

2023 CITY OF SILOAM SPRINGS BENEFIT CHANGES

Open Enrollment Dates: November 7th - November 23rd.



WHAT'S NEW IN 2023

- New Embedded Family Deductible on the Medical Plan
- Dental Rate Increase
- Vision Network Change

EMBEDDED FAMILY DEDUCTIBLE

- The family deductible for the City of Siloam Springs is \$4,000 and the family outof-pocket is \$8,000. That is not changing. There is a <u>new family deductible</u>
 <u>definition</u> that will allow the plan to start paying after one family member meets
 the individual deductible of \$2,000.
- With the new family **Embedded Deductible**, no family member will pay more than the individual deductible in the amount of \$2,000. So when a family member meets the individual deductible of \$2,000, coinsurance will apply. That means that the member will pay 20% and the plan will pay 80% until the individual out of pocket in the amount of \$4,000 is met.
- After one person meets the individual deductible (\$2,000), the remaining \$2,000
 of the family deductible can be met by one or more family members.
- The way the family out-of-pocket currently works is not changing. It is already an embedded out-of-pocket meaning no family member will pay more than the individual out of pocket in the amount of \$4,000 (\$2,000 deductible + \$2,000 coinsurance).
- This only affects employees who cover dependents. If you select the Employee Only tier, this does not apply to you.

MEDICAL FAMILY DEDUCTIBLE

Current Non-Embedded Family Deductible

Knee Surgery Total Cost: \$5,000

Family Deductible: \$4,000

Coinsurance: NA because Out of Pocket was met.

Your out of pocket cost would be \$4,000 because the out of pocket is embedded. That means you are not responsible for paying more than the individual out of pocket amount (\$4,000).

NEW Embedded Family Deductible

Knee Surgery Total Cost: \$5,000

Individual Deductible: \$2,000

Coinsurance: 20% of \$3,000

Your out of pocket cost would be \$2,600.

If you have another surgery or illness, you would pay 20% until you pay the remaining \$1,400 of your out of pocket cost.

DENTAL RATES CHANGES

2022 Dental Rates

 Employee Only - \$13.50 per pay period

2023 Dental Rates

 Employee Only - \$14.17 per pay period

Difference of \$.67 per pay period

- Employee + 1 \$28.42 per pay period
- Employee + 1 \$29.83 per pay period

Difference of \$1.41 per pay period

- Employee + Family \$52.36 per pay period
- Employee + Family \$54.95 per pay period

Difference of \$2.59 per pay period

VISION NETWORK

- Your Vision Plan will still be offered by Delta Vision, however, there is a new network.
- Beginning January 1, 2023, the vision network will switch to the <u>EyeMed</u> <u>Insight Network</u>. There will be no disruption with the providers in Siloam Springs.
- This network includes 79 retail provider locations including:
 - Wal-Mart
 - Sam's Club
- You can also shop online while staying in-network at:
 - Lenscrafters.com
 - Targetoptical.com
 - Ray-ban.com
 - Contactsdirect.com
 - Glasses.com



Coverage Examples

| Benefits |
|---------------|
| \$200/\$250 |
| \$150/\$100 |
| \$200 |
| \$500 |
| Up to \$4,000 |
| Up to \$3,000 |
| \$1,250 |
| \$300/Day |
| \$400/Day |
| |



\$25-\$75



Semimonthly Rates

| Employee | \$10.27 |
|-----------------------------------|---------|
| Employee + Spouse | \$16.90 |
| Employee + Child(Childre n) | \$22.20 |
| Family | \$28.83 |

Step



Hospital Indemnity

It provides financial assistance to enhance your current coverage. It may help avoid dipping into savings or

having to borrow to address out-of-pocket-expenses major medical insurance was never intended to cover.

Like transportation and meals for family members, help with child care, or time away from

work, for instance.

Coverage Examples

| Benefit Examples | Benefits |
|--|----------|
| Hospital Admission (per confinement) | \$1,000 |
| Hospital Confinement (per day) | \$150 |
| Hospital Intensive Care (per day) | \$150 |
| Hospital Care Step-Down Unit (per day) | \$75 |

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Screening **Benefit** \$50

Semimonthly Rates

| Employee | \$11.22 |
|-----------------------------------|---------|
| Employee + Spouse | \$21.41 |
| Employee + Child(Childre n) | \$17.27 |
| Family | \$27.46 |

COVERED CRITICAL ILLNESSES



Benefit Examples

| Illnesses Covered | Percentage of Maximum Benefit |
|---------------------------|-------------------------------------|
| Cancer | 100% |
| Heart Attack | 100% |
| Stroke | 100% |
| Kidney Failure | 100% |
| Sudden Cardiac Arrest | 100% |
| Major Organ Transplant | 25%* |

Semimonthly Rates



| EE Non- Tobacc o | \$5,000 | \$10,000 | \$15,000 | \$20,000 |
|---------------------------|---------|----------|----------|----------|
| 18-29 | \$1.96 | \$3.17 | \$4.37 | \$5.58 |
| 30-39 | \$2.78 | \$4.80 | \$6.82 | \$8.84 |
| 40-49 | \$4.78 | \$8.80 | \$12.81 | \$16.83 |
| 50-59 | \$8.65 | \$16.53 | \$24.42 | \$32.30 |
| 60+ | \$15.96 | \$31.16 | \$46.36 | \$61.57 |

NCE, LLC

Short Term Disability

Our Aflac group disability plan can help protect your income by offering disability benefits to help you make ends meet when you are out of work. Our plan was created with you in mind and includes:

Off-job only coverage.

Benefits that help you maintain your standard of living.



Maximum Income Replacement Percentage – The maximum income replacement is 60 percent of salary.

Benefit Options:
Benefit Period - 3 Month
Elimination Period - 7/7 & 0/7

Thank you Aflac – Cheryl Aranda (479)957-4089

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