

THE CITY OF
Anna

2025-2026
Enrollment Guide

Take Care of Your Tomorrow!

Personal needs greatly influence the choices we make every day. That's why the City of Anna wants to provide you with the freedom to select quality benefit options that work best for you.

It is important that you take an opportunity to review all your benefit plan options in detail. You will need to carefully consider each benefit option, its cost and value to you, and whether it is appropriate for your personal needs. By taking the time to examine all of your options, you will ensure that your benefits meet those needs throughout the plan year.

The City of Anna values our employees and recognizes the importance of offering benefits that enhance people's lives.

Included are benefits available to you as of October 1, 2025.

Please Keep This Guide

It is a valuable resource for you throughout the year.

Your City of Anna HR Team



At **The Purple Card®** we are passionate about serving the patient's best interest – we represent the patient, not the insurance company! Every member is assigned to a Patient Advocate to serve as a liaison between healthcare providers, insurance carriers and health-related communities. Our Patient Advocates are highly skilled and trained to provide prompt and excellent service to educate and assist members on ways to maximize their healthcare coverage and other available benefits.



Purple Card Assistance	Expected Timeline
<p>Emergency • You've lost your ID card and the provider's office needs to verify benefits •</p>	<p>Immediately – 24 Hours</p>
<p>Enrollment Support & Eligibility • You have questions about benefit information discussed at Open Enrollment meetings • Your dependent is losing coverage and needs to enroll in your plan •</p>	<p>Immediately - 48 Hours</p>
<p>Benefit Assistance & Coverage • You need help filling a prescription at the pharmacy or a carrier drug program • You need to verify coverage for a particular medical procedure or service •</p>	<p>24 - 48 Hours</p>
<p>Physician & Provider Search • You need assistance locating a physician or provider in your area •</p>	<p>Immediately - 24 Hours</p>
<p>Claims & Quality Care • You have a question about how a claim was processed or you're being balance-billed by your provider • You have a quality-of-care question and need to know if you are receiving the right care for your medical condition •</p>	<p>2 Days - 1 Week</p>
<p>Complex Claims • You had a procedure done in which you're receiving multiple bills and you do not understand what your financial responsibilities are for each bill •</p>	<p>1 - 4 Weeks</p>

Your Patient Advocate

Did you know you have a dedicated patient advocate? If you have any questions about your benefits, contact:



Tori Long

Team Lead, Senior Patient Advocate
tori@thepurplecard.com



Vanessa Ghally

Director, Patient Advocacy
vanessa.ghally@thepurplecard.com

Questions about Your Benefits? Just Pull Out Your Purple Card!



Call
866.788.9118



Email
help@thepurplecard.com



Online
thepurplecard.com

Benefit Resource List

Benefit	Contact	By Phone	On the Internet
Healthcare Advocacy	The Purple Card	1-866-788-9118	tori@thepurplecard.com
Medical Coverage	United Healthcare (UHC)	1-866-801-4409	HDHP HSA-Q: www.myuhc.com Surest PPO Copay: benefits.surest.com
Prescription/Pharmacy Coverage	Optum	1-800-356-3477	www.myuhc.com
Dental Coverage	Guardian	1-888-482-7342	www.guardianlife.com
Vision Coverage	Guardian	1-888-482-7342	www.guardianlife.com
Telemedicine	UHC	1-866-801-4409	HDHP HSA-Q: myuhc.com/virtualcare Surest PPO Copay: Use the Surest App
Life Insurance	Guardian	1-888-482-7342	www.guardianlife.com
Short-Term Disability Insurance	Guardian	1-888-482-7342	www.guardianlife.com
Long-Term Disability Insurance	Guardian	1-888-482-7342	www.guardianlife.com
Worksite Benefits (Accident, Cancer, Critical Illness)	Guardian	1-888-482-7342	www.guardianlife.com
Flexible Spending or Dependent Care Accounts	Benefit Bucks	1-866-788-9118	www.myRSC.com clientservices@mybenefitbucks.com
Health Savings Accounts	Benefit Bucks	1-866-788-9118	www.myRSC.com clientservices@mybenefitbucks.com
Health Reimbursement Account (HSA-Q Plan)	Benefit Bucks	1-866-788-9118	claims@mybenefitbucks.com
Employee Assistance Program (EAP)	ComPsych (through Guardian)	1-855-239-0743	guidanceresources.com
Pension Retirement	Texas Municipal Retirement System (TMRS)	1-800-924-8677	www.tmr.com
457(b) Retirement (Deferred Compensation)	Mission Square Retirement Omar Guevara	1-202-759-7007	www.missionsq.org oiguevara@missionsq.org

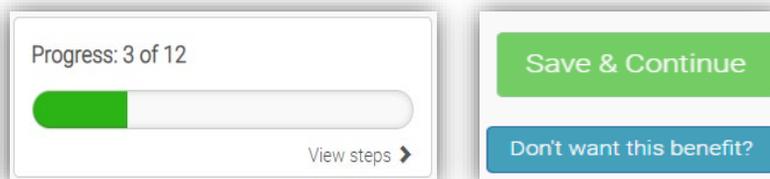
Further resources and information on employee benefits are available at www.annatexas.gov/employeehr.
Please contact your Human Resources team at HR@annatexas.gov or The Purple Card for questions or assistance.

Online Enrollment System

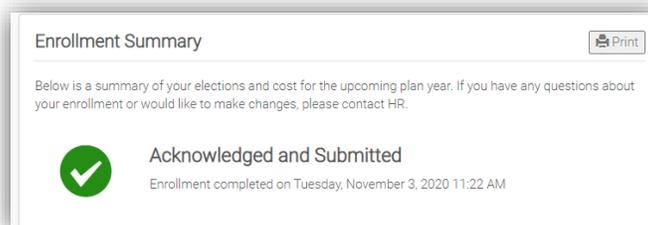


All of your benefit options will be presented in Employee Navigator, the City of Anna's online enrollment system, along with your payroll deduction amounts.

- If you have already accessed Employee Navigator and registered, please log in at: <https://www.employeenavigator.com/benefits/Account/Login>
- If you are accessing Employee Navigator for the first time, you can access the website to register and log in here: <https://employeenavigator.com/benefits/Account/Register>
- Your client id is **CityOA**
- You will click on the **Start Enrollment** button to begin.
- The first step will be to update and confirm your personal information and ensure you have your dependents entered.
- You can see your progress as you move through your enrollments
- Click on **View Steps** to choose a specific election you want to review or update (all must be completed for your enrollment to be finalized)



- For each election you must choose to elect or decline benefits.
- When you have completed your elections, you will be taken to a summary and signature page. You can print your election summary here. **You may make changes until Open Enrollment ends on Thursday, 08/21/2025.**
- **You must submit your electronic signature for your enrollments to be processed.**



- You can log into Employee Navigator throughout the year to see your elections and make demographic changes as needed.

Medical Benefits

Effective 10/01/2025, our medical coverage moves to UnitedHealthcare (UHC) and will help you maintain your well-being through preventive care and access to UHC's extensive network of providers. UHC will provide deductible credit for qualified expenses incurred between 01/01/2025 – 09/30/2025. To find a participating provider, go to www.myuhc.com or contact **The Purple Card**.

IN-NETWORK BENEFIT HIGHLIGHTS	UHC - PPO HDHP HSA-Q Plan (Plan 1)	UHC - PPO Surest Copay Plan (Plan 2)
Network	Choice Plus	Choice Plus
Annual Deductible <i>Calendar Year – Resets January 1</i>	Individual: \$ 5,000 Family: \$10,000	Individual: \$0 Family: \$0
Health Reimbursement Arrangement (HRA) <i>Back-end deductible reimbursement</i>	Individual: \$1,000 Family: \$2,000	N/A
Health Savings Account (HSA)	Individual: \$1,250 <i>(employer funded)</i> Family: \$1,250 <i>(employer funded)</i> <i>Funded yearly based on the calendar year - deposited monthly</i>	N/A
Coinsurance You Pay <i>Your share of the bill post-deductible</i>	30%	0%
Annual Out-of-Pocket Maximum	Individual: \$ 6,350 Family: \$12,700	Individual: \$ 6,500 Family: \$13,000

Covered Services – YOU PAY:

Preventive Care	\$0 copay, Deductible waived (DW)	\$0 copay, Deductible waived (DW)
Primary Care Office Visit	Deductible & Coinsurance (D & C)	\$25 - \$130 copay
Specialist Office Visit	D & C	\$25 - \$130 copay
Mental Health / Counseling Visit	D & C	\$25 copay
UHC Telemedicine	0% after deductible	\$0 - \$90 copay
Diagnostic: X-Rays, Labs	D & C	\$0
Diagnostic: Imaging	D & C	\$150 - \$1,050 copay
Urgent Care Center	D & C	\$80
Emergency Room	D & C	\$850 copay
Outpatient	D & C	\$350 - \$3,500
Inpatient	D & C	\$350 - \$3,500
Prescriptions <i>30 Day Supply (Retail) / 90 Day Supply (Mail Order) / Specialty</i>	D & C	Tier 1: \$10 / \$25 / \$10 Tier 2: \$35 / \$87.50 / \$100 Tier 3: \$70 / \$175 / \$200
Mandatory Generic**		

** If you obtain a brand-name drug when a preferred generic is available, you are responsible for the brand name cost/copay plus the cost difference between the brand name drug and the preferred generic drug.

A health plan with simplicity at its core.



“

It tells you what you're gonna pay up front. Nobody else does that.”

Freeman B., Surest member

- No deductible
- Look up actual prices (not estimates)
- Access the large, national UnitedHealthcare network



Try it now

surest.com/plan?accesscode=FITX252511Alt1

Insurance coverage is provided by All Savers Insurance Company (for AL, GA, OH, UT and VA), by UnitedHealthcare Insurance Company of IL (for IL), by UnitedHealthcare of Kentucky, Ltd. (for KY), or by UnitedHealthcare Insurance Company (for AL, AR, AZ, CO, DC, DE, GA, IA, ID, IL, IN, KS, KY, LA, MD, MI, MN, MO, MS, MT, NC, NE, NH, NJ, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WI, WV, and WY). These policies have exclusions, limitations, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the insuring company. Administrative services provided by Bind Benefits, Inc. d/b/a Surest, its affiliate United HealthCare Services, Inc., or by Bind Benefits, Inc. d/b/a Surest Administrative Services, in CA. © Bind Benefits, Inc. d/b/a Surest. All rights reserved. B2C_24-AI-749469_0424

surest.

Clear answers about your costs, your coverage, your options.

surest.

GENERAL PLAN DETAILS

Deductible	\$0
Broad, national network	Yes
Out-of-pocket limit	
Employee	\$6,500
Family	\$13,000

PRESCRIPTION DRUGS

30-day

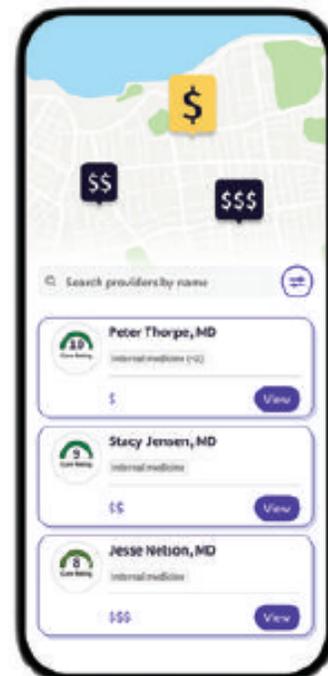
Preventive drugs	\$0	Specialty drugs	
Tier 1	\$10	Tier 1	\$10
Tier 2	\$35	Tier 2	\$100
Tier 3	\$70	Tier 3	\$200

YOUR COPAYS

Preventive visit	\$0
Virtual visit (primary and urgent)	\$0
Office visit	\$25 to \$130
Mental health and substance use disorder office visit	\$25
Urgent care visit	\$80
Emergency room visit	\$850
Basic diagnostic lab tests, X-rays, and ultrasounds	\$0
Physical therapy (visit limits apply)	\$15 to \$90
Maternity labor and delivery	\$1,300 to \$2,750

“The big ‘a-ha’ moment for me is **I know what I’m going to pay.** I never did before. Never.”

Freeman B., Surest member



See how powerful simple can be.



Check prices

surest.com/plan?accesscode=FITX252511Alt1

Non-Customer Request
10/1/2025
D6500

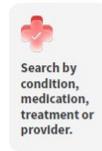
Insurance coverage provided by UnitedHealthcare Insurance Company, UnitedHealthcare Benefits Plan of California, UnitedHealthcare of Kentucky, Ltd., or by UnitedHealthcare Insurance Company of Illinois. Administrative services provided by United Health Care Services, Inc. or its affiliates. © Bind Benefits, Inc., d/b/a Surest. All rights reserved. B2C E125391 5550.0 2/25 25 -391160 2-A Non-Customer Request D6500 Effective: 10/1/2025

See how powerful simple can be

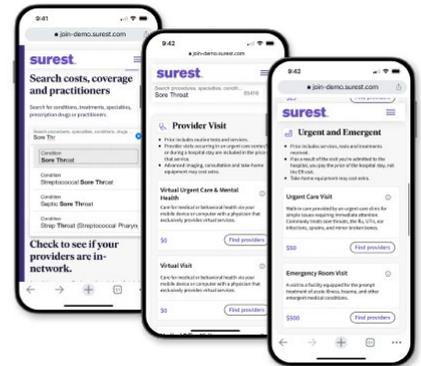
When it comes to knowing health care prices in advance, consumers are often kept out of the loop. It's different with the Surest plan. Members can check costs and compare care options before making an appointment. No guessing. And prices for health services that often occur together are bundled into a single copay. Know what's owed in advance and receive a single bill for the services delivered in that one visit.

Prices (copays) are lower for higher-value options, based on quality, efficiency and overall effectiveness of care. With this visibility, members choose differently.

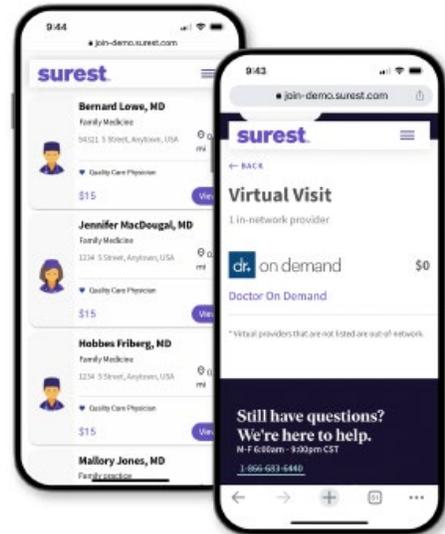
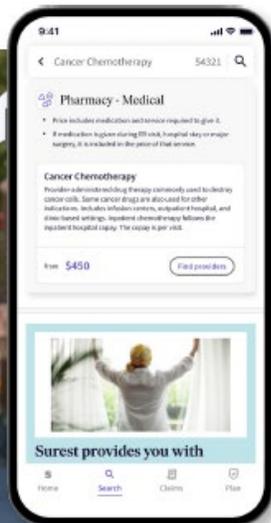
The result?
Savings opportunities for employers and employees.



Search by condition, medication, treatment or provider.



Search providers and compare prices.



surest™
A UnitedHealthcare Company

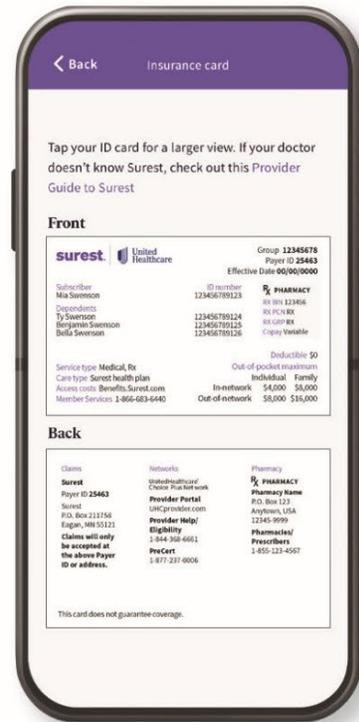
Does your provider know the Surest plan?

Helpful info to share

Surest is a UnitedHealthcare company—members access the UnitedHealthcare and Optum networks. However, some providers may not recognize the Surest name at first glance. Below are some helpful tips.

Give your doctor's office this information:

- The Surest network is **UnitedHealthcare** (Choice Plus, Select or Options PPO) and **Optum Behavioral Health**.
- The member ID card has information regarding eligibility.
- Need more information? Visit [Surest.com/Providers](https://www.surest.com/Providers) or [UHCprovider.com/surest](https://www.uhcprovider.com/surest).



Payer ID and claim mailing address

Claims

Surest
Payer ID **25463**
Surest
P.O. Box 211758
Eagan, MN 55121
Claims will only be accepted at the above Payer ID or address.

Networks

UnitedHealthcare®
Choice Plus Network
Provider Portal
UHCprovider.com
**Provider Help/
Eligibility**
1-844-368-6661
PreCert
1-877-237-0006

Network and provider resources (may depend on provider location)

Surest
Payer ID **25463**
Surest
P.O. Box 211758
Eagan, MN 55121
Claims will only be accepted at the above Payer ID or address.

UnitedHealthcare®
Choice Plus Network
Provider Portal
UHCprovider.com
**Provider Help/
Eligibility**
1-844-368-6661
PreCert
1-877-237-0006

Pharmacy

Rx PHARMACY
Pharmacy Name
P.O. Box 123
Anytown, USA
12345-9999
**Pharmacies/
Prescribers**
1-855-123-4567

This card does not guarantee coverage.

Sample member ID card for illustration only; actual information varies depending on payer, plan and other requirements.

surest.		Group 12345678
		Payer ID 25463
		Effective Date 00/00/0000
Subscriber	ID number	Rx PHARMACY
Mia Swenson	123456789123	RX BIN 123456
Dependents		RX PCN RX
Ty Swenson	123456789124	RX GRP RX
Benjamin Swenson	123456789125	Copy Variable
Bella Swenson	123456789126	
		Deductible \$0
Service type Medical, Rx	Out-of-pocket maximum	
Care type Surest health plan	Individual	Family
Access costs Benefits.Surest.com	In-network	\$4,000 \$8,000
Member Services 1-866-683-6440	Out-of-network	\$8,000 \$16,000

surest.
A UnitedHealthcare Company

Insurance coverage for fully insured plans is provided by All Savers Insurance Company (for FL, GA, OH, UT and VA) or by UnitedHealthcare Insurance Company (for AZ, MI, MN, MO, OK, PA, SC and TN). These policies have exclusions, limitations, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company. Administrative services for insurance products underwritten by All Savers Insurance Company and UnitedHealthcare Insurance Company, and for self-funded plans, are provided by Bind Benefits, Inc. d/b/a Surest, its affiliate UnitedHealthCare Services, Inc., or by Bind Benefits, Inc. d/b/a Surest Administrators Services, Inc. CA. Stop loss insurance for level funded plans is underwritten by UnitedHealthcare Insurance Company.

Health Savings Account (HSA)

Calendar Year 2025 Annual HSA Annual Contribution Limit (Extra \$1,000 for age 55+)			
Tier	Total IRS Limit	City Contribution	Employee Limit
Individual	\$4,300	\$1,250 (plan year)	\$3,050
Family	\$8,550	\$1,250 (plan year)	\$7,300
Calendar Year 2026 HSA Annual Contribution Limit (Extra \$1,000 for age 55+)			
Tier	Total IRS Limit	City Contribution	Employee Limit
Individual	\$4,400	\$1,250 (plan year)	\$3,150
Family	\$8,750	\$1,250 (plan year)	\$7,500

Highlights

- Who is Eligible?** You can participate in an HSA if you enroll in a high-deductible health plan like the UHC - PPO HDHP HSA-Q Plan (Plan 1). However, **you are not eligible if**:
 - You are enrolled in Medicaid or Medicare (Parts A, B, C or D)
 - You are covered by another medical plan (such as your spouse's plan) that is not a qualified high-deductible health plan
 - You or your spouse participate in a health care flexible spending account (unless it is specifically a Limited Purpose FSA)
 - You can be claimed as a dependent on someone else's tax return
- You own your HSA account.** Funds are your money and roll over from year to year. There is no 'use it or lose it.' It is a savings account in your name and stays with you if you change jobs or retire.
- Triple Tax Free** - Your payroll contributions go into the account tax free, grow tax free, and can be withdrawn tax free for qualified expenses.
- Pay for eligible medical, dental, and vision expenses** for you, your spouse, and your tax dependents. Substantiation may be required if you are audited by the IRS, so keep all receipts.
- Funds can be invested** and earn interest tax-free once your HSA account balance is \$1,000.
- Includes a Debit Card** – Only the funds in the account will be available for use.
- You can change your contributions anytime** (subject to payroll schedule and internal payroll deadlines)
- Portal Access:** www.myrsc.com
 - Login ID: Your SSN (no spaces or dashes)
 - Employer Code: 68654445

Examples of Qualifying Medical Expenses

Addiction treatment	Fertility enhancement
Ambulance services	Home Healthcare
Chiropractor	Hospital services
Childbirth	Over-The-Counter (OTC) Medications
First aid supplies	Psychiatric treatment
Dental treatment	Special education
Diagnostic (labs, x-rays, etc.)	Therapy or counseling
Doctor's fees	Smoking cessation
Hearing aids	Vision care (glasses, contacts)

Examples of NON-Qualifying Medical Expenses

Cosmetic surgery	Babysitting
Massage Therapy	Pediatric diaper services
Hair transplants	Health club dues
Vitamins	Swim lessons
Teeth whitening	Vacation / Travel

UHC HDHP HSA-Q Plan (Plan 1): Health Reimbursement Arrangement (HRA)

The HRA for the UHC PPO HDHP HSA plan, funded by the City of Anna and administered by Benefit Bucks, reimburses you for a portion of the in-network charges applied to your deductible. You will pay the first \$4,000 of your individual deductible and the HRA will reimburse you for the last \$1,000 of the individual deductible. If you cover dependents, you will pay the first \$8,000 of the family deductible and the HRA will reimburse you for the last \$2,000 of the family deductible.

- Only available on the UHC PPO HDHP HSA-Q Plan (Plan 1).
- Lowers your out-of-pocket deductible costs
- Reimbursements are tax-deductible for City of Anna and tax-exempt for employees
- Reimburses for covered IN-NETWORK expenses for you, your covered spouse and dependents that apply to the deductibles. *Out-of-network expenses are not eligible.

HRA – Who Pays What?

UHC HDHP HSA-Q Plan (Plan 1): \$5,000 Individual Deductible

You pay first \$0.01 - \$4,000.00 of in-network claims...



HEALTH REIMBURSEMENT ARRANGEMENT

City of Anna reimburses you for covered in-network costs between \$4,000.01 - \$5,000.00



You are responsible for 30% coinsurance for covered in-network expenses between \$5,000.01 - \$6,350.00 (the out-of-pocket maximum)



UHC pays all covered, in-network claims from \$6,350.01 through the end of the calendar year

UHC HDHP HSA-Q Plan (Plan 1): \$10,000 Family Deductible

You pay first \$.01 - \$8,000.00 of in-network claims...



HEALTH REIMBURSEMENT ARRANGEMENT

City of Anna reimburses you for covered in-network expenses between \$8,000.01 - \$10,000.00



You are responsible for 30% coinsurance for covered in-network expenses between \$10,000.01 - \$12,700.00 (the out-of-pocket maximum)



UHC pays all covered, in-network claims from \$12,700.01 through the end of the calendar year

UHC HDHP HSA-Q Plan HRA: *Reimbursement Requires Action!*

- Reminder: Only eligible if enrolled in the UHC PPO HDHP HSA-Q Plan (Plan 1).
- ***Reimbursements do not happen automatically.***
- Track your deductible online or call **The Purple Card** for an update.
- Reimbursement is made via direct deposit when:
 - The employee out-of-pocket requirements is met,
 - An eligible expense is incurred, and
 - The explanation of benefits (EOB) is provided to Benefit Bucks.
- HRAs cannot reimburse expenses paid for with HSA funds.
- Time Sensitive! All reimbursement requests must be submitted no later than 90 days after the deductible year ends on December 31.
- Deductibles start over on January 1 of each year.

PPO Copay Plan HRA

The PPO Copay Plan HRA will sunset effective 09/30/2025 and will no longer be offered.

Existing participants (as of 09/30/2025) have 18 months (through 03/31/2027) to deplete the existing funds in the account. Any funds remaining after the 18-month period will be forfeited.

Existing participants (as of 09/30/2025) who retire between 10/01/2025 and 09/30/2026 will have their funds rolled over to an a retiree reimbursement account (RRA) with Benefit Bucks. RRA funds must also be depleted by 03/31/2027. Any remaining funds after 03/31/2027 will be forfeited.

Preparing for Your Transition to UnitedHealthcare

- Determine if your providers are in-network at www.myuhc.com or by calling **The Purple Card** at 1-866-788-9118
- Try to refill any maintenance medications prior to 10/01/2025 to avoid any delays.
- Contact **The Purple Card** at 1-866-788-9118 if:
 - Your medication requires prior authorization – they can assist with obtaining new authorization;
 - You receive prescriptions via mail-order – they can assist with transitioning to the new mail-order vendor, Optum Pharmacy;
 - You are on a Specialty medication – they can assist with obtaining a new authorization and transitioning to the new specialty vendor, Optum Specialty Pharmacy;
 - You want to know how your medications are covered under UnitedHealthcare’s formulary.
- Remember UnitedHealthcare will provide credit for deductibles that have already been met from 01/01/2025 through 09/30/2025. The credit process can take 60-90 days to complete. If you have met your deductible and have procedures scheduled in the next 60-90 days, please reach out to **The Purple Card** with questions.



Let Optum Home Delivery bring your medications to you

With Optum® Home Delivery, you can get a 3-month supply of your long-term medications. Plus, they are mailed to you with free standard shipping.

Want more reasons?

- 

Skip the trips
Your medications can be delivered to your door. You don't even have to leave home or wait in the pharmacy line.
- 

Save some money
You may pay less than what you do at in-store pharmacies. And, standard shipping is free.
- 

Stay on track
With a 3-month supply, you may be less likely to miss a dose. You can even sign up for automatic refills.
- 

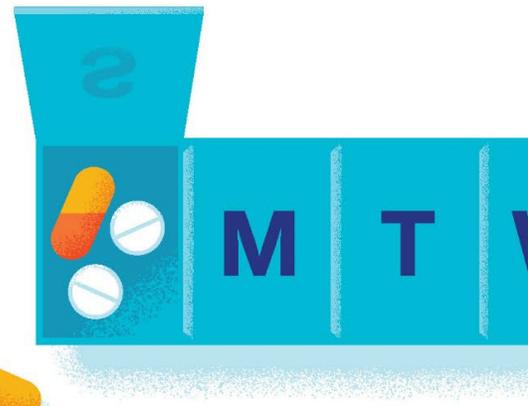
Pay your way
Make 1 payment upfront or split it up into 3 equal monthly payments with the Easy Payment Plan.

We're here when you need us

Use the website and app any time to track orders, request refills, price medications and more. Pharmacists and customer support team are also ready 24/7.

Ready for home delivery? Here are the ways to sign up.

- myuhc.com® or with the **UnitedHealthcare**® app.
- Or, ask your doctor to send an electronic prescription to Optum Rx.
- Or, call the number on your member ID card.



Get the lowest price

Members who use home delivery save \$10-12* on average per order when they use the drug pricing tool and fill with home delivery.

Go online or use the UnitedHealthcare app to see what you can save.

*2020 Optum Rx drug pricing tool cost analysis.

continued



Get on-the-go access to your health plan.

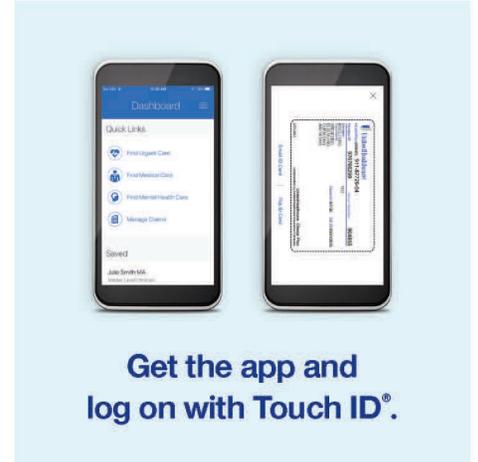
The UnitedHealthcare® app puts your plan at your fingertips.



The app has you covered.

When you're out and about, you can do everything from managing your plan to getting convenient care. Just download the app to:

- Find nearby care options in your network.
- Estimate costs.
- Video chat with a doctor 24/7.
- View and share your health plan ID card.
- See your claim details and view progress toward your deductible.



The UnitedHealthcare app is available for download for iPhone® or Android™.



Apple, App Store, iPhone, Touch ID and the Apple logo are trademarks of Apple Inc., registered in the U.S. and other countries. Android is a trademark of Google LLC. Google Play and the Google Play logo are registered trademarks of Google Inc.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.

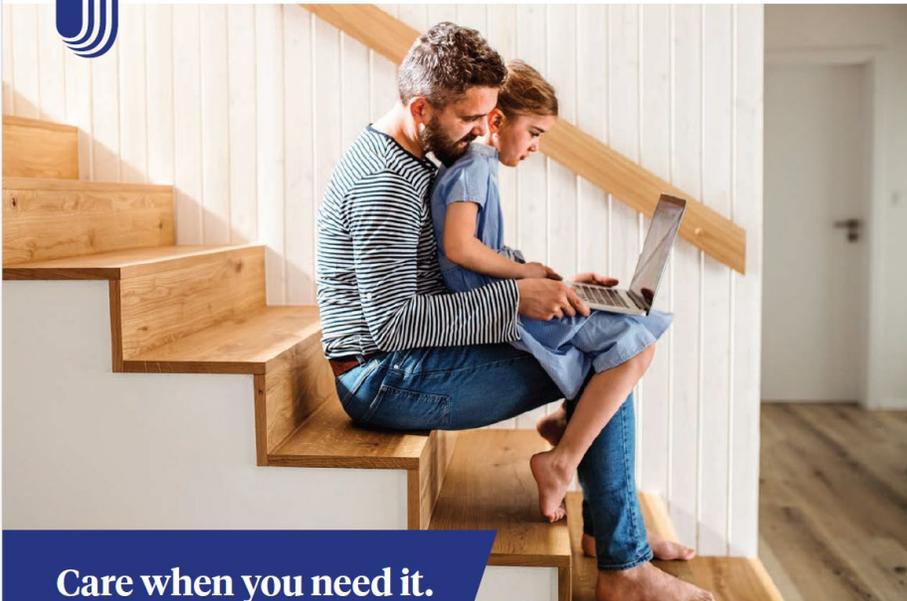
Virtual Visits are not an insurance product, health care provider or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times or in all locations.

*Data rates may apply.

Facebook.com/UnitedHealthcare | Twitter.com/UHC | Instagram.com/UnitedHealthcare | YouTube.com/UnitedHealthcare

8967324.0 9/19 ©2019 United HealthCare Services, Inc. 19-12129





**Care when you need it.
No shoes required.**

**Virtual Visits on the UHC
HDHP HSA-Q Plan**



**United
Healthcare®**

Make an appointment

Scan or visit myuhc.com/virtualcare to get started

You can make a virtual care appointment for your urgent care, primary care, mental health and specialty care needs. You may get seen faster by a provider and often, it even costs less. All from the comfort of anywhere you choose.

Get seen sooner with virtual care

On average, you can connect with a provider by video or phone* in:

15 minutes or less**
for 24/7 Virtual Visits

3 days or less
for virtual specialty care

1 week or less
for virtual primary care
or virtual therapy

Here are some of the things virtual care can help you with.

24/7 Virtual Visits

- Bronchitis
- Coughs, colds and flu
- Fevers
- Headaches
- Pinkeye
- Rashes
- Sinus problems
- Stomach pain and urinary tract infections (UTIs)

Virtual primary care

- Annual wellness visits, covered 100% just like in-person
- Lab orders
- Non-urgent needs
- Prescription refills*
- Specialist referrals

Virtual therapy

- ADD/ADHD
- Addiction
- Anxiety
- Depression
- Grief
- Mental health disorders
- Stress

Virtual specialty care

- Dental care
- Dermatology
- Gastroenterology needs
- Migraines
- Sleep apnea
- Speech therapy
- Women's health issues, like menopause, birth control and breast health



Healthier habits, healthier lifestyle

Take small steps for lasting change with Real Appeal®, an online weight management support program.



Get healthier, at no additional cost to you

Real Appeal on Rally Coach™ is a proven weight management program designed to help you get healthier and stay healthier. It's available to you and eligible family members at no additional cost as part of your benefits.

Take small steps toward healthier habits

Set achievable nutrition, exercise and weight management goals that keep you motivated to create lasting change. Track your progress from your daily dashboard, too.

Support and community along the way

Feel supported with personalized messages, online group sessions led by coaches and a caring community of members.



Get a Success Kit delivered right to your door.

Make the most of tools and resources like weight and food scales, a portion plate and more. Your Success Kit is delivered after you attend your first live group session.

Visit myuhc.com > Health Resources > Real Appeal

United
Healthcare

Real
Appeal

Real Appeal is a voluntary weight loss program that is offered to eligible members at no additional cost as part of their benefit plan. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them. Results, if any, may vary. Any items/tools that are provided may be taxable and participants should consult an appropriate tax professional to determine any tax obligations they may have from receiving items/tools under the program.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.

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Rediscover your passion for health

With One Pass SelectSM, we're on a mission to make fitness engaging for everyone. One Pass Select can help you reach your fitness goals, while finding new passions along the way. Find a routine that's right for you whether you work out at home or at the gym. Choose a membership tier that fits your lifestyle and provides everything you need for whole body health in one easy, affordable plan

As of January 1, 2025, you and your eligible family members (18+) can get started with One Pass Select when you activate UnitedHealthcare Rewards. Plus, you can use your earnings to help pay for your One Pass Select membership.



Find your fit with One Pass Select



At the gym

Choose from our large nationwide network of gym brands and local fitness studios. Use any gym in the network and create a routine just for you.



At home

Work out at home with live or on-demand online fitness classes. Try our workout builder to get routines created just for you based on your fitness level and interests.

\$34/mo

Classic

12,000+ gym locations

\$69/mo

Standard

14,000+ gym and premium locations

\$109/mo

Premium

16,000+ gym and premium locations

\$159/mo

Elite

20,000+ gym and premium locations



To get started:

1. Scan this code to download the **UnitedHealthcare**SM app
2. Sign in or register
3. Select **UHC Rewards**
4. Select **Redeem rewards** to access One Pass Select

An enrollment fee may apply.

Or get started with a digital-only plan for \$10/Mo.

One Pass Select is a voluntary program featuring a subscription-based nationwide gym network, digital fitness and grocery delivery service. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. Individuals should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for them. Purchasing discounted gym and fitness studio memberships, digital fitness or grocery delivery services may have tax implications. Employers and individuals should consult an appropriate tax professional to determine if they have any tax obligations with respect to the purchase of these discounted memberships or services under this program, as applicable. One Pass Select is a program offered by Optum. Subscription costs are payable to Optum.

Insurance coverage provided by or through United Healthcare Insurance Company or its affiliates.

UnitedHealthcare Rewards is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for you. Receiving an activity tracker, certain credit cards and/or purchasing an activity tracker with earnings may have tax implications. You should consult with an appropriate tax professional to determine if you have any tax obligations under this program, as applicable. If any fraudulent activity is detected (e.g., misrepresented physical activity), you may be suspended and/or terminated from the program. If you are unable to meet a standard related to health factor to receive a reward under this program, you might qualify for an opportunity to receive the reward by different means. You may call us toll-free at 1-866-230-2505 or at the number on your health plan ID card, and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward. Rewards may be limited due to incentive limits under applicable law. Components subject to change. This program is not available for fully insured members in Hawaii, Vermont and Puerto Rico or available to level funded members in District of Columbia, Hawaii, Vermont and Puerto Rico.

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You have the Surest plan, now get the app.

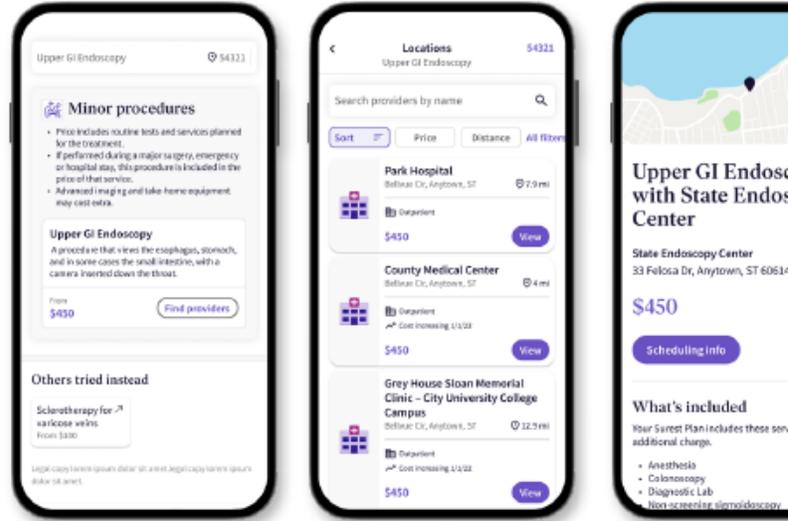
Start here:

- 1 Download the Surest app.
- 2 Activate your free account.
- 3 Start finding opportunities to save.

(It's that easy.)



Members annual **out-of-pocket costs are 46% lower** than the national average.¹



*This image is fictional and for illustrative purposes only.

Get started.

Download the app or activate on our website at **Benefits.Surest.com**.



Apple and the Apple logo are trademarks of Apple Inc., registered in the U.S. and other countries and regions. App Store is a service mark of Apple Inc. Google Play and the Google Play logo are trademarks of Google LLC. 1. Surest self-funded 2021 book of business plan sponsors with at least 12 months of incurred experience in 2021 and both medical and pharmacy data within our warehouse; compared to matched comparison groups from a nationally representative commercially insured database matched by gender, age, urbanicity and zip code using exact matching. 141_V03. Insurance coverage for fully insured plans is provided by All Savers Insurance Company (for FL, GA, OH, UT and VA) or by UnitedHealthcare Insurance Company (for AZ, AR, MI, MN, MO, OK, PA, SC and TN). These policies have exclusions, limitations, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company. Administrative services for insurance products underwritten by All Savers Insurance Company and UnitedHealthcare Insurance Company, and for self-funded plans, are provided by Blind Benefits, Inc. d/b/a Surest, its affiliate United HealthCare Services, Inc., or by Blind Benefits, Inc. d/b/a Surest Administrators Services, Inc. Stop loss insurance for level-funded plans is underwritten by UnitedHealthcare Insurance Company. © Blind Benefits, Inc., dba Surest. All_22-AI-357814_0123



Virtual Visits on the UHC Surest PPO Copay Plan

A doctor who is with you always — every day.

How we can help

Some examples of how our doctors can help:

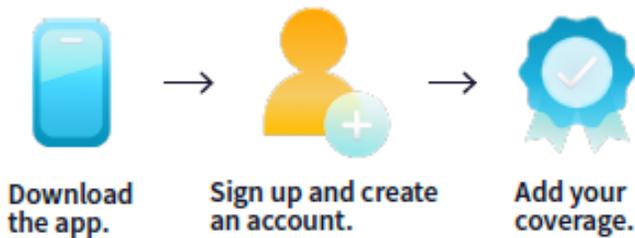
- Colds and allergies
- Migraines & headaches
- Urinary tract infections
- Acne & skin conditions
- Diabetes
- Heart health
- Labs & screenings
- Prescription refills*

You can also talk with experienced, licensed psychiatrists and therapists about mental health needs including anxiety, stress, workplace concerns and insomnia - available 7 days a week, from the privacy of your home.

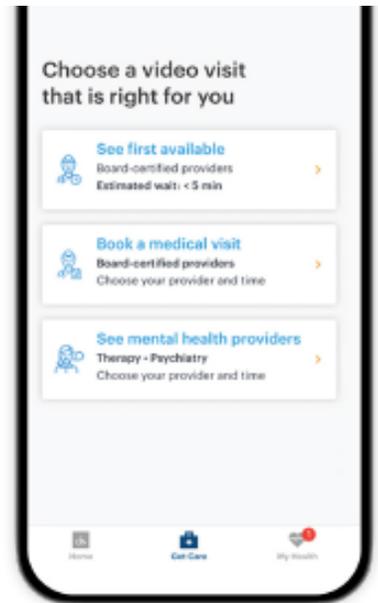
Surest members can visit the Surest app or website for cost and coverage information.

Get started

Join Doctor On Demand in 3 easy steps.



Download the Surest App



Connect with our board-certified doctors via live video right from your phone, tablet or computer on-demand 24/7 or by appointment.



For more information, visit: [DoctorOnDemand.com](https://www.DoctorOnDemand.com)

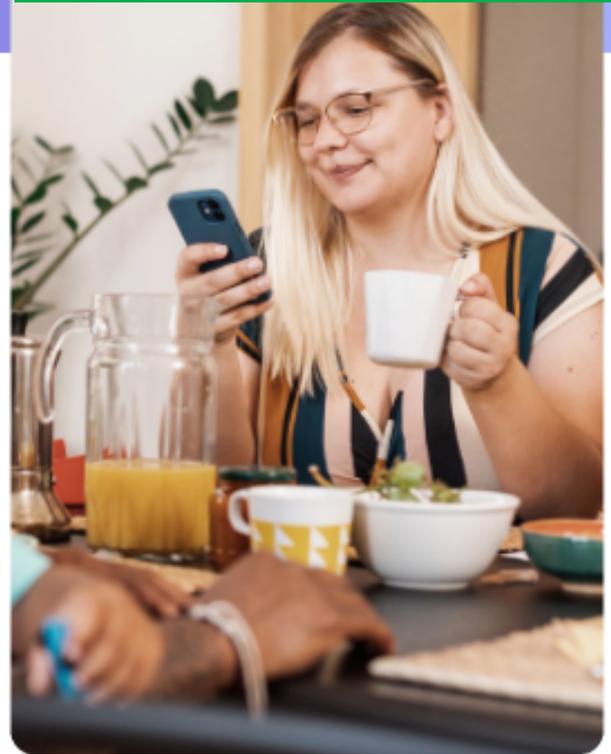
The telemedicine services made available through Doctor On Demand are provided by licensed physicians practicing within a group of independently owned professional practices collectively known as "Doctor On Demand Professionals". These professional practices provide services via the Doctor On Demand telehealth platform. Doctor On Demand, Inc. does not itself provide any physician, mental health or other healthcare provider services. © 2021 Doctor On Demand, Inc.. All rights reserved. * Doctor On Demand physicians do not prescribe Controlled Substances, and may select not to treat or prescribe other medications based on what is clinically appropriate. Insurance coverage for fully insured plans is provided by All Savers Insurance Company (for FL, GA, OH, UT and VA) or by UnitedHealthcare Insurance Company (for AL, AR, AZ, CO, CA, HI, IL, IN, KS, LA, MI, MN, MO, MS, NC, ND, NJ, NV, OK, PA, SC, TN, TX and WI). These policies have exclusions, limitations, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company. Administrative services for insurance products underwritten by All Savers Insurance Company and UnitedHealthcare Insurance Company, and for self-funded plans, are provided by Blind Benefits, Inc. d/b/a Surest, its affiliate United HealthCare Services, Inc., or by Blind Benefits, Inc. d/b/a Surest Administrators Services, in CA. Stop loss insurance for self-funded plans is underwritten by United Healthcare Insurance Company. ID#_22-AI-296382_0023

Surest Member Services:
866-683-6440, Monday – Friday, 6 am – 9 pm CT.

Brought to you by: **surest.**

Rediscover your passion for health.

With One Pass Select™, we're on a mission to make fitness engaging for everyone. One Pass Select can help you reach your fitness goals, while finding new passions along the way. Find a routine that's right for you whether you work out at home or at the gym. Choose a membership tier that fits your lifestyle and provides everything you need for whole-body health in one easy, affordable plan. One Pass Select is available to you or your eligible family members (18+).



Find your fit with One Pass Select



At the gym

Choose from our large, nationwide network of gym brands and local fitness studios. Use any gym in the network and create a routine just for you.



In the kitchen*

Get groceries and household essentials delivered to your home. We make it easy to plan for everything you need to enjoy delicious, nutritious meals.



At home

Work out at home with live or on-demand online fitness classes. Try our workout builder to get routines created just for you, no matter what your fitness level and interests are.

\$34/Month

Classic | 12,000+ gym locations

\$69/Month

Standard | 14,000+ gym and premium locations

\$109/Month

Premium | 16,000+ gym and premium locations

\$159/Month

Elite | 20,000+ gym and premium locations

- An enrollment fee may apply, or get started with a digital-only plan for \$10/Month.
- All tiers Classic or above include the digital tier, grocery delivery*, and additional benefits at no extra cost.



Enroll today

Scan QR code below or visit OnePassSelect.com.

*Grocery services not available to fully insured groups in TX.

One Pass Select is a voluntary program featuring a subscription-based nationwide gym network, digital fitness and grocery delivery service. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. Individuals should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for them. Purchasing discounted gym and fitness studio memberships, digital fitness or grocery delivery services may have tax implications. Employers and individuals should consult an appropriate tax professional to determine if they have any tax obligations with respect to the purchase of these discounted memberships or services under this program, as applicable. One Pass Select is a program offered by Optum. Subscription costs are payable to Optum.

Insurance coverage for fully insured plans is provided by All Savers Insurance Company (for FL, GA, OH, UT and VA), by UnitedHealthcare Insurance Company of IL (for IL), by UnitedHealthcare of Kentucky, Ltd. (for KY), or by UnitedHealthcare Insurance Company (for AL, AR, AZ, CO, DC, DE, GA, IA, ID, IL, IN, KS, KY, LA, MI, MN, MO, MS, MT, NC, NE, NH, NV, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WI, WV and WY). These policies have exclusions, limitations, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company. Administrative services for insurance products underwritten by All Savers Insurance Company and UnitedHealthcare Insurance Company, and for self-funded plans, are provided by Bind Benefits, Inc. d/b/a Surest, its affiliate United HealthCare Services, Inc., or by Bind Benefits, Inc. d/b/a Surest Administrators Services, Inc. CA. © Bind Benefits, Inc., d/b/a Surest. All rights reserved. BxC_24-AI-968123_1024



Helping You Build Healthier Habits

Imagine having all the support you need to create a healthy lifestyle and boost your well-being. Real Appeal® makes it possible, by helping you take small steps for lasting change.

More Support for More Confidence

Real Appeal is a practical online weight management program. It's available to you and eligible family members at no additional cost as part of your health plan benefits.



Supportive Coaching and Sessions

Get personalized guidance from a coach, who leads collaborative weekly group sessions.

Making Behavior Change Possible

Together, we'll address topics like emotional eating, mindset and motivation, and more.

Resources to Stay Motivated

Your Success Kit gives you access to online fitness classes, scales, a portion plate, and more.

Boosting your well-being starts with:

Your mindset

We'll dive into awareness, motivation, confidence, accountability, and more.

Holistic health

Creating a healthy mindset starts with focusing on actions, not just weight loss.

Peer support

Your online group supports you by sharing challenges and successes.



Get started now at enroll.realappeal.com or scan the QR code.

Please have your health insurance ID card handy when enrolling.

Real Appeal is available to members at no additional cost as part of their benefits plan, subject to eligibility requirements. The Real Appeal program is educational in nature and is not a substitute for medical advice.

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Flexible Spending Accounts

You can also participate in the City of Anna Flexible Spending Accounts (FSA), provided through Benefit Bucks. FSAs include a debit card and allow you to set aside pre-tax payroll deductions to pay for eligible medical, dental, vision, and dependent care expenses. Eligible expenses include those associated with office visits, labs, dental procedures, eyeglasses, contacts lenses and much more. A full list of eligible expenses is available at www.irs.gov.

You must submit a new election each year if you would like to participate in the FSA.

HEALTHCARE FSA

- Eligible medical, dental, and vision expenses include:
 - Deductibles
 - Coinsurance
 - Copays
 - Cost of prescription drugs
- New participants will receive an FSA debit card in the mail; current participants may use existing FSA debit card.
- Available only on the UHC Surest PPO Copay Plan.
- If on the UHC HDHP HSA-Q Plan with a Health Savings Account, a Limited Purpose FSA is available for dental and vision expenses only.
- Minimum Annual Contribution: \$100
- **Calendar Year 2025 Annual FSA Maximum Contribution: \$3,300**

DEPENDENT CARE FSA (DCAP)

- Eligible dependent care expenses include:
 - Pre-school
 - Summer day camp
 - Before/after-school programs
 - Child/Adult daycare
- Eligible dependents:
 - Children under age 13,
 - Dependents (of any age) incapable of caring for themselves.
 - Both parents are REQUIRED to be working or going to school full-time at the time of childcare for it to be eligible for reimbursement
- Minimum Annual Contribution: \$150
- **Calendar Year 2025 Annual Maximum DCAP Contribution: \$5,000 (\$2,500 if married filing separately)**

As a reminder, elections remain the same throughout the plan year unless there is a Qualifying Life Event.

90-Day Run-Out Period: You have 90 days to file FSA claims after the plan year ends on September 30, 2026 for claims incurred on or before September 30, 2026.

Plan Carry Over: You can roll over up to **\$660** of unused funds to the new plan year.

Go to www.myRSC.com to submit claims or call 866-788-9118

Plan Carefully: You Lose What You Don't Use

FSAs are a great way to cut your tax bill, but you need to plan carefully. Under IRS regulations that govern FSAs, **you forfeit any money left in your account that is not used to reimburse you for eligible expenses incurred during the plan year.** This is called the "use it or lose it" rule. As you consider the amount to put into your FSAs, keep this rule in mind.



Dental Benefits

Your dental coverage will remain with Guardian for the 2025-2026 plan year. Your full feature plan uses the Dental Guard Preferred Network – please visit: <https://www.guardiananytime.com> to find a provider or download your insurance card. Or you can always call **the Purple Card!**

ID cards are only available in electronic format.

Option 1: Value plan, you can visit any dentist; but you pay less out-of-pocket when you choose a PPO dentist. Out-of-network benefits are limited to our PPO fee schedule.

Option 2: NAP plan, you can visit any dentist; but you pay less out-of-pocket when you choose a PPO dentist. Out-of-network benefits are based on a percentile of the prevailing fee data for the dentist's zip code.

IN-NETWORK BENEFIT HIGHLIGHTS	Value Plan Limited Network	NAP (Network Access Plan) Broad Network
Network	DentalGuard Preferred	DentalGuard Preferred
Calendar Year Deductible <i>Individual / Family</i>	\$50 / \$150 (Up to 3 per family)	\$50 / \$150 (Up to 3 per family)
Annual Benefit Maximum	\$2,000 per person	\$2,000 per person

Covered Services – YOU PAY

Preventive <i>Routine Exams / Cleaning</i>	100%, deductible waived (DW)	100%, deductible waived (DW)
Basic <i>Fillings, Root Canals</i>	0% after deductible	20% after deductible
Major <i>Crowns, Dentures, Implants</i>	40% after deductible	50% after deductible
Orthodontia <i>Children under 19 only</i>	50% after deductible / \$2,500 Lifetime Benefit Limit	50% after deductible / \$2,500 Lifetime Benefit Limit

Dental Maximum Benefit Plan Year Rollover

Rollover Threshold <i>Benefits paid cannot exceed this amount</i>	Maximum Rollover Amount <i>Rewards added to next year's benefit max</i>	Max Rollover Account Limit <i>Maximum possible accumulation of rewards</i>
\$800	\$400	\$1,500

Oral Health Rewards Program

Regular visits to the dentist can help prevent and detect the early signs of serious diseases.

That's why Guardian's Maximum Rollover Oral Health Rewards Program encourages and rewards members who visit the dentist, by rolling over part of your unused annual maximum into a Maximum Rollover Account (MRA). This can be used in future years if your plan's annual maximum is reached.

How maximum rollover works*

Depending on a plan's annual maximum, if claims made for a certain year don't reach a specified threshold, then the set maximum rollover amount can be rolled over.

Plan annual maximum**	Threshold	Maximum rollover amount	Maximum rollover account limit
\$2,000 Maximum claims reimbursement	\$800 Claims amount that determines rollover eligibility	\$400 Additional dollars added to a plan's annual maximum for future years	\$1,500 The limit that cannot be exceeded within the maximum rollover account



Automatic rollover

Submit a claim (without exceeding the paid claims threshold of a benefit year), and Guardian will roll over a portion of your unused annual dental maximum.

* This example has been created for illustrative purposes only.

** If a plan has a different annual maximum for PPO benefits vs. non-PPO benefits, (\$1500 PPO/\$1000 non-PPO for example) the non-PPO maximum determines the Maximum Rollover plan. May not be available in all states.

Guardian's Dental Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. Information provided in this communication is for informational purposes only. Dental Policy Form No. GP-1-DEN-16. GUARDIAN® is a registered service mark of The Guardian Life Insurance Company of America © Copyright 2023 The Guardian Life Insurance Company of America.

Vision Benefits

Your vision coverage will remain with Guardian for the 2025-2026 plan year.

Your full feature plan uses the VSP Network – please visit: www.guardiananytime.com to find a provider or download your insurance card. Or you can always call the **Purple Card!**

ID cards are only available in electronic format.

IN-NETWORK BENEFIT HIGHLIGHTS	Guardian
Network	VSP

Covered Services – YOU PAY / FREQUENCY

Exam	\$10 copay / Once every calendar year
Lenses	\$10 - Single, Bifocal, Trifocal, Lenticular / Once every calendar year <i>See benefit summary for cost of lens enhancements</i>
Frames	\$200 allowance + 20% off the balance / Once every calendar year
Contact Lenses	\$200 allowance / Once every calendar year in lieu of glasses

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

Basic Life and AD&D Coverage

City of Anna provides life insurance benefits through Guardian to all eligible employees **at no cost to you**. The Basic Life benefit is **\$25,000** with a matching AD&D benefit. Age-based benefit reductions apply. A conversion and portability option is included with age restrictions. Please see plan documents for more information. Please remember to update your beneficiary if needed.

Supplemental (Voluntary) Life & AD&D Coverage

You also have the option to purchase supplemental Voluntary Life Insurance and AD&D coverage for you and your family through Guardian. You must purchase coverage for yourself if you wish to cover dependents. You pay for this coverage through payroll deduction. A conversion and portability option is included with age restrictions. Please see plan documents for more information. Please remember to update your beneficiary if needed. Rates are based on age and are located in Employee Navigator. Age-based benefit reductions apply.

	Employee	Spouse	Children
Maximum Coverage Amount	\$300,000 (increments of \$10,000)	100% of employee amount up to \$250,000 (increments of \$10,000)	\$10,000 or \$20,000 - 15 days old to 26 years (Birth to 14 Days - \$500)
Guarantee Issue (GI)	\$150,000 (under age 65)	\$30,000 (under age 65)	N/A
Age Reductions	\$50,000 (Age 65 to 69) \$10,000 (Age 70+)	\$10,000 (Age 65 to 69) \$0 (Age 70+)	
Evidence of Insurability (EOI)	Required for elections over GI or with new elections after your original enrollment period. EOI form can be found in Employee Navigator.		

During this annual enrollment period, **if you currently have voluntary life with Guardian**, you may increase your amount of coverage by up to \$50,000 (provided the total amount does not exceed the Guarantee Issue amount) without EOI. If the total amount exceeds the Guarantee Issue, EOI will be required for the amount above the Guaranteed Issue.

If you are a new hire in your initial eligibility period, you may elect up to the Guarantee Issue amount without EOI. If your election exceed the Guarantee Issue amount, EOI is required.

If you are not a new hire in the initial eligibility period and you do not currently have voluntary life insurance Guardian, EOI is required for any amount of coverage.

Any Increase to Spouse or Child coverage will require EOI.

If EOI is required, you will prompted in Employee Navigator to complete the form online.

Rates Per \$1,000 of Coverage (including AD&D)		
Age Bands	Employee	Spouse *
16-29	\$0.082	\$0.082
30-34	\$0.084	\$0.084
35-39	\$0.099	\$0.099
40-44	\$0.132	\$0.132
45-49	\$0.190	\$0.190
50-54	\$0.288	\$0.288
55-59	\$0.441	\$0.441
60-64	\$0.640	\$0.640
65-69	\$1.132	\$1.132
70+	\$2.192	N/A
Child Cost	\$0.136	

*The cost of spouse coverage is based on the employee's age

Voluntary Short-Term Disability

City of Anna offers Voluntary Short-Term (STD) Disability benefits to all eligible employees. This coverage, also known as “paycheck insurance,” continues with Guardian and pays a percentage of your salary in the event you are unable to work due to a qualifying illness or injury. The rates are based on age and salary and can be located in Employee Navigator.

Short-Term Disability	
Who Pays	Employee Paid (Voluntary)
Benefit	60% of weekly pre-disability earnings
Maximum Benefit	\$1,000 per week
Income Type	Tax Free
Elimination Period	29 days; Benefits begin on day 30
Maximum Benefit Period	Up to 13 weeks
Pre-Existing Condition Limitation	Any condition that you receive medical attention for in the 3 months prior to your effective date that results in a disability during the first 12 months of coverage, would not be covered.
Evidence of Insurability (EOI)	Required for late entrants only (employees who do not elect this benefit as a new hire, but later elect during open enrollment)

Age	Rates / \$10
<19	\$0.150
20-24	\$0.150
25-29	\$0.160
30-34	\$0.210
35-39	\$0.180
40-44	\$0.150
45-49	\$0.190
50-54	\$0.230
55-59	\$0.290
60+	\$0.420

Rate Calculation Example: Age 50

$$\begin{array}{cccccc}
 \underline{\$40,000} \div 52 = & \underline{\$769} \times 60\% = & \underline{\$461} \div 10 = & \underline{\$46} \times & \underline{\$0.230} = & \underline{\$10.58} \\
 \text{Your annual} & \text{Your weekly} & \text{Your weekly} & \text{Rate} & \text{Monthly cost} \\
 \text{earnings} & \text{earnings} & \text{benefit} & & & \\
 & & & & & \\
 & & & & & \text{Not to exceed benefit max of \$1000}
 \end{array}$$

Long-term Disability

City of Anna Long-Term (LTD) Disability benefits to all eligible employees **at no cost to you**. This coverage, also known as “paycheck insurance,” continues with Guardian and pays a percentage of your salary in the event you are unable to work for a long period of time due to a qualifying illness or injury.

	Long-Term Disability
Who Pays	City of Anna
Benefit	60% of monthly pre-disability earnings
Maximum Benefit	\$6,000 per month
Income Type	Taxed
Elimination Period	90 days; Benefits begin on the 91 st day
Maximum Benefit Period	Benefits are payable as long as you are disabled or until you reach the SSNRA, whichever occurs first. A reduced duration schedule applies if disability occurs after age 65.
Pre-Existing Condition Limitation	Any condition that you receive medical attention for in the 3 months prior to your effective date that results in a disability during the first 12 months of coverage, would not be covered.
Evidence of Insurability (EOI)	Not Required

Critical Illness



Watch our video
How critical illness insurance
helps cover the costs of treatment.

City of Anna continues to offer voluntary Critical Illness coverage to all eligible employees. This coverage is through Guardian and pays a monetary benefit in the event you are diagnosed with a covered illness. The rates are based on age and coverage amount and are located in Employee Navigator. See the benefit summary in Employee Navigator for more information.

Critical illness insurance

Critical illness insurance may help you cover expenses not covered by your health insurance.

It's a cash payment you receive if you ever experience a serious illness like cancer, a heart attack, or a stroke, giving you the financial support to focus on recovery.

Who is it for?

Critical illness insurance is a supplemental policy for people who already have health insurance. It provides you with an additional payment to cover expenses like deductibles, treatments, and living costs.

What does it cover?

Critical illnesses include strokes, heart attacks, Parkinson's disease and cancer. Our policies can cover over 30 major illnesses, helping you stay financially stable by paying you a lump sum if you're diagnosed with one of them.

Why should I consider it?

Health coverage is becoming more expensive, with higher co-pays, premiums, and deductibles. Critical illness insurance is an affordable way to supplement and pay for additional expenses that your health insurance doesn't cover. Our policies typically provide payments for the first and second time you're diagnosed with a covered illness.

Plus, critical illness insurance is portable and payments are made directly to you.



Critical costs

John is hospitalized after a heart attack, and has to cover the cost of five days as an inpatient.

Average heart attack hospitalization expense: **\$53,000**

Average Major Medical deductible: **\$1,500**

Major Medical covers 80% of the cost after the deductible is met, but John's still responsible for 20%: **\$10,300**.

Total out-of-pocket amount for John (deductible + coinsurance): **\$11,800**.

John has a **\$10,000** Guardian Critical Illness policy, which covers the majority of these out-of-pocket expenses.

Age Bands	Employee Rates per \$5,000 (Max \$20,000)	Spouse Rates per \$2,500 (Max \$10,000)
17-29	\$2.55	\$1.28
30-39	\$4.10	\$2.05
40-49	\$7.85	\$3.93
50-59	\$15.55	\$7.78
60-69	\$26.70	\$13.35
70+	\$45.45	\$22.73

Accident

**NEW BENEFIT!
EFFECTIVE 10/01/2025**

The City of Anna is offering a new voluntary Accident benefit through Guardian effective 10/01/2025 to all eligible employees. This coverage pays a monetary benefit in the event you or your dependents are injured in an accident. The costs are located in Employee Navigator. See the benefit summary in Employee Navigator for more information. Also includes Global Emergency Assistance Services. There are two options:

- Option 1 – Covers off-the-job accidents
- Option 2 – Covers on- and off-the-job accidents

Accident insurance

Accidents happen. With accident insurance, you can help them hurt a bit less.

Accident insurance is an extra layer of protection that gives you a cash payment to help cover out-of-pocket expenses when you suffer an unexpected, qualifying accident.

Who is it for?

Nobody can predict when an accident might happen. That's why accident insurance is an important add-on policy for people who want to supplement the health and disability insurance coverage they already have individually or through an employer.

What does it cover?

Accident Insurance pays you lump sum of benefits after you suffer an accident. This could be more than 40 different circumstances, including: emergency treatment, ambulance, burns, dislocations, fractures, hospital confinement, and surgery.

Why should I consider it?

Health coverage may become more expensive, with higher co-pays, premiums, and deductibles. Accident insurance can be a simple, affordable way to help supplement and cover additional expenses your health and disability insurance may not cover, including x-rays, ambulance services, deductibles, and even things like rent or groceries.

Plus, accident insurance is portable and payments are made directly to you.



Added support during recovery

Amanda breaks her leg falling off her bike and needs emergency treatment.

Average non-surgical broken leg treatment expense: **\$2,500**

Average Major Medical deductible: **\$1,500**

Major Medical covers 80% of the surgical cost after the deductible is met, but Amanda's still responsible for 20%: **\$200**

Total out-of-pocket amount for Amanda (deductible + coinsurance): **\$1,700**

Amanda's Guardian Accident policy pays her a benefit of **\$1,700**, which covers all of her out-of-pocket expenses.

Tier	Option 1: Off-the-Job	Option 2: On- & Off-the-Job
Employee Only	\$5.32	\$9.51
Employee + Spouse	\$8.91	\$13.11
Employee + Child	\$9.40	\$13.60
Family	\$12.99	\$17.19

Cancer

**NEW BENEFIT!
EFFECTIVE 10/01/2025**

The City of Anna is offering a new voluntary Cancer coverage through Guardian effective 10/01/2025 for all eligible employees. This coverage pays a monetary benefit in the event you are diagnosed with cancer and undergo treatment. The rates are based on age and coverage amount and are located in Employee Navigator. See the benefit summary in Employee Navigator for more information.

IMPORTANT: *In order to be approved for Cancer coverage, you MUST complete and submit the Cancer Policy Evidence of Insurability form. Upon review, Guardian will notify you if your coverage has been approved.*

Cancer insurance

If you're diagnosed with cancer, the last thing you need to think about is the cost. Cancer insurance helps ease the financial burden.

Every year, more and more people are diagnosed with cancer. Unfortunately, in addition to bearing the physical and emotional toll of this disease, patients are often saddled with added financial expenses.

Who is it for?

Cancer insurance is for people who want added financial protection, in addition to their regular health insurance. It comes into play if you are diagnosed with cancer—providing additional financial support to help keep the focus on your cancer treatment and recovery.

What does it cover?

Cancer insurance benefits can help you handle medical plan deductibles, co-pays and other out-of-pocket costs by providing benefits when you receive radiation or chemotherapy treatment, or are hospitalized for surgery to treat cancer. These benefits can be used for non-medical expenses such as transportation to treatment facilities, and even everyday living expenses like groceries, rent, and mortgage payments.

Why should I consider it?

Health coverage may become more expensive, with higher co-pays, premiums, and deductibles. The unexpected out-of-pocket expenses of cancer recovery, including transportation, co-pays, and deductibles, can add up fast. What's more, some of the costs you may incur during recovery are non-medical, such as covering a mortgage, childcare, and household expenses. Cancer insurance can help you pay for all of them.

Plus, cancer insurance is portable and payments are made directly to you.



Extra support

Sarah's diagnosed with kidney cancer after a screening test and decides to undergo kidney removal surgery.

Average surgical expense: **\$25,000**

Average Major Medical deductible: **\$1,500**

Major Medical covers 80% of the surgical cost after the deductible is met, but Sarah's still responsible for 20%: **\$4,700**

Total out-of-pocket amount for Sarah (deductible + coinsurance): **\$6,200**

Sarah has Guardian's Cancer Advantage policy, which pays her **\$2,500** as an initial diagnosis benefit and **\$2,100** for a 7-day hospital stay.

This gives her a total of **\$4,600** to help cover a portion of her out-of-pocket amount.

Tier	Per Pay Cost
Employee Only	\$5.38
Employee + Spouse	\$11.46
Employee + Child	\$6.67
Family	\$12.75

Employee Assistance Program (EAP)

GuidanceResources®

Your Life. Your Work. Your Best.® Your GuidanceResources® Program

Sometimes life can feel overwhelming. It doesn't have to. Your ComPsych® GuidanceResources® program provides confidential counseling, expert guidance and valuable resources to help you handle any of life's challenges, big or small.

Services:

Confidential Emotional Support

3 face-to-face or virtual sessions per person, per issue, per year

- Anxiety, depression, stress
- Grief, loss and life adjustments
- Relationship/marital conflicts

Work and Lifestyle Support

- Child, elder and pet care
- Moving and relocation
- Shelter and government assistance

Legal Guidance

- Divorce, adoption and family law
- Wills, trusts and estate planning
- Free consultation and discounted local representation

Financial Resources

- Retirement planning, taxes
- Relocation, mortgages, insurance
- Budgeting, debt, bankruptcy and more

Digital Support

- Connect to counseling, work-life support or other services
- Tap into an array of articles, podcasts, videos, slideshows
- Improve your skills with On-Demand trainings

Online Will Preparation

- Quickly and easily complete a will on your computer with EstateGuidance®
- Specify guardians, trustees and property division
- Provide funeral and burial instructions

Wellness Support

Flexible 3-5 coaching session model

- Make positive lifestyle changes with health coaching
- Improve your nutrition, exercise habits, weight loss efforts
- Get help with smoking cessation, back care, resiliency and more

Life is challenging. We can help.
Confidential 24/7 support.

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GuidanceResources® Worldwide

 Guardian®



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Call: (855) 239.0743
TRS: Dial 711



Online: [guidanceresources.com](https://www.guidanceresources.com)
App: GuidanceNowSM
Web ID: Guardian

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Monthly Premiums

Tier	Total Premium	City of Anna	Employee
UHC PPO HDHP HSA-Q Plan (Plan 1)			
Employee Only	\$500.12	\$500.12	\$0.00
Employee + Spouse	\$1,141.75	\$859.43	\$282.32
Employee + Children	\$1,082.04	\$826.00	\$256.04
Employee + Family	\$1,723.69	\$1,185.32	\$538.37
UHC Surest PPO Copay Plan (Plan 2)			
Employee Only	\$658.58	\$658.58	\$0.00
Employee + Spouse	\$1,503.51	\$1,131.74	\$371.77
Employee + Children	\$1,424.88	\$1,087.71	\$337.17
Employee + Family	\$2,269.83	\$1,560.88	\$708.95
Guardian Dental Plan			
Employee Only	\$29.38	\$29.38	\$0.00
Employee + Spouse	\$59.65	\$44.52	\$15.14
Employee + Children	\$88.81	\$59.10	\$29.72
Employee + Family	\$128.22	\$78.80	\$49.42
Guardian Vision Plan			
Employee Only	\$10.62	\$10.62	\$0.00
Employee + Spouse	\$17.88	\$14.25	\$3.63
Employee + Children	\$18.24	\$14.43	\$3.81
Employee + Family	\$28.86	\$19.74	\$9.12

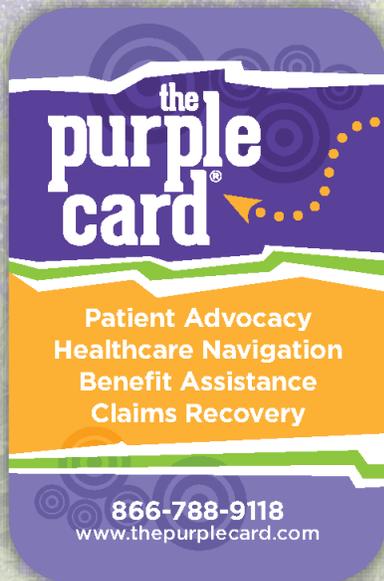
Per pay period premium deductions are calculated based on 24 pay periods

Questions About Your Benefit Offerings?

Just Pull Out Your Purple Card and Call

866.788.9118

8:30am - 5:30pm | Monday - Friday



The City of Anna continues to partner with Brinson Benefits. Brinson's team will ensure that you fully understand and get the most out of your employee benefit plans. You can contact The Purple Card with questions or concerns about any of your benefit plans.

Just pull out The Purple Card and call (866) 788-9118

This benefits brochure is a brief outline of certain benefits available to The City of Anna employees. The details of these plans and policies are contained in the official plan and policy documents, including some insurance contracts. If there is ever a question about one of these plans and policies, or if there is a conflict between information in this booklet and the formal language of the plan or policy documents, the formal wording in the plan or policy documents will govern. Also, please note that the benefits described in this booklet may be changed at any time and does not represent a contractual obligation on the part of The City of Anna.