



LEXINGTON

2018 EMPLOYEE BENEFITS OVERVIEW

Jan 1, 2018 – Dec 31, 2018



The contents of this booklet are intended for general information purposes only. It is not to be relied upon as a summary plan description or for the determination of any policy benefits, limitations or exclusions. The master insurance policies issued by the respective carriers will be relied upon exclusively to determine all benefits.

Welcome!

We know you work hard each day to make a significant contribution to our great American City. The benefits and programs described in this overview are a significant component of your overall compensation. You may not think of your benefits every time you receive a paycheck, but we know they are very important to you and certainly are one of LFUCG's greatest investments.

We make this investment because we want to reward you for the work you do. We also want to ensure you and your family have the security you need to help protect you from the devastating consequences of life's risks. Going above and beyond the standard healthcare delivery system, we provide you unlimited access to high quality healthcare through the Samuel Brown Health Center; a gold standard model and comprehensive healthcare delivery system complete with a physician, nurse practitioners, medical staff and a full pharmacy that is designed to put you first!

In 2018, we will continue to offer 4 medical plan designs to fit the unique needs of your family. You will notice that the deductible for our HSA plans have increased by \$100 for individual and \$200 for family and this is a result of new IRS regulations regarding the minimum allowable deductible. Also, with respect to the premium rates, you will see a small increase, but certainly less than healthcare cost increase trends both in Kentucky and nationally. In this regard, the best way to help control our healthcare costs is to be informed consumers of healthcare services. Remember, by using

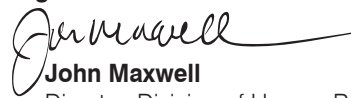
our Samuel Brown Health Center and City Pharmacy, you can save money on your medical expenses as well as help LFUCG better control overall healthcare costs related to our medical plans.

New for 2018, all pharmacy benefits will be managed through Anthem BC/BS using Express Scripts (instead of Baptist Health). However, since Anthem will continue to utilize Express Scripts, we expect only a limited number of changes to the formulary, quantity limits and step therapy requirements relative to prescribed medication.

LFUCG will also continue to make a contribution to your Health Savings Account as in the past for those electing an HSA medical plan. This contribution will assist you in accumulating savings for current and future medical expenses. The LFUCG's HSA contributions are made during the months of January and July.

This booklet contains highlights of the benefits offered by LFUCG beginning January 1, 2018 through December 31, 2018. Star Robbins & Company will be assisting employees again this year along with our Human Resources benefits team and members of Benefit Insurance Marketing (BIM) to provide guidance and support during your enrollment process.

Together LexThrive!


John Maxwell

Director, Division of Human Resources

Eligibility

Full time employees are eligible for all benefits outlined in this summary on the first of the month following your date of hire. Eligible employees may elect to cover a Spouse, Dependent or Qualified Adult. All new employees must provide proof of dependents' eligibility to enroll.

A Qualified Adult is defined as a person of the same or opposite sex who meets the following criteria (See HR for Affidavit and required documentation):

- Age 18 or older.
- Not related to the employee.
- Must reside with employee for at least 12 months prior to enrollment.
- Agree to inform LFUCG within 30 days of any change in the circumstances attested to in the affidavit.
- Must be unmarried
- Financially interdependent with the covered employee for at least twelve (12) months & will certify, via an affidavit signed by both the Qualified Adult and the employee, that at least two (2) of the following conditions have existed for twelve (12) months. (choose one (1) from the left column & one (1) from the right column). See chart at right.

Joint ownership of real estate property or joint tenancy on a residential lease	Will designating the eligible Qualified Adult as primary beneficiary
Joint ownership of an automobile	Retirement plan or life insurance policy beneficiary designation form designating the eligible Qualified Adult as primary beneficiary
Joint bank or credit account	Durable power of attorney signed to the effect that the employee and eligible Qualified Adult have granted powers to one another
Joint liabilities	Adoption papers or legal guardianship identifying the employee and Qualified Adult as the joint adopting individuals or joint legal guardians
Joint utility account	

open enrollment

enroll in benefits online through PeopleSoft

hcm.lexingtonky.gov

select "self service" > "benefits" > "Benefits Enrollment"

october
9 - 27



LEXINGTON

Dr. Samuel Brown Health Center



The Dr. Samuel Brown Health Center is a ZERO-COST alternative to office visit co-pays (certain lab costs will be extra). The Health Center provides a variety of health & wellness services similar to any doctor's office, but with no co-pays! In addition to primary and acute care, the Center offers Health Coaching for those individuals looking to succeed with long term goals such as weight loss, health improvement or smoking cessation.

Who staffs the Center?

The Center has a full-time clinical staff of seven, including a physician, three physician assistants, three medical assistants and a receptionist.

Who can use the Center?

The Center is open to all LFUCG employees, retirees and dependents age 2 and older who are on the 2018 Preferred Provider Organization (PPO) plan or High Deductible Health Plans (HDHP/HSA).



David R. French M.D.
Medical Director



How do I schedule my appointments?

To schedule appointments you can call the Center at **(859) 425-2555** or schedule your appointment online at marathon-health.com/myphr.

Laboratory tests: *You may incur charges for laboratory services.* This will depend on your health plan and the terms of coverage that are applied.



City Employee Pharmacy

The City Employee Pharmacy is available to all employees and their dependents that are enrolled on the 2018 LFUCG PPO or HSA health plans. Medications through the on-site pharmacy are offered at wholesale cost.

Located inside the Dr. Samuel Brown Health Center at 100 Trade Street, Suite 145.

The City Employee Pharmacy:

Phone: 859-367-4990

Fax: 859-367-4993

Pharmacy Hours:

Monday through Thursday – 8:30 a.m. – 6:00 p.m.

Friday – 8:30 a.m. – 4:00 p.m.

Saturday – 8:30 a.m. – noon

Closed – 1:30 p.m. – 2:00 p.m. for lunch everyday

Prescribing Physicians do not have to be with the Health Center.

The City Employee Pharmacy will fill a prescription from any healthcare provider authorized to prescribe in the Commonwealth of Kentucky.

Transferring Prescriptions can be done by calling or faxing your prescription information (found on your prescription label) to the City Employee Pharmacy.

Government Center Delivery Service is Available.

LFUCG Health Plan Comparisons January 1 - December 31, 2018



Anthem In-Network Plan Design	Traditional Plans		Health Savings Account Eligible	
	PPO 1	PPO 2	HSA 1	HSA 2
Calendar Year Annual Deductible	\$500 Individual \$1,000 Family	\$2,000 Individual \$4,000 Family	\$2,700 Individual \$5,400 Family	\$2,700 Individual \$5,400 Family
Coinsurance (Plan / Member)	80% / 20%	80% / 20%	100% / 0%	80% / 20%
Medical Maximum Out-of-Pocket (includes deductible, medical co-pays and coinsurance)	\$1,500 Individual \$3,000 Family	\$4,000 Individual \$8,000 Family	\$2,700 Individual \$5,400 Family	\$5,000 Individual \$10,000 Family
Rx Maximum Out-of-Pocket	\$2,000 Individual \$4,000 Family	\$2,000 Individual \$4,000 Family	Included in Med Max Out-of-Pocket	Included in Med Max Out-of-Pocket
Covered Services	Member Cost Share			
Samuel Brown Wellness Center	\$0 Co-pay	\$0 Co-pay	\$0 Co-pay	\$0 Co-pay
Primary Care Office Visit	\$15 Co-pay*	\$30 Co-pay*	Deductible + 0%	Deductible + 20%
Specialist Office Visit	\$30 Co-pay*	\$60 Co-pay*	Deductible + 0%	Deductible + 20%
Preventive Care	Covered in full	Covered in full	Covered in full	Covered in full
Urgent Care	\$60 Co-pay*	\$100 Co-pay*	Deductible + 0%	Deductible + 20%
Emergency Room	Deductible + 20%	Deductible + 20%	Deductible + 0%	Deductible + 20%
Inpatient Facility Services	Deductible + 20%	Deductible + 20%	Deductible + 0%	Deductible + 20%
Outpatient Services	Deductible + 20%	Deductible + 20%	Deductible + 0%	Deductible + 20%
Rx Drug Co-Pay	\$10/\$30/\$60 Co-pay**	\$10/\$30/\$60 Co-pay**	Deductible + 0%	Deductible + 20%
City Pharmacy Rx Drug Co-pay	\$3/15/30 Co-pay**	\$3/15/30 Co-pay**	Deductible + 0%	Deductible + 20%
Annual LFUCG HSA Contribution	N/A	N/A	\$500 Indiv.*** \$1,000 ES/EC/F	\$1,000 Indiv.*** \$1,000 ES/EC/F

NOTE: Dependents covered to age 26.

* Medical co-payments accumulate toward the Medical maximum out-of-pocket.

** Rx co-payments go toward the Pharmacy maximum out-of-pocket which accumulates separately from the Medical maximum out-of-pocket.

*** LFUCG contributions will be deposited half in January and half in July.

Anthem Medical & Vision Benefits

All Anthem Medical plans include Anthem Vision benefits. You can find medical and vision providers at **anthem.com**. Out-of-pocket expenses on the Anthem Vision plan do not accumulate toward any medical deductibles or maximum out-of-pocket. Dependents covered to age 26. See chart above for medical plan comparisons and chart at right for vision summary.



Anthem Vision Benefits Summary

In Network Benefits	Anthem Blue View Vision included with Medical Plan
Co-pays	
Exams	\$10 co-pay
Materials	\$10 co-pay
Service Frequency	
Exams	Once every 12 months
Lenses	Once every 12 months
Frames	Once every 12 months
Lens Coverage	
Single Vision lenses	Covered in full (after co-pay)
Lined Bifocal lenses	Covered in full (after co-pay)
Lined Trifocal lenses	Covered in full (after co-pay)
Frames	\$100 Allowance, then 20% off remaining balance
Contact Lenses	
Elective	\$110 Allowance, then 15% off remaining balance
Disposable	\$110 Allowance
Medically necessary	Covered in full

The above references in-network benefits only; for out-of-network benefits see full summary of benefits.



Pharmacy Benefits

Pharmacy Benefits are provided through Anthem/Express Scripts for all medical plans, effective Jan 1, 2018. Your prescription information will be included on your medical card.



■ Call Anthem Member Services for questions on co-pays, coverage and authorization:

- ▶ Phone: **1-844-812-9209**
- ▶ Web: **anthem.com**

■ Home Delivery:

- ▶ Phone: **1-866-216-4540**

■ Specialty Medications:

- ▶ Phone: **1-800-870-6419 (Accredo)**

Most of your local pharmacies and National chains are in-network providers for Anthem/ESI.

NOTE: If you are prescribed a Specialty Medication (typically injectables), your doctor can contact the dedicated phone numbers as noted above to make arrangements for your medication delivery.

Qualifying Events

IRS Guidelines are adhered to for the medical, dental and vision plans at LFUCG which are administered in accordance with the IRS Section 125 Tax Code. This allows premiums for benefits to be deducted on a pre-tax basis from your paycheck.

Plan changes cannot be made after open enrollment without a change in family status or qualifying event that is consistent with the IRS guidelines. A change in family status allows you to add or remove dependents from your plan but does not allow you to change from one plan to another. Some examples of qualifying events are:

- Legal marital status changes: Marriage, divorce, death of a spouse (copy of marriage certificate, copy of final court divorce decree or death certificate required).
- Cancellation of dependent coverage due to dependent ineligibility: *Dependent gains or loses coverage under another plan.*
- Birth or adoption of a child (copy of birth certificate or adoption papers required).
- Change in employment status from part-time or temporary to full-time.
- Change in employment status (full-time to part-time or temporary) or termination of employment.
- Loss of coverage under spouse's employer plan due to a spouse's death, termination of employment, divorce or loss of eligibility for other coverage
- Qualified medical child support court order (documents required).

CHANGES IN FAMILY STATUS MUST BE REPORTED TO HR WITHIN 30 DAYS OF THE QUALIFYING EVENT IN ORDER TO MAKE A PLAN CHANGE.

Flexible Spending Accounts (FSA)

LFUCG offers two Flexible Spending Accounts (FSAs) which can save you money! You can elect a medical FSA to complement your PPO medical plan, or if you are waiving medical coverage, or enrolled in a PPO plan elsewhere.



A General Purpose Medical FSA allows you to payroll deduct money tax free to pay for qualified medical, dental and vision expenses not covered by your insurance plans (expenses such as co-pays, or deductibles). You can payroll deduct up to \$2,600/each year to be used on expenses incurred during that year. **Account is funded in its entirety at the beginning of the plan year.**

The Dependent Care Account can help to fund the care of children under the age of 13, or a disabled spouse, child or parent while you work. This account can be used for daycare, preschool, after school care, summer day camp or elder care. The annual maximum contribution is \$5,000 (or \$2,500 if married, filing separately). **The funds in this account can only be used as they accumulate.**

FSA Plan election does not roll over. You must re-enroll each year.

■ IRS guidelines stipulate that if you contribute dollars to a Flexible Spending Account and do not use all the money you deposit, you will lose any remaining balance in the account at the end of the eligible claims period.

■ However, for both Flexible Spending Accounts, you may continue to incur claims for expenses during the "Grace Period". The Grace Period extends 2 ½ months after the Plan Year ends, during which time you can continue to incur claims and use up all amounts remaining in your Health Flexible Spending Account or Dependent care Flexible Spending Account. Any monies left at the end of the Grace Period (March 15th) will be forfeited. Claims must be submitted no later than 15 days after the end of the Grace Period (March 30th).

■ For information on eligible FSA expenses, go to: **irs.gov/publications/p502**



Health Savings Account Plan (HSA)

Enrolling in our HSA 1 or HSA 2 medical plan options may make you eligible for a Health Savings Account (HSA). This is a savings account that can be funded with **pre-tax dollars to be used for qualified medical, dental and vision expenses**. It is similar to the flexible spending account with the exception that the **money is rolled over year to year and cannot be lost**. You can use the funds in your HSA Account for qualifying medical expenses in future years. This account goes with you even if you leave employment with LFUCG.

Eligibility requirements for the Health Savings Account:

- ▶ You must be covered by a High Deductible Health Plan (HSA 1 or HSA 2).
- ▶ You cannot be covered under another medical plan that is not an HDHP.
- ▶ You are **NOT** eligible for an HSA Account if either you or your spouse contributes to a general purpose Medical Flexible Spending Account.
- ▶ You are **NOT** eligible for an HSA Account if you are enrolled in a government sponsored medical plan (i.e. Medicare, Medicaid).

LFUCG contributes a sum of money to your HSA Account as indicated below. **Half is deposited in January and half in July.**

HSA Plan	Single	with Dependents
HSA 1	\$500	\$1,000
HSA 2	\$1,000	\$1,000

These are in addition to your personal Health Savings Account contributions.

Health Equity manages all of the contributions into the Health Savings Accounts. Any contribution you make can be payroll deducted and deposited by LFUCG. For more information on Health Savings Accounts, call **866-346-5800**, or visit **myhealthequity.com**.

Contribution limitations apply since this is an IRS regulated account. The 2018 limits include both employer & employee contributions (see chart at below):

NEW for 2018

IRS has increased the maximum annual HSA contribution limits for 2018:

Single:	Employee/Children:
\$3,450	\$6,900
Employee/Spouse:	Family:
\$6,900	\$6,900

Anyone between the ages of 55-65 may elect to contribute an additional \$1,000 to the account each year. There is no limit on how much money can accumulate year after year. The above limits apply to annual contributions from both you and your employer.

■ First time participants will receive a new card if you sign up for an HSA with Health Equity.

■ For information on eligible **HSA** expenses, go to:

irs.gov/publications/p969

HEALTH EQUITY / HSA Help Center

If you need help with your claims status, card swipes, account balance, or eligible expenses contact the Health Equity Help Center. They are available every hour of every day at the phone number listed on your card or: **866-346-5800**.

You can also view your personal Health Savings Account Information on line at **myHealthEquity.com**... click 'begin now'. The site will walk you through the initial set up of your account.

After your first site visit, you can log in to **myHealthEquity.com** with the user name and password that you set up previously.

For general HSA information, go to **HealthEquity.com/LFUCG**.

IN THE EVENT OF AN IRS AUDIT you will need to provide all receipts for withdrawals made from the HSA Account to verify that they were Qualified Medical Expenses.

Please note that it is ultimately your responsibility to provide the IRS with evidence of the expense if audited. The item(s) you purchase with the debit card may process to pay at the point of purchase, but the item(s) may not be an IRS qualifying expenditure.



Preventive Care Benefits

Preventive Care benefits are covered at 100% on both PPO and HSA plans. Preventive Care benefits cover basic annual exams and services medically suggested for age and gender.

Anthem Care Anywhere/Anytime

Anthem provides a variety of care options that are available to you 24/7 and can be an alternative to an emergency room for minor illnesses and injuries:

LiveHealth OnlineSM

LiveHealth Online is a convenient way for employees to interact with a doctor via live, two-way video on your computer or mobile device. LiveHealth Online provides access to U.S. board-certified doctors at the same price as a regular doctor visit co-pay (\$49 charge for HSA medical plan) and Doctors can ePrescribe to local pharmacies. The LiveHealth Online service is available anywhere you have an internet connection (at home, in the office or on the go) 24 hours a day 7 days a week / 365 days / year.

For more information, or to sign up for a visit, go to livehealthonline.com

LiveHealth Online now has Therapists to help with stress, anxiety, depression, relationship or family issues, grief or panic attacks. Therapists do not prescribe medications.

For more information, or to schedule a visit:

For more information, or to schedule a visit, go to livehealthonline.com

or call: 1-844-784-8409

Little Clinics & Urgent Care Centers

Little Clinics and Urgent Care Centers are available to the LFUCG employees through Anthem for walk in appointments to treat symptoms that should be looked at right away but that don't require an emergency room visit. All facilities below offer extended hours and/or weekend hours.

- Little Clinics (located in select Kroger stores)
- MinuteClinic (located at select CVS Pharmacies)
- Urgent Care Center
- Baptist Urgent Care
- Clark Immediate Care Center

24/7 Nurseline[®]

Let a nurse help you decide what a true emergency is. The number is on the back of your member ID card. In the time it takes to make a quick call, the nurse can help you decide what kind of care makes the most sense and can find a provider near you.

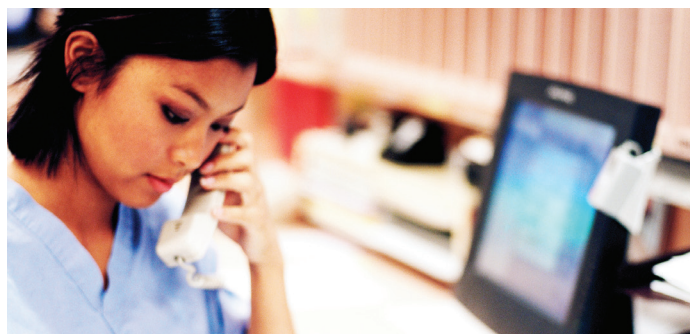
Phone: 1-800-337-4770

Additional Anthem Resources

- **Care Comparison:** Pricing comparison for 130+ procedures, at a variety of facilities in your geographical area. This service allows Anthem members to be wise healthcare consumers.
- **Condition Care:** Assistance in managing conditions such as asthma, diabetes, chronic obstructive pulmonary disease or coronary artery disease.
- **Complex Care:** Anthem will identify and assist members in managing complex and/or multiple disease states.
- **Future Moms Maternity Program:** Access to an OB nurse who can advise/answer pregnancy related questions as needed. Access to maternity web site with educational resources.

More information on Anthem Resources can be found on-line at anthem.com or by calling the Customer Service Number at:

1-844-812-9209



LFUCG offers two dental plans through Delta Dental with an extensive network of providers. Each plan's benefits are a little different depending on the needs of your family. A detailed summary of benefits can be found at lexingtonky.gov/benefits. Once, enrolled, you may visit Delta Dental's website at deltadentalky.com or call (800) 955-2030 to locate a provider. Dependents covered to age 26.

Dental Benefits Summary

OPTION 1	PPO Dentist	Premier Dentist	Out-of-Network Dentist*
Dental Benefits			
Calendar Year Annual Dental Deductible	\$25 indiv. \$75 family		
Dental Maximum Benefit per Year <i>(per member)</i>	\$1,000 per covered person		
Orthodontia Lifetime Max	N/A		
Dependent Age Limit <i>(end of birthday month)</i>	Up to age 26		
Covered Services	Member Cost Share		
Diagnostic / Preventive Care <i>(once every 6 mos)</i> - Oral exams, cleanings, space maintainers - Brush Biopsy - X-rays - Emergency Care	No member cost	No member cost	No member cost
Basic Services <i>(deductible applies)</i> - Minor Restorative - Fillings & crown repair - Endodontics - root canals - Periodontic Services - Major Restorative - crowns - Oral Surgery Services - Relines and Repairs - to bridges, implants and dentures	No member cost	No member cost	No member cost
Major Services <i>(deductible applies)</i> - Prosthodontic Services - bridges, implants & dentures	No member cost	No member cost	No member cost
Dental Payroll Deductions - 26 Pay Periods			
Employee	\$15.20		
Employee + Spouse	\$29.34		
Employee + Child(ren)	\$28.12		
Family	\$45.43		

*When you receive services from a non-participating dentist, the non-participating dentist fee may be less than what your dentist charges and you are responsible for that difference.

Dental Benefits Summary

OPTION 2	PPO Dentist	Premier Dentist	Out-of-Network Dentist*
Dental Benefits			
Calendar Year Annual Dental Deductible	\$25 indiv. \$75 family		
Dental Maximum Benefit per Year <i>(per member)</i>	\$2,500 per covered person		
Orthodontia Lifetime Max	\$1,000		
Dependent Age Limit <i>(end of birthday month)</i>	Up to age 26 (age 19 for Ortho benefits)		
Covered Services	Member Cost Share		
Diagnostic / Preventive Care <i>(once every 6 mos)</i> - Oral exams, cleanings, space maintainers - Brush Biopsy - X-rays - Emergency Care	No member cost	20%	20%
Basic Services <i>(deductible applies)</i> - Fillings & crown repair - Periodontic Services - Oral Surgery Services - Denture repair	20%	40%	40%
Major Services <i>(deductible applies)</i> - Endodontics - root canals - Crowns - Relines/rebase to dentures - Repair to bridges - Implant maintenance, repair and removal - Adjustments to complete or partial dentures - Bridges, implants and dentures	50%	50%	50%
Orthodontia Services - Braces	50%	50%	50%

Dental Payroll Deductions - 26 Pay Periods

Employee	\$11.53
Employee + Spouse	\$22.50
Employee + Child(ren)	\$28.61
Family	\$43.49

*When you receive services from a non-participating dentist, the non-participating dentist fee may be less than what your dentist charges and you are responsible for that difference.

You can purchase the Dental Plan even if you are not on the health plans.

STAND ALONE VISION PROGRAM

LFUCG also offers a stand alone Vision Program through EyeMed Vision Care. You can elect this coverage if you don't have the Anthem Medical/Vision plan or if you just want additional coverage. Network providers can be found at eyemedvisioncare.com. See chart below for vision summary.

Vision Benefits Summary



In Network	EyeMed Vision Care
Co-pays	
Exams	\$5 co-pay
Lenses	\$5 co-pay
Frames	\$0 co-pay
Service Frequency	
Exams	Once every 12 months
Lenses	Once every 12 months
Frames	Once every 12 months
Lens Coverage	
Single Vision lenses	Covered in full (after co-pay)*
Lined Bifocal lenses	Covered in full (after co-pay)*
Lined Trifocal lenses	Covered in full (after co-pay)*
Frames	\$110 allowance; 20% discount on balance
Contact Lenses	\$0 co-pay
Elective	\$105 allowance; 15% discount on balance
Disposable	\$105 allowance
Medically Necessary	Covered in full
Payroll Deductions - 26 Pay Periods	
Employee	\$2.86
Employee + Spouse	\$5.39
Employee + Child(ren)	\$5.68
Family	\$8.30

*See full benefit summary for the cost of lens upgrades and out-of-network expenses.

NEW BENEFITS WEBSITE

Benefits website has moved!
Visit lexingtonky.gov/benefits

You'll find summaries and contact information regarding:

medical benefits
pharmacy benefits
dental benefits
vision benefits
health savings account
flexible spending account
Dr. Samuel Brown Health Center
City Employee Pharmacy

LEXthrive Health & Wellness Rewards Program

LEXthrive! is a points-based incentive program designed to reward your healthy behaviors. The more you take part in healthy activities and events, the more points you earn!

Earn points when you:

- ▶ Schedule your annual physical at the Samuel Brown Health Center and complete your Health Risk Assessment, too!
- ▶ Have a preventive screening at the Samuel Brown Health Center.
- ▶ Fill your prescriptions at the City Employee Pharmacy.
- ▶ And much more!

This program is available to primary policyholders and spouses active on the LFUCG health plan.

Go to lexingtonky.gov/benefits to view details or call 1-800-539-5722 to activate your account.

Rewards for participating in a wellness program are available to all employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact Dr. French at the Samuel Brown Health Center and we will work with you (and, if you wish, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.

LEXthrive
Health • Wellness • **REWARDS**

BASIC TERM LIFE INSURANCE and ACCIDENTAL DEATH & DISMEMBERMENT

- ▶ \$25,000 – Bargaining Police, Fire and Corrections Employees
 - ▶ \$20,000 – Non-bargaining Employees
 - ▶ Coverage reduces by 50% @ age 70
- This year only, employee optional life insurance, through Prudential, is available on a Guarantee Issue basis (meaning no medical questions will be asked).
 - Dependent coverage through Prudential is available; however, you must elect optional life insurance for yourself.
 - Life insurance for dependents may not exceed 50% of the employee benefit.

Voluntary Supplemental Plans for 2018

Why should I consider Supplemental Plans?

These plans are designed to pay direct to you and help provide peace of mind during medical life events. There are many different supplemental plans available. LFUCG has three available categories of Supplemental benefits; “**Life Insurance Plans**”, “**Medical Related Plans**”, and “**Disability Income Plans**”.

THIS ENROLLMENT ONLY

During this year’s enrollment, you will have the option of participating in certain life options Guaranteed Issue. Guaranteed Issue means coverage is available without the required medical questions and underwriting review. Some plans will have a 12/12 lookback period. These special offers are only good during this enrollment period. Talk to your Star Robbins & Company Benefit Educators for more details.

▶ **Trustmark’s Universal Life Events with Long Term Care**



Trustmark

If you need Long Term Care, will your choices be limited? Long Term Care can be expensive and may be needed at any age. With the Universal Life Events coverage, benefits can be paid as death benefits or living benefits, or a combination of both. This coverage is flexible to meet your needs and budget.

▶ **Humana: Whole Life Coverage - Voluntary Whole Life Coverage**

Humana

Whole Life coverage gives you and your loved ones a solid foundation for building a long-term financial plan. It helps ensure that your family is financially protected with money that can be used for funeral costs and other final expenses, as well as immediate needs such as probate expenses and ongoing bills like utilities. It can also help with debt liquidation, such as paying off loans or a mortgage, and future expenses such as education funds or retirement needs.

Why do I need Whole Life coverage?

Whole life coverage is a simple, voluntary policy you can get at a reasonable cost during your working years, when you and your family need it most. It’s also a benefit that can

stay in place when it’s time for retirement. Features include: Level Premiums, Guaranteed renewable, Accumulated Cash Value, and Death Benefit and Cash Value are guaranteed. You can keep your plan and continue to pay premiums even if you change employers. Humana’s whole life plans have 2 “living benefits” that offer real value: One enables you to request an acceleration of up to 50% of the death benefit, if you are diagnosed with a terminal illness in the future. The second benefit, The Facility Care Accelerated benefit provides an acceleration of your life insurance benefit for adult day care and inpatient resident care. Paid up at age 65 policy option, or paid up at 99 policy options are available.

▶ **Level Term Life Coverage: Humana. 10 Year or 20 Year**

Why Do I need Term Life coverage?

If someone depends on you financially, it is wise to have life insurance, whether you’re married, single, a single parent, a small business owner, or retired. Life insurance can help relieve additional financial stress for your loved ones and preserve their quality of life. Term Life gives you protection for a defined period of 10 or 20 years, and can supplement any other life plan you may have in place. You can keep your plan and continue to pay premiums even if you change employers. Coverage for your spouse and children is also available.

Voluntary Supplemental Plans for 2018

Medical Related Supplemental Plans

Medical Related Supplemental Plans are designed to help cover out-of-pocket costs associated with medical care. These special policies provide needed financial support during unexpected life events which impact the ability to earn a paycheck. Supplemental benefits pay direct to you to help stay caught up with everyday expenses, such as mortgages, car payments, groceries, etc., so you can focus on getting well.

► Cancer Coverage



Cancer Coverage is perhaps the most popular of these medical related supplemental plans. The American Cancer Society reports "1 in every 3 women and 1 in every 2 men will have a cancer diagnosis." LFUCG offers three levels of this important coverage. Some highlights of the plan are shown in the claim example below.

Claim Example: Jane's doctor recommends pre-op testing and provides her with the location of the hospital. Jane must travel 200 miles for pre-op testing (medical imaging) and is admitted to the hospital for surgery. Jane undergoes surgery, anesthesia, radiation/chemo, and is visited by a doctor during a 3-day hospital stay. Every 2 weeks she has radiation/chemo and is given anti-nausea medication. Jane sees her doctor during follow up visits. Allstate's Cancer Insurance paid the following claim payments direct to Jane:

Wellness Exam.....	\$100	Medical Imaging.....	\$1,000
Non-Local Transportation....	\$160	Anti-Nausea.....	\$200
Radiation/Chemo	\$20,000	Cancer Initial Diagnosis ...	\$5,000
Physician Visits.....	\$150	Anesthesia.....	\$750
Hospital Confinement	\$1,200	Inpatient Medicine	\$75
Surgery.....	\$3,000	TOTAL BENEFITS: \$31,635	

► Critical Illness Coverage



Group Voluntary Critical Illness pays a lump sum cash benefit of \$10,000 or \$20,000 to help you cover out-of-pocket expenses associated with a covered Critical Illness, such as heart attack or stroke. The claims example below highlights the features of this coverage.

Claim Example: Jim suffers a heart attack, and is hospitalized for 3 days. Four months later, Jim has another heart attack. He is admitted to the ICU unit for 3 days and undergoes coronary artery bypass surgery. Jim ultimately made the decision to leave his job, and is able to take his coverage with him. Allstate's Critical Illness insurance paid the following claim payments direct to Jim:

Heart Attack.....	\$20,000
Second Event.....	\$20,000
Bypass Surgery	\$5,000
TOTAL BENEFITS: \$45,000	

► Accident Coverage



There are activities that you or your family do on a daily basis that may lead to an accident or injury. Injuries can happen while playing Sports, Traveling, and even at Work. Allstate's Group Accident plan pays benefits for expenses associated with an accident and can help protect hard-earned savings should an on or off the job accidental injury occur. The claim example below illustrates features of this policy.

Claim Example: Emily chooses accident coverage at annual enrollment. Two years later she is traveling to work and is in a car accident. She is air-lifted to the hospital. Emily incurred expenses for services in and out of the hospital. In addition to what major medical paid to the providers, Allstate's Accident insurance paid the following claim payments direct to Emily:

Air Ambulance Service	\$600	Outpatient doctor visit	\$50
Medicine.....	\$10	Open Abdominal/ Thoracic	
3-Day hospital stay	\$600	Surgery.....	\$2,000
Hospital Admission	\$1,000	Initial Hospital Confinement	\$1,000
Medical Expenses	\$500	TOTAL BENEFITS: \$5,760	



Voluntary Supplemental Plans for 2018

Medical Related Supplemental Plans

► Group Indemnity Medical Allstate.

Allstate's Group Indemnity Medical coverage helps pay out-of-pocket medical expenses associated with hospital confinement. It provides a cash benefit for initial and daily hospital confinement and daily intensive care confinement. The claim illustrated below highlights the features of this coverage.

Claim Example: Jane chooses benefits under her employer approved plan. Three years later, Jane is on a summer cycling vacation when she falls and breaks her foot in 4 places. She suffers bruising and swelling of her head and left leg. Jane is taken by ambulance to the nearest hospital emergency room where she is admitted to intensive care for trauma to her head. Two days later, Jane is released from Intensive care and moved to a regular hospital room where she undergoes surgery on her foot. She is visited by a doctor during her stay. Two days later, Jane is released and the doctor prescribes medication to aid in her recovery and help with her pain. Allstate's GIM insurance paid the following claim payments direct to Jane:

First Day Hospital Confinement.....	\$2,500
Daily Hospital Confinement.....	\$1,500
Hospital Intensive Care.....	\$1,000
TOTAL BENEFITS: \$5,000	

Disability Income Supplemental Plans

One of our most valuable assets is our ability to work and earn a paycheck. Disability income provides a paycheck to you in the event you are disabled and cannot work. There are two types of coverage available. These two options can work in harmony with each other to provide both short-term and long-term disability benefits.

► Short-Term Disability Income Protection

Short-Term Disability protects your paycheck if you cannot work due to off the job illness or injury. You will have the ability to select the amount of coverage that coordinates best with your current sick pay. These benefits start after a short elimination period and pay for the first few months of a disability based on your selected coverage.



► Long-Term Disability Income Protection

Long-Term Disability protects your income when short-term coverage ends and covers you to Social Security Normal Retirement Age, should you remain disabled. Why do you need it? Ask yourself this: If you get sick or hurt, how would you manage life without a paycheck? How long could you go without a paycheck? Would you be able to pay your mortgage or rent? Could you afford the new expenses that come with disability?



What's Covered?

Up to 60% of your monthly Income. You choose the amount of coverage based on your needs and budget.

NOTE: If you did not elect Disability Coverage when initially eligible, you will need to provide an Evidence of Insurability form which is subject to Cigna underwriting approval.

Late applicants may also be subject to pre-existing condition limitations. See Benefit Summary for full details.



Voluntary Auto & Homeowners

The Lexington-Fayette Urban County Government employees qualify for auto and home discounts through Liberty Mutual's Group Savings Plus® program. What does this mean for you? It means a group discount of up to 10% off Liberty Mutual's already competitive auto and home insurance rates.



Contact: Joey Doom at **1-800-852-4419** or visit Liberty Mutual's website at **libertymutual.com/gsplfucg** for contact information.

Metro Employees Credit Union



Membership is available to employees of the LFUCG. To become a member of MECU simply stop by one of their offices, give them a call at **258-3990** or visit online at **metroemployeescu.org**.

Metro Employees Credit Union is proud to offer its' members a variety of savings and loan products including the following:

- Share draft checking
- Borrowing opportunities
- Savings and investment opportunities
- Payroll deduction is available

YMCA



The YMCA has waived the joining fee and discounted the membership rates for LFUCG employees. LFUCG supplements a portion of the membership rate so this gives you a great value. Employee rates may vary by location and contract year. Check the new benefits website or call your local YMCA for current rates that apply.

Contact the YMCA directly to set up your membership. How do you join? Stop by one of the YMCA locations and tour the YMCA facility. **YOU WILL NEED TO BRING YOUR LFUCG ID OR A PAYCHECK STUB FOR EMPLOYMENT VERIFICATION.**

Beaumont Centre Family YMCA

3250 Beaumont Centre Circle
Lexington, KY 40513
859-219-9622

North Lexington Family YMCA

381 W. Loudon Ave.
Lexington, KY 40508
859-258-9622

High Street YMCA

239 E. High Street
Lexington, KY 40507
859-254-9622

Whitaker Family YMCA

2681 Old Rosebud Rd.
Lexington, KY 40509
859-543-9622

LFUCG employees and part-time employees who are eligible to receive benefits may participate.

Retirement Planning

ICMA DEFERRED COMPENSATION: 26 pay period calculation



Contact: Call Customer Service at **1-800-669-7400**; or call Yvonne Bailey at **1-866-339-8796**; or via email at **ybailey@icmarc.org**; fax **202-682-6439**.

Forms are also available on-line at **lexingtonky.gov/benefits**

- 457 deferred compensation plan Enrollment form required only if you are opening a NEW ACCOUNT
- Traditional / IRA Roth option available but must meet criteria for opening the account (after-tax deduction)
- Minimum contribution of \$15.00 per paycheck

Plan Features:

1. Loans and hardship withdrawals are available
2. Offers advice services to help manage your deferred compensation account
3. One on One Appointments are available

KY DEFERRED COMP: 26 pay period calculation



Contact: Call Customer Service at **1-800-542-2667**; fax **502-573-4494**; or visit Kentucky Deferred Comp's website at **kentuckydcp.com** for contact information.

Forms are also available on-line at **lexingtonky.gov/benefits**

- **A form is REQUIRED** for all changes to your account as well as opening a NEW ACCOUNT - they request that you mail it to them at the address on the form, or fax it to them at the number above.
- A 401(k) Plan and 457(b) accounts - Minimum contribution of \$14 per paycheck.
- Traditional / Roth IRA available if in 401 or 457 through LFUCG (after-tax deduction).

Benefit Enrollment through Oracle/PeopleSoft Enterprises

Get started at **hcm.lexingtonky.gov**

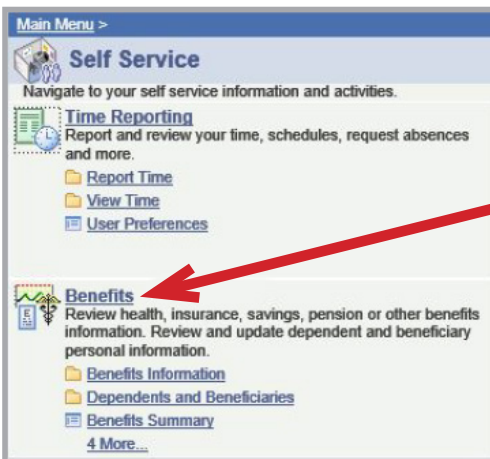
ORACLE®
PEOPLESOFT ENTERPRISE

If you already have a PeopleSoft Account set up, use your User Name & Password to access the Menu Page. If you need to update your Password, call Computer Services help desk at (859) 258-3730.



STEP 1:

Once you access the 'Menu Page', select '**SELF SERVICE**'.



STEP 2:

On the 'Self Service Page', select '**BENEFITS**'.




STEP 3:

On the 'Benefits Page', select '**BENEFITS ENROLLMENT**'.

During Open Enrollment you may make changes to any benefit plan in which you are eligible to participate. Please remember to enroll all dependents you wish to cover and complete their information including social security number and date of birth. If you are adding new dependents to the plan, you must provide proof of eligibility. You will be notified if documentation is required.

Note: Some benefit enrollment options may require you to submit additional documentation directly to the provider offering that benefit. If additional forms are required for any of your enrollment elections, instructions will be provided.


Once the Open Enrollment period is over, these elections will remain in effect for the plan year unless you have a qualifying family status change. The Select button next to an event means it is currently open for enrollment. To begin your enrollment, click .

Benefit Enrollment through Oracle/PeopleSoft Enterprises

STEP 4:

You will be required to complete the **Tobacco Affidavit** on behalf of both you and your spouse (if spouse is covered under medical plan).

STEP 5:

You will have the opportunity to  any benefits you want to change.


REMEMBER: FSA contributions do not roll over and must be elected each year.

STEP 6:

If you are sure your benefit elections are correct, select the  button.

	Before Tax	After Tax	Total	Employer
Costs	217.72	0.00	217.72	47.07
Your Costs	53.53	0.00	53.53	

These costs do not include 401k or 457 elections.

 Click **Verify** to verify you have reviewed your elections above and to continue to the Authorize Elections page.

You're not finished yet. Continue until you see '**CONGRATULATIONS**'.

STEP 7:

CONGRATULATIONS! You have completed your enrollment. If you select '**OK**', you will not receive a confirmation of your enrollment. It is a good idea to select the '**Generate Rpt**' button to print out a confirmation. This will reflect your 2018 elections and should be kept for your records.

If you see '**SUBMITTED**' on the 'Benefits Enrollment Page', your 2018 Enrollment is complete.



Have a great 2018!

Benefits Enrollment

During open enrollment you may make changes to your elections. Please remember to enroll all dependents including social security number and date of birth. You must provide proof of eligibility. You will be notified if your elections are not complete.

Note: Some benefit enrollment options may require the provider offering that benefit. If additional information is required, instructions will be provided.

Once the Open Enrollment period is over, these elections will remain in effect for the plan year unless you have a qualifying family status change. The **Select** button next to an event means it is currently open for enrollment. To begin your enrollment, click **Select**.

Open Benefit Events				
Event Description		Event Date	Event Status	Job Title
Open Enrollment		01/01/2018	Submitted	

Once you click **Select**, it will take a few seconds for your benefits enrollment information to load.

If you see "Submitted", your benefits were successfully submitted. If you hit the select button again, it will delete any new elections made and you will need to complete the entire enrollment process again and re-submit.

CONTACTS AT-A-GLANCE

QUESTIONS	COMPANY	WHO ARE THEY?	TELEPHONE	WEB ADDRESS
Medical Benefits Information	 Anthem	Insurance Company	1-844-812-9209	anthem.com
Pharmacy Benefits Information	 Anthem EXPRESS SCRIPTS®	Anthem/ESI Customer Service	1-844-812-9209	anthem.com
Pharmacy Benefits Specialty Medications	 accredo®	Customer Service	1-800-870-6419	accredo.com
Dental Benefits Information	 DELTA DENTAL®	Customer Service	1-800-955-2030 Group # M00034	deltadentalky.com
Vision Benefits (with Medical plan)	 Anthem	Customer Service	1-866-723-0515	anthem.com (Blue View Vision Network)
Vision Benefits (Stand alone)	 eye med	Customer Service	1-866-299-1358	eyemedvisioncare.com
FSA Information	 CHARD SNYDER Benefit Solutions	Flex Spending Customer Service	1-800-982-7715	chard-snyder.com
HSA Help Center	 HealthEquity®	HSA Personal Help Center HSA General Information	1-866-346-5800	myhealthequity.com healthequity.com/LFUCG
Group Life/AD&D Information	 Prudential	Deron Smith	859-685-6588	deron.smith@assuredptrnl.com
Voluntary Short-Term Disability Information	 Trustmark BANKING - INVESTMENTS - INSURANCE	Star Robbins & Co. Claims Support	1-800-486-7721	starrobbins.com
Voluntary Long-Term Disability Information	 Cigna.	To report a claim:	1-800-362-4462	N/A
		Star Robbins & Co. Plan Information	1-800-486-7721	starrobbins.com
Vol. Cancer, Critical Illness, Accident Assistance & Hospital Indemnity Info	 Allstate.	Star Robbins & Co. Claims Support	1-800-486-7721	starrobbins.com
Voluntary Individual Term Life Information	 Humana.	Star Robbins & Co. Claims Support	1-800-486-7721	starrobbins.com
Voluntary Whole Life Information	 Humana.	Star Robbins & Co. Claims Support	1-800-486-7721	starrobbins.com
Voluntary Universal Life Information	 Trustmark BANKING - INVESTMENTS - INSURANCE	Star Robbins & Co. Claims Support	1-800-486-7721	starrobbins.com
ICMA Deferred Compensation Info.	 ICMA RC	Customer Service	1-800-669-7400 Yvonne Bailey: Ph: 1-866-339-8796 Fax: 202-682-6439	icmarc.org email: ybailey@icmarc.org
KY Deferred Comp - 457/401(k) Information	 Kentucky Deferred Comp	Customer Support	1-800-542-2667 Fax: 502-573-4494	kentuckydcp.com
Voluntary Auto & Homeowners Information	 Liberty Mutual.	Joey Doom	1-800-852-4419	libertymutual.com/ gsplfucg
Metro Employees Credit Union Information	 METRO EMPLOYEES CREDIT UNION	Customer Service	859-258-3990	metroemployeeescu.org

The benefits overview is intended for summary purposes only. It is not to be relied upon for the determination of any policy benefits, limitations or exclusions. The master insurance policies issued by the respective carriers will be relied upon exclusively to determine all benefits.

