Public Safety (EAP) - EAP vendor provides confidential counseling and referral assistance ranging from work related stress, marital or financial problems, drug and/or alcohol dependency, and more. EAP services are free and available to employees and their family members 24 hours a day. You and your household members can receive up to six face-to-face counseling sessions per person, per need, per year. All matters are strictly confidential. PublicSafetyEAP.com or call 1-888-327-1060.



Morneau Shepell (BDA EAP) – (The Standard our LTD vendor) Second EAP program also providing you assistance with up to three face-to-face visits and unlimited telephonic sessions. www.eapbda.com enter "standard" and password: eap4u



NC Association of Rescue & EMS – Agency paid membership, death benefit, and educational scholarship opportunities for employees. <http://www.ncarems.org/>



Benevolent Fund - Mecklenburg EMS Agency - The Benevolent Fund provides financial assistance up to \$500 for Agency employees in the event of personal or family crisis, hardship, emergency situation or disaster. The fund is fully funded by the Employees at Medic by contributing any voluntary amount through payroll deduction.

Additional Benefits

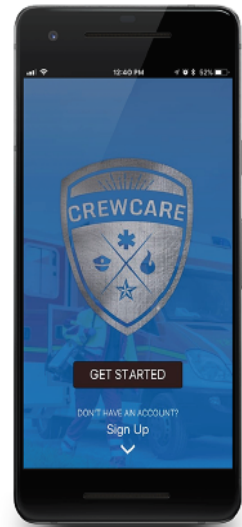
Download the Free CrewCare App for First Responders

DEPARTMENT CODE: P100

Department specific crisis and support resources
Anonymous input to help address dept. stress

All information is confidential

CrewCareLife.com



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Nationwide Pet Insurance

Pet Insurance Premiums are based on resident state and species of animal you wish to enroll. My Pet Protection allows you to visit any vet, anywhere and provides an average savings of 30% or more over similar plans. Enrollment is quick and convenient and claims can be submitted conveniently via the free VitusVet app! This benefit is portable and may be converted to an individual policy if you leave employment.

For questions about plans and to enroll, please call 1-888-899-4874 or visit <http://petinsurance.com/medic911>.



Nationwide®



Employee Assistance Program

TO ACCESS THE WEBSITE AND RESOURCES FOR EMPLOYEES

1. Log on to PublicSafetyEAP.com
2. Click **Employee & Family Login**
3. If you've already created a User Name and Password, simply enter that information in the appropriate boxes.
If you have not registered, complete steps 4 - 7.
4. Click on REGISTER HERE
5. Enter your employer's name and click Continue
6. Your employer's name will appear; select the button and click Continue
7. Fill out the Registration Form and create your own User Name and Password, then click Continue. **You only need to register once.**



You'll find an entire library of problem-solving resources including assessments, trainings, videos, tools and calculators such as 2,000+ Harvard Medical School articles

- Thousands of Legal articles •
- 800,000 Child/Elder care providers •
- Personal Growth programs •
- Mental and Physical Health assessments
- Financial tools and calculators •
- Career Development information •
- 900 Health videos •

Plus, important new resources that include:

CAREGIVER CENTER

A vast array of tools designed to help those providing care for a chronically ill, disabled, or aging family member or friend.

TRAINING CENTER

Access hundreds of personal and professional development trainings and courses.

LOCATORS

Search for childcare and eldercare resources in your local area.

RESILIENCE JOURNEY

An interactive new benefit to help you develop your maximum potential, experience less stress, less depression and improve physical and emotional health.

ESI WELLNESS CENTER

Articles, health assessments, courses, videos, and FAQs related to dieting, nutrition, stress, smoking, and physical fitness.

More benefits than any other EAP.

www.PublicSafetyEAP.com • 1-888-327-1060

Holidays and Leave

Holidays (13 Annually—Regular Full-time Employees)

New Year's Day	Labor Day
MLK's Birthday	Veterans Day
Good Friday	Thanksgiving Day
Memorial Day	Friday after Thanksgiving
Juneteenth	Christmas Day
Independence Day	Two additional days at Christmas



Leaves Policies—Employee handbook citations

- Policy 3.8 Bereavement — up to 24 consecutive hours
- Policy 3.16 Wellness Benefit — up to 2 days
- Policy 4.1 FMLA — unpaid up to 12 work weeks
- Policy 4.1 Military Caregiver Leave — unpaid up to 26 work weeks
- Policy 4.2 Administrative Leave — unpaid up to 30 days
- Policy 4.3 Disaster Response Leave
- Policy 4.4 Extended Leave — unpaid up to 26 work weeks
- Policy 4.6 Military Leave
- Policy 4.7 Parent-Child School Leave
- Policy 4.8 Paid Family Leave — paid to up 6 weeks*

*Full-time benefit eligible employees are eligible for paid family leave as defined by FMLA excluding intermittent and employee only.

Vacation Leave (Policy 3.3)

Four (4) hours of vacation leave shall be awarded to the accumulated benefits of all employees eligible to receive vacation leave who do not use sick leave and/or leave without pay for a period of one quarter year.

Quarters are defined as:

Quarter 1 = January – March

Quarter 2 = April – June

Quarter 3 = July – September

Quarter 4 = October – December

Vacation Benefit Leave (Policy 3.3) - 40 Hour Weeks

Length of Service	Accrued hour per pay period	Annual Accrual
Under 2 years	3.07	79.82
2-up to 5 years	3.69	95.94
5-10 years	4.61	119.86
10-15 years	5.53	143.87
15-20 years	6.46	167.96
Over 20	7.38	191.88

Sick Benefit Leave (Policy 3.13)

Shift	Accrued hour per pay period	Annual Accrual
40 hour	3.69	95.94

*There is no maximum accrued limit for sick leave.

NEW—Wellness Benefit Leave—Policy 3.16

Two (2) wellness days are granted at the beginning of each fiscal year to all full-time, regular employees for use after the initial ninety (90) calendar days of employment.



Mecklenburg EMS Agency Employee Benefits

STATEMENT OF EQUAL EMPLOYMENT OPPORTUNITY AND AMERICANS WITH DISABILITIES ACT

It is the policy of Mecklenburg EMS Agency to provide equal employment opportunity without regard to race, color, religion, sex, sexual orientation, genetic information, political affiliation, age, disability, national origin, or other status protected by federal, state or local law.

Discrimination against any person in the recruitment, examination, appointment, training, promotion, retention, discipline, or any other aspect of personnel administration because of race, color, religion, sex, sexual orientation, genetic information, political affiliation, age, disability, national origin, or other status protected by federal, state or local law is prohibited.

Discrimination on the basis of age, sex, or physical disability is prohibited except where age, sex, or disability requirements constitute a bona fide occupational qualification necessary for performance of the essential functions of a job.

Medic will comply with the Americans with Disabilities Act (ADA) which prohibits discrimination on the basis of a disability. Medic will make reasonable accommodations upon requests of otherwise qualified disabled applicants and employees to enable them to perform essential job functions except where such accommodations may constitute an unreasonable hardship or jeopardize the health and safety of employees, applicants or the general public.

The employee benefits program is administered by Mecklenburg County c/o Medic
Human Resources Department
4425 Wilkinson Blvd
Charlotte, NC 28208

Human Resources:
humanresources@medic911.com

For additional information about any benefits described in this brochure, please consult Mecklenburg EMS Agency policies, the applicable summary plan description (SPD), or the actual plan. In the event that there is any conflict between the information in this brochure, the SPD, the policies, and/or a plan, the plan document always governs.

Participation in any of Medic's benefit plans does not create and should not be viewed as a contract of employment. While Mecklenburg EMS Agency intends to provide these benefits for an indefinite period of time, it reserves the right to terminate, suspend, withdraw, amend, or modify a plan at any time. Any such change or termination of benefits will be based solely on the decision of the Medic.

ACCESS TO AND AVAILABILITY OF THE NOTICE OF PRIVACY PRACTICES FROM MECKLENBURG COUNTY

Mecklenburg County Group Health Plans' Notice of Privacy Practices (NPP) is applicable to persons enrolled in the employee and retiree medical plans, the dental plan, the medical flexible spending plan, and employee assistance program. If you wish to request a paper copy, you must submit your request in writing to the Group Health Plans' Privacy Coordinator at HR.Compliance@mecklenburgcountync.gov or via US Mail to: County HR, Compliance & Privacy Practices, 700 E. Fourth Street, Charlotte, NC 28202.

HR and Risk & Safety Teams

Departmental Contact Information:

Monday - Friday 7:00 am – 5:00 pm



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704-943-6100



Victoria Milligan
HR Training/Development
VictoriaM@medic911.com

All benefit, forms and policy information is located on the Medic Employee Website at:

www.medic911.com

Click - My Medic (upper right corner)

To login:

Username - your email address

Password - your Medic password