

# 2024 Benefits Brochure



**medconnect**  
BE HEALTHY. LIVE WELL. RETIRE STRONG.

# Action Items for Employees

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

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

**October 2, 2023 through October 30, 2023**

- Enrollment this year is **mandatory**—you must complete open enrollment to remain enrolled in coverages. You can make changes, add/remove dependents and update your FSA, LPFSA or HSA deductions.
- Complete through online payroll portal (UKG).
- Contact HR at HumanResources@medic911.com if unable to log into the payroll portal.

\* **Wellness Initiative Requirements**

**Biometrics onsite October 9—October 12 in Classrooms 117A/B**

- October 9 & October 11 from 2PM—7PM
- October 10 & October 12 from 9AM—2PM
- Must make an appointment; PPE optional
- Appointment link can be found on extranet under “Open Enrollment & Benefit Info”
- Online HRA questionnaire through <https://tinyurl.com/MEDIC2023HRA>
- HR will be onsite the week of October 9th to answer benefit questions

\* **Flu Shots - REQUIRED**

**Flu Shot Clinic onsite October 9—October 12 in Outdoor Sound Stage**

- October 9 & October 11 from 2PM—7PM
- October 10 & October 12 from 9AM—2PM
- Must make an appointment; PPE optional
- Appointment links can be found on extranet under “Open Enrollment & Benefit Info”
- Bring your Medical Insurance card to receive vaccine at Post 100
- Obtain vaccine at a local pharmacy or primary physician, and submit to the Safety team by email (Safety@medic911.com) or the HR lockbox by October 30, 2023
- Exemption/declination forms can be acquired through the Safety team



**ALL FIELD + DUAL-ROLE EMPLOYEES**

Annual fit testing is required for field/dual-role employees.

- Located in Outdoor Soundstage
- Schedule follows onsite flu clinic
- Face must be clean shaven to ensure proper fit
- Must bring 1/2 face mask, if applicable
- No appointment needed



## What is Changing?

- There are three medical options for the plan year – PPO, QHDHP-Enhanced and QHDHP-Standard
- All employees are now eligible for the PPO plan
- Decrease in ALL medical premiums
- Slight increase in dental premiums
- Increased annual benefit maximums for dental coverage
- Adult orthodontia and implants now included in the dental enhanced plan
- Increase in contribution max for Health Savings Accounts (HSA) and Flexible Savings Accounts (FSA)
- Employer HSA seed contribution amounts change based on selected medical plan
- All plans remain with the same carriers
- No change in vision premiums

## What is not Changing?

- 100% preventative care coverage, no medical lifetime max and no preexisting condition limits
- Discounted medical premiums when employees complete all action items (refer to page 2)
- Coverage for adult children up to the age of 26 for medical, dental, vision and life
- 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 amount
  - \* The Agency reserves the right to request proof of coverage of other medical coverage at any time



<div>  <div> <div>BCBS Medical</div> <div>www.bluecrossnc.com</div> <div>1-877-275-9787</div> </div> </div>			
Medical Plan Choices for 2024			
	PPO Plan	High Deductible Plan Enhanced	High Deductible Plan Standard
Deductible (Single/Family)			
<i>In-Network</i> Deductible (Single/Family)	\$600/\$1,200	\$2,000/\$4,000	\$3,000/\$6,000
<i>Out-of-Network</i> Deductible (Single/Family)	\$1,500/\$3,000	\$4,000/\$8,000	\$6,000/\$12,000
HSA Seed (Single/Family)	N/A	\$400/\$800	\$250/\$500
Coinsurance			
<i>In-Network</i>	30%	30%	30%
<i>Out-of-Network</i>	40%	70%	70%
<i>In-Network</i> OOP Max (includes deductible)	\$5,000/\$10,000	\$6,000/\$12,000	\$7,000/\$14,000
<i>Out-of-Network</i>	\$10,800/\$21,600	\$12,000/\$24,000	\$14,000/\$28,000
Lifetime Maximum Benefit	Unlimited	Unlimited	Unlimited
Physician Services			
Office Visits (PCP/Specialist)	\$25/\$40	30% after deductible	30% after deductible
Preventative Care	Covered at 100%	Covered at 100%	Covered at 100%
Allergy Injection (by non-physician)	Covered at 100%	30% after deductible	30% after deductible
Surgery	30% after deductible	30% after deductible	30% after deductible
Hospital/Facility			
Inpatient/Outpatient Hospital	30% after deductible	30% after deductible	30% after deductible
Emergency Room 	\$225 copay then 30% after deductible	30% after deductible	30% after deductible
Urgent Care	\$60	30% after deductible	30% after deductible
CVS Prescription Drug Plan			
Generic Preventive	100%	100%	100%
Retail Generic	\$15	30% after deductible	30% after deductible
Retail Preferred Brand	30%	30% after deductible	30% after deductible
	\$30 min, \$90 max		
Retail Non-Preferred Brand	40%	30% after deductible	30% after deductible
	\$60 min, \$120 max		



Bi-Weekly Rates 24 Pay Periods		Employee	Employee + Child(ren)	Employee + Spouse	Family
Discounted Wellness Rates					
PPO		\$43.34	\$115.11	\$148.97	\$248.49
	High Deductible Enhanced	\$25.71	\$85.14	\$110.19	\$186.79
	High Deductible Standard	\$1.90	\$44.66	\$57.80	\$103.45
Non Discounted Rates					
PPO		\$85.00	\$156.78	\$190.63	\$290.15
	High Deductible Enhanced	\$67.38	\$126.81	\$151.85	\$228.45
	High Deductible Standard	\$43.56	\$86.33	\$99.47	\$145.11

**Medical Plan Opt Out/Waive**

If you waive the medical plan options for 2024, 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.**

- CVS is the preferred pharmacy vendor but you may go to any retail pharmacy vendor that accepts CVS Caremark.
- 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.



# BROADER, LESS EXPENSIVE telehealth services

For Fully Insured Groups

**Telehealth offers convenient and cost effective access to both acute care and behavioral health services.**<sup>1</sup> It's a great way to help employees seek the care they need. That's why Blue Cross and Blue Shield of North Carolina (Blue Cross NC) is pleased to offer telehealth services from Teladoc. Teladoc is a standard plan benefit for fully insured groups, and includes behavioral health services.

## Easy access

Teladoc's doctors address a range of acute care and behavioral health concerns. They can diagnose symptoms, prescribe non-narcotic medication and send e-prescriptions to the patient's pharmacy.<sup>2</sup> Employees can consult with a doctor by phone or video 24 hours a day for minor acute care. Behavioral health services are available by appointment seven days a week.

## Behavioral health<sup>1</sup>

Nearly one in five American adults have experienced a mental, behavioral or emotional disorder in the past year<sup>3</sup>, making access to behavioral health resources more important than ever. With behavioral health services available through Teladoc, you give your employees:

- Access to secure sessions with state-licensed mental health professionals
- Home-based treatments for those suffering from conditions like PTSD and anxiety
- Online tools to find providers, and communicate with them between sessions

## Attractive savings

On average, members pay \$57 for urgent care visits and \$396 for visits to the emergency room.<sup>3</sup> Telehealth services can significantly reduce those out-of-pocket expenses for your employees. For plans with a copay, the patient will be responsible for a \$10 copay for both acute care and behavioral health services.<sup>4</sup> For plans with a deductible and coinsurance, they pay no more than the cost of the service.

## Safe and trusted

Teladoc is a HIPAA- and PHI-compliant solution that uses secure video via computer, tablet or mobile app.<sup>5</sup> Employees gain easy access to U.S. board-certified doctors licensed to practice in the state. Specialties range from primary care and internal medicine to pediatrics and behavioral health care — so they can treat many different non-emergency health problems as well as behavioral health concerns.

## Teladoc at a glance

- World leading in whole-person virtual care<sup>6</sup>
- Low wait times<sup>7</sup>
- U.S. board-certified physicians in our network have an average of 20 years' experience and deliver the highest-quality care<sup>8</sup>
- #1 among direct-to-consumer telehealth providers in the J.D. Power 2021 U.S. Telehealth Satisfaction Study<sup>6</sup>
- Trained, licensed mental health professionals providing counseling and behavioral health services
- HIPAA-compliant
- 24/7 availability including holidays

## 3 ways to sign up today

So it's ready when you need it!



**Download the Teladoc mobile app**  
(iOS- / Android-supported)



**Go to [Teladoc.com](https://www.teladoc.com)** and click "Log in/Register"



**Call 1-800-835-2362**  
(1-800-TELADOC)

### Please Note:

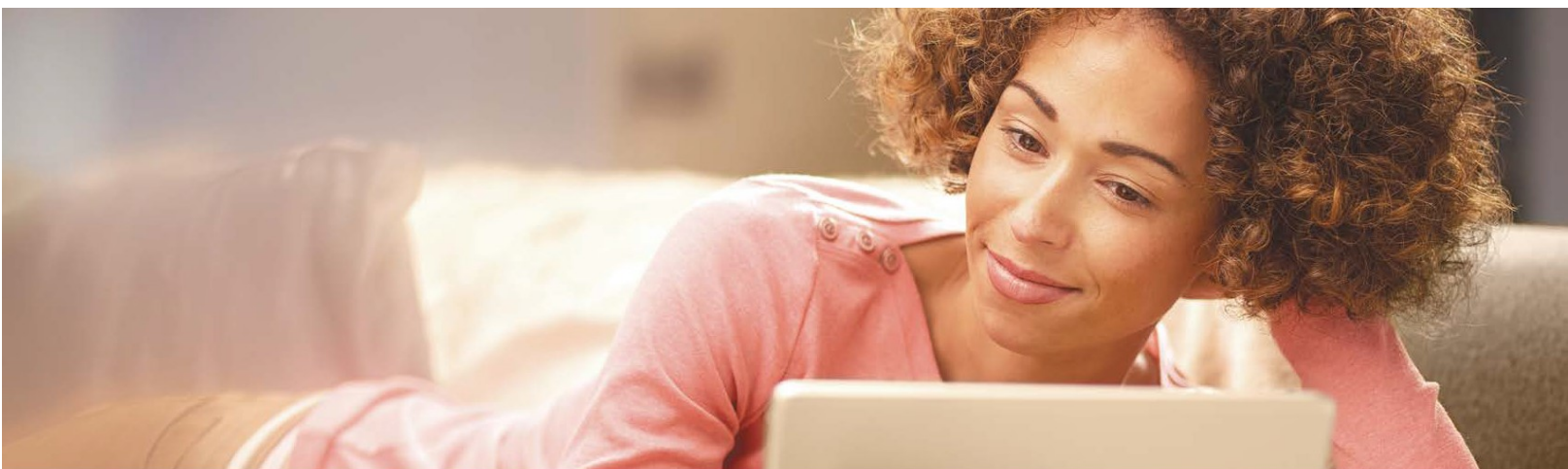
You must wait until your health plan effective date before registering for telehealth services.



**BlueCross BlueShield  
of North Carolina**



**TELADOC®**



## SKIN CONCERNS CAN'T WAIT

Your new anytime, anywhere dermatology office.

Telehealth is one of the ways Blue Cross and Blue Shield of North Carolina (Blue Cross NC) is making health care more accessible and affordable. And it's not just for acute care needs.

With Teladoc, you have convenient access to state-licensed doctors to address non-emergency dermatology needs. This makes it easier than ever to take care of all kinds of skin problems no matter where you are – with no appointment necessary.

### Why use Teladoc dermatology?

- A quick and discreet way to treat skin conditions like acne, rash, eczema and more
- Access to a network of board-certified dermatologists online
- Shorter wait times compared to the months it may take to see a provider in-person<sup>1</sup>
- Upload photos to get a diagnosis from a licensed dermatologist within 48-72 hours, with a treatment plan and prescription, if needed

### How it works

Upload a few photos and a description of your condition. A dermatologist examines the photos and provides diagnosis, treatment plans and prescriptions (if appropriate) for the most common conditions. Average reply is within 48 to 72 hours.

Let's talk!

For more information or to schedule an appointment, visit [Teladoc.com](https://www.teladoc.com) or call 1-800-835-2362 (1-800-TELADOC).



### Conditions Treated

- Acne & rashes
- Alopecia
- Bruises
- Cold sores
- Eczema & psoriasis
- Inflamed or enlarged hair follicles
- Moles
- Rosacea
- Skin infections
- Warts
- And more

<sup>1</sup> [www.teladoc.com/how-it-works/](https://www.teladoc.com/how-it-works/) (Accessed 2021).

Teladoc is an independent company that is solely responsible for the telehealth services it is providing. Teladoc does not offer Blue Cross or Blue Shield products or services. Telehealth services are subject to the terms and conditions of the member's health plan, including benefits, limitations and exclusions. Telehealth services are not a substitute for emergency care.

Teladoc does not replace your primary care doctor and is not an insurance product. Teladoc is subject to state regulations. Teladoc does not prescribe DEA-controlled substances and may not prescribe nontherapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. Teladoc does not guarantee patients will receive a prescription. Health care professionals using the platform have the right to deny care if, based on professional judgment, a case is inappropriate for telehealth or for misuse of services. Teladoc and the Teladoc logo are registered trademarks of Teladoc, Inc. and may not be used without written permission. For complete terms of use, visit [member.teladoc.com/terms/terms\\_of\\_use](https://member.teladoc.com/terms/terms_of_use).

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BlueCross BlueShield  
of North Carolina



TELADOC



## 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 in 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 01/01/2024.

### Eligibility

- Must be enrolled in a Qualified High Deductible Plan
- Not covered by any other health plan including Medicare, TRICARE, or TRICARE for Life
- Have not received 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)**

### 2024 MEDIC SEED CONTRIBUTIONS

#### Standard High Deductible Plan

- Employee Only = \$250
- Employee + Family = \$500

#### Enhanced High Deductible Plan

- Employee Only = \$400
- Employee + Family = \$800

#### 2024 Contribution Limits

- Employee Only = \$4,150
- Employee + Family = \$8,300
- "Catch-up" = Additional \$1,000

## 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 leave the agency.
- 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.





# Flexible Spending Accounts

For 2024, 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, 2025.
- A **Limited Purpose Flexible Spending Account** is 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, 2025.

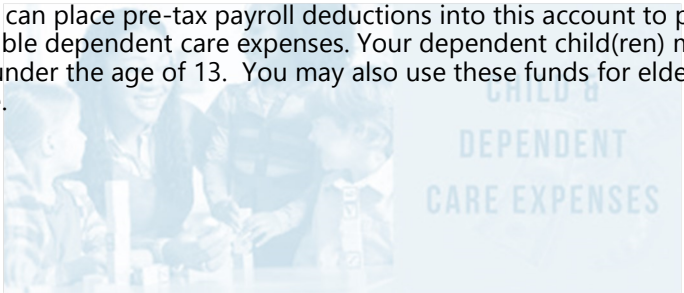
Important Note: If you currently have a traditional FSA and enroll into the Q-HDHP for 2024, you MUST use all funds by December 31, 2023.

You may also use your FSA funds at [fsastore.com](https://fsastore.com).

## Dependent Care Accounts

### WHAT IS A DEPENDENT CARE ACCOUNT?

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



## Questions?

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](https://letscatapult.org).

### CREATE A FSA SYSTEM LOGIN

1. Go to <https://letscatapult.org/services/benefit-solutions/benefit-administration/>
2. Click on "Participants Login"
3. Register for your account.
4. Registration ID is your FSA debit card number. Employee ID is your SSN.
5. Create a username and password, along with the security questions requested.

### Annual Maximum Contributions to each plan are:

Medical:	<b>\$3,200</b>
Dependent Care:	<b>\$5,000</b>

**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 2024 calendar year.

DCA and FSA accounts are non-portable.





Dental Plan Choices for 2024		
	Standard Plan	Enhanced Plan
Calendar Year Maximum (Class I, II, and III Expenses) (per individual)		
In-Network	\$1,500	\$2,000
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%	100%
	No Deductibles	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)		
	After Deductible	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)	60%	50%
	After Deductible	After Deductible
Crowns/Inlays/Onlays		
Dentures		
Bridges		
Class IV Expenses - Orthodontia (In-Network/Out-of Network)		
Includes adults & implants	N/A	50% / 50%
	N/A	After Deductible
Lifetime Maximum	N/A	\$2,000
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		

Bi-Weekly Rates 24 Pay Periods	Employee	Employee + Child(ren)	Employee + Spouse	Employee + Family
Standard	\$3.37	\$17.52	\$14.40	\$27.55
Enhanced	\$5.76	\$29.90	\$24.56	\$47.02

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



## DID YOU KNOW?

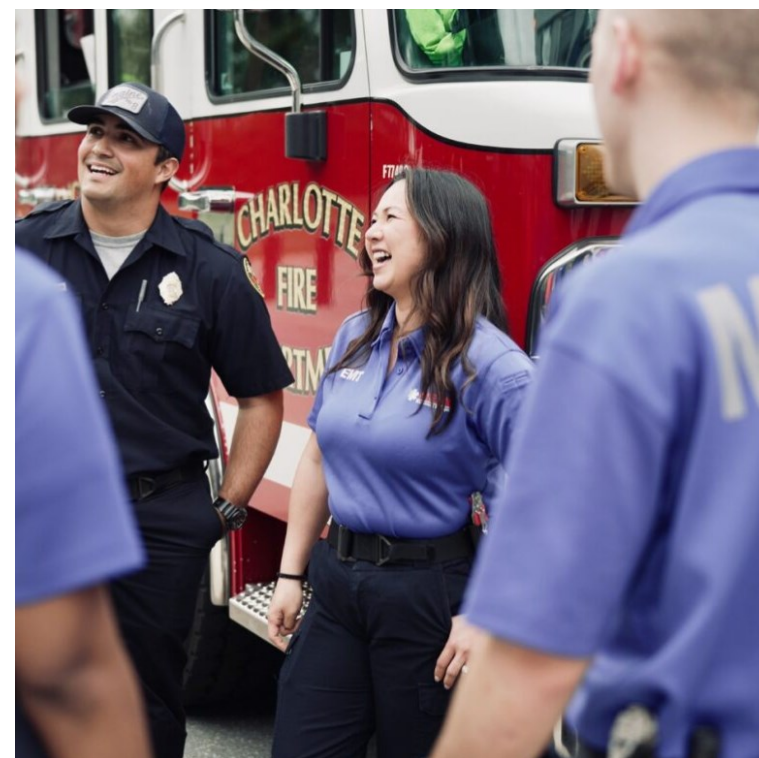
You can connect with a dentist using virtual care (telehealth) on your phone, tablet, or computer 24/7 if you are experiencing dental pain, oral sores, lesions, swelling or infections.

- Speak with a dentist within minutes from the comfort of your home
- The process will save you hours in waiting in an emergency room
- Get a dental consult anytime, anywhere a steady internet connection is available
- Virtual dental visits are covered to the same extent as in-person dental visits: you may qualify for services at no cost to you
- Get a free at-home dental screening using your smartphone



The myCigna app gives you a new and improved way to easily access your important dental information.

ID Cards can easily be printed, emailed or shared from your mobile device.





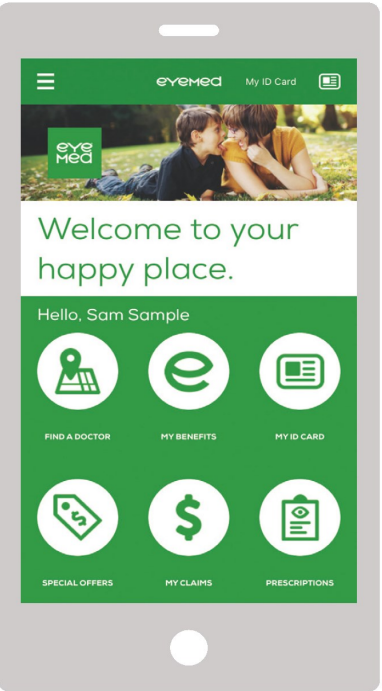
Bi-Weekly Rates	Employee	Employee + Child(ren)	Employee + Spouse	Employee + Family
Standard	\$2.43	\$5.29	\$5.03	\$8.30
Enhanced	\$5.75	\$11.06	\$10.78	\$16.81
Vision Plan Choices for 2024				
Services	In-Network PLUS Provid-	Standard Plan	Enhanced Plan	
		Eye exam every 12 months		
Comprehensive Exam	\$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	Lenses every 12 months		
		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, Standard	\$45 copay/\$0 copay	\$45 copay	\$0 copay	
Anti-Reflective, Tiers 1-3	\$57-85 copay/\$12-85 copay	\$57-85 copay	\$12-85 copay	
Photochromic	\$75 copay/\$0 copay	\$75 copay	\$0 copay	
Polycarbonate, Standard	\$40 copay/\$0 copay	\$40 copay	\$0 copay	
Polycarbonate, Standard <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	



# On the go? Now your benefits are, too.

NEW LOOK. FRESH FEATURES. SAME GREAT BENEFITS, WHENEVER YOU NEED THEM.

Our revamped EyeMed Mobile App brings you fresh new features to help you get the most from your EyeMed experience – anytime, anywhere.



## The features you love plus new features to explore

- See benefits and eligibility at-a-glance
- Track your claims
- Grab special offers to help you save more
- Find an in-network eye doctor with the Provider Locator
- View your ID card at-a-shake
- Set upcoming exam and contact lens replacement reminders
- Get answers to your FAQs
- Access interactive vision guides to help you see and live your best
- Use Facial recognition, Touch ID and Apple Wallet for Apple users

## USING THE OLD APP?

Make sure you download the newest version of the app to keep up with our latest features, as older versions will no longer be supported. Download the new app, enter your existing login info (no need to re-register) and you're all set.

Check out the App Store or Google Play to download the new app

INDEPENDENT  
PROVIDER  
NETWORK



LENSCRAFTERS

PEARLE  
VISION

OPTICAL



# Plan Terminology

**Copayment (Copay)** is the amount you pay at the time a covered service is provided. Copay amounts vary depending on: the service you receive; in-network vs. out-of-network doctor; primary physician/doctor vs. specialist; and type of prescription drug.

**Coinsurance** is the sharing of costs between you and the insurance provider, for covered services after you have met your plan year deductible. For example, if your coinsurance is 30% , that means you will pay 30% and the insurance provider will pay 70%, of covered medical expenses, after you've met your deductible.

**Deductible** is the amount you pay for covered health care services before your insurance plan starts to pay. With a \$4,000 deductible, for example, you pay the first \$4,000 of covered services yourself.

**Rates** is the amount of money deducted from your paycheck to pay for the premiums of your selected medical, dental and vision coverage

**In-Network** is a group of doctors, hospitals, pharmacies, and other providers who contract with insurance companies and provide services at negotiated rates.

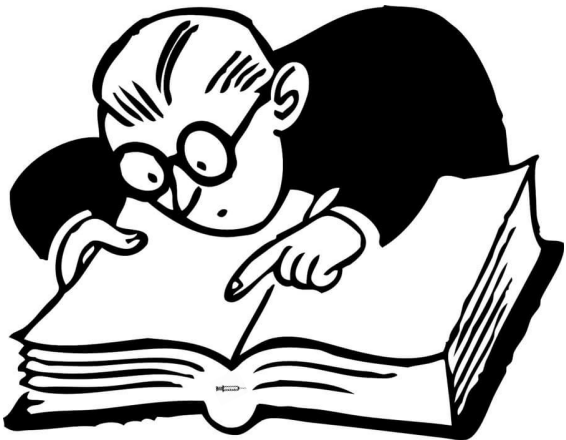
**Out-of-Network** is a group of doctors, hospitals, pharmacies, and other providers who do not contract with the insurance companies and do not provide services at negotiated rates. You pay more out of pocket and have fewer protections

**Out-of-Pocket Max** is the maximum amount of money you will have to pay for covered medical expenses within a plan year.

**Seed Money** are funds the County allocates for employees who select a High Deductible Health Plan (HDHP) and enroll in an Health Savings Account (HSA). These funds are uploaded to your HSA card at the beginning of the year, whether you contribute or not

**Preventative Care** is routine health care that is 100% covered. Coverage includes screenings, services and counseling to help prevent illness, disease or other health problems. To view the list of preventive care services, please visit [www.bcbsnc.com](http://www.bcbsnc.com). Wellness Rate is the discount received on medical premiums when you complete predetermined wellness activities.

**Wellness Rate** is the discount received on medical premiums when you complete predetermined wellness activities



## If this happens...

Loss of Health Coverage

Changes in Household

Change in job

Other Circumstances





# Coverage & Changes

## 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.



## Life Events...

Add or remove dependent coverage, if a qualifying event occurs (such as marriage, birth of a child or dependent has reached maximum age of 26, etc.)

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.



## Make Changes Anytime...

- 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
- Start, stop of change Benevolent Fund contribution



## You can change this...

Medical  
insurance

Dental  
insurance

Vision  
insurance

Life  
insurance



"Safety net for you and your family.....Extra Cash!"

Available Plan Options

- **Cancer** - Aflac's cancer plan can help you and your family better financially if cancer occurs.
- **Critical Illness** - Helps with costs associated with heart attack, stroke, coma, paralysis, etc.
- **Hospital Confinement** - Can help ease the financial burden of hospital stays and visits
- **Accident** - Accidents happen....big and small. Take advantage of this popular plan when the unexpected happens.

**Onsite Enrollment – Week of December 4<sup>th</sup>**

Aflac/Transamerica Representative

Debbie Crisp

704-796-4546

Deborah\_Crisp@us.aflac.com



### Pet insurance

Pet insurance premiums are based on resident state and species of animal(s) you wish to enroll. My Pet Protection allows you to vision 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>.

## Additional Benefits

### EMT to Paramedic Incentive Program

Medic recognizes that maintaining a work/life balance, while trying to advance your career is challenging. Understanding that employees are its most valuable resource, Medic wants every EMT to succeed at their career goals. This is why the EMT to Paramedic Incentive Program was designed.

1. 5% increase effective your first day of the Paramedic Program
2. \$1,250 bonus after completion of the program
3. 5% increase or Paramedic entry level pay increase once upgraded to Paramedic status
4. \$1,250 bonus one year post upgrade
5. Schedule incentives
6. Additional tuition reimbursement

Contact Breanne Garcia if interested!

BreanneG@Medic911.com



**Tuition Reimbursement**— All regular benefit eligible employees are eligible for school tuition and/or approved seminar reimbursement. Reimbursements are based on allocation of funds up to an annual maximum of \$750 for school tuition and \$200 maximum for approved seminar/conference reimbursement and are provided on a first-come-first-serve basis.

# Benefit Leave and Holidays

SICK BENEFIT LEAVE (POLICY 3.13)		
Shift	Accrued hour per pay period	Annual Accrual
40 hour	3.69	95.94

**LEAVE POLICIES**

**Employee Handbook Citations**

- Policy 3.8 Bereavement —up to 24 consecutive hours
- Policy 3.16 Wellness Benefit — up to 2 days after ninety (90) calendar days of employment.
- 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 BENEFIT LEAVE (POLICY 3.3) 40 Hour Weeks		
Years of Service	NEW Accrual Per Pay Period	NEW Accrual per Year
Under 2 Years	4.31	112
2 – up to 5 Years	4.92	128
5 – up to 10 Years	5.85	152
10 – up to 15 Years	7.38	192
15 – up to 20 Years	8.31	216
Over 20 Years	9.54	248

**VACATION LEAVE (POLICY 3.3)**

Each quarter, four (4) hours of vacation leave shall be awarded to eligible employees who do not utilize sick leave and/or leave without pay. Quarters are defined as:

Quarter 1 = January – March

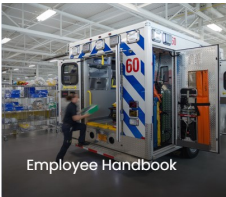
Quarter 2 = April – June

Quarter 3 = July – September

Quarter 4 = October – December

Employee Handbook is located on the Extranet!

www.Medic911.com



Holidays (13 Annual/Regular Full-time Employees)	
• New Year’s Day	• Thanksgiving Day
• MLK Day	• Friday after Thanksgiving
• Good Friday	• Christmas Day
• Memorial Day	• Two additional days at Christmas
• Juneteenth	
• Independence Day	
• Veterans Day	



# Savings and Retirement

## NC Retirement System

Mecklenburg EMS Agency regular full-time employees are automatically enrolled into the North Carolina Local Government Retirement System (LRS) and begin to earn service credit upon the first day of employment. Employees contribute 6% of gross wages and are vested after 5 years of service.

Employee contributes **6%** of gross wages deducted from paychecks. Agency contributions of **12.87%** 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

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:

- Mission Square (formally ICMA)-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.

### Questions?

#### NC Retirement System

877-627-3287  
[www.myNCretirement.com](http://www.myNCretirement.com)

#### NC 401(K) and 457 Plan

Client Services: 866-627-5267  
Robert Sipprell, CRC  
[Robert.Sipprell@empower.com](mailto:Robert.Sipprell@empower.com)  
[www.ncplans.retirepru.com](http://www.ncplans.retirepru.com)

#### Mission Square Retirement 457 Plan

Client Services: 866-266-7310  
Daisy Jones  
[Djones@icmarc.org](mailto: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](http://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](http://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.
- Transamerica Supplemental Life** - Aflac provides supplemental life insurance separate from the Agency provided policy. You may purchase coverage for yourself, spouse, and/or children. This policy is portable and can convert to an individual policy if you leave employment for no additional cost. A living benefit is also available (long term care-pay eligible up to 50 months).



## 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) up to \$150,000 for basic life and 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.
- NC Association of Rescue & EMS** – Agency paid membership, death benefit, and educational scholarship opportunities for employees. <http://www.ncarems.org/>
- Firemen's and Rescue 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.





### HOW DOES THE EAP WORK?

Getting the help you need is simple. Call the EAP 24 hours a day, 7 days a week to reach a professional counselor via our toll-free number or log on to our website to access other benefits.

**800-252-4555**  
**www.theEAP.com**

### MORE BENEFITS FOR YOU

Your EAP provides access to more problem-solving solutions and life enhancement benefits than any other EAP. And nearly 99% of those who use the EAP are satisfied with the experience.



### COUNSELING BENEFITS

Many complex issues are best resolved with counseling assistance from a behavioral health professional. You will want to consider calling for help if you encounter problems such as:

- Relationship and family issues
- Depression, stress, or anxiety
- Grief or loss of a loved one
- Eating disorders or substance abuse
- Workplace difficulties

When you call, you connect immediately with a counselor. Each of our experienced counselors has a Masters or Ph.D. level of training. Should you need to be referred to a local counselor for personal visits, we have an extensive network of providers available to ensure that you will have a counselor near your home or workplace.



### WORK/LIFE BENEFITS

Help for personal, family, financial, and legal issues is available for your everyday work/life problems including:

- Debt counseling and restructuring
- Legal problems not related to employment or medical concerns
- Childcare and elder care assistance
- Financial information
- Caregiver help and resources
- Real estate and tenant/landlord concerns
- Interpersonal skills with family and co-workers
- Pet Help Center

### SELF-HELP RESOURCES

Access thousands of tools and informative resources covering virtually every problem you might encounter. You can call or log on to the website to access these benefits. Resources include:

- Behavioral Health - information on everything from alcohol abuse to personal stress
- Financial – articles and tools to help answer your questions and learn money management
- Legal Information - topics ranging from a will to wills
- Tools for Tough Times - resources to help you do more with less in difficult financial times

### PEAK PERFORMANCE COACHING

Personal and professional coaching is available from senior-level ESI coaches. Get one-to-one telephone coaching and support, as well as online self-help resources and trainings.

Coaching is available for:

- Certified Financial Coaching
- Balancing Life at Work and Home
- Resilience
- Effective Communication
- Home Purchasing
- Student Debt
- Relaxation Coaching for Beginners
- Workplace Conflict
- Retirement (Practical & Emotional Aspects)
- Succeeding as a Supervisor

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LIFESTYLE SAVINGS BENEFITS

Your Lifestyle Savings Benefits include thousands of specially negotiated ways to shop, travel, entertain, and improve your health and your quality of life. Explore deals, discounts, and perks from your favorite national brands.

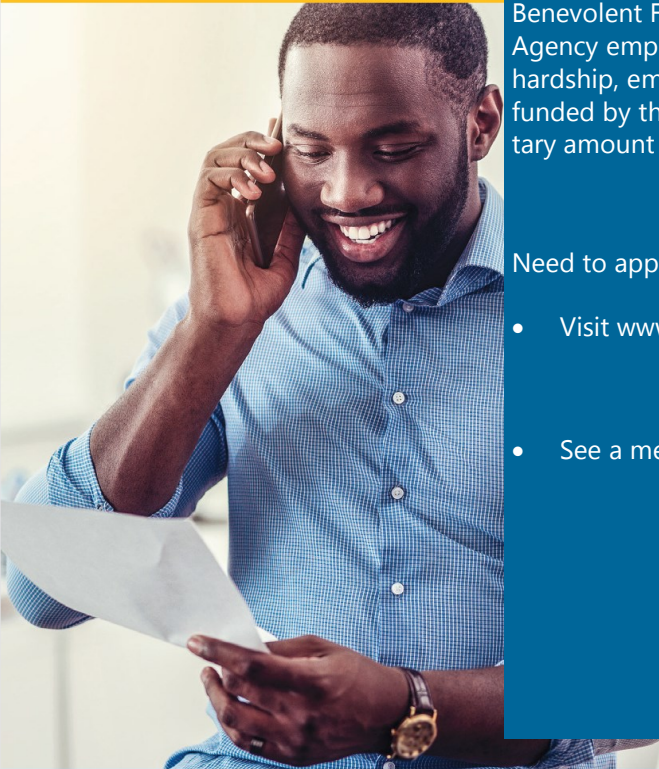
PERSONAL DEVELOPMENT AND TRAINING BENEFITS

Our online training includes an extensive library of **eLearning courses, trainings, and videos** to help you boost your personal and professional growth. Balance your work, life, and career objectives with the help of tutorials, exercises, and worksheets.

WELLNESS BENEFITS

The EAP wellness benefit allows you to access information and resources to improve you and your family’s overall wellness including stress reduction, fitness, diet and smoking cessation.

- Online Wellness Center
- One-to-One Wellness Coaching from certified coaches for nutrition, weight loss, fitness, reducing stress and quitting tobacco.



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.

- Visit eapbda.com
- Enter “standard”
- Password: eap4u

**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.

Need to apply?

- Visit [www.medic911.com/benevolent-fund/](http://www.medic911.com/benevolent-fund/)
- or
- See a member of Human Resources



# Have questions or need additional information?

Recruitment + Onboarding + Compensation + Benefits + Retirement + Employee Relations



Sarah Latimer  
**HR Supervisor**  
SarahL@Medic911.com  
704-943-6137

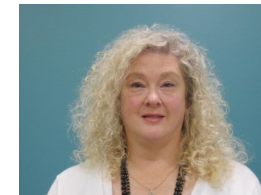


Amy Broughton  
**Safety & Risk Supervisor**  
AmyB@Medic911.com  
704-943-6095



Chelsea Cline  
**Senior HR Generalist**  
ChelseaC@Medic911.com  
704-943-6004

Pamela Jackson  
**Safety & Risk Specialist**  
PamelaJ@Medic911.com  
704-943-6164



Zeke Smith  
**HR Generalist**  
ZekeS@medic911.com  
704-943-6423

Helen Reed  
**Case Coordinator**  
HelenR@Medic911.com  
704-943-6100



Noni Watson  
**HR Generalist**  
NoniW@medic911.com  
704-943-6107

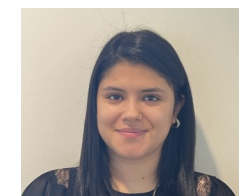


Madison Kiger  
**HR Recruiter**  
MadisonK@medic911.com  
704-943-6107

Maritza Gonzalez  
**Receptionist/Records**  
MaritzaG@Medic911.com  
704-943-6000



Breanne Garcia  
**Training/Onboarding Generalist**  
BreanneG@medic911.com  
704-943-6089



Iranova Calidonio Moran  
**HR Coordinator**  
IranovaM@medic911.com  
704-943-6030



Jackie Martin  
**HR Manager**  
JacklynM@Medic911.com  
704-943-6085

Reception + Records Request + FMLA + OJI + Driver Safety

# 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](mailto: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](mailto:HR.Compliance@mecklenburgcountync.gov) or via US Mail to: County HR, Compliance & Privacy Practices, 700 E. Fourth Street, Charlotte, NC 28202.*

# Benefits Brochure

## GET CONNECTED WITH MEDIC BINGO!

**Find out about Medic benefits and play to win!** To get MEDIC BINGO, you will need to have one row, one column or diagonal stamped **plus** the FLU SHOT.

Please show your completed card at the HR Welcome Table.



**medconnect**  
BE HEALTHY. LIVE WELL. RETIRE STRONG.

### Event Checklist:

- ◇ Complete biometrics
- ◇ Get your flu shot (or declination)
- ◇ Complete online HRA
- ◇ Complete FIT test (if credentialed)
- ◇ Complete Bingo card



**Connect...** for your health



**Connect...** for your benefits



**Connect...** for your future