

2024 Benefits Guide

Health and wellness benefits for you and your family.

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WELCOME TO ANNUAL ENROLLMENT!

The City of Mission is committed to providing you and your family access to competitive benefits at an affordable cost. Please take time to review this summary.

Open Enrollment is your one opportunity each year to make changes to your benefit elections. Elections made during Open Enrollment become effective January 1, 2024, and remain in place throughout 2024, unless you experience a qualifying event that allows you to make changes midyear. Examples of qualifying events are marriage, divorce, and birth or adoption of a child. You have 30 days from the date of the qualifying event to make changes to your benefit elections. Changes must be consistent with the qualifying event.

If you experience a qualifying event, please contact Kathy Stratman at 913.676.8354 or kstratman@missionks.org to discuss your options.

Basic Terms and Definitions

Below you will find some medical insurance terms and basic claim examples to help you understand how our plans work.

A network is comprised of contracted providers. An insurance carrier requests that providers participate in its network, and in return, the providers agree to offer discounted services to their patients. If you pick an out-of-network provider, your claims could cost more because you will not receive the discounts that an in-network provider offers.

Please note: In 2024, Blue Cross Blue Shield will continue to administer our comprehensive medical plans. Blue KC's network offers exceptional access to in-network providers and deep discounts on services, resulting in lower costs for our employees and our plan. It is highly recommended that you verify that all associated providers are participating in the network. This includes not only your doctor but also anesthesiologists, lab facilities, etc. This helps you avoid incurring any unexpected out-ofnetwork charges and ensures cost-effective use of your health plan.

PREVENTIVE CARE Routine healthcare services can minimize the risk of certain illnesses or chronic conditions. Examples of preventive care services include but are not limited to physicals, mammograms, flu vaccines, prostate tests, and smoking cessation. As a reminder, regardless of which plan you enroll in, preventive care services will continue to be covered at 100% when you visit an in-network provider.

IN-NETWORK VERSUS OUT-OF-NETWORK DEDUCTIBLE A deductible is the amount you owe for covered healthcare services before your plan begins to pay benefits. For example, if the deductible is \$2,800, your plan won't pay anything until you've paid the first \$2,800 of the bill for your covered healthcare services that are subject to the deductible. Preventive care is not subject to the deductible because it is covered 100% in-network by all three medical plan options.

> EMBEDDED DEDUCTIBLE An embedded deductible is a system that combines individual and family deductibles in a family health insurance policy. If you are enrolled in the family tier of the medical plan, the plan will contain two deductible components: an individual deductible and a family deductible. An individual in the family plan can meet the individual embedded deductible, and Blue KC will cover that individual's medical bills prior to the aggregate family deductible being met. The individual deductible is embedded in the family deductible. One person in the family will never exceed more than the individual deductible or the individual out-of-pocket maximum.

COINSURANCE Coinsurance is your share of the costs of a covered healthcare service, calculated as a percentage (for example, 10%) of the allowed amount for the service. Your coinsurance will begin after you have met your

deductible. For example, if the charge for an X-ray is \$1,000 and you have met your deductible, your coinsurance payment of 10% would be \$100. Your health insurance pays the rest of the allowed amount. You will often see coinsurance displayed as a percentage of what the plan will pay. For example, 90% means that the plan is paying 90% and the employee picks up the remaining 10%.

COPAY A copay is a fixed dollar amount that you pay for a healthcare service. The amount can vary by the type of service. Your copays do not count toward your deductible but will count toward your out-of-pocket maximum.

OUT-OF-POCKET MAXIMUM The out-of-

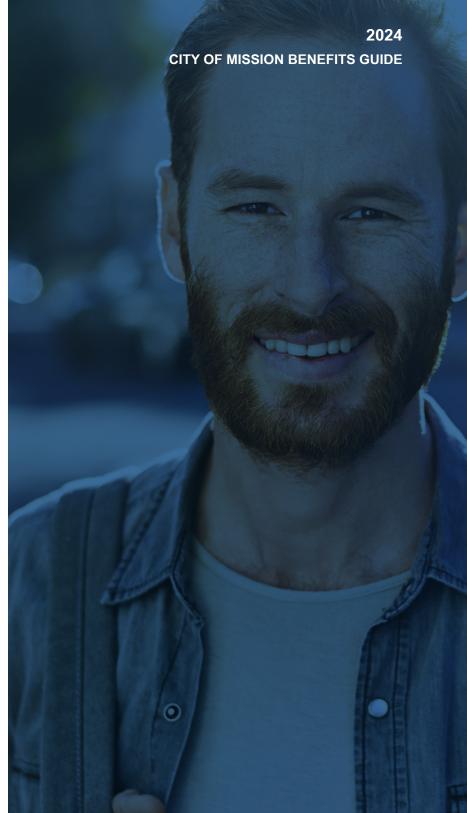
pocket maximum is designed to protect you in the event of a catastrophic illness or injury. Your out-of-pocket maximum includes your deductible, coinsurance and copays that you pay for out of your own pocket. After you have paid the specified out-of-pocket amount during a policy year, Blue KC pays the remaining covered services at 100%.

EXPLANATION OF BENEFITS (EOB) The

EOB is a statement from the insurance company showing how a claim was processed. It tells you what portion of the claim was paid to the doctor or hospital and what portion of the payment, if any, you are responsible for paying. Remember to hold on to these documents!

2024 Benefits Summary

- Medical/Prescription coverage will continue to be with Blue Cross Blue Shield of Kansas City.
- Dental plan—Delta Dental of Kansas will continue to administer the dental plan.
- Vision plan continues with EyeMed with no changes to the plan design. The City will continue to pay the cost of this benefit.
- Life and Disability—The Standard will continue to administer these plans.
- Flexible Spending Account will continue to be administered by BASIC.
- AFLAC will continue to offer voluntary programs for you and your family.
- Voluntary Retirement plans will continue to be offered through Empower, The Principal, or MissionSquare Retirement.
- Spouse and Child Optional Group Term Life will be offered through KPERS.
- The City of Mission Wellness Program will continue through 2024.



Medical and Prescription Drug

The City is committed to offering comprehensive health insurance to our employees and their families. We are pleased to announce that in 2024 the City of Mission will continue its partnership with Blue Cross Blue Shield of Kansas City (Blue KC). We are excited to announce that the renewal for 2024 resulted in no increase to employee premiums. There will be a formulary change to the prescription drug coverage. City of Mission is moving from Optum's preferred formulary to the premium formulary in 2024. Optum will

send a letter in the mail to your home address if this change will have an impact on your current prescriptions.

Plan Options

- Base PPO plan—BlueSelect Plus network
- Spira Care EPO plan—BlueSelect Plus network
- Buy-Up PPO plan—Preferred Care Blue network

Understanding Your Plan Network Options

Base PPO Plan—BlueSelect Plus Network

- Blue KC's high-performance network with access to care within the Kansas City metropolitan area.
- Includes 3,600 in-network physicians and specialists and 10 top hospitals.
- You do not have to select a primary care physician.
- In- and out-of-network coverage, as well as national and international coverage through Blue Card.

Hospitals included in the BlueSelect Plus Network:

- AdventHealth Shawnee Mission
- Cameron Regional Medical Center
- Children's Mercy Hospital
- Children's Mercy Hospital—South

- Liberty Hospital
- North Kansas City Hospital
- Olathe Medical Center
- Truman Medical Center—Hospital Hill

IN-NETWORK PROVIDERS IN THESE COUNTIES:

Missouri: Clinton, Clay, Jackson, Platte.

Kansas: Johnson and Wyandotte.

IN-NETWORK PROVIDERS THROUGH BLUE CARD:

National and international coverage through Blue Card program providing in-network access to medical care when you travel.

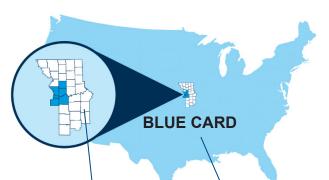
OUT-OF-NETWORK PROVIDERS IN THESE COUNTIES

You have out-of-network coverage but higher out of pocket costs.

- Truman Medical Center—Lakewood
- University of Kansas Hospital

CITY OF MISSION BENEFITS GUIDE

2024



Spira Care EPO plan—BlueSelect Plus network

- Blue KC Spira Care Centers serve members' primary care needs while still providing access to the BlueSelect Plus network with coverage for specialty or emergency needs outside the Care Centers.
- No co-pays, no deductibles, and no additional costs for procedures at Spira Care Centers.
- In-network benefits only, there are no out-of-network benefits for this plan.
- To learn more about Spira Care, visit spiracare.com.
- See pages 7 and 8 for in depth information regarding the Spira plan.

Buy-Up PPO plan—Preferred Care Blue network

- 's broadest network of healthcare providers and hospitals with coverage in both Metro and Non-KC Metro areas.
- Includes 6,200 in-network physicians and specialists and 50 hospitals.
- You do not have to select a primary care physician.
- In- and out-of-network coverage, as well as national and international coverage through Blue Card.
- National and international coverage.

Locate a Provider

- To locate an in-network physician or hospital, visit <u>BlueKC.com</u> and click Find Care.
- Existing members can log in to their member portal and search for providers within their current plan's network. If you are considering changing your plan/network or if you are a new member, continue your search as a guest. Select either the BlueSelect Plus or Preferred Care Blue network and enter your ZIP code.
- Remember, if you enroll in the Spira Care EPO plan option, you will need to visit a Spira Care Center for your primary care needs.

ACCESS TO CARE

Serving members' primary care needs throughout the KC metro

CROSSROADS 1916 Grand Boulevard Kansas City, MO 64108 OVERLAND PARK 7431 W 133rd Street Overland Park, KS 66213

2024

LEE'S SUMMIT 760 NW Blue Parkway Lee's Summit, MO 64086

SHAWNEE 10824 Shawnee Mission Parkway Shawnee, KS 66203

TIFFANY SPRINGS

8765 N Ambassador Drive

Kansas City, MO 64154

LIBERTY 8350 N Church Road Kansas City, MO 64158

15710 W 135th Street, #200

OLATHE

Olathe, KS 66062

9800 Troup Avenue Kansas City, KS 66111

INDEPENDENCE COMING SOON! 3717 S Whitney Avenue Independence, MO 64055



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Spira Care EPO

This offering is crafted for members looking to simplify and personalize their healthcare experience. If you believe that your and your family's health needs in the next year will largely fall within primary care, including labs and X-rays, and routine behavioral health services, you can enjoy the peace of mind that comes with knowing that there will be no additional charges outside your monthly premiums. For needs outside the Spira Care Centers, you'll have access to the BlueSelect Plus network within the Kansas City metropolitan area.

What Is Spira Care?

Spira Care is health insurance with a primary care clinic at no additional cost. It's a healthcare package designed for those seeking simplicity in navigating their healthcare journeys. In contrast to traditional plans, Spira Care provides the easiest-imaginable access to a member-centered experience so that members can count on accessing care from a welcoming place without all of the complexity.

The entire experience was designed by patients from start to finish to provide comprehensive care at convenient locations with no deductibles, no co-pays, and no additional cost for any procedures received at the care centers.

Spira Care Services

Comprehensive services



SPIRA CARE

Spira Care Shawnee 10824 Shawnee Mission Parkway Shawnee, KS 66216

Spira Care Liberty 8350 N. Church Road Kansas City, MO 64158

Spira Care Olathe 15710 W. 135th Street Suite 200 Olathe, KS 66062

Spira Care Crossroads 1916 Grand Blvd. Kansas City, MO 64108

Spira Care Lee's Summit 760 NW Blue Parkway Lee's Summit, MO 64086

Spira Care Wyandotte 98th and Parallel Parkway Kansas City, KS

Spira Care Tiffany Springs 8765 N Ambassador Drive Kansas City, MO 64153

Spira Care Overland Park 7431 W. 133rd Street Overland Park, KS 66203

Spira Care Independence 3717 Whitney Avenue Independence, MO 64055

The Team That Supports Members

CARE GUIDES: Every Spira Care member will have access to a team of care guides to walk with them on their health journey. Care guides are available to answer insurance questions, coordinate care, and more.

FIRST-CLASS DOCTORS: Spira Care's team of doctors is known for an exceptional level of care. They're member-centric experts with a passion for family care and a dedication to ongoing wellness and member peace of mind.

CARE TEAM: Our nurses, doctors, and care guides are unified in creating a wellness road map for each member. Together, this care team provides a complete healthcare support system.

Spira Care Examples

Jake, age 22: Recently promoted, feeling pressure at work

Since taking on greater responsibilities at work, Jake has loved the fact that he doesn't have to worry about budgeting for his primary care services at Spira Care. He rarely needs care beyond regular doctor visits and occasional labs, and it's a weight off his shoulders knowing that he'll never see a bill for any care center appointment.

Jake already has enough on his plate, so he takes advantage of meeting with his Spira Care behavioral therapist at no additional cost to make sure that he's keeping his anxiety in check.

Dana, age 58: Recently diagnosed with cancer, little experience with insurance

Dana has always been fairly healthy, so she's never had a reason to pay close attention to her health plan. However, a thyroid cancer diagnosis earlier this year has turned her world upside down. She currently has over 50 insurance claims, feels overwhelmed and confused, and has no idea what to do next.

With Spira Care, Dana's care guide will not only answer her questions regarding claims and benefits but also help coordinate specialist care within the BlueSelect Plus network. Dana regularly meets with her primary care doctor at no additional cost, and all oncologist appointments are applied toward a simple annual deductible.

FAQs

Q: What prescriptions are filled at Spira Care?

A: Spira Care offers the convenience of on-site prescription services for approximately 50 of the top generic prescriptions at your regular co-pay level.

Q: What about prescriptions that can't be filled at Spira Care?

A: Your care team will facilitate prescription services through convenient mail order or at your preferred pharmacy at your regular co-pay level.

Q: What happens if I go to a physician out-of-network?

A: Spira Care is built on an exclusive provider organization (EPO) insurance model. Except for emergency services, members must receive all care from in-network providers (BlueSelect Plus network in the KC area or BlueCard network outside the 32-county service area). Nonemergency services received out-of-network will not be covered.

Q: I already have a primary care or pediatric physician I love. Can I still see that physician?

A: While this plan is ideal for members who utilize the no-additional-cost primary and pediatric care at the care centers, members still have access to more than 3,600 providers in the BlueSelect Plus network. Members will also have the nationwide coverage of the BlueCard network outside the 32-county Blue KC service area.

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Comparing Your Medical Plan Options

BlueSelect Plus Network

The two plans below utilize the BlueSelect Plus network. This network has deep discounts available when using providers within the Kansas City metro area. These plans can be elected by employees who reside in the six-county metro area, which includes Clinton, Clay, Jackson, and Platte counties in Missouri, and Johnson and Wyandotte counties in Kansas.

Benefit	Base PPO Plan BlueSelect Plus Network		Spira Care BlueSelect Plu	
	In-network	Out-of-network	In-network	Out-of-network
Deductible:	\$2,500 individual/\$5,000 family	\$2,500 individual/\$5,000 family	\$2,000 individual/\$4,000 family	
Deductible applies to all servi	ces unless indicated otherwise.			
Coinsurance	80%	50%	100%	
Out-of-pocket maximum:	\$5,000 individual/\$10,000 family	\$20,000 individual/\$40,000 family	\$2,000 individual/\$4,000 family	
Preventive services	100%	Ded. then 50%	100%	Not covered
Physician office visits	\$40 co-pay	Ded. then 50%	Deductible*	NUL COVELED
Specialist office visits	\$40 co-pay	Ded. then 50%	Deductible	
Inpatient hospital	Ded. then 80%	Ded. then 50%	Deductible	
Outpatient hospital	Ded. then 80%	Ded. then 50%	Deductible	
Urgent care	\$40 co-pay	Ded. then 50%	Deductible	
Emergency room	\$100 co-pay then 80%	\$100 co-pay then 80%	Deductible	In-network deductible
Prescription drugs	In-network	Out-of-network	In-network	Value-based Rx
Retail				
Generic	\$15 co-pay	\$15 co-pay	\$15 co-pay	
Preferred brand	\$70 co-pay	\$70 co-pay	\$50 co-pay	Not covered
Nonpreferred brand	\$110 co-pay	\$110 co-pay then 50%	Deductible	NUL COVELED
Specialty	\$200 co-pay	\$200 co-pay then 50%	Deductible	
Mail order				
Generic	\$37.50 co-pay	\$37.50 co-pay	\$15 co-pay	
Preferred brand	\$175 co-pay	\$175 co-pay	\$125 co-pay	Not covered
Nonpreferred brand	\$275 co-pay	\$275 co-pay then 50%	Deductible	

*No charge when you seek care in a Spira Care Center.

Preferred Care Blue Network

The Buy-Up PPO plan below utilizes the Preferred Care Blue network. This is a broad network of local and nationwide healthcare providers. The discounts in this network are less than the BlueSelect Plus network, but it offers greater freedom to choose doctors and hospitals. You can search eligible providers in this network by visiting BlueKC.com and selecting the Preferred Care Blue network on the provider search tool.

Benefits	Buy-Up PPO Plan Preferred Care Blue Network		
	In-network	Out-of-network	
Deductible Deductible applies to all services unless indicated otherwise.	\$2,000 individual/\$4,000 family	\$2,000 individual/\$4,000 family	
Coinsurance	80%	50%	
Out-of-pocket maximum	\$5,500 individual/\$11,000 family	\$11,000 individual/\$22,000 family	
Preventive services	100%	Ded. then 50%	
Physician office visits	\$30 co-pay	Ded. then 50%	
Specialist office visits	\$30 co-pay	Ded. then 50%	
Inpatient hospital	Ded. then 80%	Ded. then 50%	
Outpatient hospital	Ded. then 80%	Ded. then 50%	
Urgent care	\$30 co-pay	Ded. then 50%	
Emergency room	\$100 co-pay then 80%	\$100 co-pay then 80%	
Prescription drugs	In-network	Value-based Rx	
Retail			
Generic	\$15 co-pay	\$15 co-pay	
Brand name	\$70 co-pay	\$70 co-pay	
Nonpreferred	\$110 co-pay	\$110 co-pay then 50%	
Specialty	\$200 co-pay	\$200 then 50%	
Mail order			
Generic	\$37.50 co-pay	\$37.50 co-pay	
Brand name	\$175 co-pay	\$175 co-pay	
Nonpreferred	\$275 co-pay	\$275 co-pay then 50%	

Employee Contributions

Base PPO plan: BlueSelect Plus Network

	Total Monthly Premium	Monthly Employer Contribution	Monthly Employee Contribution	Per Payroll (24)
Employee	\$698.88	\$559.10	\$139.78	\$69.89
Employee + spouse	\$1,467.63	\$1,174.10	\$293.53	\$146.76
Employee + child(ren)	\$1,257.97	\$1,006.38	\$251.59	\$125.80
Employee + family	\$2,096.62	\$1,677.30	\$419.32	\$209.66

Spira Care EPO: BlueSelect Plus Network

	Total Monthly Premium	Monthly Employer Contribution	Monthly Employee Contribution	Per Payroll (24)
Employee	\$702.43	\$561.94	\$140.49	\$70.24
Employee + spouse	\$1,475.09	\$1,180.07	\$295.02	\$147.51
Employee + child(ren)	\$1,264.37	\$1,011.50	\$252.87	\$126.44
Employee + family	\$2,107.28	\$1,685.82	\$421.46	\$210.73

Buy-Up PPO Plan: Preferred Care Blue Network

	Total Monthly Premium	Monthly Employer Contribution	Monthly Employee Contribution	Per Payroll (24)
Employee	\$848.46	\$678.77	\$169.69	\$84.85
Employee + spouse	\$1,781.78	\$1,425.42	\$356.36	\$178.18
Employee + child(ren)	\$1,527.23	\$1,221.78	\$305.45	\$152.72
Employee + family	\$2,545.39	\$2,036.31	\$509.08	\$254.54

Selecting Which Plan Is Right for You—Plan Cost Calculator

The Plan Cost Calculator is an excellent tool that can help you make an educated enrollment decision for 2024. This Excel-based tool will assist you in comparing the Medical plan options and help determine which one might be best for you and your family. The tool is pre-populated with the annualized contributions. Enter your expected healthcare services into the calculator, and the tool will calculate your total estimated out-of-pocket expenses by plan. This information will help you to determine which plan will cost you the least amount of money (based upon your entries) on an annual basis. To get the most information for your decision, input several different scenarios (best, average, and worst-case) into the calculator. It is important to consider your personal financial risk tolerance when choosing your Medical plan. **Please refer to the City's employee website to access the Plan Cost Calculator**.

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Virtual Health

Blue KC offers access to video visits with boardcertified doctors and behavioral health therapists right from your smartphone, tablet, or computer. Blue KC Virtual Care is convenient for everyday medical and behavioral healthcare and is always private and secure. Don't want to wait for an appointment? Not in reach of a nearby provider? You can benefit from non-emergent care and consult from the comfort and convenience of wherever you are.

Members can download the Blue KC Virtual Care app or visit <u>BlueKCvirtualcare.com</u> to schedule an online appointment. To register, create an account using your Blue KC member ID card for reference. This ensures members are charged the correct amounts when they use telehealth benefits. Register now at <u>BlueKCvirtualcare.com</u> or download the Blue KC Virtual Care app in the Apple App Store or in Google Play. If you have questions, please call 888.658.6653.

24/7 ACCESS TO VIRTUAL CARE Online or Mobile Doctor Visits

Get care wherever you are for common medical issues

Why use virtual care?



What can be treated?

COMMON MEDICAL ISSUES, SUCH AS:

Sinus Pain
 Nausea, Vomiting,

Diarrhea

· Coughs, Sore Throat

Redness or Pain

Minor Fevers, ColdsRashes, Minor Burns

Eye Swelling, Irritation,

- Mild Asthma
- Mild Allergic Reactions
 Bumps, Cuts, Scrapes
- Minor Headaches
- Burning with Urination
- Cold Sores
- Sprains, Strains

· Anxiety

Pink Eye

BEHAVIORAL HEALTHCARE ISSUES, SUCH AS:

- OCD
- Bereavement/grief
 PTSD/trauma
- Bipolar disorder
 Panic attack
- Depression

- Urgent or sick care needs available 24/7
 Behavioral
 - Benavioral healthcare needs by appointment
- Affordable visits based on your plan's benefits (costs can vary for behavioral healthcare provider type)



How do I start an appointment?

- 1. Download the Blue KC Virtual Care mobile app or visit BlueKCvirtualcare.com.
- 2. Create an account using your Blue KC member ID card for reference.
- **3.** View a list of available doctors, their experience and ratings, and select one.
- 4. For urgent or sick care needs: Stream a live visit directly online or your mobile device.
- 5. For behavioral healthcare needs: Schedule your session with a psychologist or counselor.

VIRTUAL CARE IS NOT FOR EMERGENCIES

If you have a serious medical concern, go to the emergency room or call 911. ¹ Blue KC does not guarantee a prescription will be written.



online or your mob 5. For behavioral he

Mindful by Blue KC

Blue KC's new Mindful services make behavioral health more affordable and accessible for employees and dependents enrolled in one of the Blue KC medical plans. As your new single point of contact, Blue KC's Mindful Advocates are licensed behavioral health clinicians who match you to providers and services when you need them, including listening, navigating care, crisis management, benefits guidance, connecting you to care, and any necessary follow-up.

What Is Behavioral Health?

Behavioral health refers to the relationship between a person's behavior and their overall well-being. Our behavioral health impacts our ability to function in everyday life and our concept of self. Depression, anxiety, substance use, and other behavioral health issues can affect how we manage our physical health and daily living challenges. Addressing behavioral health is increasingly recognized as a vital part of self-care.

It can be hard to admit you need help—and even harder to get it. But there's never been a better time to face any behavioral health issues head on.

No matter what you're facing, a Mindful Advocate is available 24/7 and is just a call away for topics including:

- Major life events (divorce, loss, etc.)
- Child care

Stress

Other everyday life challenges

- Financial issues
- View the expansive list of additional resources available to you under the Mindful program by visiting mindfulBlueKC.com.

It all starts with the Mindful Advocate

By calling one number and speaking to a Mindful Advocate, who's available 24/7, members can get:





Care navigation

In-the-moment support



Help locating and referring to in network providers Help connecting to expedited treatment options in crisis situations

A Mindful Advocate can help members access tools including in-person, text, online therapy and virtual visit options specific to the members' behavioral healthcare needs. To learn more call **833-302-MIND (6463)** or visit **MindfulBlueKC.com**.



Blue KC Services

Livongo for Diabetes

Blue Cross Blue Shield of Kansas City (Blue KC) partners with Livongo to help members with diabetes better manage their care. Any member on the Medical plan with a diagnosis of diabetes can participate—at no cost to you!

Livongo Diabetes Management

- You will receive a cellularly enabled glucometer, free unlimited strips and lancets shipped directly to you, and personalized coaching and trends management.
- Your smart glucometer seamlessly shares your health summary report to a care team. The care team is available 24/7/365 to intervene in case of emergency.
- Clinical data analytics provide insights and educational content.

If you or a covered dependent have diabetes, join today at join.livongo.com/BlueKC/register or call 800.945.4355. Use registration code: Blue KC

Diabetes Prevention Program

Blue KC partners with Solera Health to provide a Diabetes Prevention Program (DPP) at no cost to all members who qualify (excluding Medicare Advantage and JAA groups). It's a 16-week program, followed by monthly sessions that can help you lose weight, adopt healthy habits, and significantly reduce your risk of developing diabetes. And it's available at no cost to members who qualify. Through this benefit, you may be able to participate in a national weight loss program such as Weight Watchers[®], Retrofit, or HealthSlate.



Most Programs Include:

- Access to a personal health coach.
- Weekly lessons.
- A small group for support.
- Tools such as a wireless scale or activity tracker.

Learn More and See If You Qualify:

For those enrolled in the Medical plan, you can find more information and take the one-minute quiz to see if you qualify by visiting solera4me.com/en/BlueKC.



Pharmacy Benefits

Effective 1/1/2024, the City of Mission will be offering the premium formulary through OptumRx and BlueKC. Together, Blue KC and OptumRx provides safe, easy, and cost-effective ways for you to get the medication you need. You have several ways to fill prescriptions. Each option offers convenient services to help you make the most of your pharmacy plan.

Here's what you need to know about each:

Retail Network	Home Delivery	Specialty Pharmacy
You have access to fill your prescriptions at thousands of retail pharmacies and many national drugstores, supermarkets, and large retailers.	Our home delivery program can save you time and money by delivering maintenance medications directly to your home.	Our specialty pharmacy can help you manage your chronic conditions and specialty therapies.

Get Started

- Log in to myBlueKC.com.
- Click Plan Benefits on the left and then select Pharmacy Plan Info.
- From that screen click the View Your Pharmacy Benefits button to be redirected to the OptumRx site.
- Once you're redirected to the OptumRx homepage, you can enroll in home delivery, find a network pharmacy, check medication coverage, and much more.

Home Delivery

Follow the instructions above to enroll in our home delivery program and have a three-month supply of maintenance medication (those you take regularly) delivered directly to your home. Here's what else this program can offer:

- Cost Savings—You may pay less for your medication with a threemonth supply through home delivery.
- Convenience—Get free standard shipping on medications delivered to your mailbox.
- 24/7 Access and Reminders—Speak to a pharmacist who can answer your questions any time, any day.

Specialty Pharmacy

Specialty medications can be important to maintaining or improving your health and quality of life. If you take a specialty medication, our specialty pharmacy can help by providing resources and personalized, therapy-specific support. Here are just a few of the support services available to you:

- Access to your medications at the lowest cost.
- 24/7 access to personalized patient care from knowledgeable pharmacists and nurses who specialize in your condition.
- Proactive refill reminders with timely delivery and shipping in confidential packaging.

GENERAL QUESTIONS OR ASSISTANCE: Call Blue KC Customer Service at the number listed on your member ID card, Monday through Friday, from 8 a.m. to 8 p.m. Central Time with any questions.

- HOME DELIVERY ASSISTANCE: 844.579.7774
- SPECIALTY MEDICATION ASSISTANCE: 855.427.4682

Rx Savings Solutions

Blue KC partners with Rx Savings Solutions to offer a user-friendly pharmacy savings tool. Based on real prescription pricing, the tool uses claims data, your actual plan benefits and accumulators to determine how you can save at the pharmacy. You will receive text and/or email notifications of savings opportunities on their prescriptions.

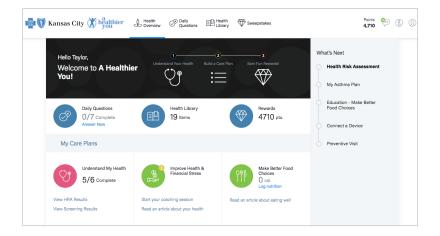
Ways You Can Save



You may access the Rx Savings Solutions tool throughout the Blue KC member portal, <u>myBlueKC.com</u>. In order to receive text message or email alerts, you must log in to the portal and reach the Rx Savings Solutions page to verify preferred mobile phone numbers and email addresses. You may opt out of notifications at any time.

Wellness

Proactive and preventive healthcare is the first step you can take to ensure the best outcomes and least cost for you and City of Mission. You can maintain or achieve better health, manage chronic conditions, and develop personal care plans using the A Healthier You[™] online portal and mobile app.



Dental

Delta Dental will continue to administer the Dental plan in 2024. The dental plan design is listed at the bottom of the page, please note that there will be a 2% increase to rates in 2024. Keep in mind that since the City of Mission uses a PPO network, benefits differ between innetwork and out-of-network providers. Utilizing providers in-network keeps your cost and plan's cost down. This helps prevent future premium increases. Check the website if you have questions about a specific provider.

Dental Summary

	Delta Den	ital of Kansas	
Plan features	In-network	Out-of-network	
Annual deductible Individual Family		\$50 \$150	
Annual maximum	\$	1,500	
Preventive services	100%	80%	
Basic services	80%	60%	
Major services	50%	40%	
Orthodontia	50% \$1,000 lifetime benefit maximum		
Balance billing*	Not allowed	Allowed	

TO LOCATE DELTA DENTAL PROVIDERS:

- Visit the website at deltadentalks.com.
- Contact customer service at 800.234.3375.

*Based on the procedure, the insurance company "allows" in-network providers to charge a certain dollar amount. The benefit percentages are based on the allowed charges. If you go to a provider who is not in the network, the insurance company will base payment on what dentists charge on average. If that particular provider charges more than this amount, that provider reserves the right to charge you the difference. This would be in addition to the "allowed" amount.

Dental Premium Rates

Tier Level	Total Monthly Premium	Employer Contribution	Monthly Employee Contribution	Per Payroll (24)
Employee only	\$32.30	\$25.84	\$6.46	\$3.23
Employee + family	\$94.47	\$75.58	\$18.89	\$9.45

- Unlimited cleanings.
- Right Start 4 Kids program: Provides children 12 and under 100% coverage, with no deductible for all services covered under the plan, excluding orthodontics, when an in-network dentist is seen.

2024 CITY OF MISSION BENEFITS GUIDE

Vision

The City will continue to offer Vision coverage through EyeMed at no cost to you and your family.

Vision Summary

	In-network member cost	Out-of-network reimbursement
Exam (once every 12 months)		
Exam with dilation as necessary	\$10 co-pay	Up to \$40
Retinal Imaging	Up to \$39	N/A
Standard contact lens fitting and follow-up	Up to \$55	N/A
Premium contact lens fitting and follow-up	10% off retail	N/A
Frames (once every 24 months)		
Retail frame allowance	\$150 allowance, then 20% off balance	Up to \$105
Standard plastic lenses (once every 12 mo	nths)	
Single vision	\$10 co-pay	Up to \$30
Bifocal	\$10 co-pay	Up to \$50
Trifocal	\$10 co-pay	Up to \$70
Standard progressive lens	\$75 co-pay	Up to \$50
Premium progressive lens	\$95-\$120 co-pay	Up to \$50-\$70
Lenticular	\$10 co-pay	Up to \$70
Lens options		
UV treatment	\$15	N/A
Tint (solid or gradient)	\$15	N/A
Standard plastic scratch coating	\$15	N/A
Standard polycarbonate	\$40	N/A
Standard anti-reflective coating	\$45	N/A
Premium anti-reflective coating	\$57-68	N/A
Other add-ons and services	20% off retail price	N/A
Contact lenses (once every 12 months)		
Conventional	\$150 allowance, then 15% off balance	Up to \$150
Disposable	\$150 allowance, plus balance	Up to \$150
Medically necessary	Paid in full	Up to \$210

Laser Vision Correction: 15% off the retail price or 5% off the promotion price. Hearing Care: 40% off hearing exams and a low-price guarantee on discounted hearing aids. Additional Discounts (in-network providers):

- 40% off complete pair of prescription sunglasses.
- 20% off non-prescription sunglasses.
- 20% off remaining balance beyond plan coverage.

TO LOCATE EYEMED PROVIDERS:

- Visit the website eyemed.com.
- Contact 866.804.0982.
- For Lasik providers, call 877.5LASER6.

Life and Disability

The Standard will continue to administer these important income protection benefits. As a reminder, beneficiary designations may be changed at any time throughout the year; however, Open Enrollment is a great time to ensure this information is up to date and reflects your current wishes.

Basic Life and Accidental Death & Dismemberment (AD&D)

As an employee of the City of Mission, in addition to the life insurance/death benefit offered through KPERS and KP&F, the City of Mission provides all employees with Basic Life/AD&D insurance at no cost to you.

In 2024, you will receive \$40,000 in Basic Life/AD&D coverage provided by the City at no cost to you.

Voluntary Term Life Insurance

You also have the option to select additional benefits for you and your dependents. If you choose to elect additional coverage for yourself, you may then elect spouse and/or child coverage. If you are electing coverage for the first time or increasing coverage amounts, you will be required to complete a medical history questionnaire.

Employee Coverage

- Available in increments of \$10,000, up to 5x your annual salary, not to exceed a maximum of \$300,000.
- Age-based rates are in five-year increments—based on your age each calendar year. Premiums adjust as you reach new age brackets.

Spouse Coverage

- Available in \$5,000 increments, up to \$150,000 in coverage, or 50% of the amount you purchase for yourself.
- Rates for spouse coverage are based on the employee's age.

Child Coverage

- \$10,000 in life insurance for your dependent children.
- Includes unmarried child(ren) through age 20, or through age 24 if full-time student.
- \$1.00 per month for \$10,000 in coverage, regardless of the number of children you cover.

LifeWorks EAP

EAP Services for City of Mission

Life can be complicated. Get help with all of life's questions, issues, and concerns with LifeWorks. They are available any time, 24/7, 365 days a year.

LifeWorks offers support with mental, financial, physical, and emotional wellbeing. Whether you have questions about handling stress at work and home, parenting and child care, managing money, or health issues, you can turn to LifeWorks for a confidential service that you can trust.

Services include:

Life

- Retirement
- Midlife
- Student life
- Legal
- Relationships
- Disabilities
- Crisis
- Personal issues

Family

- Parenting
- Couples
- Separation/divorce
- Older relatives
- Adoption
- Death/loss
- Child care
- Education

Health

- Mental health
- Addictions
- Fitness
- Managing stress
- Nutrition
- Sleep
- Smoking cessation
- Alternative health

Work

- Time management
- Career development
- Work relationships
- Work stress
- Managing people
- Shift work
- Coping with change
- Communication

Money

- Saving
- Investing
- Budgeting
- Managing debt
- Home buying
- Renting
- Estate planning
- Bankruptcy

Call us—if you're using the LifeWorks mobile app, you can call us with one tap from your smartphone.

Provide your name and employer's name to an advisor. Your information will be kept confidential.

Share your concerns with a professional advisor for expert advice, strategies, and next steps.



Arrange with the advisor about how, when, and where you want to be contacted if follow-up is required.

Your advisor will ask for your employer's name (or other sponsoring organization's name) so we can confirm the type of service available to you, along with other important health insurance and benefits information.



2024

Flexible Spending Accounts (FSAs)

The Section 125/Flexible Spending plan will continue to be administered by BASIC. The FSAs (Medical Reimbursement and Dependent Care) provide additional tax benefits by allowing you to set aside a certain amount of your paycheck on a pre-tax basis to pay for eligible expenses.

Medical Reimbursement Account

- Used to pay for eligible expenses not covered under Medical, Dental, and Vision plans.
- Examples include co-pays, deductibles, orthodontia expenses, prescription drug co-pays, and LASIK/laser eye surgery.
- The 2024 household contribution maximum is \$3,200.
- Option to use debit card or submit claims via fax, mail, or online.
- You have until March 15, 2024, to incur and submit claims in order to use funds left over from the 2023 plan year. You can avoid forfeitures if you plan carefully, conservatively, and only for predictable expenses.



Manage your account online via the website (www.basiconline.com) or on the BASIC benefits app¹

Dependent Care Account

- Used to pay for day care for eligible dependents (including disabled adult children or legal spouse) that permit you to be "gainfully employed."
- The 2024 household contribution maximum is \$5,000.
- Reimbursement by fax, mail, or online.

The IRS requires that you make your election decision before the new plan year begins each year or before your effective date, if you are newly eligible. The election decision remains in effect for the plan year, unless you have a qualifying life event.

*If you have funds left at the end of the plan year, you may continue to incur claims for expenses during the "grace period." The grace period extends 2 1/2 months after the end of the plan year, during which time you can continue to incur claims and use up all amounts remaining in your Health FSA or Dependent Care FSA.

INTRODUCING THE BASIC CARD MYWALLET

Easily organize and manage your BASIC card via the secure benefits app¹ or web portal with features like:



- Request a dependent card
- Report a lost or stolen card
- Suspend use for a misplaced card
- Request a PIN (for ATM use)²
- Store other important cards



2024 CITY OF MISSION BENEFITS GUIDE

AFLAC

AFLAC representatives will be available during the Open Enrollment meetings to discuss the programs they offer in more detail. The following programs are available for you to consider:

- Accident
- Cancer
- Specified Health (Heart Attack/Stroke)
- Hospital
- Juvenile Life
- Short-Term Disability

As a reminder, the Short-Term Disability (STD) policy is guarantee issue, which means you do not have to undergo a medical underwriting process to purchase. If you are interested in Short-Term Disability protection, AFLAC is your only source for this benefit.

457 Plans

All full-time employees of the City participate in either KPERS (general employees) or KP&F (sworn police employees). In addition, the City offers all employees the opportunity to participate in voluntary 457 Deferred Compensation plans provided by Empower or MissionSquare Retirement.

Starting January 1, 2024, Empower contributions can be either pretax 457 contributions or after-tax Roth contributions. MissionSquare contributions remain pre-tax only. You can elect to participate or change your contribution amount at any time throughout the year. If you would like more information on these plans or want to change or begin your contributions for 2024 please contact Kathy Stratman.

Contribution limits for 2024 are as follows:

	2024 limit
Pre-tax employee elective deferrals to 401(k), 403(b), and 457(b) plans (without regard to "catch-up" contributions):	\$23,000
Pre-tax employee catch-up contributions to 401(k), 403(b), and 457(b) plans: Special "catch-up" rules may apply to 457(b) plans	\$7,500 \$3,500
Maximum annual contribution to defined contribution plans:	\$68,000

Kansas Money Purchase Plan

After the first year of full-time employment, all full-time non-police officer employees are automatically enrolled in a money purchase plan administered by The Principal with the city contributing 2% of your gross earnings. Like the 457 Deferred Compensation plans, you may elect to participate or change your contribution at any time through the year once you have become eligible.

All full-time general employees (not sworn police officers) who meet the plan requirements will receive an employer contribution and are eligible to voluntary deferrals. The requirements are:

- At least age 21
- 1 year of service in which you worked at least 1,000 hours
- You will enter the plan on the first day if the month on or after you meet the eligibility requirements.

The passage the SECURE 1.0 Act and SECURE 2.0 Act added provisions that allow long-term, part-time employees to become eligible for voluntary employee deferrals. The requirements are:

- At least age 21
- Worked three consecutive 12-month periods with at least 500 hours of service, starting in 2021

If you want more information on this plan, please contact Kathy Stratman.

All changes must be made by November 22!

The descriptions of the benefits are not guarantees of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official documents will govern.