



G A R D E N C I T Y

2026 Benefit Guide





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Important Notice

City of Garden City has made every attempt to ensure the accuracy of the information described in this enrollment guide. This guide is not an official plan document and does not provide a complete description of your benefit plans. Any discrepancy between this guide and the insurance contracts, summary plan descriptions (SPDs) or any other legal documents that govern the plans of benefits described in this enrollment guide will be resolved according to those documents. City of Garden City reserves the right to amend or discontinue the benefits described in this enrollment guide in the future, as well as change how eligible employees and City of Garden City share plan costs at any time. This enrollment guide creates neither an employment agreement of any kind nor a guarantee of continued employment with City of Garden City.





Welcome

At the City of Garden City, we appreciate the dedication and hard work you bring every day. Our success is a direct result of the talent and commitment of our employees—and we're proud to have you on our team. That's why we offer a comprehensive and high-quality benefits package designed to provide flexibility, security, and peace of mind for you and your family.

2026 OPEN ENROLLMENT

You have the opportunity to make changes to your health care coverage that will become effective January 1, 2026.

You must participate in Open Enrollment if you wish to do any or all the following:

- Make changes to your medical, dental, or vision coverage for the upcoming plan year
- Contribute to a Health Care Account (FSA)
- Make changes to your income protection benefits

This is a passive enrollment. If you don't enroll in benefits, you may default to the same or comparable coverage that you elected last year. **However, you won't be automatically enrolled in the FSA. You will need to make an election to participate each year.**

Review this guide to choose which benefits are right for you. If after reading this guide you need more information, please contact Human Resources.

ENROLLING IN BENEFITS

There are three opportunities to enroll in or make changes to your benefits:

AS A NEW HIRE

You can enroll in benefits effective the first of the month following 30 days of employment. If you miss this initial enrollment window, your next opportunity to enroll will be the annual open enrollment period.

1

DURING OPEN ENROLLMENT

You can make changes to your benefits each year during the annual open enrollment period (normally held in November) for benefits effective January 1–December 31 of the following year.

2

QUALIFYING LIFE EVENTS

Your 2026 elections will remain in effect throughout the calendar plan year unless you experience a change in status that affects eligibility for benefits or another qualifying life event (in accordance with Internal Revenue Code rules). You must request an election change within 30 days and may need to provide supporting documentation (such as a marriage license or birth certificate).

3



Eligibility

Full-time employees (working a minimum of 30 hours per week) and their eligible dependents can participate in City of Garden City benefits. Eligible dependents include:

- Your legal spouse
- Child(ren) up to age 26
- Child(ren) of any age if you support the child and he or she is incapable of self-support due to mental or physical disability

ENROLLING IN BENEFITS

If you're eligible for City of Garden City benefits, you can enroll by completing the applicable enrollment forms and providing them to human resources. If after reading this guide you have enrollment questions, please contact Human Resources.

Proof of Dependent Eligibility

You may be required to provide proof of eligibility for your dependents. After you enroll, you'll receive all necessary eligibility and documentation requirements. City of Garden City may conduct a dependent eligibility audit at any time. Eligible dependents are defined as a lawful spouse.

"Child(ren)" include but are not limited to, natural child(ren), legally adopted child(ren), child(ren) for whom the employee is a court-appointed legal guardian, foster child(ren, and/or stepchild(ren) who permanently resides with the employee. Benefits for a dependent child(ren) will continue until the last day of the calendar month in which the limiting age is reached.

Qualifying Life Events

Once you enroll in your benefit plan, your elections remain in effect for the remainder of the calendar year. The only exception is if you have a qualifying change in status. Any benefit changes resulting from a Qualifying Life Event must be requested by the employee within 30 days of the event. These qualifying events include:

- Marriage, divorce or legal separation
- Birth, adoption, placement for adoption or custody of a child
- The death of a dependent
- A change in your spouse's employment that affects your benefits eligibility (starting a new job, leaving a job, starting or returning from an unpaid leave of absence or changing from part-time to full-time status, etc.)
- A change in your dependent's eligibility for benefits
- A change in you or your dependent's residence that affects eligibility for coverage
- Receiving a court order, such as a Qualified Medical Child Support Order



Benefit Highlights

At City of Garden City, we truly value the dedication that goes into your work every day. That's why as a City of Garden City employee, we're proud to offer a comprehensive and competitive benefits program designed to meet the diverse needs of our employees and their families.

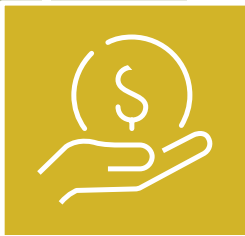
Insurance Carriers:

- Medical HMO and POS – GMA/Anthem of GA
- Dental – Anthem Dental
- Vision – EyeMed
- City of Garden City provides Basic Life with Accidental Death and Dismemberment and Long-Term Disability at no cost to you
- Life and Disability - Mutual of Omaha
- **Voluntary Life, there is a \$10k EE buy-up option for employees only, which is capped at the Gross Income (GI) limit of \$100k** – For example, if an EE has \$50k currently, they can increase to \$60k without Evidence of Insurability (EOI). If someone has \$100k, they cannot increase without EOI
- Health Care Flexible Spending Account – Ameriflex

Important – Medical / Dental Enrollment or Changes:

- If you are enrolling for the first time or making changes such as adding a new dependent to your medical or dental plan, GMA requires each employee that enrolls in medical and or dental provide completed and signed enrollment forms including a SAVE affidavit - along with verified documents as applicable to the members enrolling.
- These documents include a copy of marriage certificates, birth certificates, (or adoption/court orders).
- The affidavit must be signed, dated, and notarized with a copy of the driver's license or other verifiable document.

DOCUMENTS YOU MUST BRING TO ENROLL IN MEDICAL AND DENTAL COVERAGE	
Coverage Level	Documents Required
EE Only	<ul style="list-style-type: none">• Employee – Current ID/Driver's License
Employee + Spouse	<ul style="list-style-type: none">• Employee – Current ID/Driver's License, Marriage Certificate
Employee + Child(ren)	<ul style="list-style-type: none">• Birth Certificate for each child to be covered or Court Child Support Order• Employee – Current ID/Driver's License
Family	<ul style="list-style-type: none">• Marriage Certificate• Birth Certificate for each child to be covered or Court Child Support Order• Employee – Current ID/Driver's License

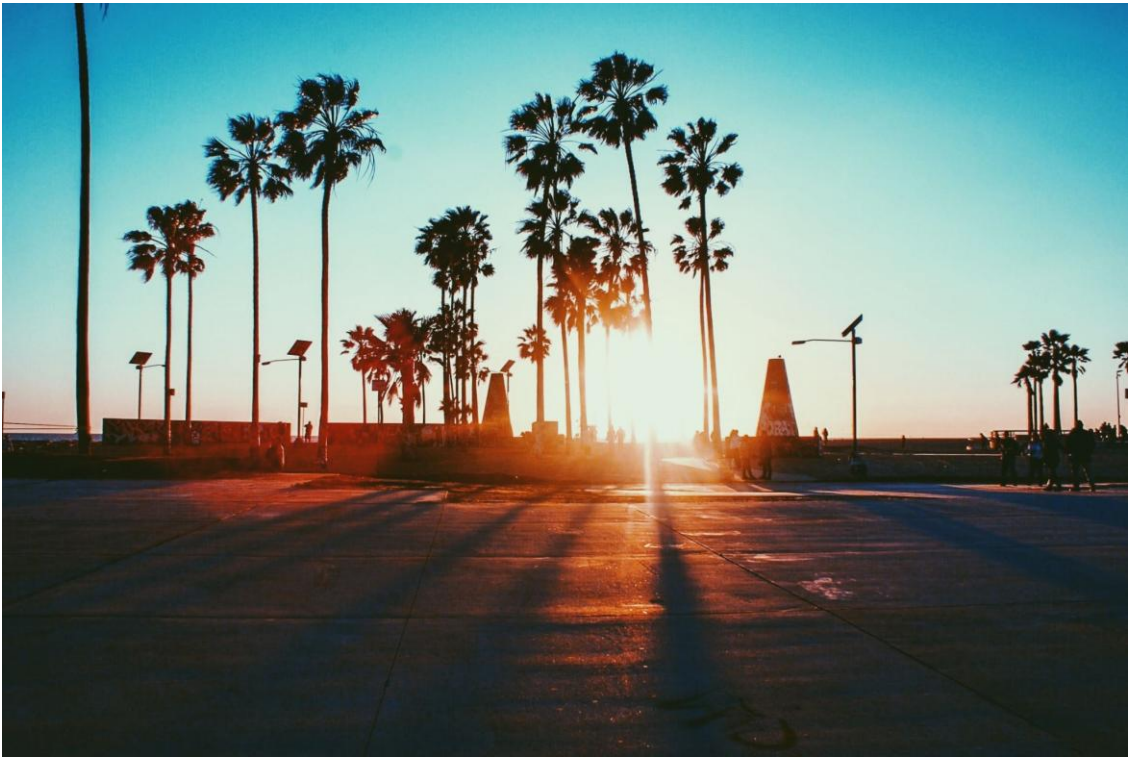


Employee Contributions

The values below indicate how much you're responsible for contributing towards coverage. Amounts are taken directly from your paycheck bi-weekly.

Contribution Summary

Benefit	Employee Only	Employee + Spouse	Employee + Children	Employee + Family
GMA Anthem HMO	\$0.00	\$74.88	\$59.49	\$164.77
GMA Anthem POS	\$9.65	\$148.26	\$97.09	\$259.25
Anthem Dental	\$5.08	\$10.47	\$11.62	\$17.00
EyeMed Vision	\$2.84	\$5.40	\$5.68	\$8.34
Supplemental Life	See page 18			





Medical Plan Options

You have the choice of several quality and comprehensive medical plans through Anthem. When choosing your plan, consider your budget, any planned procedures and other potential healthcare needs.

Each plan offers in and out-of-network coverage, but you will pay less for services when you use in-network providers. To find an in-network provider visit www.anthem.com and click on “Find Care”.

Medical Plans Summary

Key Features	HMO 90% \$250 Deductible Plan	POS 80/60 \$500 Deductible Plan	
	In-Network	In-Network	Out-of-Network
Calendar Year Deductible Individual / Family	\$250/\$750	\$500/\$1,500	\$1,000/\$3,000
Out-of-Pocket Maximum (includes deductible) Individual / Family	\$1,500/\$3,000	\$3,000/\$6,000	\$5,500/\$11,000
Lifetime Maximum	No Limit	No Limit	
Coinsurance (portion you pay)	10%	20%	40%
Preventive Care	Covered 100%	Covered 100%	40%, after deductible
Physician Services Office Visit / Specialist Visit	\$20/\$30	\$30/\$40	40%, after deductible
Urgent Care Copay	\$60	\$60	
Emergency Room Copay (waived if admitted)	\$200	\$200	
Inpatient Hospital (per admission)	10%, after deductible	20%, after deductible	40%, after deductible
Lab and X-Ray Services	20%, after deductible	20%, after deductible	40%, after deductible



The information above is a summary of coverage only. For more information, scan the QR code with the camera on your smart device, visit www.anthem.com.





Prescription Drug Benefits

Medical plan options include prescription drug coverage from Aetna.

Key Features	HMO 90% \$250 Deductible Plan	POS 80/60 \$500 Deductible Plan	
	In-Network	In-Network	Out-of-Network
Calendar Year Prescription Drug Out-of-Pocket Maximum Individual / Family	\$4,450/\$8,900	\$1,600/\$3,200	\$3,200/\$6,400
Retail Prescriptions (30-day supply)			
Generic	\$10	\$10	\$10 + cost difference
Preferred Brand	\$35	\$35	\$35 + cost difference
Non-preferred Brand	\$60	\$60	\$60 + cost difference
Mail-Order Prescriptions (90-day supply)			
Generic	\$20	\$20	N/A
Preferred Brand	\$70	\$70	
Non-preferred Brand	\$120	\$120	

Ways to Save on Your Prescriptions

There are many ways to save on prescriptions! Keep these in mind the next time your provider prescribes a new medication.



Order by Mail

For maintenance medications, you can save time and money by using a mail-order service. Instead of a 30-day supply, you can have a 90-day supply shipped directly to you.



Compare Pharmacies

Less expensive prescriptions may be offered by some pharmacies, such as those at warehouse clubs or discount stores. Call ahead to determine which pharmacy has the most competitive price.



Check Over-The-Counter Options

Over-the-counter drugs can be an inexpensive alternative for some common ailments. Ask your pharmacist if they have any suggestions for options that serve the same purpose for less.



Aetna Pharmacy Benefit Program

Your Aetna Pharmacy / Prescription Benefits

Pharmacy benefits are administered by Aetna Pharmacy Services. You can obtain information on Plan benefits, refill mail order prescriptions online, locate a participating pharmacy, and access drug information by visiting the Aetna website at www.aetna.com. **Basic Control Formulary w/ACSF.**

Pharmacy Benefit Program

All prescription drugs for the Aetna Pharmacy Benefits are divided into tier groups. Generic, Brand Preferred, and Brand Non-Preferred. The group your prescription falls into will determine your co-payment. Generic substitutions are available for many brand-name drugs. You have the power to choose generic vs. brand.

Mail Order Prescriptions - How to get started

1. Call us or go online. Call us at 888-792-3862, or you can log in to your member website www.aetna.com.
2. Request home delivery. By phone or online — you can also print out an order form to send to us.
3. Get refills your way. It's easy to reorder online, by phone or by mail.

What will I pay?

Depending on your plan, you may pay less for medicine you get through home delivery than at a retail pharmacy. To know for sure, just check your plan details.

Know the cost of your medicine *ahead of time*

How? Log in to your member website at www.aetna.com. Select Manage Prescriptions, then click on "Pharmacy Coverage and Costs." Choose "Estimate drug costs" to see what you'll pay and get the most value from your plan.

You can also do a lot more on your member website, like find a network pharmacy, check on your order or even ask a pharmacist a question.

Quick without the hassle

Get your regular medicines through CVS Caremark Mail Service Pharmacy.





How to Find a Doctor

Looking for a doctor?

Here's all you need to do to find a doctor near you:



Go to [Anthem.com/Find Care](https://Anthem.com/FindCare)



You can look for a doctor by using either:

Search as a member: Log in with a username and password or with the member number on your ID card.

Search as a guest: Select a plan or network, or search by all plans and networks, to get started



Once you log in, select the Find Care option on the welcome menu. The network is – **Blue Open Access**

Next, choose who you'd like to see. You can search for a doctor nearby or use the doctor's name



Select a provider to get details, like:
Specialties- Gender-
Training- Languages -
spoken or Phone number





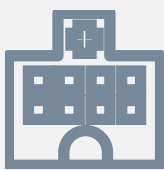

Download the Sydney App or Anthem Anywhere App to get started

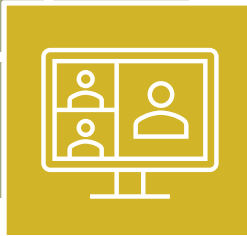


Where to Go for Care

With so many options for care, how do you know which is best for the flu, a broken bone or physical exam?

Depending upon where you receive medical attention, the cost can vary immensely. Here's a general guideline that can help you save on health care expenses and your time.

Location of Care	Cost	Common Conditions	Time Investment
TELEMEDICINE 	\$	<ul style="list-style-type: none"> • Cough/cold/sinus/flu • Earaches/stomach pain/diarrhea • Rashes/allergies/insect bites • Urinary tract infections • Pink eye 	<p>Appointments typically available within an hour</p> <p>No need to leave home</p>
PRIMARY CARE PHYSICIAN OR RETAIL CLINIC 	\$\$	<ul style="list-style-type: none"> • Checkups • Preventive services • Vaccinations and screenings • General health management • Sick visits for minor conditions 	<p>Usually need appointment</p> <p>Short wait times</p>
URGENT CARE 	\$\$\$	<ul style="list-style-type: none"> • Severe Fever and flu symptoms • Sprains and strains • Stitches • Minor burns • Minor infections • Minor broken bones 	<p>No appointment needed</p> <p>Typically, have extended hours</p>
EMERGENCY ROOM 	\$\$\$\$	<ul style="list-style-type: none"> • Chest pain • Heavy bleeding • Large open wounds • Spinal or head injuries • Major broken bones • Severe cuts/burns • Numbness or weakness • Sudden vision change 	<p>Open 24/7</p> <p>No appointment needed</p> <p>Wait times can be up to several hours.</p>



LiveHealth Online

LiveHealth

With LiveHealth, you get Immediate 24/7 access to board certified doctors. Secure and private video chats. Prescriptions that can be sent to your pharmacy.

Medical Chats/Virtual Visits LiveHealth Online or K Health, through their affiliated Provider Groups, or download the Sydney App – No charge.

Online Customer Support

For additional information, please contact LiveHealth Online Support (855) 603-7985 or visit their website at <https://www.livehealthonline.com/availability>.

Virtual Care

Use Sydney Health App to keep track of your health and benefits – all in one place. With a few taps, you can quickly access your plan details, member Services, virtual care, and wellness resources. Sydney Health stays one step ahead – moving your health forward by building a world of wellness around you.

Download the Sydney App today! Or register at www.anthem.com/register. No appointment required.



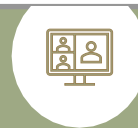
What can virtual doctors treat?

Colds, sore throats
Headaches, mild fevers
UIT's , back pain, and more!



Your virtual doctor can also:

Prescribe certain medications
Recommend Specialists
Order lab tests
Tell you if it's time to seek care
in person



Help is available 24/7

Fast doctor visits through your
phone, tablet, or computer –
no appointments or waiting
rooms.



Affordable care option

Virtual visits cost significantly
less than a trip to the
emergency room



Reliable care you can trust

Manage your urgent care
needs and receive expert
advise, treatment plans, and
prescriptions.



Sydney App

Download the Sydney Health
App and use it for a virtual visit
with a doctor 24/7, video call,
text, or chat.



Anthem Lark Diabetes Program

Anthem Lark Diabetes Prevention Program

The Lark Diabetes Prevention Program (DPP) is a smartphone-app that is fully recognized by the Centers for Disease Control and Prevention (CDC).

The program provides 24/7 education and personalized coaching to prevent onset of type 2 diabetes.

What is a Diabetes Prevention Program (DPP)?

A diabetes prevention program uses guidelines from the CDC to teach you about prediabetes and help you make small lifestyle changes that can significantly reduce your chance of developing type 2 diabetes or other health issues. Go to: www.lark.com/anthem or download the **Sydney Mobile App** and take a one-minute survey to see if you could benefit from Lark's diabetes prevention program.

What is Included in the Lark

- The CDC's 26-week Prevent T2 educational program
- Weight coaching facility by a connect scale
- Personalized guidance on sleep and physical activity
- Behavioral health screening, coaching, and escalation to appropriate care resources

Programs Designed for the Individual

Lark personalizes your experience, giving you specific tips and daily education on areas that matter most to you.

- Diabetes Prevention
- Diabetes Care
- Hypertension Care
- Prevention & Wellness

Choose a Goal that Works for You





Dental Benefits

The Anthem Dental Plan is designed to keep you smiling year after year. To find a dentist by name or location, go to [anthem.com](https://www.anthem.com) or call dental customer service at the number listed on the back of your ID card.

Plan	Plan Features
Anthem Dental	<ul style="list-style-type: none">• Ask a Hygienist: Have a dental question? Simply email our team of licensed dental professionals and receive a personalized response within approximately 24 hours.• Dental Health Risk Assessment: Gain insight into your oral health and understand your risk factors for tooth decay, gum disease, and oral cancer. This easy-to-use online tool helps you take proactive steps toward better dental wellness.• Dental Care Cost Estimator: Curious about the cost of dental procedures? Use our web-based estimator to get accurate pricing for common treatments when visiting a network dentist.• Find Care Tool: Available on the Sydney Health app and anthem.com, this tool helps you locate dental providers and access the services you need.• Virtual Dental Visits: Need dental care on the go or have an urgent issue? Schedule a virtual visit with The TeleDentists — same cost as an in-office appointment. Book online at teledentists.com/anthem.

Dental Plan Summary

Key Features	Anthem Dental Complete Network	
	In-Network	Out-of-Network
Calendar Year Deductible (Individual / Family)	\$50/\$150	\$50/\$150
Preventive Services (no deductible)	100%	100%
Basic Services	80%	80%
Major Services	50%	50%
Orthodontics (adults and children)	50%	50%
Orthodontics Lifetime Maximum	\$1,000	\$1,000
Annual Calendar Year Maximum	\$1,500	\$1,500



The information above is a summary of coverage only. For more information, scan the QR code with the camera on your smart device, visit www.anthem.com or call 844-729-1565





Vision Benefits

You and your eligible dependents have access to comprehensive vision coverage through EyeMed. The plan provides benefits for both in-network and out-of-network services. When you choose an in-network provider, EyeMed covers eligible expenses at a higher benefit level. If you opt for an out-of-network provider, you'll need to pay the full cost upfront and submit a claim for partial reimbursement.

Vision Plan Summary

Key Features	In-Network	Out-of-Network	Frequency
Exam	\$20 copay	Up to \$30	Once every 12 months
Lenses	\$20 copay	\$25 - \$60	Once every 12 months
Frames	\$0 copay; \$130 allowance 20% off balance over \$130	Up to \$65	Once every 24 months
Contact Lenses (instead of glasses)	Elective: Up to \$130 allowance 15% off balance over \$130 Medically Necessary: Covered 100%	Up to \$104 Up to \$200	Once every 12 months in lieu of glasses

To locate a participating provider, please visit www.eyemedvisioncare.com. Network: **Select**

- Lenscrafters
- Pearle Vision
- Eyeglass World
- America's Best
- MyEyeDr
- Walmart Vision Center
- Target Optical & more!



The information above is a summary of coverage only. For more information, scan the QR code with the camera on your smart device, visit www.eyemed.com.





Flexible Spending Account (FSA)

Flexible Spending Accounts (FSAs) allow you to save money from your paycheck to pay Health Care and Dependent Care expenses with tax-free dollars. When you contribute to FSAs, your pre-tax contributions reduce your taxable income. The Flexible Spending Account is offered through Ameriflex.

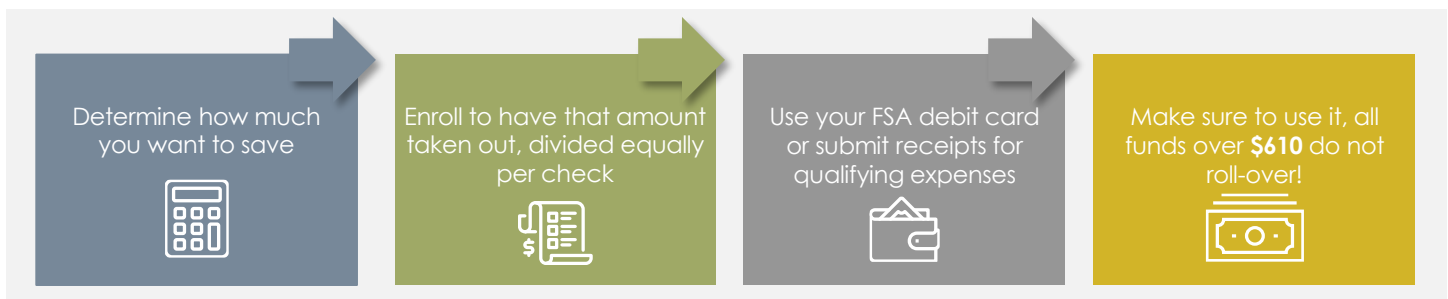
Account	What it can be used for:	Most you can contribute in 2026:
Health Care FSA	To pay medical, dental, vision, and hearing expenses not covered by your health care plans, such as deductibles, coinsurance and copayments. NOTE: If you contribute to an HSA, you cannot participate in the Health Care FSA.	\$3,050

Healthcare FSA

The Healthcare FSA lets you set aside up to \$3,050, from your paycheck for eligible medical, dental and vision expenses. Use-It or Lose-It – **if your plan has a carry over feature, any funds over \$610 will be lost at the end of the plan year.**

How the FSA Works:

- Before enrolling, it's important to estimate your 2026 health care expenses carefully. FSA contributions are deducted from your paycheck on a **pretax basis** in equal amounts throughout the year, and your **entire account balance is available starting January 1.**
- If you enroll in the Health Care FSA, you'll receive a **debit card** to conveniently pay for eligible health care expenses at the point of service. Alternatively, you can pay out-of-pocket and submit a claim for reimbursement online or by mail.
- **Important:** Unused FSA funds are forfeited, so plan your contributions wisely.
- **Run-Out Period:** You have until **March 31, 2026**, to submit claims for reimbursement from your 2025 FSA.
- For a complete list of eligible expenses, visit www.flex125.com or call **888-868-3539**.





Life Insurance

Basic Life and AD&D

As a City of Garden City employee, you are automatically enrolled in Basic Life and Accidental Death & Dismemberment (AD&D) insurance—at no cost to you. Your coverage amount is equal to your annual salary.

In the event of an accidental death, an additional AD&D benefit is paid. If you suffer the loss of a limb or eyesight due to an accident, the AD&D plan provides a percentage of the benefit amount based on the severity of the loss.

Basic Life and AD&D Plan	
Carrier Name	Mutual of Omaha
Life Benefit Amount	Your annual salary amount
AD&D Benefit Amount	Your annual salary amount
Portability Option	Included
Conversion Option	Included
Living Benefit Rider / Accelerated Death Benefit (Terminal Illness)	Included
Age Reduction Schedule (% of benefit offered)	Age 65 – 65% Age 70 – 50%

Portability Option

A feature that allows the employee to continue the policy at group rates that are generally lower than an individual policy. For example, after termination of employment, the employee may take the contract with him/her and be billed directly for any premiums due. This allows the employee to retain the term life insurance coverage, even though he/she is no longer a part of the group. Please refer to the policy specifications and/or the contract for specific information on requirements, eligibility, and continuation rates.

Conversion Option

A group life insurance provision that allows an employee whose coverage terminates for specified reasons to convert his/her group coverage to an individual whole life insurance policy without presenting evidence of insurability.

Living Benefit Rider / Accelerated Death Benefit

If you become chronically or terminally ill, a percentage of your life insurance benefit will be paid to you to offset expenses.

To initiate any one of these provisions, you must contact the City's Human Resources Director.

** If your Basic Life and AD&D insurance coverage exceeds \$50,000, you will be responsible for an imputed tax, in accordance with IRS requirements. This appears on your paycheck under the Taxable Benefit section as Group Term Life and is not a deduction, it is a tax calculation.*



Life Insurance

Supplemental Life and AD&D

You have the option to supplement your company-paid coverage by purchasing additional Life and AD&D insurance for yourself, your spouse and your children. You are required to purchase coverage for yourself in order to enroll your family members. You pay the full cost of this coverage on an after-tax basis. The cost varies depending on your age and the amount of coverage you choose. The plans are with Mutual of Omaha.

Voluntary Life	Employee	Spouse	Children
Benefit Amount	Amounts of \$10,000 up to 5 times your annual salary.	Amounts of \$5,000 not to exceed 100% of employee election	100% of employee's benefit up to \$10,000
Guaranteed Issue Amount	5 times your annual salary, up to \$100,000	100% of employee	100% of employee's benefit

Monthly Rate Table			
Employee		Spouse	
Age	Rate per \$1,000	Age	Rate per \$1,000
0-29	\$0.091	0-24	\$0.078
30-34	\$0.091	25-29	\$0.088
35-39	\$0.157	30-34	\$0.112
40-44	\$0.216	35-39	\$0.162
45-49	\$0.344	40-44	\$0.232
50-54	\$0.528	45-49	\$0.362
55-59	\$0.863	50-54	\$0.562
60-64	\$1.377	55-59	\$0.862
65-69	\$2.417	60-64	\$1.474
70-74	\$4.361	65-69	\$2.518
75+	\$8.833	Terms	Terms
AD&D	\$0.075	AD&D	\$0.080
Child Life Rate	\$0.130	Child AD&D Rate	\$0.040

Monthly Employee Rate

Example: 35-year-old elects \$100,000 life coverage.
 $\$100,000 \times \$0.157 \text{ (rate)} = \$15.70$ monthly rate
 AD&D coverage
 $\$100,000 \times 0.075 \text{ (rate)} = \7.50 monthly rate

Please note: Evidence of insurability may be required if you enroll after your initial eligibility period or if you elect amounts over the policy's Guarantee Issue amount.

Open Enrollment Buy-up Option – (Employee only), may purchase 10k during open enrollment, which is capped at the Gross Income (GI) limit of \$100k. Example – EE has \$50k currently, can increase to \$60k without an EOI.



Income Protection Benefits

Voluntary Short-Term Disability

City of Garden City offers you the opportunity to purchase voluntary short term disability coverage at group rates through payroll deduction. Voluntary short term disability insurance helps replace lost income due to a disabling injury or illness. The plan is offered through Mutual of Omaha.

If you enroll in the plan after your initial eligibility, coverage is subject to review of evidence of insurability (EOI) by the insurance carrier.

Since you pay 100% of the voluntary short term disability premium, your short-term disability benefit payment will not have taxes deducted.

Plan	Short Term Disability – Plan A	Short Term Disability – Plan B
Benefit	60% of your weekly income	60% of your weekly income
Maximum Weekly Benefit	\$1,000	\$1,000
Maximum Benefit Period	Up to 12 weeks	Up to 9 weeks
Benefit Begin Accident and Illness	After 7 days	After 29 days
Pre-Existing Condition Limitation	3/6 months	3/6 months

Monthly Premium Calculation

Example: 35-year-old making \$40,000 per year – **Plan A**
 $\$40,000 / 52 = \$769.23/\text{weekly earnings}$
 $\$769.23 \times 60\% = \$461.53/\text{weekly benefit maximum}$
 $\$461.53 / \$10 \times 0.70 = \$32.31/\text{monthly premium}$

Example: 35-year-old making \$40,000 per year – **Plan B**
 $\$40,000 / 52 = \$769.23/\text{weekly earnings}$
 $\$769.23 \times 60\% = \$461.53/\text{weekly benefit maximum}$
 $\$461.53 / \$10 \times 0.33 = \$15.23/\text{monthly premium}$

Age Band	Monthly Rate – Plan A
<19	\$0.74
20-24	\$0.74
25-29	\$0.79
30-34	\$0.76
35-39	\$0.70
40-44	\$0.88
45-49	\$0.87
50-54	\$1.07
55-59	\$1.41
60-64	\$1.74
65-69	\$1.85
70-99	\$1.85

Age Band	Monthly Rate – Plan B
<19	\$0.29
20-24	\$0.29
25-29	\$0.34
30-34	\$0.32
35-39	\$0.33
40-44	\$0.39
45-49	\$0.44
50-54	\$0.58
55-59	\$0.69
60-64	\$0.81
65-69	\$0.83
70-99	\$0.83



Income Protection Benefits

Long Term Disability

City of Garden City provides at no cost to the employee a long-term disability benefit. Long term disability helps replace income when you are prevented from working for an extensive period of time due to disabling illness or injury. The Plan is provided through Mutual of Omaha.

Long Term Disability Plan	
Benefit	60% of your monthly income
Minimum Monthly Benefit	\$100
Maximum Monthly Benefit	\$5,000
Maximum Benefit Period	Social Security Normal Retirement Age
Elimination Period	90 Days
BENEFIT LIMITATIONS	
Own Occupation	24 Months
Pre-Existing Condition	3/12 Months

Pre-Existing Condition Limitation

- The plan doesn't pay a long-term disability benefit for an illness, injury or pregnancy for which you received medical care or treatment, including prescription drugs, during the 90 days leading up to your coverage effective date.
- Eligibility for coverage for a disability related to this illness, injury or pregnancy begins once you've been covered under the plan for 12 consecutive calendar months and have been actively at work.

Elimination Period

The elimination period is 90 days. Once this amount of time has elapsed, benefits are paid at 60% of the basic monthly income up to a maximum of \$5,000, up to age SSNRA.

Own Occupation

The inability to perform the material and substantial duties of your regular occupation. The insurance company will consider your occupation to be the occupation you are engaged in at the time you become disabled. They will pay the claim even if you are working in some other capacity.

Taxes will be deducted from your long-term disability benefit payment



Benefit FAQ's

What is a Deductible?

A **deductible** is the amount you pay **out-of-pocket** for covered healthcare services before your insurance starts to pay.

Example: If your deductible is **\$500**, you must pay the first \$500 of covered services yourself.

What is Coinsurance?

Coinsurance is your share of the costs of a covered service **after** you've met your deductible.

Example: If your plan has 20% coinsurance, you pay 20% of the cost and your insurer pays 80%.

What is an out-of-pocket maximum?

This is the **most** you'll pay in a year for covered services. After reaching it, your insurance pays **100%** of covered costs.

What's Included in the Out-of-Pocket Maximum?

- **Deductibles**
- **Coinsurance**
- **Copays**
- **Prescription drug costs**

How can I track my deductible and coinsurance payments?

- You can monitor your spending through:
- Your insurance provider's **online portal**
- **Explanation of Benefits (EOB)** statements
- Customer service or mobile apps

Can I receive STD and Workers' Compensation at the same time?

STD typically covers **non-work-related injuries or illnesses**, while Worker's Comp is for **work-related incidents**. Most STD policies exclude coverage for work-related conditions.

Long-Term Disability (LTD) Coordination:

Can I receive LTD and Workers' Compensation at the same time? Yes, but LTD benefits are usually **reduced** by the amount received from Worker Comp. This ensures the total income doesn't exceed pre-disability earnings

Are LTD benefits taxable?

Employer-paid – LTD benefits are usually **taxable**.



Additional Benefits

Employee Assistance Program (EAP)

The Employee Assistance Program (EAP) is through Mutual of Omaha is a company paid benefit. The Employee Assistance Program (EAP) provides you the opportunity to speak to a professional counselor confidentially about any type of personal concern that may be affecting your work or personal life. Concerns such as caring for elderly parents, managing work and family, drug and alcohol abuse, legal and financial concerns, stress, and depression can have an impact on all of us.

To reach a professional counselor, simply call 800-316-2796. An EAP representative will get some background information from you and arrange for a counselor to talk to you in depth. You have access to unlimited telephone consultation and **three face-to-face visits**.

Your confidentiality is protected under Federal and State laws. You may also browse for information yourself by accessing the EAP website at www.mutualofomaha.com.

The website includes the ability to search for information on topics such as emotional well-being, mental health, communication, and workplace issues.

Reasons to Call Your EAP

The EAP is here for you and your family

Family matters

Stress

Relationships

Grief and loss

Substance Abuse

Call anytime, 24/7, for expert guidance and support that's free and confidential. 800-316-2796





Retirement Plan Features

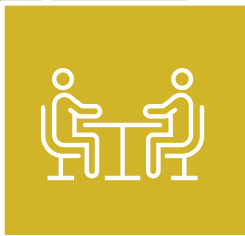
City of Garden City Retirement Plan

After years of devotion to service with City of Garden City, our employees shouldn't have to worry about what happens when they retire, and our employees should not have to depend solely on Social Security Retirement Benefits. That's where the Garden City Retirement (Pension) Plan steps in. This is a defined benefit plan also referred to as a "pension plan" which is administered by the Georgia Municipal Employee Benefit System (GMEBS). Created in 1965, GMEBS offers customized retirement coverage for more than 280 local government entities. Learn more about our retirement benefits and plan options.

Plan Features

PARTICIPATION	Mandatory
ELIGIBILITY REQUIREMENTS	Employee regularly scheduled to work a minimum of 30 hours per week on a continuous basis.
VESTING	Employees: 5-year vesting
NORMAL RETIREMENT AGE	Employees: Age 65+5 or greater years of service; Age 55+20 years of service
EARLY RETIREMENT	Age 55+10 years of service
PARTICIPANT CONTRIBUTIONS	2.50% (Mandatory)
DEATH BENEFITS	In-service death benefit
DISABILITY BENEFIT	20% Minimum





457/401 Retirement Plan



The City has a Defined Contribution Plan for employees to invest money!

The 457 Plan is for employee contributions. You can contribute up to the IRS allowable annual amounts into your 457. You always own all contributions (and the gains realized from those contributions) you make to your 457.

The 401 is the Employer Plan into which the City makes matching contributions based on your contribution. The City currently matches 50% of your total contribution up to 6% of your income. In other words, if you contribute 3% of your annual income - the City matches 1.5% or if you contribute 6% or your annual income the City matching contribution is 3% of your income. Any amount you contribute over 6% the City match is held to a max of 3%.

Mission Square Retirement is available at different times through out the year to assist or to change enrollment into the 457/401a plan. Contact HR for enrollment forms or to change pre-tax contribution amounts or percentages. Employees may also call or email Mission Square Retirement for direction on choosing funds for investment contributions. Contact info:

Mission Square Retirement

Jack Fessler

Phone: 205-759-7186

Email: jefessler@missionsq.org

www.mission.org

All enrollment forms are to be turned into HR. Once enrolled, go online to www.icmarc.org and register to view account activity or download the ICMA-RC App. Employees are vested in the 401 Employer Plan (City match) upon completion of 4 years of service – beginning with date of hire for City of Garden City!

The Vesting Schedule:

0%	1 Year of Service
50%	2nd Year of Service
75%	3rd Year of Service
100%	4th Year of Service

Once enrolled, employees can start, stop, increase, or decrease contributions at anytime by contacting HR. Participation in this retirement plan is totally voluntary.



Value Added Service

My Benefit Advisor

Choosing the right plan

Everybody has different health needs. There's no such thing as one-size fits-all Medicare coverage.

My Benefit Advisor offers you access to a range of Medicare coverage solutions – including options that combine health and prescription drug coverage into one plan. They will also support your transition from employer coverage to Medicare.

Coverage centered around you

When you're ready to look at your options, My Benefit Advisor can help you find Medicare coverage designed to help you live healthier – and keep enjoying the life you love. Many of today's coverage options include benefits such as:

- Health coaching
- Wellness programs
- Fitness memberships at no additional cost

When you're ready for Medicare, just call

203-634-2812

john.foxx@mybenefitadvisor.com





Key Contacts

For Questions About	Carrier	Phone Number	Email/Website
Medical	Anthem/GMA	855-397-9267	www.anthem.com
Pharmacy	Aetna	888-792-3862	www.aetna.com
LiveHealth Online	Anthem	855-603-7985	www.livehealth.com
Dental	Anthem	844-729-1565	www.anthem.com
Vision	EyeMed	866-939-3633	www.eyemedvisioncare.com
Flexible Spending Account (FSA)	Ameriflex Benefit Solutions	888-868-3539	www.flex125.com
Life and AD&D Insurance	Mutual of Omaha	800-775-8805	www.mutualofomaha.com
Short-Term Disability (STD)	Mutual of Omaha	800-877-5176	www.mutualofomaha.com
Long-Term Disability (LTD)	Mutual of Omaha	800-877-5176	www.mutualofomaha.com
Employee Assistance Program (EAP)	Mutual of Omaha	800-316-2796	www.mutualofomaha.com
Retirement Plan	Mission Square Retirement Jack Fessler	202-759-7186	jefessler@missionsq.org
Medicare	My Benefit Advisor	203-634-2812	john.foxx@mybenefitadvisor.com
Tina Campbell Sr. Client Manager	EPIC	404-797-9545	tina.campbell@epicbrokers.com



Notes



G A R D E N C I T Y

Prepared By



Insurance Brokers &
Consultants