

2025 BENEFITS GUIDE





BENEFITS OVERVIEW

This benefits guide contains an overview of the valuable benefits package available to you through Pender County. You will find helpful information herein to assist you in understanding the benefits offered. Please read your materials carefully to choose the plans that best meet the needs of you and your family.

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As you prepare to enroll for benefits or make changes to your coverage, consider the needs of you and your family throughout the entire year. Think about the types and levels of coverage and the associated cost of each plan. Keep this guide as reference to use throughout the year.

ANNUAL ENROLLMENT *** MANDATORY THIS YEAR ***

Sept 30th - Oct 25th

Annual enrollment is the period each year to make changes to your benefits. You can change plans as well as add or drop coverage provided you and your dependent(s) meet all eligibility requirements. Changes made during open enrollment must remain until the following open enrollment period, unless you experience a qualifying life event.

Medical Benefits (see page 4)

Sept 30 - Oct 25

Enroll in State Health Medical Plan in eBenefits portal

Call Center Support 1-855-859-0966

M-F 8am - 10pm, Sat 8am - 12pm

OR, for State Health Plan questions, Contact HR

Ancillary Benefits (see page 9)

Sept 27

Benefits Review Meeting in Auditorium 10-11am and 2-3pm

Sept 30 - Oct 10

BY PHONE enrollment with Benefit Coach from 11am-8pm

Oct 7 - Oct 10

ONSITE enrollment with Benefit Coach from 11am-8pm

Sept 30 - Oct 25

Employee Self Enrollment (online)

To schedule onsite or by phone appointments with a Benefit Counselor go to:

<https://flimp.live/PenderCounty>

Or call 1-877-277-7476 (M-F 9am- 9pm)



Benefit Eligible Employees must complete an enrollment session by phone, onsite, or enroll online by **10/25** for both ancillary benefits and for medical benefits.

Medicare Part D – Prescription Drug Information

If you (and/or your eligible dependents) are covered by Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please see the Legal Notices in the Employee Navigator Document Library or ask HR for more details.



Important Information for the 2025 Benefit Plan Year

Pender County is proud to offer a comprehensive benefits package to eligible, full-time employees who work 30 hours or more per week and have 30 days of service. Permanent part-time employees who regularly work 20 – 29 hours per week have access to negotiated group rates for the dental, vision, life and dependent life, short-term disability, and work-site benefits such as accident, critical illness and hospital indemnity. Pender County employees benefit from enhanced coverages and broader networks from MetLife at reduced rates.

ELIGIBILITY

You are eligible to participate in Pender County's benefits if you are a full-time employee working at least 30 hours per week. If you are permanent part-time employee working 20-29 hours per week, you may participate in purchasing dental, vision, life and dependent life, STD, and worksite benefits at group rates. If you enroll in benefits, you may also cover your:

- Legal 'spouse' as defined by the State of NC
- Children up to age 26
- Unmarried children of any age who are mentally or physically disabled

The term 'Child' includes a biological child, step child, legally adopted child, foster child, or a child placed under you or your spouse's permanent legal guardianship.

MAKING CHANGES TO YOUR BENEFITS

Each year, you have the opportunity to make changes to your benefits during open enrollment. You may make mid-year changes to your benefits only if you have a qualifying life event. Examples of qualifying life events include:

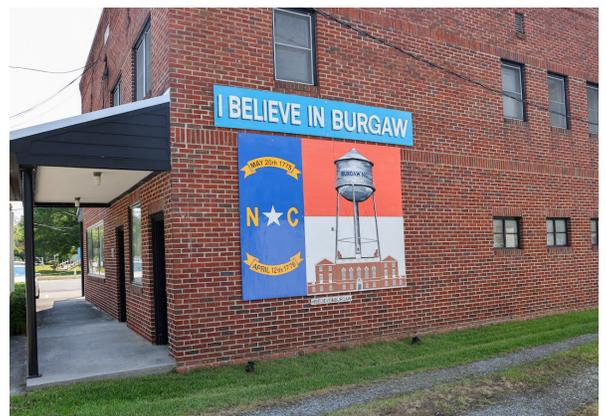
- Marriage, divorce, or annulment;
- Gain or loss of an eligible dependent for reasons such as birth, adoption, court order, disability, death, marriage, or reaching the dependent child age limit;
- Changes in your spouse's employment affecting benefit eligibility;
- Changes in your spouse's benefit coverage with another employer that affects benefit eligibility;
- Changes in employee work status.

You have 30 days from the date of the event to contact Human Resources of your qualifying event. Keep in mind, the changes you make must be directly related to the event and are effective the 1st of the month following the date of the status change.

EMPLOYEE PAYROLL CONTRIBUTIONS

Pre-Tax = Employee contributions for medical/vision, dental, and flexible spending accounts will be deducted from your paycheck on a pre-tax basis. This means that you do not pay federal, state or Social Security taxes on your contribution.

After-Tax = Employee contributions for term life, short-term disability, critical illness, accident, and hospital indemnity are paid for with after- tax contributions.





ENROLL IN YOUR MEDICAL BENEFITS

Action **REQUIRED** on your Part!
Open Enrollment Sept 30th - Oct 25th, 2024

To enroll in your medical benefits, visit the State Health Plan website at www.shpnc.org and click **eBenefits**. If you are adding dependents to a benefit plan, you will be asked to provide documentation of dependent eligibility under the State Health Plan.

MUST COMPLETE BY OCT 25th

ALL active employees, including dependents, will be moved to the Base PPO Plan (70/30) effective Jan. 1, 2025 if you fail to complete your SHP open enrollment. Employees **MUST** take action reduce their premium in either the Base 70/30 or Enhanced 80/20 Plan by completing a Tobacco Attestation.

To Enroll in your Medical Benefits:

Click link below:

[eBenefits | NC State Health Plan \(shpnc.org\)](http://eBenefits | NC State Health Plan (shpnc.org))

Scroll down and click on the button

Log in: Your username is your first name, last initial and the last 4 digits of your SSN.

(Example: JohnD1234)

Important Note Regarding Passwords:

If you are having issues logging into eBenefits, do not continue to attempt to log in or you will lock your account. Instead you have the option to reset your password. Simply click "Reset your account" then "I can't remember my password." From there you will be prompted to a screen that will ask you to enter your username so a passcode can be sent to the email address you have in eBenefits.

You will see your eBenefits landing page; click "Get Started"



****ACTION REQUIRED****

All active members and Non-Medicare retirees were moved to the Base PPO Plan (70/30) for the 2025 benefit year. If you prefer to enroll in the Enhanced PPO Plan (80/20), **YOU MUST TAKE ACTION**. If you want to reduce your monthly premium by \$60 for either plan, **YOU MUST TAKE ACTION** by October 25, 2024.

If you enroll in the Enhanced PPO Plan (80/20) or Base PPO Plan (70/30) and visit your selected PCP, you can receive a copay reduction. Please make sure a PCP is selected.

Click on the video to view a short step-by-step demonstration of the online enrollment process.

When you are ready to complete the enrollment process you will need to click the "Get Started" button. When you have completed your enrollment you **MUST** click **SAVE!** A green congratulations message will appear when you have successfully completed your enrollment selection.

[Get started >](#)

Once you have selected your medical plan, reviewed your dependents, and completed your tobacco attestation, Make sure you click "Save" on the Benefit Summary Page. You have Successfully completed your medical insurance election when you see this banner.

✓ **Congratulations, REBECCA!** You have successfully completed your enrollment process.

Please review and print your Confirmation Statement for your records.



TOBACCO ATTESTATION



Action **REQUIRED** on your Part!



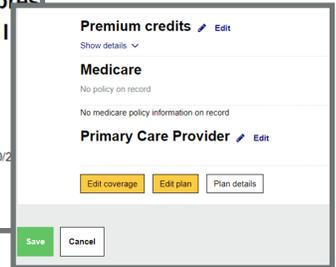
After you select your medical plan, on the next screen, you will attest to your tobacco use status.

Tobacco Attestation

I attest that I am **NOT** a tobacco user (includes cigarettes, cigars, vaping or any product containing nicotine). Or if I am a tobacco user, I will complete at least one tobacco cessation counseling session by November 30, 2024. I understand that making a false statement, representing myself as a non-tobacco user, may result in the termination from State Health Plan coverage. I agree to my efforts to verify my tobacco status.

Select the appropriate response below:

- I am NOT a tobacco user
- I AM a tobacco user but agree to participate in a cessation counseling program by 11/30/24
- I AM a tobacco user



At the final Screen, click **“Save”**.

Tobacco Attestation Savings

	Enhanced PPO Plan (80/20)	Base PPO Plan 70/30
Subscriber-Only Monthly Premium	\$110	\$85
Attest to being a non-tobacco user or agree to visit a provider (by Nov 30, 2024) for at least one cessation counseling session to earn a monthly premium credit.	-\$60	-\$60
Total Monthly Subscriber-Only Premium (With Credit)	\$50	\$25

Tobacco Users Have until November 30, 2024 to Complete Activity.

- Employees can attend a tobacco cessation counseling session at a provider’s office that offers this service for **free** to lower their 2025 employee-only premium by \$60.
 - * If you combine your tobacco cessation visit with another service, there may be a copay.
- To earn the \$60 premium credit, employees may complete the tobacco cessation counseling session between **July 1 and November 30, 2024**. You do not have to wait until Open Enrollment!
- Please note** this action is **only** for tobacco users who want to reduce their 2025 premium. If the employee is a non-tobacco user, they will simply attest to that fact during the Open Enrollment.
- To ensure you receive credit for visit, please upload your provider office visit summary to the “Document Center” located in eBenefits, the Plan’s enrollment system. *Be sure to request a copy of your summary during your visit.*



MEDICAL BENEFITS



A new TPA is on the way.



- Aetna will become the State Health Plan’s new Third-Party Administrator (TPA) on Jan. 1, 2025. Blue Cross NC is the Plan’s current TPA.
- The State Health Plan’s goal is to make the Aetna transition as seamless as possible.
- A few things to keep in mind regarding the 2025 State Health Plan benefits:
 - ⇒ No benefit changes
 - ⇒ No premium increases
 - ⇒ New TPA
 - ⇒ New ID Card
 - ⇒ New 24/7 Nurse Line
 - ⇒ New virtual care services through Teladoc
 - ⇒ Expanded disease and case-management program

See SSO Link: All members will need to RE-SELECT a Primary Care Provider (PCP) in order to keep enjoying \$0 to lower copays when visiting that provider.

New ID Cards coming late November - December. Beginning Jan.1, 2025, 2024 ID cards will no longer work at provider offices or pharmacies. Cards will include:

- new TPA Logo
- new member ID number
- new group number
- new contact phone numbers
- new network name

<p>North Carolina State Health Plan FOR TEACHERS AND STATE EMPLOYEES A Division of the Department of State Treasurer</p>		<p>Provider Type Selected PCP* Phys/Occ/Spch Th Specialist Behavioral Health Urgent Care Hosp/ER Other Info Ind Deductible Ind OOP Max Family Deductible Family OOP Max Primary Care Pro PCP Name Prints 1 North Carolini Preferred +</p>	<p>Non CPP* CPP \$0 \$10</p>												
<p>JOE SAMPLE ID: XXXXXXXXXXXXX SAMPLE GROUP NAME Group No: XXXXXXXX Eff Date: 01/01/2025 Enhanced PPO Plan (80/20) NC SHP Network Choice POS II RXBIN: 0044336 ADV RXGRP: RX0274 SELF INSURED <small>Paid for by YOU and other NC Taxpayers</small></p>		<p>Third Party Administrator: Pharmacy Benefits Administrator: </p> <table border="0"> <tr> <td>Benefits & Claims Number</td> <td>1-833-690-1037</td> </tr> <tr> <td>Eligibility & Enrollment</td> <td>1-855-859-0966</td> </tr> <tr> <td>Behavioral Health</td> <td>1-800-424-4047</td> </tr> <tr> <td>Provider Relations/Precert</td> <td>1-888-632-3862</td> </tr> <tr> <td>Pharmacy Help Desk</td> <td>1-800-364-6331</td> </tr> <tr> <td>CVS Caremark</td> <td>1-888-321-3124</td> </tr> </table> <p>Aetna Life Insurance Company Submit Claims To: PO Box 14079 Lexington, KY 40512-4079</p> <p>Talk to a doctor 24/7: 1-855-TELADOC or Teladoc.com www.SHPNC.org</p> <p><small>Aetna provides administrative services only for the self funded plan, and assumes no financial risk for claims. Claims may be subject to review. Members are responsible for obtaining the prior review/consent for professional and/or outpatient services for non-participating providers.</small></p>		Benefits & Claims Number	1-833-690-1037	Eligibility & Enrollment	1-855-859-0966	Behavioral Health	1-800-424-4047	Provider Relations/Precert	1-888-632-3862	Pharmacy Help Desk	1-800-364-6331	CVS Caremark	1-888-321-3124
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MEDICAL BENEFITS

No major benefit plan changes for 2025.

FOR 2025 - All currently active employees will be moved to the Base PPO Plan effective January 1, 2025. If you would like to change your enrollment to the Enhanced PPO Plan, you must log into the system and update your election.

The table below provides In-Network highlights from each plan. Details about each plan are available on the State Health Plan website at www.shpnc.org.

Plan Feature	Member In-Network Expenses	
	Base PPO Plan (70/30)	Enhanced PPO Plan (80/20)
Annual Deductible	\$1,500 (Individual) \$4,500 (Family)	\$1,250 (Individual) \$3,750 (Family)
Coinsurance	30% of eligible expenses after deductible	20% of eligible expenses after deductible
Out-of-Pocket Maximum (Combined Medical and Pharmacy)	\$5,900 (Individual) \$16,300 (Family)	\$4,890 (Individual) \$14,670 (Family)
Affordable Care Act (ACA) Preventive Services	\$0 (covered at 100%)	\$0 (covered at 100%)
Primary Care Office Visits	\$0 for CPP PCP on ID Card \$30 for non-CPP PCP on ID Card \$45 for any other PCP	\$0 for CPP PCP on ID Card \$10 for non-CPP PCP on ID Card \$25 for any other PCP
Specialist Copay	\$47 for CPP Specialist \$94 for other Specialists	\$40 for CPP Specialist \$80 for other Specialists
Behavioral Health	\$0 CPP Provider \$45 non-CPP Provider	\$0 CPP Provider \$25 non-CPP Provider
Speech, Occupational, Chiro and Physical Therapy Copay	\$36 for CPP Providers \$72 for other Providers	\$26 for CPP Providers \$52 for other Providers
Teladoc	\$45	\$25
Urgent Care	\$100	\$70
Emergency Room (copay waived w/ admission or observation stay)	\$337 copay, then 30% after deductible	\$300 copay, then 20% after deductible
Inpatient Hospital	\$337 copay, then 30% after deductible	\$300 copay, then 20% after deductible

***Remember that you can reduce your medical premiums by completing the tobacco attestation!**



PRESCRIPTION DRUG COVERAGE

The State Health Plan of North Carolina utilizes CVS/Caremark as the Prescription Benefit Manager. Remember, the Plan maintains a customized closed formulary, or drug list. In a “closed” formulary, certain drugs may be excluded. The formulary is updated on a quarterly basis.

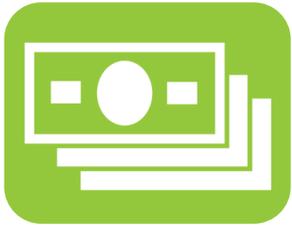
The table below provides In-Network highlights for prescription drug coverage for a 30-day supply. Details about each plan are available on the State Health Plan website www.shpnc.org

Benefits	Base PPO Plan (70/30)	Enhanced PPO Plan (80/20)
Tier 1 (Generic)	\$16	\$5
Tier 2 (Preferred Brand and High Cost Generic)	\$47	\$30
Tier 3 (Non-Preferred Brand)	Deductible / Coinsurance	Deductible / Coinsurance
Tier 4 (Low Cost Generic Specialty)	\$200	\$100
Tier 5 (Preferred Specialty)	\$350	\$250
Tier 6 (Non-Preferred Specialty)	Deductible / Coinsurance	Deductible / Coinsurance
Preferred Diabetic Supplies** (Test Strips, Lancets, Syringes, Needles)	\$10	\$5
Preferred Insulin and Non-Preferred Insulin	\$0	\$0

**Preferred Brand is the OneTouch Test Strips. Non-preferred diabetic testing supplies are considered a Tier 3 member copay.

Potential Financial Responsibility when Using Out-of-Network Providers

The amount the plan pays for covered services provided is based on a maximum allowable amount for the specific service rendered. Although your plan stipulates an out-of-pocket maximum for out-of-network services, please note the maximum allowed amount for an eligible procedure may not be equal to amount charged by your out-of-network provider. Your out-of-network provider may bill you for the difference between the amount charged and the maximum allowed amount. This is called balance billing and the amount billed to you can be substantial. The out-of-pocket maximum outlined in your policy will not include amounts in excess of the allowable charge and other non-covered expenses as defined by your plan. The maximum reimbursable amount for non-network providers can be based on a number of schedules such as a percentage of reasonable and customary or a percentage of Medicare. The plan document or carrier’s master policy is the controlling document, and this Employee Benefits Guide does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual plan language. Contact your claims payer or insurer for more information.



2025 STATE HEALTH PLAN RATES

MEDICAL PLAN	MONTHLY RATES*
Base PPO Plan (70/30)	
Employee	\$25.00
Employee + Spouse	\$590.00
Employee + Child(ren)	\$218.00
Family	\$598.00
Enhanced PPO Plan (80/20)	
Employee	\$50.00
Employee + Spouse	\$700.00
Employee + Child(ren)	\$305.00
Family	\$720.00

**Assumes completion of tobacco attestation. The employee-only premium will be \$60 higher per month if the tobacco attestation is not completed.*





ENROLL IN YOUR ANCILLARY BENEFITS

Action **REQUIRED** on your Part! **Open Enrollment Sept 30 - Oct 25**

MetLife will continue to provide coverage for Dental, Basic Life (County Paid), Voluntary Life, Dependent Life, Short-Term Disability, Long-Term Disability (County Paid), Work-Site Voluntary Benefits (Accident, Critical Illness/Cancer and Hospital Indemnity) and Pet Insurance. CEC will continue to administer our Vision benefits MetLife will support our Employee Assistance Program through LifeWorks.

MUST COMPLETE BY OCT 25th

Every Benefit Eligible Employee must complete an enrollment session with a **Benefit Coach** by phone, onsite, or enroll online by 10/25 - Even if to waive Benefits - no exceptions.

Important Times and Dates

Auditorium - 801 S Walker Street in Burgaw

- Sept 27** **Benefits Review Meeting in Auditorium (~1 hr)**
Two sessions - 10:00 am and 2:00pm
- Sept 30 - Oct 10** **BY PHONE enrollment with Benefit Coach.**
Appointments Available from 11am - 8pm
- Oct 7 - Oct 10** **ONSITE enrollment with Benefit Coach in**
Auditorium by appointment from 11am - 8pm
- Sept 30 - Oct 25** **Employee Self Enrollment is OPEN**
(see next page for enrollment instructions)

***Gift Card Prizes of \$25 will be awarded at random for those who pre-schedule their appointment before open enrollment.**



Go to our Open Enrollment website to learn more and schedule your appointment! Online and Phone sessions with Benefit Counselor are **by appointment only!**

<https://flimp.live/PenderCounty>



- View benefits videos and information
- **To enroll onsite or by phone**, schedule your phone appointment online or call 1-877-277-7476, Mon – Fri, 9am - 9pm

Enroll by phone – a great opportunity to speak with a licensed, professional Benefit Coach. Make your appointment.

- Personalized benefits review
- Help with benefit decisions
- Answers to your questions
- One easy phone call (we call you)
- Include your spouse



2025 Benefits Open Enrollment

9/30 - 10/25 2024

Onsite In-Person Enrollment appointments available: 10/7-10/10

Phone Enrollment appointments available: 9/30-10/10

Self Service (online) enrollment also available: 9/30-10/25



HOW TO ENROLL IN YOUR ANCILLARY BENEFITS

Action **REQUIRED** on your Part! **Open Enrollment Sept 30 - Oct 25**

employee NAVIGATOR

Username
|

Password

Login

Forgot Username? Forgot Password?

Register as a new user

How to Register in Employee Navigator

Step 1: Log In

Go to www.employeenavigator.com/benefits/Account/Login

- Returning users: Log in with the username and password you selected. Click Reset a forgotten password.
- First time users: Select Register as a new user and Create an account, and create your own username and password.

Step 2. Create Your Account

Enter in the requested information:

- First Name
- Last Name
- Company Identifier: **PenderCoGov**
- PIN: Last 4 digit of your Social Security Number
- Date of Birth: MM/DD/YYYY

Step 3. Register your Username and Password.

Username: Company email is recommended

Password: Length minimum is 6, number and symbol required.

Create Your Account

Then register a username and password

Username
(company email is recommended)

Password
(minimum length of 6, number and symbol required)

show it

I agree with the [terms of use](#)

Next >

Create Your Account

First, let's find your company record

First Name

Last Name

Company Identifier
(provided by HR)

PIN
(Last 4 Digits of SSN / ID)

Birth Date
(mm/dd/yyyy)

Next >

How to Enroll in your Benefits

Step 1: Welcome!

After you login, click Let's Begin to complete your required tasks.

Step 2: Onboarding

(For first time users, if applicable) Complete any assigned onboarding tasks before enrolling in your benefits.

Once you've completed your tasks click **Start Enrollment** to begin your enrollments.

Onboarding Complete!

Great job! Now you can begin electing your benefits. There are 34 days left in Open Enrollment for you to complete this.

Onboarding

1. Benefit Enrollment
2. HR tasks

Start Enrollment Dismiss, complete later

Participation Required

You can't say we didn't tell you, the following items are a MUST HAVE for HR. We require that you complete them. You can log out anytime, but that won't make them go away! You'll be hearing from your HR until these items are completed.

1. Onboarding
2. Benefits Enrollment
3. HR tasks

Lets Begin!

TIP

If you hit **“Dismiss, complete later”** you'll be taken to your Home Page. You'll still be able to start enrollments again by clicking **“Start Enrollments”**.

MUST COMPLETE BY OCT 25th

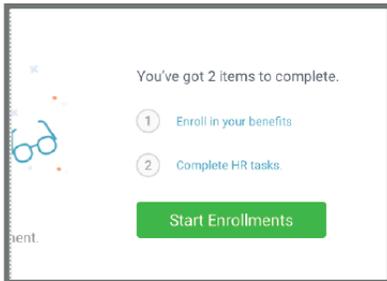
Every Benefit Eligible Employee must complete an enrollment session with a Benefit Coach by phone, onsite, or enroll online by **10/25** - Even if to waive Benefits - no exceptions.



HOW TO ENROLL IN YOUR ANCILLARY BENEFITS

Action **REQUIRED** on your Part! **Open Enrollment Sept 30 - Oct 25**

How to Enroll in your Benefits Continued

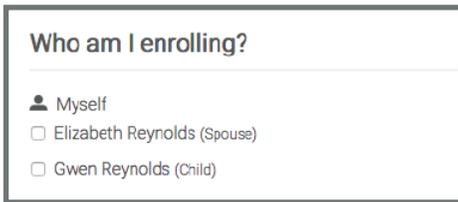


Step 3: Start Enrollments

After clicking **Start Enrollment**, you'll need to complete some personal and dependent information before moving to your benefit elections.

TIP

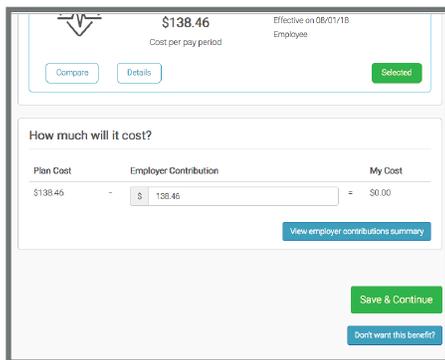
Have dependent details handy. To enroll a dependent in coverage you will need their Date of Birth and Social Security Number.



Step 4: Benefit Elections

To enroll dependents in a benefit, click the checkbox next to the dependent's name under Who am I enrolling?

Below your dependents you can view your available plans and the cost per pay. To elect a benefit, click **Select Plan** underneath the plan cost.



Click **Save & Continue** at the bottom of each screen to save your elections.

If you do not want a benefit, click **Don't want this benefit?** at the bottom of the screen and select a reason from the drop-down menu.

Step 5: Forms

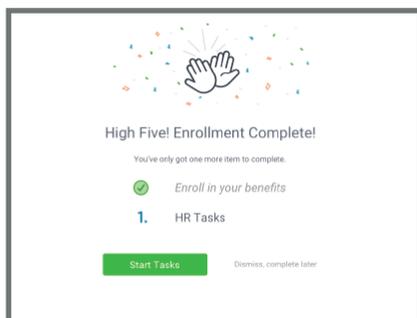
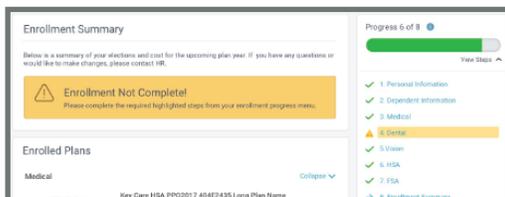
If you have elected benefits that require a beneficiary designation, Primary Care Physician, or completion of an Evidence of Insurability form, you will be prompted to add in those details.

Step 6: Review & Confirm Elections

Review the benefits you selected on the enrollment summary page to make sure they are correct then click **Sign & Agree** to complete your enrollment. You can either print a summary of your elections for your records or login at any point during the year to view your summary online.

TIP

If you miss a step you'll see **Enrollment Not Complete** in the progress bar with the incomplete steps highlighted. Click on any incomplete steps to complete them.



Step 8: HR Tasks (if applicable)

To complete any required HR tasks, click **Start Tasks**. If your HR department has not assigned any tasks, you're finished!



You can login to review your benefits 24/7



DENTAL BENEFITS

Administered by MetLife



Good oral care enhances overall physical health, appearance and mental well-being. Problems with the teeth and gums are common and easily treated health problems. Keep your teeth healthy and your smile bright with the Pender County dental benefit plan.

BENEFITS	IN-NETWORK
Annual Deductible	\$25 per person; \$75 family limit
Annual Benefit Maximum	\$5,000 - per member total
Preventive Dental Services TYPE A (cleanings - 2X in 1 year, exams, sealants, x-rays)	100%; no deductible
Basic Dental Services TYPE B (fillings, root canal therapy, oral surgery)	80%
Major Dental Services TYPE C (extractions, crowns, inlays, onlays, bridges, dentures, repairs)	50%
Orthodontia - Braces (Children up to Age 19)	50%
Orthodontia Lifetime Maximum (Per Person)	Up to \$1,000

When you receive services from a Nonparticipating Dentist, the services fee may be less than what your dentist charges, which means that you will be responsible for the difference.

VOLUNTARY DENTAL PLAN	PER PAY-CHECK RATES
Employee	\$17.49
Employee + Spouse	\$34.49
Employee + Child(ren)	\$43.95
Family	\$61.21



Finding In-network Dentists

You pay less for services when you use a dentist in the MetLife network. You can find an in-network dentist by visiting www.metlife.com/dental or calling (800) 275-4638.



Dental information available through the MetLife Mobile App

Viewing your dental plan just got easier with the MetLife Mobile App



To use the MetLife mobile app, employees can choose to register at metlife.com/mybenefits from a computer or directly through the app. Certain features of MetLife US Mobile App are not available for some MetLife Dental Plans.

You can:

- Find a dentist
- Get estimates for most procedures enhanced to display personalized, plan specific costs and additional information such as percent covered, applicable deductible, Plan Maximum and Frequency Limits.
- View your plan summary with quick links to important information on deductibles and Plan Maximums as well as Covered Services
- View detailed coverage information for your dental policy such as benefit sharing percentage, applicable deductibles, Plan Maximum and Frequency Limits
- View your claims
- Track your brushing and flossing
- Access and save digital ID card to photo library or mobile app

It's easy! Search "MetLife" on the App Store or Google Play to download the MetLife US Mobile App, or scan the QR codes. Search our network of thousands of dentists and specialists to find a provider near you.

Or log-in to [My Benefits MetLife](https://metlife.com/mybenefits) to access your plan information.

It's available 24 hours a day, seven days a week.

To use the MetLife mobile app, employees can choose to register at metlife.com/mybenefits from a computer or directly through the app. Certain features of MetLife US Mobile App are not available for some MetLife Dental Plans.





VISION BENEFITS

Insured by Community Eye Care (CEC)



Regular eye examinations can not only determine your need for corrective eyewear but also may detect general health problems in their earliest stages. Protection for the eyes should be a major concern to everyone.

BENEFITS	IN-NETWORK	OUT-OF-NETWORK
Eye Exam - Every 12 months	\$10 copay	100% minus copay
Retinal Screening An enhancement to the eye exam where high resolution images are taken of the inside of the eye to detect and monitor conditions like diabetes.	\$39 copay	None
Eyewear - An annual \$200 flexible allowance for prescription and non-prescription eyewear. Every 12 months	\$25 copay	Up to \$200 minus copay
Contact Lens fitting or evaluation - Every 12 months	\$25 copay	100% minus copay

Additional pairs of Glasses or Contacts

Members receive a 20% savings on additional pairs of prescription and non-prescription glasses, and 10% savings on contact lenses, from any CEC in-network provider within 12 months of their last eye exam.

Lasik Discounts

Members can save up to 50% from participating QualSight LASIK providers, including TLC Laser Eye Center



SUNGLASSES ARE IN!

Non-prescription eyewear, including sunglasses, is included in your CEC vision plan. Other non-prescription eyewear such as blue-light blocking glasses, safety glasses, and readers are also included. If you don't need corrective lenses, you can use the allowance for sunglasses!

VOLUNTARY VISION PLAN	PER PAYCHECK RATES
Employee	\$4.49
Employee + One	\$9.45
Family	\$13.48

Finding In-network Eye Doctors

You can find an in-network eye doctor in the CEC network by visiting: cecvision.com/search



FLEXIBLE SPENDING ACCOUNTS

Administered by Flores

A Flexible Spending Account (FSA) is an employer sponsored plan that allows you to deduct dollars from your paycheck and deposit them into a special account that is protected from taxes (Social Security taxes, Federal, and in most cases, State taxes). You can then use these funds towards IRS approved expenses.

- **Healthcare FSA** - With this account, you can set aside funds to be used for eligible out of pocket medical expenses. Please refer to the chart on the following page for examples. You can contribute up to **\$3,200** per year in 2024 (2025 limit has not been announced). You must re-enroll in this benefit each year.
- **Dependent Care FSA** - With this account, you can reimburse yourself for eligible childcare expenses for your dependents so that you (and your spouse if you are married) can work. You can contribute up to **\$5,000** per year. You must re-enroll in this benefit each year.

How long do I have to use my FSA funds?

Any funds you contribute to your Healthcare FSA or Dependent Care FSA must have claims filed by March 31, 2025. Your plan does allow for up to **\$640** of unused Healthcare FSA funds to be rolled over to the next year. There is no rollover for Dependent Care FSA funds.

Healthcare FSA Debit Card

1. **ENROLL IN ELIGIBLE BENEFIT PLAN** - Pender County offers the Flores Debit card to employees that enroll in an eligible benefit plan. The card will allow you to pay for eligible expenses at participating providers at the time services are rendered, thus eliminating or reducing your out-of-pocket cost at the time of the purchase or service.
2. **RECEIVE YOUR DEBIT CARD** - Your Flores Debit Card will be mailed upon your enrollment in an eligible benefit plan. No activation is required, but you should review the Cardholder Agreement included in this mailing, and then sign the back of your card.
3. **PROPER USE & ACCOUNT MANAGEMENT** - You will be able to view and manage your Debit Card account on the Flores participant website, www.flores247.com. You should keep your receipts and invoices for payments made with your Flores Debit Card, as you may be required to provide documentation to Flores to verify the eligibility of certain transactions. If requested, you may submit your documentation to Flores by uploading it to your online account, uploading using the e-Receipt mobile application, or sending it by fax or mail.

How do I obtain my account details?

- **Website** - Visit www.flores247.com and login using Participant ID or Username and password
- **Mobile** - Download the app for mobile filing
- **PID & Password Assistance** - Dial 800.840.7684

How do I submit documents to Flores?

- **Online** - Visit www.flores247.com and upload scanned documents securely
- **Mobile** - Download e-Receipt smartphone app for Apple or Android devices
- **Mail** - Flores & Associates, LLC; PO Box 31397 Charlotte, NC 28231
- **Fax** - 800.726.9982 or 704.335.0818



Self-Service Features:

- Access your account information
- Requests for reimbursement from your account
- Submit supporting documentation for transactions
- Available through App store or Google Play



FLEXIBLE SPENDING ACCOUNTS

Administered by Flores

Healthcare FSA Expenses - To verify an expense that is not listed below, please call **800.532.3327**.

Acceptable Over-the-Counter Items

- | | | |
|-------------------------------|--------------------------------|---------------------------------|
| Acid Controllers | Ovulation Indicators | Gauze and Tape Incontinence |
| Acne Medications | Pedialyte | Supplies Diabetic Supplies |
| Allergy & Sinus | Blood Pressure Monitor | Glucose Meters |
| Antibiotic Products | Cholesterol Test | Sunscreen SPF 15+ |
| Anti-Diarrheals, Anti-Gas | Pregnancy Test | Crutches |
| Anti-Itch & Insect Bite | Condoms | Orthopedic Shoe Inserts |
| Asthma devices and Medication | Flu Shots | Breast Pumps/Lactation Supplies |
| Smoking Cessation Medication | Reading Glasses | Baby Rash Ointments/Creams |
| Insulin | Menstrual Care Products | Laxatives |
| Saline | Cold Sore Remedies | Motion Sickness |
| Bandages/Band-Aids | Cough, Cold & Flu | Pain Relief |
| Rubbing Alcohol | Digestive Aids | Sleep Aids & Sedatives |
| Thermometers | Feminine Anti-Fungal/Anti-Itch | Stomach Remedies |
| Cold/Hot Packs | Contraceptive Pills | Medicated Sunburn Creams |
| First Aid Kits | | |
| Oxygen | | |

Dependent Care FSA Expenses - To verify an expense that is not listed below, please call **800.532.3327**.

Expense		Allowed?	Comments
After-school care or extended day programs (supervised activities for children after the regular school program).	✔	Yes	These programs are generally custodial in nature although children may be supervised by qualified adults the primary purpose of the program is to care for children while parents are at work.
Au pair	✔	Yes	With the exception of airfare and other fixed costs as long as the expenses are within plan year.
Babysitter (inside or outside participants' home)	○	Maybe	Yes, unless babysitter is child of participant (or spouse) under 19 years of age or is otherwise claimed as a dependent by the employee or spouse on their federal tax return. Also, the primary purpose must be to care for children while the parents are at work.
Custodial or elder care expenses	○	Maybe	Eligible to extent not attributable to medical services as long as care is for legal dependent of participant.
Educational Expenses – First Grade and above	✘	No	
Educational Expenses – Kindergarten	✘	No	If child attends ½ day kindergarten and ½ day daycare the expenses may be prorated accordingly and the daycare charges may be reimbursed.
Educational Expenses – Nursery School	✔	Yes	Eligible as long as the primary purpose of the expense is custodial care so the parent can work. Most nursery schools (even Montessori) are custodial in nature.



LIFE INSURANCE BENEFITS

Insured by MetLife



LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE

Life Insurance

Life insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump sum payment if you die while employed by Pender County. Pender County provides basic life insurance of \$10,000 at no cost to you for full time employees (including commissioners).

Accidental Death and Dismemberment (AD&D) Insurance

Accidental Death and Dismemberment (AD&D) insurance provides payment to you or your beneficiaries if you lose a limb or die in an accident. Pender County provides AD&D coverage of \$10,000 at no cost to you. This coverage is in addition to your company-paid life insurance described above for full time employees (including commissioners).



Employee Basic Life and AD&D (Employer paid)	
Benefit Amount	\$10,000 Benefit Reductions Apply*

* 33% at Age 70, 50% at Age 75

VOLUNTARY LIFE INSURANCE

All full-time and permanent part-time employees working at least 20 hours per week may purchase life insurance in addition to the company-provided coverage. You may also purchase life insurance for your dependents if you purchase additional coverage for yourself. You are guaranteed coverage (up to \$200,000 or five times your salary, and up to \$25,000 for your spouse) without answering medical questions if you enroll when you are first eligible.

	Benefit Amounts (No age reduction)	Benefit Maximum (Employee paid)	Guaranteed Issue
Employee	\$10,000 Increments	The lesser of 5 X annual earnings or \$500,000 (minimum \$10,000)	\$200,000
Spouse	\$5,000 Increments	The lesser of 50% of the employee life amount or \$100,000 (minimum \$5,000)	\$25,000
Child(ren)	Flat	15 Days to 6 months: \$500 6 month to Age 26: Options of \$1,000, \$2,000, \$4,000, \$5,000 or \$10,000	6 months to age 26: \$10,000

Submitting your SOH application

Should you request an amount greater than the guaranteed issue, you will need to complete an Statement of Health (SOH) form. Your Benefit Counselor will show you how to find the SOH form during enrollment. Or, if you are enrolling yourself, Employee Navigator offers a pop up of the SOH form if it is required. You can download then, or access later in the document library within Employee Navigator. Once the form is completed, MAIL, FAX or EMAIL directly to MetLife Underwriting.

Metropolitan Life Insurance Company
 Medical Underwriting
 P O Box 14593
 Lexington, KY 40512-4593
 FAX: 1-888-505-7446
 EMAIL: METLIFESOH@metlife.com

Conversion: Should you separate from Pender County, you will need to contact MetLife directly within 31 days to port your coverage should you choose to retain it. Dependent coverage is not portable.

MetLife Customer Service: 1-800-438-6388.



LIFE INSURANCE BENEFITS

Voluntary Universal Life



Trustmark Universal Life

**NEW COVERAGE OPTION - No Medical Questions up to GI
This Open Enrollment Only**

Trustmark's fully portable Universal Life solutions address your differing needs for permanent life insurance and provides peace of mind for a lifetime. These options include the industry's most comprehensive Living Benefits package, with benefits for long-term care (LTC) services. Plans are available for you and your dependents. Employees must purchase coverage on themselves to purchase coverage for their dependents.

Universal Life provides flexible benefits, allowing you to adjust your death benefit, cash value and premiums as your financial needs change. In addition, this two-in-one coverage includes benefits for long-term care services that you can access to help pay for the high cost of LTC.

Trustmark Universal LifeEvents®

Benefits Designed for a Lifetime - An innovative concept in life insurance, Universal LifeEvents is uniquely designed to match the your needs throughout your lifetime. Universal LifeEvents pays a higher death benefit during your working years, when expenses are high and families need maximum protection. At age 70 (or the 15th policy anniversary, whichever is later), when financial needs are typically lower, the death benefit reduces to one third. However, higher benefits for LTC never reduce — they continue for the life of the policy, to help meet one's greater need for LTC in retirement.

- ⇒ Terminal Illness Benefit - Accelerates 75% of death benefit amount when life expectancy is 24 months or less.
- ⇒ Benefit Restoration - Fully restored death benefit reduced by LTC each time a benefit is paid. Allows beneficiaries to receive the full death benefit.
 Example: For a policy valued at \$100,000, the policy will have doubled in value – \$100,000 paid in LTC benefits, and \$100,000 paid in death benefit (if all 25 months of LTC are paid).
- ⇒ Home Health and Long Term Care - Designed to accelerate death benefit at 4% per month for up to 25 months to pay for long-term care in an assisted living or long-term care facility, or home health care or adult day care.
 Example: With a death benefit of \$100,000, \$4,000 per month is available for 25 months to pay for long-term care.

Eligibility	Universal Life	Universal Life Events	Universal Life Coverage (65-70)	Minimum Coverage	Maximum Simplified Issue*
Employees (permanent working 20 hours or more)	Ages: 18 - 75	Ages 18 - 64	Employee	Greater of amount purchased by \$3.00 or \$10,000	\$300,000
Spouse	Ages: 18 - 70	Ages 18 - 64	Spouse	Greater of amount purchased by \$3.00 or \$10,000	\$300,000
Children	Up to Age 23	N/A			

Standard Universal Life will be offered to employees 65-75. Policies with issue age 71+ do not include LTC benefits.

Universal Life Events Coverage (18-64)	Minimum Coverage	Guaranteed Issue (available only during <u>this</u> open enrollment)	Maximum Simplified Issue*
Employee	Greater of amount purchased by \$3.00 or \$10,000	Up to \$100,000	\$300,000
Spouse	Greater of amount purchased by \$3.00 or \$10,000	If employee applies for coverage, amount purchased by \$3.00 per week or \$25,000 whichever is greater	\$300,000

*Simplified Issue requires that the proposed insured provide height and weight plus answer 3 additional questions.

Enrollment for Universal Life or Universal LifeEvents must be completed with Benefit Coach in-person or by telephone. To schedule an appointment for Sept 30 - Oct 11, go to <https://flimp.live/PenderCounty> or call 1-877-277-7476 (M-F 9am- 9pm) or use the QR Code to schedule.



DISABILITY INSURANCE BENEFITS

Insured by MetLife



VOLUNTARY SHORT TERM DISABILITY (100% EMPLOYEE PAID)

All full-time employees and permanent part-time employees working at least 20 hours per week may purchase Short-Term Disability (STD) insurance.

Short-Term Disability (STD) benefits are payable when you are unable to work due to an injury or illness unrelated to work. If you meet the plan's disability requirements, you will receive a percentage of your earnings until the benefit duration has ended.

- **Benefit Begins*:** 8th day of accident or illness
- **Benefit Amount:** 60% of your weekly salary up to \$1000 per week
- **Pre-Existing Exclusion:** 3/12 months exclusion
- **Benefit Duration:** up to 25 weeks

Rates for Short-Term Disability are determined by employee's salary and age.

AGE	RATE
<30	\$0.821
30-34	\$0.871
35-39	\$0.782
40-44	\$0.841
45-49	\$1.029
50-54	\$1.277
55-59	\$1.540
60+	\$1.600

STD - PER \$10 COVERED WEEKLY BENEFIT

Voluntary STD - Monthly Premium *SAMPLE 42 Year Old *	
A. Annual Earnings (round to nearest dollar)	\$40,000
B. Weekly Earnings (annual earnings dividend by 52)	\$769.23
C. Your Weekly Earning multiplied by Benefit 60% = Covered Weekly Benefit (B multiplied by 60%)	\$461.54
PLEASE NOTE: Plan has a maximum of \$1000 Weekly Benefit	
D. Covered Weekly Benefit divided by 10	\$46.15
E. Multiply by Rate (D multiplied by appropriate age banded rate = <u>monthly</u> premium) rounded to nearest next dollar	\$38.81

Bi-Monthly Premium = \$ 19.41

LONG TERM DISABILITY (100% COUNTY PAID)

Pender County provides Long-Term Disability Insurance at no cost to full-time employees working at least 30 hours per week.

Long-Term Disability (LTD) benefits are provided as income protection in the event you become disabled for an extended period. Proof of disability is required.

- **Benefit Begins:** After 180 days of qualified disability
- **Benefit Amount:** 50% of your pre-disability earnings; maximum of \$1,000 per month
- **Pre-Existing Exclusion:** 3/12 months exclusion
- **Benefit Duration:** Lesser of 24 months or the duration shown below
 - * Age 66 - 21 months
 - * Age 67 - 18 months
 - * Age 68 - 15 months
 - * Age 69 and over - 12 months

Pre-existing Condition– Any condition you sought treatment for, or should have sought treatment for, within the 3 months prior to your effective date of coverage may be considered pre-existing and benefits may not be paid for that condition until you have been on the plan for 12 consecutive months.



ADDITIONAL INSURANCE BENEFITS

Insured by MetLife



VOLUNTARY ACCIDENT INSURANCE

Accident insurance pays a cash benefit when you or your covered family members suffer injuries sustained in an accident. Covered injuries include fractures, burns, concussions, tears, lacerations, broken teeth and eye injuries. Below are samples of covered benefits and the payment received by the employee.

Emergency Room - \$150	Urgent Care - \$75	Ground Ambulance \$300	Major Diagnostic Testing \$150
Coma - \$7,500	Fractures - up to \$4,000	Hospital Admission \$1,000 per accident	Basic Accidental Death \$25,000 employee

VOLUNTARY CRITICAL ILLNESS (INCLUDING CANCER) INSURANCE

This insurance pays a lump-sum cash benefit directly to the insured following the diagnosis of a covered critical illness or event, including (but not limited to) Cancer, Heart Attack, Stroke, Kidney Failure, Transplants, Sudden Cardiac Arrest, Coma, Loss of Sight/Hearing/Speech

Employees will receive a lump sum payment upon initial diagnosis or a covered critical illness. You can select coverage of \$10,000; \$20,000 or \$30,000 for yourself.

Spouse/Domestic Partners and Children are covered at 50% of the employee's benefit amount. Children are covered at no additional charge.

VOLUNTARY HOSPITAL INDEMNITY INSURANCE

Hospital Indemnity insurance is designed to help provide financial protection for covered individuals by paying a cash benefit due to a hospitalization. You can receive benefits when you're admitted to the hospital for a covered accident, illness, or childbirth. Employees can use the benefit to meet the out-of-pocket expenses and extra bills that can occur. Indemnity lump sum benefits are paid directly to the Employee based on the schedule of benefits, regardless of the actual cost of treatment. There are no copays, deductibles, coinsurance or network requirements. These benefits aren't reduced because you receive a payment from any other coverage you have, such as Medical, Accident or Critical Illness Insurance.

Hospital Admission Benefit \$1,000 (1X per year)	Hospital Confinement \$150 per day, max of 31 days/ year	Hospital Intensive Care \$150 per day, max of 31 days /year (paid in addition to Hospital Confinement)
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MetLife will provide an annual benefit **per calendar year per covered person** for receiving an eligible health screening.

Accident: **\$100** per covered person

Critical Illness: **\$100** per covered person

Hospital Indemnity: **\$50** per covered person

How to claim your Health Screening Benefit

1. Visit www.metlife.com/mybenefits or call 1-800-438-6388
2. Provide the following
 - Name of the insured, social security number, group name, certificate number
 - What date did you have your test? And what test did you have completed?
3. Receive Payment - checks are typically issued within a few business days.



WORKSITE BENEFIT COSTS

Insured by MetLife



ACCIDENT PLAN	PER PAYCHECK
Employee	\$8.02
Employee + Spouse	\$12.75
Employee + Child(ren)	\$16.28
Family	\$21.01

HOSPITAL INDEMNITY PLAN	PER PAYCHECK
Employee	\$9.45
Employee + Spouse	\$18.22
Employee + Child(ren)	\$14.49
Family	\$23.66

CRITICAL ILLNESS (INCLUDING CANCER) PLAN	PER PAYCHECK
EE/SP Attained Age (Premium per \$1,000) Non-Tobacco	
<30	\$0.45
30-39	\$0.61
40-49	\$0.99
50-59	\$1.74
60+	\$3.14
EE/SP Attained Age (Premium per \$1,000) Tobacco	
<30	\$0.55
30-39	\$0.83
40-49	\$1.44
50-59	\$2.68
60+	\$4.79

How to Calculate

Multiply the per \$1,000 rates shown above by the benefit amount divided by \$1,000 (e.g., 15 for \$15,000 of coverage) and round to two decimals to calculate rates for the quoted benefit amounts.

Employee Coverage amounts
10,000, 20,000, or 30,000

Spouse Coverage Amounts
(50% of Employee Coverage)
5,000, 10,000, or 15,000.

Eligible Dependent Children are covered at no additional charge. MetLife requires records of enrolled Dependent Children to be provided on the enrollment file.

Note: Final Implemented Rates may vary slightly due to rounding. Spouse Rates for Critical Illness are based on employee age and tobacco status.



PET INSURANCE

Insured by MetLife



Pets are family too. When they get sick or injured, it can be a stressful time. MetLife Pet Insurance can help by covering some of the costs for your pet's vet bills. This coverage allows you to customize the plan to best suit you and your pet's needs.

You can select from a range of annual limits, deductibles, and coinsurance levels. There is a quick 3 step enrollment.

What do you get with Pet Insurance?

- Flexible coverage with up to 90% reimbursement and freedom to visit any U.S. licensed vet
- Option of family plans, covering multiple cats and dogs on one policy
- 24/7 access to Telehealth Concierge Services - because accidents and illnesses don't always wait for your vet to be open
- Discounts up to 30% and additional offers on pet care, where available
- Optional Preventive Care coverage
- Coverage of previously covered pre-existing conditions when switching providers
- MetLife Pet mobile app to submit and track claims, manage your pet's health and wellness and find nearby pet services

How does MetLife Pet Insurance Work?

- Select and enroll in the best coverage for you and your pet
- Download the mobile app
- Take your pet to the vet
- Pay the bill within 90 days and send it with your claim documents to MetLife via the mobile app, online portal, email, fax or mail
- Receive reimbursement by check or direct deposit if the claim expense is covered under the policy

How do I get a quote?

- Go to www.metlife.com/getpetquote
- Call for a quote or with questions: **1-800-438-6388**
- Or scan the QR Code to start the quote process!





EMPLOYEE ASSISTANCE PROGRAM

Administered by MetLife



Pender County offers employees an Employee Assistance Program through MetLife. This confidential counseling program is here to help you and your family navigate through personal situations.

Expert advice for work, life and your wellbeing:

Speak with a licensed counselor about anything going on in your life, including:

- **Family:** Going through a divorce, caring for an elderly family member, returning to work after having a baby
- **Work:** Job relocation, building relationships with co-workers and managers, navigating through reorganization
- **Money:** Budgeting, financial guidance, retirement planning, buying or selling a home, tax issues
- **Legal Services:** Issues relating to civil, personal and family law, financial matters, real estate and estate planning
- **Identity Theft Recovery:** ID theft prevention tips and help from a financial counselor if you are victimized
- **Health:** Coping with anxiety or depression, getting the proper amount of sleep, how to kick a bad habit like smoking
- **Everyday Life:** Moving and adjusting to a new community, grieving over the loss of a loved one, military family matters, training a new pet

Convenient and confidential help at no cost to you:

- Up to 5 virtual (video or telephonic) counseling sessions, per issue, with a licensed clinician
- Up to 5 face-to-face counseling sessions, per issue, with a licensed clinician

Help is always at your fingertips:

- Our mobile app makes it easy for you to access and personalize educational content important to you.
 - Search "LifeWorks" on iTunes App
 - Store or Google Play. Log in with the user name: **metliffeap** and password: **eap**
- Call at 1-888-319-7919 to speak with a counselor 24/7/365
- Visit the website at www.metliffeap.lifeworks.com
Log in with the user name: **metliffeap** and password: **eap**

Many of your ancillary benefits are provided by MetLife. Here is a video to help you learn more about your benefits through MetLife's Self-Service portal, My Benefits. You can see **claims**, find **in network providers**, and **print your own ID card**. But, first you must register in [My Benefits MetLife](#).

Register Today



- Get additional information on your MetLife benefits and link to detailed coverage information, ID cards, online claims tracking and eAlerts. ¹
- Access additional resources including planning tools, forms and documents.

Available 24/7

When you need some support, we're here to help.



Phone

1-888-319-7819



Web

metliffeap.lifeworks.com

user name: **metliffeap**
and password: **eap**



Mobile App

user name: **metliffeap**
and password: **eap**



Navigating life together



PENDER COUNTY EMPLOYEE WELLNESS

Your well-being is paramount to both your personal success and satisfaction. That's why we're thrilled to launch our comprehensive Employee Wellness Program designed to support you in achieving your health and wellness goals. We strive to foster a culture of well-being that encompasses physical, mental, emotional, as well as financial health. We are committed to empowering you to prioritize self-care, manage stress, and cultivate healthy habits both in and out of the workplace. This year we will be offering fitness challenges, nutrition workshops, and support for your mental health. Join us on this journey towards a healthier, happier, and more fulfilled life.

All Full-Time and Part-Time Permanent Employees (30 hours or more a week) are eligible to participate in all of our Wellness Options and Incentives.

Pender County Health Department

As an eligible employee, you have access to the Pender County Health Department and Dental Clinic, without using your PTO. Contact the health department to schedule your appointment. For more information on services see Page 26.

Annual Health Risk Assessment (HRA)

Each Full-Time employee who participates in the HRA will earn eight (8) hours of Vacation Leave
Part-Time Permanent employees working 30 hours per week will earn a prorated amount of 6 hours for completing the HRA

The Health Risks Assessment (HRA) identifies risks associated with individual health factors and help you mitigate these risks through interventions such as referrals to specialist, ergonomic improvements, health education, resources, and wellness incentives.

This assessment is only available once a year and typically includes:

- Lab Work (Blood draw)
- Blood Pressure
- Weight and Height
- Health Survey
- Referrals to Specialist
- Wellness Coaching

The Employee HRA's are available on a walk in basis any Monday - Oct 1st through Dec 31st from 8:00 - 11:00am and 1:00 - 3:00pm.

All employee medical information is confidential and regulated by HIPPA and the HRA will be submitted to insurance as preventative care which is covered 100% by our insurance provider.





PENDER COUNTY EMPLOYEE WELLNESS INCENTIVES

Welcome to the **Pender County Wellness Quest!** Embark on this exciting adventure by completing a variety of wellness activities designed to enhance your well-being. Whether it's staying active, completing wellness exams, or participating in County wide wellness challenges and lunch and learn events, each step you take will bring you closer to your goal of overall wellness.

Throughout this quest, every milestone you achieve earns you points and rewards. Unlock prizes that celebrate your progress and encourage you to keep going. Together, we'll explore new ways to prioritize self-care and cultivate habits that support overall employee wellness.

Make your way through each quest and unlock prizes by completing missions to earn points.

LEVEL ONE - Earn 20 points and receive a Pender County Water Bottle

LEVEL TWO - Earn 40 points and receive a Pender County Wellness Quest T-shirt

**GRAND PRIZE - Earn 60 points and receive a one-time Cash Incentive of \$100.00
(Awards based on Fiscal Year running 7/1/24 - 6/30/25)**

<p>Mission 1 [20 points] Complete your Annual Employee Health Risk Assessment</p>	<p>Mission 2 [20 points] Obtain a yearly Physical - This can be done at our health department or at your primary care physician.</p>
<p>Mission 3 [5 points each] Complete one of the following recommended screenings Vision Exam, Dental Exam/cleaning, Mammogram, prostate exam, skin cancer screening, or colonoscopy.</p>	<p>Mission 4 [2.5 points each] Participate in Lunch and Learn classes or Wellness Challenges provided by the County.</p>
<p>Mission 5 [10 points] Physical Activity - Proof of Gym membership for 3 months, or 12 weeks of exercise logs.</p>	<p>Mission 6 [5 points each] Receive recommended vaccine(s) Flu, Covid, Tetanus, shingles, or alternate vaccines.</p>

Discounted Gym Membership Options

Fitness Fusion- Burgaw, NC - \$25/month

Fitness Fusion offers a state-of-the-art fitness center equipment and has a full staff of certified instructions to lead class programs and assist clients. The gym is conveniently located within walking distance from the Administration building. (Includes 1 year contract)

Fit 4 Life- Richlands-13 - (\$24.99/month)

Locations- Including Wilmington, Richlands, and Jacksonville.

Join Fit 4 Life and enjoy the many commodities at any of the 13 locations. Fit 4 Life offers 24-hour access, personal training, group classes, and free childcare/kid zones at select locations and hours.





PENDER COUNTY HEALTH DEPARTMENT

PENDER COUNTY HEALTH DEPARTMENT SERVICES

If you aren't feeling well or just need an annual physical come visit our Adult Health Clinic. Call us for an appointment.

Our Immunization Clinics in Burgaw and Hampstead offer a variety of adult immunizations including Tdap, Tetanus, Shingles, Influenza, COVID and more! We have many services through our dental clinic, and we accept the county's dental insurance, so come on over!

Adult Services

- Physical exams
- Sick and well care
- Immunizations
- Dental services (adults and children)
 - * Comprehensive dental exam
 - * Teeth cleaning
 - * Dental sealants
 - * Most tooth extractions
 - * Dentures / Crowns / Partials and bridges

Got kids? We also do well checks/physicals and sick visits for children. Forgot to get that shot before school starts? We can help, check out our immunization clinic. And if that's not enough, we also offer a variety of dental services for the kiddos too!

Children's Health

- Immunizations
- Sick care
- Well child checks

Are you pregnant or need your annual check-up? Come see our Women's Health Nurse Practitioner for our women's health clinic. We offer family planning services and top quality prenatal care!

Women's Health Services

- Family planning
- Pregnancy testing
- Prenatal care
- Colposcopy clinic

Health Department Address:
803 S. Walker Street
Burgaw, NC 28425

Hours: 7am - 5:30pm
Main (910) 259-1230
Fax (910) 259-2138
Dental Center (910) 259-1503
WIC (910) 259-1290

Hampstead Annex Address:
15060 US Highway 17
Hampstead, NC 28443

Hours: 8am - 4pm
Phone (910) 259-1486

Please call our office to make an appointment to see a provider.

Walk-ins accepted for immunizations, labs, and blood pressure checks.





RETIREMENT BENEFITS

RETIREMENT

All full-time employees are automatically enrolled into the NC Local Government Employees Retirement System. Employees contribute 6% of gross wages to their retirement account. The County contributes based on guidelines set by the Retirement System.

Members can log in anytime through the NC State Retirement System – Orbit. ORBIT is a secure site that allows you to view your personal account information, download retirement forms, and access retirement resources 24 hours a day, seven days a week. To set up or log in to your personal ORBIT account, go to the ORBIT website and follow the log in instructions, or register for an ORBIT account. More information can be found in the Retirement System handbook.

LGERS

The Local Governmental Employees' Retirement System (LGERS) is a defined benefit plan qualified under Section 401(a) of the Internal Revenue Code. Defined benefit plans use a formula to calculate monthly retirement benefits once eligibility requirements have been met.

LGERS LEO

You become a member of LGERS as a local law enforcement officer on your hire date if you are a permanent, full-time paid employee of an employer, who (i) possesses the power of arrest, (ii) has taken the law enforcement oath administered under the authority of the state as prescribed by G. S. 11-11 and (iii) is certified as a law enforcement officer under the provisions of Chapter 17C of the General Statutes or certified as a deputy sheriff under the provisions of Chapter 17E of the General Statutes.

401K

Pender County is committed to helping its employee's save for retirement. In doing so, we have partnered with Empower/ Prudential to offer 401k options, featuring both a 401k (pre-tax and Roth) and 457 plan. Law Enforcement Officers receive 5% of gross income contribution from the County into the 401(K) plan. Regular full-time employees receive 2.5% of gross income contribution from the County into the 401(K) plan. Employees can make changes to their contributions at anytime via the Empower Website.



Empower Service Center

1-866-627-5267 Option 2





CONTACT INFORMATION

If you have specific questions about a benefit plan, please contact the administrator listed below, or your Human Resources department.

BENEFIT	ADMINISTRATOR	PHONE	WEBSITE/EMAIL
Medical	North Carolina State Health Plan (Aetna)	Medical -888-234-2416 Rx-888-321-3124	www.shpnc.com
Dental	MetLife	800-275 - 4638	www.metlife.com/dental
Vision	CEC	888 - 254 - 4290	cecvision.com
Life and AD&D	Met Life	800 - 275 - 4638	www.metlife.com/mybenefits
Universal Life	Trustmark	800 - 918 - 8877	www.trustmarksolutions.com
Short Term Disability	Met Life	800 - 275 - 4638	www.metlife.com/mybenefits
Long Term Disability	MetLife	800 - 275 - 4638	www.metlife.com/mybenefits
Accident, Critical Illness and Hospital Insurance	Met Life	800 - 275 - 4638	www.metlife.com/mybenefits
Flexible Spending Account/ COBRA	Flores	800 - 532 - 3327	www.flores247.com
Pet Insurance	MetLife	800 - 438 - 6388	www.metlife.com/getpetquote
Employee Assistance Program	MetLife	888 - 319 - 7819	metlifeep.lifeworks.com
Enrollment Call Center Medical	Medical	855 - 859 - 0966	www.shpnc.org
Enrollment Appointment Line - Ancillary	Dental, Vision, Life, Disability, Work-Site	877 - 277 - 7476	https://flimp.live/PenderCounty
Human Resources	Front Desk	910 - 259 - 1513	HRINFO@pendercountync.gov



MetLife Benefits

Once you're enrolled you may take advantage of online self-service capabilities with MyBenefits. To register, just go to www.metlife.com/mybenefits and follow the easy registration instructions.

You can print your ID cards here!



This benefit summary prepared by



Insurance | Risk Management | Consulting