

2024 Benefit Summary



Benefits Overview

The City of Eagan is proud to offer a comprehensive benefits package to eligible full-time employees. The complete benefits package is briefly summarized in this booklet. You will receive plan booklets, which give you more detailed information about each of these programs.

You share the costs of some benefits (medical, dental and vision), and the City of Eagan provides other benefits at no cost to you (life, accidental death & dismemberment and LTD).



Benefit Plans Offered

- Medical
- VEBA
- Dental
- Vision insurance
- Life Insurance
- Accidental Death & Dismemberment (AD&D) Insurance
- Supplemental Life Insurance
- Flexible Spending Account (FSA)
- Long-Term Disability
- Employee Assistance Program (EAP)
- Voluntary Life Insurance
- Voluntary Accidental Death & Dismemberment Insurance
- Voluntary Legal Plan (Full time employees only)

Eligibility

You and your dependents are eligible for the City of Eagan benefits on the first of the month following 30 days of employment.

Eligible dependents are your spouse and children to age 26 through the calendar month of the birthday.

Elections made now will remain until the next open enrollment unless you or your family members experience a qualifying event. If you experience a qualifying event, you must contact HR within 30 days.

This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.

Medical Benefits

Administered by Blue Cross and Blue Shield of Minnesota

Comprehensive and preventive healthcare coverage is important in protecting you and your family from the financial risks of unexpected illness and injury. A little prevention usually goes a long way— especially in healthcare. Routine exams and regular preventive care provide an inexpensive review of your health. Small problems can potentially develop into large expenses. By identifying the problems early, often they can be treated at little cost.

Comprehensive healthcare also provides peace of mind. In case of an illness or injury, you and your family are covered with an excellent medical plan through the City of Eagan.

The City of Eagan offers you a choice of 3 medical plans through the Aware National Network.

If you use in-network providers, your costs will be less.

	Aware National Network		
	Copay Plan	VEBA Plan #1	VEBA Plan #2
	In-Network MN Network — Blue-Card PPO	In-Network MN Network — Blue-Card PPO	In-Network MN Network — Blue-Card PPO
Calendar Year Deductible With 4th quarter carryover feature The in and out-of-network deductibles accumulate separately.	\$0 Single \$0 Family	\$1,500 Single \$3,000 Family	\$1,500 Single \$3,000 Family
Calendar Year Out-of-Pocket Maximum The in and out-of-network maximums accumulate separately. Non-covered charges and charges in excess of our allowed amount do not apply to the out-of-pocket maximum.	Medical and Prescription \$1,000 Single \$5,000 Family	Medical and Prescription \$3,000 Single \$6,000 Family	Medical and Prescription \$1,500 Single \$3,000 Family
Coinsurance	100%	Deductible then 80% coinsurance.	Deductible then 100% coinsurance.
Lifetime Maximum per Person	Unlimited	Unlimited	Unlimited
Dependent Child Age Limit	To age 26 through the calendar month of the birthday	To age 26 through the calendar month of the birthday	To age 26 through the calendar month of the birthday
COVERED CHARGES			
PREVENTIVE CARE			
Well Child Care through age 5	100%	100%	100%
Prenatal Care			
Routine Physicals ages 6 and older			
Office Visits			

	Aware National Network		
	Copay Plan	VEBA Plan #1	VEBA Plan #2
	In-Network MN Network — Blue-Card PPO	In-Network MN Network — Blue-Card PPO	In-Network MN Network — Blue-Card PPO
PREVENTIVE CARE CONTINUED			
Cancer Screening			
Routine Hearing and Vision Exams	100%	100%	100%
Immunizations and Vaccinations			
PHYSICIAN SERVICES			
In-Hospital Medical Visits			
Surgery and Anesthesia			
Inpatient Lab and X-rays, etc.	100%		
Outpatient Lab and X-ray		Deductible then 80% coinsurance	Deductible then 100% coinsurance
Allergy Injections and Serum			
Office Visits due to Illness or Injury			
Urgent Care (Clinic Based)	100% after \$20 copay		
OTHER PROFESSIONAL SERVICES			
Chiropractic Care			
Physical Therapy, Occupational Therapy, Speech Therapy	100% after \$20 copay for office visits. All other services subject to deductible then 100% coinsurance.	Deductible then 80% coinsurance	Deductible then 100% coinsurance
Home Health Care	100%		
OUTPATIENT HOSPITAL SERVICES			
Diagnostic Tests			
Pre-Admission Tests and Exams			
Lab and X-Ray			
Chemotherapy and Radiation Therapy			
Physical, Occupational and Speech Therapy	100%	Deductible then 80% coinsurance	Deductible then 100% coinsurance
Kidney Dialysis			
Scheduled Outpatient Surgery			
Non-emergency—Illness Related visits			
Urgent Care (Hospital based)			

	Aware National Network		
	Copay Plan	VEBA Plan #1	VEBA Plan #2
	In-Network MN Network — Blue-Card PPO	In-Network MN Network — Blue-Card PPO	In-Network MN Network — Blue-Card PPO
EMERGENCY CARE			
Emergency Room	100% after \$55 copay	Deductible then 80% coinsurance	Deductible then 100% coinsurance
Physician Services	100%	Deductible then 80% coinsurance	Deductible then 100% coinsurance
Ambulance Medically necessary transport to nearest facility	80%	Deductible then 80% coinsurance	Deductible then 100% coinsurance
Medical Supplies	80%	Deductible then 80% coinsurance	Deductible then 100% coinsurance
BEHAVIORAL HEALTH CARE (MENTAL HEALTH AND CHEMICAL DEPENDENCY CARE)			
Inpatient Care	100%	Deductible then 80% coinsurance	Deductible then 100% coinsurance
Outpatient Care			
Professional Care	100% after \$20 copay for office visits		
PRESCRIPTION DRUGS			
Retail—31 day limit 100% after Copay	\$10 Generic \$25 Formulary Brand \$50 Non-Formulary Brand	\$10 Generic \$25 Formulary Brand \$50 Non-Formulary Brand	\$10 Generic \$25 Formulary Brand \$50 Non-Formulary Brand
90dayRx—90 day limit (PrimeMail) 100% after Copay	\$20 Generic \$50 Formulary Brand \$100 Non-Formulary Brand	\$20 Generic \$50 Formulary Brand \$100 Non-Formulary Brand	\$30 Generic \$75 Formulary Brand \$150 Non-Formulary Brand



Life and Accidental Death & Dismemberment Insurance

Insured by The Hartford

Life Insurance

Life insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump sum payment if you die while employed by the City of Eagan. The City of Eagan provides basic life insurance of 1X annual earnings to a maximum of \$50,000 at no cost to you.

Accidental Death and Dismemberment (AD&D) Insurance

Accidental Death and Dismemberment (AD&D) insurance provides payment to you or your beneficiaries if you lose a limb or die in an accident. The City of Eagan provides AD&D coverage of 1X annual earnings to a maximum of \$50,000 at no cost to you. This coverage is in addition to your employer-paid life insurance described above.

Voluntary Life and Accidental Death & Dismemberment Insurance

Insured by The Hartford

As an employee of the City of Eagan, you have the opportunity to purchase Supplemental Life/AD&D insurance on yourself, spouse, and dependent children. During your initial enrollment period upon hire, you may purchase up to the guarantee issue amount of \$250,000 on yourself, \$50,000 on your spouse, and \$20,000 on your dependent children without having to go through the evidence of insurability process. If you elect amounts over the guarantee issue amounts, you will need to complete the Evidence of Insurability (EOI) form and go through medical underwriting for approval.

You can elect Supplemental Life/AD&D insurance:

- Employees: \$10,000 increments up to a maximum of \$500,000
- Spouse: \$5,000 increments up to a maximum of \$250,000 (Not to exceed 100% of EE's Amount)
- Child(ren): \$20,000 flat, life birth to age 26.

Voluntary Life and AD&D Rates:

Employee or Spouse's Age	Employee Monthly Rate per \$1,000
Under 25	\$0.050
25-29	\$0.060
30-34	\$0.080
35-39	\$0.090
40-44	\$0.210
45-49	\$0.230
50-54	\$0.370
55-59	\$0.610
60-64	\$0.750
65-69	\$1.310
70-74	\$2.060
75-79	\$2.060
80+	\$2.060
AD&D Rate	\$0.020

Note: Premium rates increase with age.

Child Term Life and AD&D	
Monthly Cost for \$20,000	
Insures all eligible children - Life Rate	\$0.100
Insures all eligible children - AD&D Rate	\$0.020

Supplemental Life and AD&D Monthly Premium Calculation Example

A 40-year-old employee elects \$80,000 of Supplemental Term Life and AD&D insurance:

Coverage elected	\$80,000
Total number of units	$\$80,000 / 1,000 = 80$
Rate per \$1,000 (age 40)	\$0.14 (from table above)
Rate times # of units	$\$0.14 \times 80 = \11.20
Monthly premium	= \$11.20

Long-Term Disability

Administered by The Hartford

Meeting your basic living expenses can be a real challenge if you become disabled. Your options may be limited to personal savings, spousal income and possibly Social Security. Disability insurance provides protections for your most valuable asset—your ability to earn an income. LTD coverage provides income when you have been disabled for 30 days or more. Monthly benefit is 50% of monthly covered salary up to \$6,250.

FSA

Administered by Wex

The Flexible Spending Accounts enable you to pay for certain out-of-pocket healthcare and dependent day care expenses with tax-free dollars. You can choose to contribute to the Healthcare Spending Account, the Dependent (Day) Care Spending Account, or both through payroll deduction. Participation is voluntary.

When you have a qualified expense, you may use your FSA Debit Card or file for a reimbursement from the appropriate plan by submitting your receipt and claim form. No tax is ever paid on the money deposited or withdrawn from the account(s).

Healthcare Flexible Spending Account

The maximum calendar year contribution is \$3,200. You may use this account to pay for: deductibles, coinsurance, and copayments for medical, dental and vision plans. Prescription drug copayments. Expenses for eye exams, glasses, and contacts. Hearing exams and hearing aids. Orthodontic services not covered by the dental plan benefits. Expenses that exceed medical and/or dental plan limits.

Dependent (Day) Care Spending Account

The maximum calendar year contribution is \$5,000. You may use this plan to pay for: Child or adult day care that complies with state and local requirements. Care for an elderly or disabled dependent who spends at least eight hours each day in your home. Payment to a relative who cares for dependents if the relative is age 19 or older and not your dependent for income tax purposes.

IRS Rules and Tax Considerations

If you are married and file separate income tax returns, you may deposit up \$2,500.

You cannot pay for healthcare expenses with the Dependent (Day) Care Spending Account and vice versa.

Use It or Lose It...

Federal tax laws require that a Section 125 Plan operate on a “use it or lose it” basis. This means that if you do not use the entire amount available for reimbursement under your Healthcare Reimbursement FSA or Dependent Care Reimbursement FSA for a Plan Year, you will forfeit the unused amount and have no further claim to those monies after the Plan Year ends.

Healthcare Spending Limit \$3,200

Dependent Care Spending Limit \$5,000

VEBA

Administered by Wex

VEBA stands for Voluntary Employees' Beneficiary Association. It is a trust that is exempt from tax under the IRS code 501(c)(9). The funds in a VEBA are used to reimburse participants for healthcare expenses. The VEBA is a tax-free medical expense account established by your employer on your behalf when enrolling in qualified high deductible health plan tied to an HRA (High Deductible Plan with VEBA).

The City of Eagan will fund the VEBA plan in the amount of \$1,500 for Employee only coverage and \$3,000 for Employee+Spouse, Employee +Child(ren) and Family coverage in quarterly deposits. The annual contribution, funded quarterly, will be deposited into the employee's account. Expenses incurred up to the employee funded amount will be paid through the VEBA first before you or your dependents would experience any out-of-pocket expense. Money not used in your VEBA in any given year will roll over into the next year's balance or may be used for eligible expenses after you terminate employment or retire. Only your employer can contribute to this account and the funds cannot be transferred to any other account.

Healthcare expenses that are eligible for reimbursement are governed by Section 213(d) of the IRS Code. You may view the listing of covered services if you go to www.irs.gov and look up publication 502 for a listing of all covered services.

ANNUAL CITY OF EAGAN VEBA CONTRIBUTION		
	Total Annual Amount	Quarterly Deposits
Employee only	\$1,500	\$375
Employee + Spouse	\$3,000	\$750
Employee + Children	\$3,000	\$750
Family	\$3,000	\$750

Employee Assistance Program

Administered by LifeWorks

Find out more about all the ways that LifeWorks can help you and your family.

Whether you're coping with stress at work, having trouble with a relationship, or coping with a health issue or a personal problem, LifeWorks is here for you. LifeWorks is a service provided by your organization that offers free, confidential help with personal and work-related issues, 24/7. You can call toll-free to speak with a professional LifeWorks consultant, or you can visit our website to find the help and resources you need. Whether you have a simple question or a complex problem, LifeWorks can help you with almost any issue, including:

LIFE	FAMILY	MONEY	WORK	HEALTH
Stress and overload	Parenting	Budgeting	Time management	Exercise
Addiction and recovery	Caring for seniors	Debt management	Career development	Healthy eating
Relationships	Adoption	Credit and collections	Getting along at work	Managing stress
Depression	Discipline and safety	Saving and investing	Communication	Getting enough sleep
Grief and loss	Teenagers	Basic tax planning	Job stress and burnout	Quitting tobacco
Divorce and separation	Single parenting	Buying a car	Relocation	Heart health
Finding time for you	Blended families	Home buying and renting	Networking	Navigating the health care system

Call anytime at 877-234-5151 or visit www.lifeworks.com (user id: eagan; password: eap).

Para información sobre este programa en español, visite en-línea en www.lifeworks.com (id de usuario: eagan; clave: eap) o llame al 888-732-9020.

Dental Insurance

Administered by HealthPartners

The City of Eagan partners with HealthPartners to provide dental insurance coverage to their full-time employees. Good oral care enhances overall physical health, appearance, and mental well-being. Problems with the teeth and gums are common and easily treated. Keep your teeth healthy and your smile bright by using the dental plan provided by the City of Eagan. All full-time employees are provided the base dental plan with the option to purchase the buy-up dental plan. Below is a brief description of the Base Plan and Buy-up plan.

	Base Option	Buy-Up With Little Partners Benefit
Deductible Per person/per family (calendar year) No deductible for diagnostic and preventive services	No Deductible	\$50/\$150
Calendar Year Plan Maximum Per person	\$1,000	\$1,250
Diagnostic & Preventive Services Exams & cleanings, x-rays, fluoride treatments, space maintainers, sealants	100%	100%
Basic Services Amalgam and anterior restorations (fillings) Posterior composite (white fillings) Simple extractions	No Coverage No Coverage No Coverage	80% 80% 80%
Endodontics (root canal therapy on permanent teeth)	No Coverage	80%
Periodontics Surgical/Nonsurgical periodontics	No Coverage	80%
Oral Surgery Surgical/Nonsurgical extractions, all other oral surgery	No Coverage	80%
Major Restorative, Restorative crowns and onlays	No Coverage	50%
Prosthetic Repairs and Adjustments Denture adjustments and repairs, bridge repair	No Coverage	50%
Prosthetics Dentures (full and partial), bridges	No Coverage	50%
Eligible Dependents	Spouse and dependent children up to age 26.	



Vision Insurance

City of Eagan's vision plan through Avēsis helps you pay for glasses or contact lenses. Review the chart below for the amount you will pay for the vision service listed.

	Vision Plan	
	In Network	Out of Network
Lenses (Once every 12 months)	Single Vision Bifocal Trifocal Lenticular	Up to \$25 Up to \$40 Up to \$50 Up to \$80
Frames (Once every 24 months) (Up to 20% discount above frame allowance)	\$130 allowance	Up to \$45
Contact Lenses (Once every 12 months)	Elective (10% discount on amount exceeding allowance) Medically Necessary Separate Fitting Allowance	Up to \$110 Up to \$250 N/A
	\$130 allowance Covered in full Standard: \$50 allowance Custom: \$75 allowance	



MetLaw Legal Plan (Full time employees only)

Administered by MetLife

Available through MetLife, MetLaw[®], provided by Hyatt Legal Plans, offers convenient and affordable access to a highly qualified network of attorneys for everyday personal legal matters. Once enrolled, you will have access to an attorney as if on retainer.

Key Features

- ⇒ A national network of more than 14,000 pre-qualified attorneys
- ⇒ In-person or over-the-phone counsel for the most common personal legal matters
- ⇒ No deductibles, claim forms, copays, waiting periods
- ⇒ Unlimited access to attorneys for as many legal issues as you have
- ⇒ A voluntary benefit typically paid through payroll deductions of about \$20 per month
- ⇒ All Network Attorney fees are paid by the plan
- ⇒ Out-of-network attorney option

Comprehensive Coverage for more than 60 legal matters including:

- ⇒ Preparation of wills, living wills and trusts
- ⇒ Purchase, sale and refinancing of a residence
- ⇒ Debt collection and foreclosure defense
- ⇒ Identity theft defense
- ⇒ Tenant negotiations

Cost:

Benefit Plan	Monthly
Family	\$19.50

Contact Information

If you have specific questions about a City of Eagan benefit plan, please contact the administrator listed below, or your human resources department.

Benefit	Administrator	Phone	Website/Email
Medical	Blue Cross Blue Shield of MN	651-662-8000	www.bluecrossmn.com
VEBA	Wex	866.451.3399	www.wexinc.com/contact/health
Dental	HealthPartners	952-883-5000	www.healthpartners.com
Vision	Avēsis	800-828-9341	www.avesis.com
Life Insurance	The Hartford	800-523-2233	www.thehartford.com
Long-Term Disability	The Hartford	800-523-2233	www.thehartford.com
Flexible Spending Account	Wex	866.451.3399	www.wexinc.com/contact/health
Employee Assistance Program	LifeWorks	877-234-5151	www.lifeworks.com
MetLife Legal Plan	MetLife	800-821-6400	www.metlife.com
Gallagher	Jessica Nikunen	952.201.2029	Jessica_Nikunen@aig.com
City Contact	Sarah Johnson	651.675.5006	sljohnson@cityofeagan.com

Full Time Employee Contributions for Benefits

Aware National Network	
Benefit Plan	Monthly
MEDICAL/RX - COPAY PLAN	
Employee	\$94.56
Employee + Children	\$550.96
Employee + Spouse	\$577.20
Family	\$654.06
MEDICAL/RX - \$1500 DED / VEBA #1 PLAN	
Employee	-
Employee + Children	\$357.12
Employee + Spouse	\$371.88
Family	\$446.86
MEDICAL/RX - \$1500 DED / VEBA #2 PLAN	
Employee	\$80.86
Employee + Children	\$476.02
Employee + Spouse	\$496.42
Family	\$598.74

Benefit Plan	Monthly
DENTAL RATES (BASE PLAN)	
Employee	-
Employee + Children	-
Employee + Spouse	-
Family	-
DENTAL RATES (BUY-UP W/ Little Partners Benefit)	
Employee	\$16.62
Employee + Children	\$30.98
Employee + Spouse	\$33.08
Family	\$50.14
VISION RATES	
Employee	\$4.38
Employee + Children	\$9.22
Employee + Spouse	\$7.68
Family	\$11.40

***Dependent child coverage: it is the responsibility of all employees who are covering their children to notify Human Resources when a dependent child ages off of a plan. Employees must notify Human Resources within 30 days of the date of the event. Below is a list of benefits and when children are no longer eligible to participate in the City of Eagan's health plans.

Benefit Plan	Eligibility
Medical	Coverage terminates the last day of the month in which the child turns age 26
Dental	Coverage terminates the last day of the month in which the child turns age 26
Voluntary Life	Coverage terminates the last day of the month in which the child turns age 26

Part Time Employee Contributions for Benefits (22.5 - 30 Hours)

Aware National Network	
Benefit Plan	Monthly
MEDICAL/RX - COPAY PLAN	
Employee	\$417.38
Employee + Children	\$941.22
Employee + Spouse	\$985.86
Family	\$1,110.70
MEDICAL/RX - \$1500 DED / VEBA #1 PLAN	
Employee	\$284.18
Employee + Children	\$702.10
Employee + Spouse	\$730.84
Family	\$872.64
MEDICAL/RX - \$1500 DED / VEBA #2 PLAN	
Employee	\$365.02
Employee + Children	\$821.00
Employee + Spouse	\$855.36
Family	\$1,024.52

Benefit Plan	Monthly
DENTAL RATES (BASE PLAN)	
Employee	\$6.38
Employee + Children	\$12.16
Employee + Spouse	\$12.92
Family	\$21.06
DENTAL RATES (BUY-UP W/ Little Partners Benefit)	
Employee	\$23.00
Employee + Children	\$43.14
Employee + Spouse	\$46.00
Family	\$71.20
VISION RATES	
Employee	\$4.38
Employee + Children	\$9.22
Employee + Spouse	\$7.68
Family	\$11.40

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Part Time Employee Contributions for Benefits (17.5 - 22.5 Hours)

Aware National Network	
Benefit Plan	Monthly
MEDICAL/RX - COPAY PLAN	
Employee	\$740.20
Employee + Children	\$1,331.48
Employee + Spouse	\$1,394.50
Family	\$1,567.36
MEDICAL/RX - \$1500 DED / VEBA #1 PLAN	
Employee	\$568.36
Employee + Children	\$1,047.06
Employee + Spouse	\$1,089.78
Family	\$1,298.44
MEDICAL/RX - \$1500 DED / VEBA #2 PLAN	
Employee	\$649.22
Employee + Children	\$1,165.96
Employee + Spouse	\$1,214.32
Family	\$1,450.32

Benefit Plan	Monthly
DENTAL RATES (BASE PLAN)	
Employee	\$12.78
Employee + Children	\$24.32
Employee + Spouse	\$25.86
Family	\$42.14
DENTAL RATES (BUY-UP W/ Little Partners Benefit)	
Employee	\$29.40
Employee + Children	\$55.30
Employee + Spouse	\$58.94
Family	\$92.28
VISION RATES	
Employee	\$4.38
Employee + Children	\$9.22
Employee + Spouse	\$7.68
Family	\$11.40

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Notes



Prepared by:



Gallagher

Insurance | Risk Management | Consulting