

April 2023

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Mono, summary plan descriptions, and other sources. In case of discrepancy, plan documents will prevail over information presented in this guide. Contact Human Resources with any questions.

This Benefit Guide is for general educational purposes and is based on information provided by The County of

DENEFTIS AT A GLANCE		
BENEFIT TYPE	OPTION	
MEDICAL PLANS	PERS Choice Plan PERS Care Plan PORAC (DSA & MCPSOA Employees Only)	
DENTAL PLAN	Delta Dental	
VISION PLAN	VSP (Vision Service Providers)	
FLEXIBLE SPENDING ACCOUNT	WorkTerra: Medical Flexible Spending Account Dependent Care Account	
RETIREMENT PLANS	457/401a	
EMPLOYEE ASSISTANCE PROGRAM	Trindel: Confidential Professional Counseling Voya: 24/7 Assistance in Behavioral Health Counseling, Wellness Counseling, Financial Counseling/Planning, Family Services, Legal Services, Travel Assistance, Funeral Assistance	
OPTIONAL INSURANCES WELLNESS PROGRAMS	AFLAC: Accident Insurance Cancer/Specified Disease Insurance Critical Illness Insurance Dental Insurance Hospital Confinement Indemnity Insurance Life Insurance Short Term Disability Insurance Vision Insurance Snowcreek Athletic Club Group Rates Body Shop Gym Group Rates Double Eagle Fitness Center Group Rates	
	Memorial Hall Workout Room	

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Who is eligible?

Full time and part time employees hired into permanent benefitted positions, and their eligible dependents.

Required Documents for Benefit Enrollment

- Marriage Certificate or Declaration
 of Domestic Partnership
- Birth Certificate or Adoption papers
- ♦ Social Security Cards

When will the benefits be effective?

The first day of the month following the employee's hire date.



ELIGIBLE DEPENDENTS

- Spouse or Domestic Partner
- Children, spouse's children, adopted children up to age 26 (varies for Dental/Vison)
- Certified Disabled Dependent over age 26
- Certified "Parent-Child Relationship" Children

When can I enroll or change elections?

- Within the first 30 days of employment, except for medical coverage, which allows 60 days
- During open enrollment, currently September-October annually
- When a qualifying event occurs

What is a qualifying event?



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Marriage or
Divorce,
Birth of a child,
or Loss of Coverage

Medical Insurance Plans

Mono County contracts with CalPERS to provide health insurance for its employees and currently offers several Preferred Provider (PPO) Plans which are administered by Anthem Blue Cross. Plans available are PERS Gold, PERS Platinum, and PORAC (only available to Safety Group employee's). When considering your healthcare options, it is important to not only look at the per pay period cost to you but to also consider the level of coverage that is right for you and your family.

Healthcare Terms and Definitions

To make an informed decision about your healthcare it is essential that you understand some common terms and what they mean to your health plan. Understanding what these terms refer to will help provide a better knowledge of common costs associated with each plan. For a full glossary of healthcare terms, you can visit http://www.healthcare.gov/sbc-glossary/



Coinsurance is your share of the costs of a covered health care service, calculated as a percentage (for example, 20% of the allowed amount for the service). You generally pay coinsurance plus any deductibles you owe. (For example, if the health insurance or plan's allowed amount for an office visit is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health insurance or plan pays the rest of the allowed amount.)



Deductible is the amount you owe during a coverage period (usually one year) for covered health care services before your plan begins to pay. An overall deductible applies to all or almost all covered items and services. A plan with an overall deductible may also have separate deductibles that apply to specific services or groups of services. A plan may also have only separate deductibles. (For example, if your deductible is \$1000, your plan won't pay anything until you've met your \$1000 deductible for covered health care service subject to the deductible.)

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Out-of-pocket limit is the most you could pay during a coverage period (usually one year) for your share of the costs of covered services. After you meet this limit the plan will usually pay 100% of the allowed amount. This limit helps you plan for health care costs. This limit never includes your premium, balance-billed charges or health care your plan doesn't cover. Some plans don't count all your copayments, deductibles, coinsurance payments, out-of-network payments, or other expenses toward this limit.

Allowed amount is the maximum payment the plan will pay for a covered health care service.



Plan Summary is only meant to be a summary of common services provided by In-Network Providers, for full plan detail please refer to the Evidence of Coverage located at www.anthem.com/ca/calpers

	PERS Gold	PERS Platinum	PORAC
Annual	\$1,000 Individual	\$500 Individual	\$300 Individual
Deductible	\$2,000 Family	\$1,000 Family	\$900 Family
Out of Pocket	\$3,000 Individual	\$2,000 Individual	\$2,000 Individual
Max (RX has separate max)	\$6,000 Family	\$4,000 Family	\$4,000 Family
Primary Office Visit	\$10 Copay	\$20 Copay	\$10 Copay
Specialist Office Visit	\$35 Copay	\$35 Copay	\$35 Copay
Preventative Care	No Charge	No Charge	No Charge
Urgent Care	\$35 Copay	\$35 Copay	\$35 Copay
Emergency Room	\$50 copay (waived if admitted)	\$ 50 copay (waived if admitted)	20% coinsurance/50% coinsurance non-ER
Hospital	20% coinsurance	Facility Fee: \$250 and 10% coinsurance	20% coinsurance
Maternity Care	Inpatient coinsurance covered when enrolled and participating in Future Moms Program 20% coinsurance (without enrollment)	10% coinsurance	20% coinsurance
Diagnostic Test	20% coinsurance	10% coinsurance	20% coinsurance
Mental Health/ Behavioral Health/ Substance Abuse	\$10 copay	\$20 copay	Office Visit: \$10 and 20% coinsurance for home and hospital visits
Drocarintian	Generic: \$5	Generic: \$5	Generic Retail: \$10
Prescription Drugs	Preferred brand: \$20	Preferred brand: \$20	Preferred brand: \$25
(30 day supply)	Non-Preferred brand: \$50	Non-Preferred brand: \$50	Non-preferred brand: \$45

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Dental Insurance Plan

The County currently offers dental coverage administered by Delta Dental and the premiums are 100% employer paid.

- ⇒ To maximize dental benefits employees are highly encouraged to visit a Delta Dental PPO Dentist. PPO network dentists have contracted rates and cannot balance bill you for additional fees. To find a dentist visit www.deltadentalins.com.
- No ID card necessary, just provide your dental office with your name, birth date, & social security number. If you would like a card as a reference you can print one on www.deltadentalins.com.
- Incentive plan begins paying 70% of contract allowance for diagnostic, preventative and basic services during the first year with the coinsurance increasing by 10% each year (max 100%) if the enrollee visits the dentist at least once per year.

△ DELTA DENTAL

mary Enrolled Chause or demostic partner and cligible dependent children

Eligibility	Primary Enrollee, Spouse or domestic partner and eligible dependent children to the end of the month the dependent turns 19 or 25 if a full-time student					
Deductibles	\$25 per person / \$75 per family each calendar year Deductibles apply to Diagnostic and Preventative but is waived for Orthodontics					
Maximums	PPO dentist: \$1,100 per person each calendar year Non-PPO dentist: \$1,000 per person each calendar year					
Waiting Periods	Basic Services:		Major Services: 6 Months	Prosthodontics: 6 Months	Orthodontics: 12 Months	
Benefits and C Services			Dental PPO dentists** n-PPO Network)	Non-PPO dentists ** (Out-of-PPO Network)		
Diagnostic & Prev Services (Exams, cle and x-rays)		70-100%		70-100%		
Basic Services (Fill simple tooth extraction sealants)	•	70-100%		70-100%		
Endodontics (root	canals)	70-100%		70-10	00%	
Periodontics (gum ment)	treat-	70-100%		70-100%		
Oral Surgery		70-100%		70-100%		
_	ajor Services (crowns, ays, onlays, and case restorans) 50%		50%	509	%	
Prosthodontics (bidentures and implant	0 ,	50%		509	%	
Orthodontic Bene (dependent children)	fits	50%		50%		%
Orthodontic Maxii	mums	\$1,000 Lifetime \$1,000 Lifetime		ifetime		
**Reimbursement is based on PPO contracted fees for PPO dentists. Premier contracted fees for Premier dentists and program						

^{**}Reimbursement is based on PPO contracted fees for PPO dentists, Premier contracted fees for Premier dentists and program allowance for non-Delta Dental dentist.

Vision Insurance Plan

Vision benefits are provided by VSP and the premiums are currently 100% employer paid.

You'll get the highest level of care, including a Well Vision Exam®-the most comprehensive exam designed to detect eye and health conditions

No ID card necessary, at your appointment tell them you have VSP. If you'd like a card as a reference, you can print one on vsp.com

When you see a VSP provider, you'll get the most out of your benefit, have lower out-of-pocket costs and your satisfaction is guaranteed.

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VSP PROVIDER NETWORK: VSP SIGNATURE

Primary Enrollee, Spouse or domestic partner and eligible dependent children to the end of the month the dependent turns 26.				
Benefit	Description	Copay		
WellVision Exam	• \$160 allowance for a wide selection of frames • Every 12 months	\$10 for exam and glasses		
Prescription				
Glasses	Description	Copay		
Frame	 \$160 allowance for a wide selection of frames \$180 allowance for featured frame brands 20% savings on the amount over your allowance \$90 Walmart/Costco Frame allowance Every 12 months 	Combined with exam		
Lenses	 Single vision, lined bifocal, and lined trifocal lenses Every 12 months 	Combined with exam		
Lens Enhancements	 Progressive lenses/Custom Progressive lenses Tints/Photochromic adaptive lenses Premium progressive lenses Average savings of 35-40% on other lens enhancements Every 12 months 	\$0 \$0 \$80-90 \$120-\$160		
Contacts (instead of glasses)	•\$120 allowance for contacts; copay does not apply •Contact lens exam (fitting and evaluation) •Every 12 months	Up to \$60		
Primary Eyecare	 Treatment and diagnosis of eye conditions like pink eye, vision loss and monitoring of cataracts, glaucoma and diabetic retinopathy. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details As needed 	\$20		

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WHAT?! There's more??

Extra Savings	
Glasses and Sunglasses	 Extra \$20 to spend on featured frame brands. Go to vsp.com/special offers for details. 30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP provider on the same day as your Well Vision Exam. Or get 20% from any VSP provider within 12 months of your last Well Vision Exam
Retinal Screening	•No more than a \$39 copay on routine retinal screening as an enhancement to a Well Vision Exam
Laser Vision Correction	 Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities After surgery; use your frame allowance (if eligible) for sunglasses from any VSP doctor

^{**}VSP guarantees coverage from VSP network providers only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location.



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Wellness Program











What does "wellness" look like to you?

No matter what you do for your own wellness, the beautiful Eastern Sierra has extensive outdoor choices! And as a Mono County employee, you have the ability to choose from a variety of gym memberships at discounted group rates through a convenient payroll deduction. The County will contribute \$25.00 per month towards a membership with one of the three fitness partners.

Snowcreek Memb	persnip	
Type of Membership	Total Monthly Cost	Monthly Employee Cost
Single	\$69.00	\$44.00
Couple	\$99.00	\$74.00
Family	\$119.00	\$94.00
Additional members	after 5 are \$15 ea	ach
Double Eagle/Cre	ekside Fitness	Center
Type of Membership	Total Monthly Cost	Monthly Employee Cost
Single	\$56.00	\$31.00
Couple	\$77.00	\$52.00
Family	\$90.00	\$65.00
Additional members	after 5 are \$15 ea	nch
Dual Membership to Sr	nowcreek & Double	Eagle are available at an
The Body Shop		
Type of Membership	Total Monthly Cost	Monthly Employee Cost
Single	\$55.00	\$30.00











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Flexible Spending Accounts

What is a FSA?

With an FSA, you elect to have your annual contribution deducted from your paycheck each pay period, in equal installments throughout the year, until you reach the yearly maximum you have specified. The amount of your pay that goes into an FSA will not count as taxable income, so you will have immediate tax savings. FSA dollars can be used during the plan year to pay for qualified expenses and services.



- A Healthcare FSA allows reimbursement of qualifying out-of-pocket medical expenses.
- A Dependent Care FSA allows reimbursement of dependent care expenses, (such as daycare)

IS AN FSA RIGHT FOR ME?

- A FSA is a great way to pay for expenses with pre-tax dollars.
- A Healthcare FSA (up to \$3,050 limit set by the IRS) could save you money if you or your dependents:
 - Have out-of-pocket expenses like co-pays, coinsurance, or deductibles for health, prescription, dental or vision plans.
 - Have a health condition that requires the purchase of prescription medications on an ongoing basis.
 - Wear glasses or contact lenses or are planning LASIK surgery
 - Need orthodontia care, such as braces, or have dental expenses not covered by your insurance.
- A Dependent Care FSA (up to \$5,000 limit set by the IRS) provides pre-tax reimbursement of out-of-pocket expenses related to dependent care. This benefit may make sense if you (and your spouse, if married) are working or in school, and:
 - Your dependent children under age 13 attend daycare, after-school care or summer day camp.
 - You provide care for a person of any age whom you claim as a dependent on your federal income tax return and who is mentally or physically incapable of caring for himself or herself.

With all FSA account types, you'll receive access to a secure, easy-to-use web portal where you can track your account balance, view your investment accounts and submit requests for reimbursements. In addition, you'll receive a convenient prepaid benefits card to make it easy to pay for eligible services and products not covered by your health insurance. When you use the card, payments are automatically withdrawn from your account, so there are no out-of-pocket costs and most of the time you won't have to submit receipts to verify the purchase. Just swipe the card and go. It's that easy!

**Before you enroll, you must first decide how much you want to contribute to your account(s). You will want to spend some time estimating your anticipated eligible medical and dependent care expenses for the upcoming plan year, as Federal tax regulations require that the *unused amount at the end of the plan year be forfeited*.

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Retirement Plans







BENEFITS OF INVESTMENT

- Professional guidance from local representatives
- Convenient payroll deductions
- Employee directs investments of contributions

Participating Providers

- Orion Portfolio Solutions
- Mass Mutual
- Valic

(see last page for contact info)

CalPERS

Mono County currently contracts with the California Public Employee's Retirement System or CalPERS to provide retirement benefits to employees. CalPERS is a defined benefit plan which is funded by employee contributions, employer contribution, and earnings from CalPERS investments. A defined benefit plan provides a retirement benefit determined by a set formula which uses your years of service, age at retirement, and your highest earnings in a 12 month or 36 month period, depending on your retirement formula.

Most new members will fall into the Pension Reform Formulas:

★ Local Miscellaneous Group: 2%@62 **★** Local Safety: 2.7% @ 57

If you were a member prior to January 1, 2013, you may be eligible for a formula prior to the Pension Reform rates. Mono County's pre-pension reform formulas, which were in place on December 31, 2012 are:

> ♣ Local Miscellaneous Group: 2.5% @ 55 ♣ Local Safety-Sheriff Group: 3 % @ 55 ♣ Local Safety-Fire Group: 2 % @ 50 ♣ Local Safety-County Peace Officer: 3 % @ 50

457/401(a) Plans

Mono County provides a deferred compensation program through a 457 or 401(a) Plan. Employees have the option to sign up for the 457-deferred compensation plan and contribute up to the maximum amount allowed by the IRS. If the employee contributes a total of 1%-3% of their pre-tax salary, the County will match those contributions up to a maximum of 3% into a 401(a) plan under the employee's name.

VESTING TABLE FOR 401(A) COUNTY CONTRIBUTION

The 401(a) Plan implementing this Article shall provide the following schedule of vesting requirements for any participating employee to earn and be eligible to withdraw or otherwise receive a portion (or in some cases all) of his or her total account value at the time of termination:

Years of COUNTY Service	Portion of Account Value Vested
Less than 1 year	0%
1 year plus 1 day to 2 years	10%
2 years plus 1 day to 3 years	20%
3 years plus 1 day to 4 years	40%
4 years plus 1 day to 5 years	60%
5 years plus 1 day but less than	1 6 years 80%
6 years	100%

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

Through Voya, the County provides you and your dependents with Basic Life Insurance and AD&D at no cost to you. Basic life pays a benefit to your beneficiary if you pass away during

your employment with the County. AD&D insurance pays a benefit to you or your beneficiary, separate from the life insurance benefit, if you are severely injured or die as the result of a covered accident.

	Basic Life		l Death and ment (AD&D)
General Employees	\$5,000.00		\$15,000.00
At-Will/Elected	\$50,000.00		\$50,000.00
Paramedic	\$50,000.00		\$50,000.00
Basic Dependent Life			
Employee Spouse			\$1,000.00
Employee Child(ren)		\$1,000.00	
Employee Child(ren) (6 months and under)		\$100.00	



Supplemental Life and Accidental Death & Dismemberment (AD&D) Insurance

Employees have the option of enrolling in Voya's Supplemental Life Coverage policy for themselves, their spouse and any dependent children (to age 25). This policy is separate from the County provided policy and is paid for by the employee.

- Portability: you may apply to continue your Supplemental coverage when you leave County employment, and pay premiums directly to the insurance company
- <u>Waiver of Premium</u>: If you become unable to work due to a total disability, your insurance can be continued without premium payment
- Convenient Payroll Deductions: Premium deductions are taken directly from your paycheck (semi-monthly), so you never have to worry about late payments or lapse notices.

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Supplemental Life and Accidental Death and Dismemberment (All Employees)

•If elected in first 31 days of eligibility no proof of good health is required.

•After 31 days, proof of good health required.

After 31 days, proof of good health required

•Maximum amount available to purchase

•Proof of good health is required

Spouse or Domestic Partner Supplemental Life and Accidental Death and Dismemberment (under 70)

•If elected in first 31 days of eligibility no proof of good health is required.

•After 31 days, proof of good health required

•Maximum amount available to purchase

•Proof of good health is required

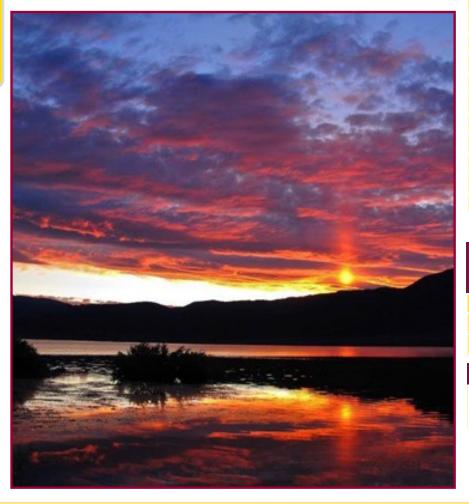
•Amount cannot exceed employee amount

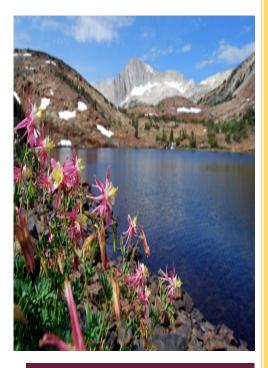
Child Supplemental Life (to age 25)

\$10,000

•If elected in first 31 days of eligibility no proof of good health is required.

After 31 days, proof of good health required





Employee and Spouse Supplemental Life Insurance Rates

Employee Age	Monthly Rate per \$1000 of Coverage
Under 25	\$0.050
25-29	\$0.060
30-34	\$0.080
35-39	\$0.098
40-44	\$0.143
45-49	\$0.210
50-54	\$0.360
55-59	\$0.600
60-64	\$0.915
65-69	\$1.763

Supplemental Accidental Death and Dismemberment (AD&D) Insurance Rates

Monthly Rate per \$1,000 of CoverageEmployee\$0.02Spouse\$0.02

Children Life Insurance Rates

Monthly Rate per \$1,000 of Coverage \$0.21

**It is recommended purchasing equal amounts of Supplemental Life and Supplemental AD&D.

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Optional Insurance

Mono County partners with Aflac to administer the optional insurances. These insurances include, but are not limited to: Supplemental Life, Short-Term Disability, Hospital Confinement Indemnity, Dental, Vision, Accident, Cancer/Specified Disease, Critical Illness, etc.



- Benefits paid directly to the employee
- Convenient payroll deductions for premiums
- Different plan levels allow employee to choose how much coverage is needed
- Local representative to administer your policy

If you are interested, you can sign up with our local representative, Roxanne Wiswosser, during open enrollment (every Sept-Oct).



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Employee Assistance Program (EAP)

A *FREE* service to all County employees, Trindel Insurance Fund provides for confidential professional counseling to help employees and their family members resolve issues that affect their personal lives and/or work performance.



- Provides a current Employee Assistance Provider List on their website
 - Verifies the Provider is licensed and insured
- Pays for three (3) sessions within any six (6) month period per County employee (employee, their spouse, or dependent minor children as defined by the IRS)



Provides the best service possible for the County employees

- 1. Choose a provider from the EAP Provider List (below or at www.trindel.org)
 - 2. Make an appointment with an EAP Provider of your choice from the List
 - 3. Take a copy of your most recent paystub or your County badge to your first visit
 - **4.** Contact Trindel or Jay Sloane (ext 5405 or jsloane@mono.ca.gov) if you have any questions.

This service is to maintain or improve employee efficiency through identification and referrals for counseling, treatment, or therapy in connection with personal problems affecting employee performance.



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Employees also have additional options in the Employee Assistance Program provided by VOYA

- iii Eligibility: Employees covered under group life and their spouses and children
- Available 24 hours a day, 7 days a week
- Confidential toll-free line or via e-mail to speak with live clinicians



Services are provided through ComPsych, and include:

- * GuidanceResources® for work-life, behavioral health and wellness services. Our program offers someone to talk to and resources to consult whenever and wherever you need them for anxiety, depression, stress, grief, loss and life adjustments, relationship/marital conflicts.
- * Online Will Preparation secure your wishes with a legally binding Will. Receive assistance completing a last Will and testament, draft a living Will, and draft a final arrangements document.
- * LegalConnect® our attorneys can help you with: family law matters, bankruptcy and credit issues, landlord/tenant issues, real estate and foreclosure questions, immigration concerns, and wills.
- * FinancialConnect® our financial experts can help you with: credit card and debt management, budgeting, retirement and estate planning, tax and real estate questions, financing for college, investment options, and mortgages, loans and refinancing.
- * Travel Assistance when traveling more than 100 miles away from home Voya offers you and your dependents pre-trip information, emergency personal services, medical assistance services, and emergency transportation services.
- * Funeral Planning Services provided by Everest Funeral Package, LLC and includes 24/7 advisor assistance. Everest Services include pre-planning with online planning tools and at-need services for family support and negotiation assistance.
- ** Services provided include a variety of no cost options. If referrals for services are necessary, pricing will depend on the extent of your personal needs. Please see Human Resources for more information & full EAP packet provide by VOYA.**

(See last page for contact information)

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Paid Time Off

Applicable collective bargaining agreement may provide otherwise

SICK TIME

Employees accrue 12 (eight hour) sick days per year.

VACATION

Initial employment = 10 days per year 3-10 years of service = 15 days per year 10-15 years of service = 17 days per year 15-20 years of service = 19 days per year 20 + years of service = 20 days per year

Permanent part-time or less than full time employee's accrue time off on a prorated basis.

COUNTY HOLIDAYS

The County currently recognizes 14 (eight hour) holidays, these will vary per year:

- New Year's Day
- Martin Luther King, Jr Day
- President's Day
- Cesar Chavez (if weekday)
- Memorial Day
- ♣ Fourth of July
- Labor Day
- Indigenous People's Day
- Veteran's Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Eve (if weekday)
- Christmas Day
- New Year's Eve (if weekday)

PERSONAL HOLIDAYS

The County entitles employees to 2 (eight hour) personal holidays per calendar.



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Contact Information



Medical Insurance: www.anthem.com/ca/calpers

○ <u>Dental Insurance:</u> www.deltadentalins.com

⑥ ⑥ Vision Insurance: www.vsp.com

VALIC_®

Kim B. Short

Financial Advisor 5070 N. 6th Street, STE 146 Fresno, CA 93710 Cell: (559) 417-7043

Oram Orion Portfolio Solutions Kaylor Greg Bokenkamp

Financial Consultant

O 888.438.0688 x13 C 760.258.4747 F 888-438-0688 E greg@investmentsok.com

306 Laurel Mountain Road, Suite 104 P.O. Box 7135 Mammoth Lakes, CA 93546 www.investmentsok.com

... MassMutual

Wells Fargo Investments **Eric Wasserman** Office: (760) 924-2600

Cell: (760) 924-2600 Cell: (760) 221-9944



www.trindel.org

or Jay Sloane, Mono County Risk Manager (760) 932-5405 jsloane@mono.ca.gov



Roxanne Wiswosser

(661) 951-3999 roxanne_wiswosser@us.aflac.com

or Mono County Human Resources



Phone: 877.533.2363 TDD: 800.697.0353

Online: guidanceresources.com App: GuidanceResources.®Now

Web ID: My5848i



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