



BENEFIT HIGHLIGHTS



January 1, 2021—December 31, 2021





Introduction

In keeping with a commitment to our most valuable resource—our people—we are pleased to offer a benefits program designed to protect your health and well-being. We believe we are providing a program that offers not only quality and value, but one that satisfies the diverse needs of our workforce.

This booklet is a summary of your benefit plans. If there is a discrepancy between these summaries and the written legal plan documents, the plan documents shall prevail. This booklet and plan summaries do not constitute a contract of employment.

You have a web portal that houses all of the information regarding benefits

Go to adp.com

Use your Login

Use your personal login and password to access benefit information

All changes and future open enrollment elections are made via the ADP portal.



Eligibility

Eligible Employee

If you are an employee working 30 or more hours per week, you are eligible to enroll yourself in the benefits described in this guide.

Eligible Dependent

The following family members are eligible for medical, dental, vision & voluntary life coverage: spouse, legal children; natural or adoptive.



Enrollment

New Employees

You become eligible for benefits effective on your full-time date of hire. You must enroll yourself and your dependents within 30 days of your hire date.

Open Enrollment

Employees who did not enroll at their initial eligibility period or who previously waived coverage for themselves and/or their dependents can take advantage of the open enrollment period.

Our plan year runs January 1 through December 31. You have the once-a-year opportunity to enroll in or make changes to your benefits during open enrollment.

Changes During the Year

Benefit changes only occur once a year, during open enrollment, unless you experience a “qualifying life event” such as: marriage, divorce, legal separation, birth or adoption, commencement or termination of adoption proceedings, change in dependent status, death of a qualified dependent, change in residence due to an employment transfer for you or your spouse, or change in spouse’s benefits or employment status.

All enrollments and changes must be submitted through the ADP benefit enrollment portal no later than 30 days from the qualified event date.



Medical Plan Information

Aetna Platinum and Gold plans

With a PPO medical plan, you receive a higher level of benefit when you visit providers who participate in the **Aetna Managed Choice POS (Open Access)** network. You may also visit providers outside the network, but benefits are lower.

Aetna HSA plan

With an eligible HSA medical plan, you receive a higher level of benefit when you visit providers who participate in the **Aetna Managed Choice POS (Open Access)** network. You may also visit providers outside the network, but benefits are lower.

If enrolled in the HSA medical plan, you are eligible to participate in a Health Savings Account (HSA). An HSA is an investment tool that helps you save for healthcare expenses, including deductibles and coinsurance. Refer to the Health Savings Account section of this guide for additional information.

To view a list of providers you can visit www.aetna.com and select the **Managed Choice POS (Open Access)** network.

Key Terms to Remember

Plan Year

Refers to the timeframe of January 1 through December 31

Calendar Year

Refers to the timeframe of January 1 through December 31

Annual Deductible

Your annual deductible is the amount you have to pay each year before the plan starts paying a portion of medical expenses. Some services, such as office visits, require copays and do not apply to the deductible.

Copays and Coinsurance

These expenses are your share of cost paid for covered services. Copays are a fixed dollar amount and are due at the time you receive care. Coinsurance is the percentage of covered expenses shared by you and the plan. In some cases, coinsurance is paid after the deductible has been met.

Out-of-Pocket Maximum

This is the total amount you can pay out of pocket each calendar year before the plan pays 100% of expenses for the rest of the calendar year. Most expenses that meet provider network requirements count toward the annual out-of-pocket maximum, including expenses paid to the deductible.



Preventive Care Services

Preventive care services are those that are linked to routine wellness exams and screenings. Non-preventive services are those that are considered diagnostic or treatment for an illness, injury, or other medical condition.

If you go in for a Preventive Screening and a condition is found, it is no longer Preventive and will be billed as Diagnostic (and not covered at 100%).

Preventive care is covered at 100% in-network. The US Preventive Services Task Force maintains a list of preventive services that all Health Care Reform compliant plans should cover at 100% for in-network providers. The following is a list of common services that are included:

- Routine physical exam
- Well baby and childcare
- Immunizations
- Bone density tests
- Cholesterol screenings
- Mammograms
- Pap smears/pelvic exams
- Colonoscopies
- Prostate test
- Lab procedures
- Screenings for HIV, HPV, and domestic violence
- Breastfeeding supplies
- Contraceptive drugs, devices, and sterilization
- Smoking cessation



Medical Plan Information

Features	Option #1 Platinum	Option #2 Gold (With HRA \$)	Option #3 HSA (With HSA \$)
Provider Network	Aetna Managed Choice POS (Open Access)	Aetna Managed Choice POS (Open Access)	Aetna Managed Choice POS (Open Access)
Calendar Year Deductible	Individual: \$1,000 Family: \$2,000	Individual: \$2,000 Family: \$4,000	Individual: \$2,000 Family: \$4,000
Coinsurance	90%	80%	100%
Out of Pocket Maximum	Individual: \$2,000 Family: \$4,000	Individual: \$4,000 Family: \$8,000	Individual: \$3,000 Family: \$6,000
Office Visit Copay	Primary Care: \$20 copay Specialist: \$20 copay	Primary Care: \$30 copay Specialist: \$50 copay	Primary Care: Deductible Specialist: Deductible
Virtual Visit	\$20 copay	\$30 copay	\$40
Preventive Visit	100% covered	100% covered	100% covered
Inpatient Hospital	10% after deductible	20% after deductible	Deductible
Outpatient Services	10% after deductible	20% after deductible	Deductible
Emergency Room	\$100 copay	\$200 copay	Deductible
Urgent Care	\$20 copay	\$50 copay	Deductible
Prescription Drug Copays			Deductible then:
Retail Pharmacy	\$10 / \$25 / \$40	\$20 / \$60 / \$100	\$10 / \$45 / \$70
Mail Order	\$20 / \$50 / \$80	\$40 / \$120 / \$200	\$20 / \$90 / \$140
Out of Network Benefits	Reduced Level of Benefits	Reduced Level of Benefits	Reduced Level of Benefits



Health Reimbursement Arrangement (HRA)

If enrolled in the Gold medical plan, you will receive a tax-free benefit known as a Health Reimbursement Arrangement (HRA). If enrolled in the Gold medical plan option, then claims that apply towards the deductible may be reimbursed up to the full deductible amounts! West Chester Township will reimburse \$2,000 per individual, up to \$4,000 of deductible claim expenses.



Medical Plan Information

Get the most out of your benefits with [aetna.com](https://www.aetna.com).

When it comes to managing your health plan and making more informed decisions, simpler is better. With [aetna.com](https://www.aetna.com), you have a personalized website that helps you access and manage your health plan. Use it to:

- Find and estimate costs for the network care you need.
- See what is covered and get information about preventive care.
- View claim details and account balances.

Get on-the-go access.

The Aetna app puts your health plan at your fingertips.

Download the app for free today to:

- Access your health plan ID card.
- Look up your health plan record during your doctor’s visit.
- Get directions to quick care options
- Find drugs and compare prices.



Know where to go.

Your primary care provider usually has easy access to your records, knows the bigger picture of your health, and many offer same-day appointments to meet your needs. When seeing your provider is not possible, however, it is important to know your quick care options to find the place that’s right for you and help avoid financial surprises.

Quick Care Options	Needs or Symptoms	Average Cost
Virtual Visits (Teladoc) Anywhere, anytime online doctor visits.	<ul style="list-style-type: none"> • Cold • Flu • Fever 	<ul style="list-style-type: none"> • Pinkeye • Sinus <p>\$60</p>
Convenience Retail Care Clinic Treatment that’s nearby. Zero to low cost at CVS or Target Minute Clinics.	<ul style="list-style-type: none"> • Skin rash • Flu shot 	<ul style="list-style-type: none"> • Minor injuries • Earache <p>\$90</p>
Urgent Care Center Quick after-hours care.	<ul style="list-style-type: none"> • Low back pain • Respiratory illness (cough, pneumonia, asthma) • Stomach illness (pain, vomiting, diarrhea) • Infections (skin, eye, ear/nose/throat, genital-urinary) • Minor injuries (burns, stitches, sprains, small fractures) 	<p>\$170</p>
Emergency Room (ER) Care for serious needs.	<ul style="list-style-type: none"> • Chest pain • Major burns • Kidney stones 	<ul style="list-style-type: none"> • Severe injuries • Shortness of breath • Severe asthma attack <p>\$2,000</p>

Freestanding ERs

Many people have been surprised by their bill after visiting a freestanding emergency room (FSER). FSERs, sometimes referred to as urgency centers, can be 2x the cost of an ER and 20x the cost of an Urgent Care Center. Neither located in nor attached to a hospital, FSERs can treat similar conditions as an ER but do not have an ER’s ability to admit patients.

Ask before you enter:

1. Is this an Urgent Care Center or ER?
2. Is this facility a network provider?





Medical Plan Information

Attain

The Attain by Aetna app is a collaboration with Apple. It combines your health history with your Apple Watch activity to offer personalized goals, achievable actions and rewards. This program is available to any employee enrolled in the Aetna medical plan, plus an enrolled spouse and age 18+ dependents.

You can use your Apple Watch or order one and earn it with points over 24 months. All you pay initially is a one-time activation fee of \$7 plus sales tax. If you already own an Apple Watch you can earn up to \$280 in gift cards over 24 months.

Visit www.attainbyaetna.com to find out more information.

Minute Clinic

For those enrolled in the Platinum or Gold medical plans, care at a CVS or Target Minute Clinic is provided at \$0 cost. Those on the HSA will be responsible for the negotiated cost until the deductible has been met.

Minute Clinics provide access to convenient, local care and can assist to treat a variety of illnesses, injuries and conditions, including:

- Allergies
- Ear infections
- Flu-like symptoms
- Bug bites, stings and more

AbleTo

Aetna has partnered with AbleTo, a leading behavioral health provider to provide support when emotional issues arise. The eight-week program offers emotional support after a medical diagnosis or life transition. It combines counseling and coaching to help with:

- Work through the normal emotions you are having
- Understand and stick with a treatment plan
- Know the types of changes you need to make

Aetna Discount Program

Instant savings on your favorite healthy-living products and services. Save on:

- Gym memberships
- Weight loss programs
- Hearing aids, and more

Register and log in at aetna.com to access your benefits and learn more about these programs.



Dental Plan Benefits

Dental benefits are provided by Delta Dental. As a member of Delta Dental of Ohio, you have access to the nation's largest dental networks: Delta Dental PPO and Delta Dental Premier. With these networks, participating dentists will not balance bill and will submit claims for you. You are not required to use an in-network dentist. Choosing a dentist who belongs to one of Delta Dental's two dentist networks can save you the most money.

Features	Delta Dental of OH
Network	Delta Dental PPO/ Delta Dental Premier
Deductible	\$50 per person/ \$150 per family
Annual Maximum	\$2,000 per person
Preventive Services Oral exams, cleanings, fluoride treatment	100% covered, no deductible
Basic Services Fillings, sealants, space maintainers, simple extractions, root canal treatment, periodontal surgery	20% after deductible
Major Services Crowns, inlays and onlays, bridge- work, dentures, oral surgery	50% after deductible
Orthodontia For children to age 19	50% to \$1,000 lifetime maximum



Vision Benefits

Vision benefits can impact overall health. This benefit is provided by Humana with both in and out of network benefits. Your vision network is the **Vision Insight** network.

Features	Humana	
Network	Vision Insight	
Benefit Provisions	In Network	Out of Network
Vision Exam – 12 months	\$10 copay	Up to \$30 reimbursement
Frames – 24 months	\$130 allowance, 20% off balance	Up to \$65 reimbursement
Standard Lenses – 12 months	\$15 copay	Up to \$100 reimbursement
Contacts – 12 months	\$130 allowance, 15% off balance	Up to \$104 reimbursement





Life and AD&D Benefits

LIFE: The Life Insurance benefit is payable to the designated beneficiary upon the death of the insured.

AD&D: Accidental Death & Dismemberment (AD&D) Insurance provides specified benefits for a covered accidental bodily injury that directly causes dismemberment (i.e. the loss of a hand, foot or eye). If death occurs from an accident, both the Life and the AD&D benefit would be payable.

Voluntary Life Insurance

This plan provides the opportunity to purchase additional coverage on yourself. If you enroll, you may also purchase coverage on your spouse and/or children. New hires can elect up to the guaranteed amounts without providing a statement of health.

Features	Principal
Life Benefit	<p>Increments of \$10,000 up to the maximum of \$500,000 \$200,000 is guaranteed (<i>new hires only</i>)</p> <p>Any requested amounts over the guaranteed amount requires completion of a statement of health (<i>new hires only</i>)</p> <p>Each year at annual open enrollment you may purchase or increase coverage, but a statement of health is required, and coverage is not guaranteed to be approved</p>
AD&D Benefit	Equal to the amount of life insurance
Benefit Reduction	Benefits are reduced by 35% at age 65, by an additional 15% at age 70
Conversion	If you terminate your employment you may convert your coverage to an individual policy
Spouse Coverage	<p>Increments of \$5,000 up to 100% of Employee amount or \$200,000 \$50,000 is guaranteed (<i>new hires only</i>)</p>
Children Coverage	\$5,000, \$10,000 or \$20,000





HSA Benefits

If you are enrolled in a high-deductible health plan such as the HSA Medical plan option, you are eligible to participate in a Health Savings Account (HSA).

An HSA is an investment tool that helps you save for healthcare expenses, including deductibles and coinsurance. Contributions to your HSA are pre-tax, and any interest earned on the account is tax-free.

West Chester Township will provide a contribution to your HSA, as illustrated below. An HSA bank account must be established before deposits can be made. In addition to being contributed tax-free, interest earnings and withdrawals for qualified medical expenses are also tax-free.

Triple tax savings!

Contributions

- In 2021, the IRS allows up to a maximum of \$3,600 if you have individual coverage, or up to

\$7,200 if you are covering yourself and additional family member(s) to be deposited to an HSA. These amounts are the most that may be deposited for the calendar year and the maximum would include the Township’s deposits.

- If you are age 55 or older, you may contribute an additional \$1,000 to your account.
- Contributions to your HSA roll over from year to year and accumulate if not used. You may use the funds to pay for any qualified health expenses occurred after the account is opened.

Reimbursement

- You may pay the bill directly via the HSA, or you may use the HSA to reimburse yourself for payments that you make. Payments and withdrawals made from your HSA to cover qualified health care expenses are tax-free.

Annual HSA Deposit Amounts				
	Employee Only	Employee & Spouse	Employee & Child(ren)	Employee & Family
Annual	\$1,000	\$2,000	\$2,000	\$2,000



Flexible Spending Accounts (FSA)

In certain situations, you can also participate in a Flexible Spending Account (FSA). You can fund your FSA account with pre-tax payroll deductions. The FSA can be used to pay for out-of-pocket qualified medical, dental and vision expenses and dependent care expenses. You must enroll/re-enroll in an FSA to participate for the plan year January 1 – December 31.

- A **Health Care FSA** is used to reimburse out-of-pocket qualified expenses incurred by you and your dependents. You are eligible for this if you are enrolled in the Platinum or Gold medical plans or waive coverage.
- A **Limited Health Care FSA** is used to reimburse out-of-pocket dental and vision expenses only. You are eligible for this if you are enrolled in the HSA medical plan.
- A **Dependent Care FSA** is used to reimburse expenses related to care of eligible dependents while you and your spouse work.

An FSA is different than an HSA. You should contribute the amount of money you expect to pay out of pocket for eligible expenses for the plan period - If you do not use the money you contributed to your account, it will not be refunded to you - “use it or lose it”!

This FSA plan does have a grace period provision. This means that you have two months and 15 days of extended coverage to allow you extra time to incur claims against your previous year’s FSA funds.

For 2021, the maximum contribution you can make to a Health FSA or Limited Health FSA is \$2,750. The maximum contribution to a Dependent Care Flexible Spending Account is \$5,000 if you are a single or married filing jointly, or \$2,500 if you are married and filing separately.



AFLAC

As an employee of West Chester Township, you have access to payroll deduct any of the following AFLAC plans:

- Personal Off the Job Accident- Covers off the job accident 24/7 for your entire family.
- Cancer Plan- Pays money directly to you for treatment, confinement, etc. costs due to cancer.
- Personal Recovery Plan- Pays money directly to you for critical illnesses such as heart attack and stroke.
- Off the Job Short Term Disability- Pays monthly benefits up to six months while unable to work due to a disability.

Please refer to the AFLAC brochures for additional information including cost.



Legal Shield

LegalShield and IDShield provides you an opportunity to enroll in these plans through payroll deductions.

The LegalShield Membership Includes:

Legal Advice/Consultation on unlimited personal issues

Letters/Calls made on your behalf

Contracts/Documents Reviewed up to 15 pages

Residential Loan Document Assistance

24/7 Emergency Access for covered situations

Speeding Ticket Assistance

IRS Audit Assistance

Uncontested Divorce, Separation, Adoption and/or Name

Change Representation (available 90 days after enrollment)

25% Preferred Member Discount (bankruptcy, criminal charges, DUI, personal injury, etc.)

Dedicated Law Firm

The IDShield Membership Includes:

Credit Monitoring

Gain access to continuous credit monitoring through TransUnion that you can access immediately via the service portal dashboard on myidshield.com or through the free IDShield mobile app. Credit activity will be reported promptly via an email alert and mobile push notification.

Credit Inquiry Alerts

Receive alerts when a creditor requests your TransUnion credit file for the purposes of opening a new credit account or when a creditor requests a credit file for changes that would result in a new financial obligation.

Consultation

Your identity protection plan includes 24/7/365 live support for covered emergencies, unlimited consultation, identity alerts, data breach notifications and lost wallet protection.

Full-Service Restoration

If your identity is stolen, our complete recovery services from our Licensed Private Investigators will ensure that it will be restored to its pre-theft status.



Your Costs

Employee Medical, Dental and Vision contributions are deducted on a pre-tax basis.

Medical	Monthly Cost		
	Option #1 Platinum	Option #2 Gold	Option #3 HSA
Employee Only	\$138.03	\$105.95	\$113.52
Employee + Spouse	\$288.48	\$221.45	\$237.25
Employee + Child(ren)	\$256.74	\$197.08	\$211.14
Employee + Family	\$408.57	\$313.62	\$336.01

Dental	Monthly Cost
Employee Only	\$6.37
Employee + One	\$13.17
Employee + Two or More	\$21.71

Vision	Monthly Cost
Employee Only	\$5.31
Employee + Spouse	\$9.30
Employee + Child(ren)	\$10.09
Employee + Family	\$15.40

LegalShield/IDShield	Monthly Cost		
	LegalShield Only	IDShield Only	Legal and Identity Combined
	\$23.95	Single: \$8.95 Family: \$18.95	Single: \$32.90 Family: \$38.90

Principal Voluntary Life

Rates are specific to your age, amount requested and tobacco use. Please refer to your specific cost in ADP.





Contact Reference Sheet

Refer to this list when you need to contact one of your benefit vendors. For general information contact your Human Resources Department or our benefit advisors at Strategic Benefits.

For questions about...	Contact...	Call...	Or Email/Visit...
Benefits, Enrollments, HR	Tonya Charles HR Manager	513-759-7213	tcharles@westchesteroh.org
HR, ADP	Jackie Lenard HR Specialist	513-759-7217	jlenard@westchesteroh.org
Enrollment, Claims	Mike Bowersox Benefit Advisor	513-366-3703	mike.bowersox@sbcinci.com
Benefits	Robin Carney-Hayes Benefit Consultant	513-366-3710	robin.carney@sbcinci.com
Medical	Aetna	Refer to the number on your ID card	www.aetna.com
Dental	Delta Dental of OH	800-524-0149	www.deltadentaloh.com
Vision	Humana	Refer to the number on your ID card	www.humana.com
Life	Principal	800-843-1371	www.principal.com
Legal/ID Shield	Ron Chambers	313-215-5304	ron@ronchambersls.com



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