

2024 Employee Benefits Guide

Plan Year: Jan. 1 – Dec. 31, 2024



Eligibility

All employees working at least 30 hours per week are eligible for the City of Minnetonka benefits on the first of the month following the date of hire.

Eligible Dependents

You may elect certain coverage options for your eligible dependents:

- Your legal spouse
- Your dependent child or stepchild up to age 26
- Any child placed with you for adoption or for whom you have legal guardianship
- Any unmarried, disabled child of any age who resides with you and who was medically certified as disabled prior to their 26th birthday and who is primarily dependent upon you for support
- Any child under 26 years of age including natural children, stepchildren, legally adopted children and children placed with you for adoption, and children for whom healthcare coverage is required through a Qualified Medical Child Support Order (QMCSO) or other court or administrative order even if the child does not reside with you

Qualified Life Events

Generally, you may change your benefit elections only during the annual open enrollment period. However, you may change your benefit elections during the year if you experience a qualified life event, provided you request the change in Benefits Connect within 30 days of the event. Examples of qualifying events include:

- Legal marital status marriage, death of spouse, divorce, legal separation, or annulment
- **Number of dependents** birth, adoption, placement for adoption, divorce or death of a dependent, or assuming primary support of a child of an unmarried dependent child
- **Employment status** eligible spouse or dependent gains or loses access to employer-sponsored coverage
- **Dependent status** change due to age or other circumstance which causes your dependent to satisfy or cease to satisfy eligibility requirements under the plan
- **Medicare or Medicaid eligible status** you or your spouse or dependent children become Medicare or Medicaid eligible.
- **Open enrollment** a spouse or child's open enrollment period at work

Your Medical Plan Choices

The City of Minnetonka offers three medical plans provided by Medica:

MEDICA

- 3,000-0% HRA with VEBA
- \$3,200-0% HSA
- \$3,200-0% HSA with Preventive RX

All plan options meet Affordable Care Act minimum value requirements and CMS creditable coverage requirements.

Network Overview

Medica Choice Passport

Medica Choice[®] Passport is an easy-to-use plan with a large, national network. You can visit any doctor, clinic or facility in the network without a referral.

What are the features?

- One of the largest networks in the nation
- Nationwide network coverage when you travel
- No referrals needed when you see network providers

What is unique?

In addition to your plan coverage, this network includes:

- The largest number of providers to choose from. With hundreds of thousands of providers throughout the nation, there's a good chance your current doctors are included in the Medica Choice Passport network.
- Providers from many different care systems and hospital affiliations. If it's important to have access to a wide range of doctors and facilities, Medica Choice Passport is an excellent choice.
- Nationwide coverage. No matter where you live in the U.S., you have access to network providers. And you're covered when you travel, too.
- Direct access to specialists. See any provider in the network without a referral.

How does it work?

Choose from any doctor, clinic or facility in the large Medica Choice Passport network. While you don't need a referral to see a specialist in the network, it's a good idea to work closely with your primary care doctor to coordinate your health care needs.

Medica Elect

With Medica Elect, you enroll in a primary care clinic. The clinic coordinates your care and will help you find a specialist when you need one. Whenever you need care, you need to start at your primary care clinic.

What are the features?

- A medium-sized regional network
- Nationwide coverage when you travel
- A medical home you choose a primary care clinic and receive care from providers in your care system
- Care is coordinated by your primary care clinic

What's unique?

- You enroll in a primary care clinic. This is the main place you'll go when you need care. Each family member can choose a different primary care clinic. Whenever you need care, you'll always start at your primary care clinic.
- Your primary care clinic is affiliated with a care system. If you need to see a specialist or go to the hospital, make sure they're in your care system. For your highest level of benefits, get all of your care from providers in your care system.
- Each family member can choose a different care system, as long as it's in the Medica Elect network. The care systems you can choose from are listed below.
- If you can't get the care you need within your care system, you can ask for referral to see a provider in another Medica Elect care system.

How does it work?

With Medica Elect, you enroll in a primary care clinic. You can change your primary care clinic as often as once a month. Your clinic is affiliated with a care system, which is a group of primary care clinics, specialists and hospitals that work together to give you the care you need.

When you pick your primary care clinic, you're also picking a care system. Each family member can choose a different care system within the Medica Elect network. Or you can all be in the same care system, but choose different primary care clinics within that system.

Medica Elect care systems:

- Allina Medical Clinics
- Children's Health Network
- Hennepin Healthcare
- Integrity Health Network
- Lakeview Medical Care System
- Minnesota Healthcare Network
- Park Nicollet Health Services
- Riverway/North Suburban Clinics
- St. Luke's Care System

Park Nicollet and HealthPartners Medical Group First with Medica ACO

Accountable care organization network

Park Nicollet and HealthPartners Medical Group First with MedicaSM connects you with the providers you know and trust from your neighborhood clinics, specialty centers and hospitals for well exams, health screenings, immunizations or an immediate medical need.

What are the features?

- Direct access to Park Nicollet and HealthPartners specialty centers, including Bariatric Surgery & Weight Center, Child & Family Behavioral Health (formerly Alexander Center), TRIA Orthopedic Center, and many more.
- Nationwide coverage when you travel
- No referrals when visiting a Park Nicollet and HealthPartners Medical Group First provider

What's unique?

In addition to your plan coverage, this accountable care organization (ACO) includes:

- Same-day primary care appointments, plus evening and weekend hours.
- Urgent care for issues that aren't life threatening but need attention right away. Open late seven days a week; check wait times for your specific urgent care online at HealthPartners.com.
- Nurse advisors you can reach 24/7/365.
- 24/7 online care for diagnosis and treatment for 60 common health conditions at Virtuwell.com.
- SmartCareSM for time-saving care when and where you need it at the clinic, on your phone or online.

How does it work?

Park Nicollet and HealthPartners Medical Group First with Medica is an accountable care organization (ACO). In an ACO, groups of doctors, nurses and other health care providers work together with your health plan to provide coordinated care. You don't need a referral when you see a provider in the Park Nicollet and HealthPartners Medical Group First network.

Coverage when you travel

If you're away from home and get sick or hurt, we've got you covered. When you travel outside the Medica service area (Minnesota, North Dakota, South Dakota and western Wisconsin) you can get network coverage by visiting a provider in the Travel Program Network. This nationwide network is one of the largest in the country. If you have children attending college outside the service area, they can use this network.

Information sharing

One of the unique features of an ACO plan is how Medica works with your provider to coordinate your health care. By sharing member information with each other, Medica and your ACO can help you get the care you need and deliver programs and services to help you get and stay healthy.

Vantage Plus with Medica

Accountable care organization network

VantagePlus with MedicaSM connects you with providers you know and trust. The network includes M Health Fairview, North Memorial Health, and many popular independent clinics. You'll also have in-network access to academic medicine and providers at the University of Minnesota. Plus, high-level trauma care from providers at North Memorial Health.

This unique partnership is called an accountable care organization. Your provider team will help you get the care you need when you need it – and make it as easy as possible. And if you're new to the plan, we'll give you a call to help you get off to a good start.

What are the features?

- Direct access to more than 4,800 providers, 650 clinics and 11 hospitals
- Nationwide coverage when you travel
- See any primary or specialty care provider in the VantagePlus network without a referral

What's unique?

- In addition to your plan coverage, this accountable care organization (ACO) includes:
- A personal welcome call for new members to help them get off to a good start.
- One phone number for questions about your care, coverage, and more 24/7/365: 1-866-882-8493.
- Multiple virtual care options available with M Health Fairview and North Memorial Health providers, including:
 - o 24/7/365 eVisits for many common health conditions.
 - Schedule a phone or video visit with your primary or specialty care provider.
 - Send an online message to your care team through MyChart, anytime.
 - Virtual care options are available for medical and mental health services.
- Nurse advisors you can reach 24/7/365.
- A specially trained pharmacist who'll make sure your medications are right for your conditions, lifestyle, and budget. This is called Medication Therapy Management.
- Urgent care for issues that aren't life threatening but need attention right away. Open weeknights and often weekends and/or holidays. No appointment needed.

How does it work?

VantagePlus with Medica is an accountable care organization (ACO). In an ACO, groups of doctors, hospitals, and other health care providers work together with your health plan to provide coordinated care. You can see any primary or specialty care provider in the VantagePlus network. Some specialty clinics require a primary care visit first for tests and to help guide your care.

Coverage when you travel

If you're away from home and get sick or hurt, we've got you covered. When you travel outside the Medica service area (Minnesota, North Dakota, South Dakota and western Wisconsin) you can get network coverage by visiting a provider in the Travel Program Network. This nationwide network is one of the largest in the country. If you have children attending college outside the service area, they can use this network, too.

Information sharing

One of the unique features of an ACO plan is how Medica works with your provider to coordinate your health care. By sharing member information with each other, Medica and your ACO can help you get the care you need and deliver programs and services to help you get and stay healthy.

Medica Services

24-Hour Health Support

Worried that your stomach bug could be something more serious? Wondering what to do about that cough that won't go away? The advisors and nurses at Medica CallLink[®] can help. They're available 24 hours a day, 365 days a year, to answer your questions and help you make intelligent decisions about your health.

Call (800) 962-9497 (TTY: 711).

Personalized Family and Women's Health Program

Ovia Health guides you through your pregnancy, parenting, and reproductive health journey, including trying to conceive and managing menopause. Get clinically-backed content and unlimited support from Ovia's team of health coaches, registered nurses, and certified nurse midwives within Ovia Health's three apps: Ovia (for reproductive health), Ovia Pregnancy, and Ovia Parenting.

Download the Ovia app that's right for you for free from the App Store or Google Play. Enter your health plan information to access all the unique tools and features.

Behavioral Health Support

Access self-care techniques, coping tools, meditations, sleep tracking and more at no additional cost anytime, anywhere with Self Care by AbleTo. Check-in, track your progress and explore personalized content that you can move through at your own pace on your mobile device. Build skills you can use for life to feel better.

To get started, visit **AbleTo.com/Begin** and enter "Medica" when asked for your access code. After you register, download the AbleTo app.

Personalized Prevention Program

Help reduce your risk for chronic disease through Omada for Prevention, a digital lifestyle change program. Combining the latest technology with ongoing personal support, you can make the changes that matter most – whether around eating, activity, sleep or stress. It's an approach that can help you lose weight and reduce your risks for type 2 diabetes and heart disease. Visit **go.omadahealth.com/medica** for more information.

Medica® Optum® Emotional Wellbeing Solutions

Whether financial troubles, personal issues or family problems, we can help. Call (800) 626-7944 (TTY: 711) 24/7/365 to talk with a counselor. They'll help you find the necessary resources to get you back on track.

Medical Plan Benefits Summary of In-Network Benefits

The following chart is a summary of in-network benefits. See the **Summary of Benefits and Coverage (SBC)** for more details and out-of-network benefits in the benefits info portal. If there is a difference between this summary and the Summary Plan Description, the plan description will prevail. Contact Human Resources for the SPD.

<u>In-Network</u> Benefits	Medica \$3,000-0% HRA with VEBA Passport Elect Park I	Medica \$3,200-0% HSA Nicollet & HealthPartners AC	Medica \$3,200-0% HSA RX
Annual Deductible and Out- of-Pocket Maximum	Individual: \$3,000 Family: \$6,000	Individual: \$3,200 Family: \$6,400	Individual: \$3,200 Family: \$6,400
Preventive Care Routine Physicals, Well Child Care, Immunizations, Cancer Screenings, Routine Eye Exams		No charge	
Office Visits Primary Care, Specialists, Urgent Care, E-Visits, Lab & X- ray, Chiropractic	Deductible then 0%	Deductible then 0%	Deductible then 0%
In-patient / Out-patient Surgery	Deductible then 0%	Deductible then 0%	Deductible then 0%
Emergency Care	Deductible then 0%	Deductible then 0%	Deductible then 0%
Prescription Drugs	Generic & Formulary Brand: 20% coinsurance (\$10 min/\$25 max) Non-Formulary Brand: 30% coinsurance (\$10 min / \$40 max) Specialty: 20% coinsurance \$200 max	Generic, Formulary Brand, Non-Formulary Brand, Specialty: Deductible then 0%	Generic, Formulary Brand, Non-Formulary Brand, Specialty: Deductible then 0% Preventive RX Generic: \$12 copay Preventive RX Brand: \$25 copay

Monthly City Contributions

Tier	Cafeteria Contribution	HRA with VEBA Contribution	HealthRewards Contribution
Employee Only	\$1,220	\$125	\$100
Employee + Spouse	\$1,700	\$250	\$100
Employee + Child(ren)	\$1,855	\$250	\$100
Employee + Family	\$2,030	\$250	\$100
Opt-Out	\$230	N/A	\$50

*Amounts may vary depending upon the bargaining unit that represents your position

The city cafeteria contribution can be used to purchase your medical, dental, vision, short-term disability and life insurance plans. If you have a balance leftover, you keep it as additional wages. Any expenses over the cafeteria amount are deducted pretax on your paycheck. HealthRewards contributions are awarded based on prior year participation. All benefits are processed on two pay periods each month.

Breakdown
Premium
Medical
Monthly
20241

		Medic	Medica \$3,000-0% HRA with VEBA	% HRA witl	h VEBA	Z	Medica \$3,200-0% HSA	00-0% HS	4	W	edica \$3,20	Medica \$3,200-0% HSA RX	۲X
Tier	Available Networks (w/plan numbers)	Passport (#41463)	Passport Elect (#41463) (#41464)	PN/HP (#44752)	Passport Elect PN/HP Vantage+ Passport Elect PN/HP Vantage+ Passport Elect (#41463) (#41464) (#51365) (#41459) (#41460) (#44751) (#51366) (#41462)	Passport (#41459)	Elect (#41460)	PN/HP (#44751)	Vantage+ (#51366)	Passport (#41461)	Elect (#41462)	PN/HP (#44753)	Vantage+ (#51367)
	Total City Contribution	1,220.00	1,220.00	1,220.00	1,220.00 1,220.00	1,220.00	1,220.00	1,220.00	1,220.00	1,220.00	1,220.00	1,220.00	1,220.00
Employee	HRA with VEBA Contribution	125.00	125.00 125.00 125.00 125.00	125.00	125.00	0	0	0		0	0	0	0
Only	City Contribution to Premiums	1,095.00	1,095.00	1,095.00	1,095.00 1,095.00 1,095.00 1,095.00 1,220.00 1,220.00 1,220.00 1,220.00 1,220.00 1,220.00 1,220.00 1,220.00 1,220.00	1,220.00	1,220.00	1,220.00	1,220.00	1,220.00	1,220.00	1,220.00	1,220.00
	Monthly Medical Premium*	1,023.01	895.13	869.56		869.56 974.48		852.67 828.31	828.31	983.25	828.31 983.25 860.35	835.77	835.77

1,855.00 1,855.00	0	,605.00 1,605.00 1,605.00 1,855.00 1,855.00 1,855.00 1,855.00 1,855.00	2,047.47 1,791.54 1,740.35 1,740.35 1,950.35 1,706.56 1,657.80 1,657.80 1,967.91 1,721.92 1,672.72 1,672.72	
1,855.00	0	1,855.00	1,721.92	
1,855.00	0	1,855.00	1,967.91	
1,855.00	0	1,855.00	1,657.80	
1,855.00	0	1,855.00	1,657.80	
1,855.00	0	1,855.00	1,706.56	
1,855.00	0	1,855.00	1,950.35	
1,855.00	250.00	1,605.00	1,740.35	
1,855.00	250.00	1,605.00	1,740.35	
1,855.00	250.00 250.00 250.00	1,605.00	1,791.54	
1,855.00	250.00	1,605.00	2,047.47	
Total City Contribution	HRA with VEBA Contribution	City Contribution to Premiums	Monthly Medical Premium*	
Employee + Child(ren)				

Total City Contribution 2,030.00 2,030.	HRA with VEBA Contribution	Family City Contribution to Premiums	Monthly Medical Premium*
i on 2,030.00	250.00		2,661.13
2,030.00	250.00	1,780.00	2,328.49
2,030.00	250.00	1,780.00	2,261.96
2,030.00	250.00	1,780.00	2,261.96
2,030.00	0	2,030.00	2,534.91
2,030.00	0	2,030.00	2,218.04
2,030.00	0	2,030.00	2,154.67
2,030.00	0	1,780.00 1,780.00 1,780.00 1,780.00 2,030.00 2,030.00 2,030.00 2,030.00 2,030.00 2,030.00 2,030.00 2,030.00 2,030.00	2,661.13 2,328.49 2,261.96 2,534.91 2,114.04 2,154.67 2,154.67 2,557.72 2,238.01 2,174.06 2,174.06
2,030.00	0	2,030.00	2,557.72
2,030.00	00.0	2,030.00	2,238.01
2,030.00	0	2,030.00	2,174.06
2,030.00	0	2,030.00	2,174.06

Medical Opt-Out: \$230

*Premium amounts are displayed before city contribution

Health Savings Account (HSA)

Why should I choose a medical plan with a health savings account (HSA)?



An HSA is a benefit that allows you to choose how much of your paycheck you'd like to set aside, before taxes are taken out, for health care expenses now and into retirement. This plan offers tax savings that a 401(k) and IRA don't, making it a powerful option for diversifying your retirement portfolio.



lt's yours

Think of your HSA as a personal savings account. Any unspent money in your HSA remains yours, allowing you to grow your balance over time. When you reach age 65, you can withdraw money (without penalty) and use it for anything, including non-healthcare expenses.



Flexibility

Save for a rainy day. Invest for your future retirement. Or spend your funds on qualified expenses, penalty free.



Easy to use

Swipe your benefits debit card at the point of purchase. There is no requirement to verify any of your purchases. We recommend keeping any receipts in case of an IRS audit.



Smart savings

The HSA's unique, triple-tax savings means the money you contribute, earnings from investments and withdrawals for eligible expenses are all tax-free, making it a savvy savings and retirement tool.



Investment options

You can invest your HSA funds in an interest-bearing account or our standard mutual fund lineup. Savvy investors may opt for a Health Savings Brokerage Account powered by Charles Schwab, giving you access to more than 8,500 mutual funds, stocks and bonds.

What does it cover?

There are thousands of eligible items. The list includes but is not limited to:

- Copays, coinsurance, insurance premiums
- · Doctor visits and surgeries
 - Over-the-counter medications (first aid, allergy, asthma, cold/flu, heartburn, etc.)
- Prescription drugs
- Birthing and lamaze classes
- Dental and orthodontia
 Vision expenses, such as frames, contacts, prescription sunglasses, etc.

View our searchable list of eligible expenses at www.wexinc.com/insights/ benefits-toolkit/eligibleexpenses/

Can I enroll?

You must be enrolled in our \$3,200-0% HSA or \$3,200-0% HSA RX high-deductible health plans (HDHP). You're not eligible for an HSA if:

- You're claimed as a dependent on someone else's taxes.
- You're covered by another plan that is not an eligible High Deductible Health Plan (HDHP), such as a spouse's plan, Medicare or TriCare.
- You or your spouse are contributing to a medical FSA anytime in 2024 (even if your spouse is not on your medical plan).

2024 Annual IRS Maximum H	ISA Contribution Limits	(your contributions + Medica Invest contributions)
Employee Only	\$4,150	Employees age 55 and over may
Employee + One	\$8,300	contribute an additional \$1,000 as catch-
Family	\$8,300	up contribution each year



MORE INFO: wexbenefitsyou.com/oe-mhc or 866-451-3399

- Download the free WEX mobile app
- Find a list of benefits-eligible expenses

Health Reimbursement Arrangement (HRA) with VEBA



Why should I choose a medical plan with a HRA with VEBA?

The Voluntary Employees' Beneficiary Association (VEBA) HRA plan is a type of a tax-free plan funded by employer contributions that you and your dependents may use to pay for eligible expenses. You must be covered by our \$3,000-0% HRA with VEBA plan to be eligible.

What you need to know about VEBAs

- As soon as your employer funds the account the money becomes available to pay for eligible expenses.
- You don't pay taxes on account contributions, interest earned, or on eligible reimbursements.
- Your money can earn interest tax free from day one.
- You can open a basic investment account with access to 30+ mutual funds.
- Use VEBA funds to pay for eligible medical expenses now or later, even in retirement.
- Once you are no longer working for your employer, use funds to pay for health insurance premiums, such as private health insurance, COBRA, Medicare, and Long Term Care premiums.
- Beneficiary protection ensures allocation of your HRA with VEBA dollars to your spouse, children, or designated beneficiary after you're gone.

HSA and HRA with VEBA Comparison Chart

Use your VEBA HRA for medical costs not covered by your health insurance, including:

- Over-the-counter medications, prescription drugs, and some feminine hygiene products
- Copayments, coinsurance, and 213(d)-listed items
- Dental and vision care costs
- HRA reimburses eligible expenses for you and for eligible dependents

You can't use your VEBA HRA for:

- Current health insurance premiums
- Costs that aren't considered qualified medical expenses as defined by the IRS

How do I access my HRA with VEBA:

- WEX will send your MHC/WEX Visa Debit Card by mail
- Download the WEX mobile app or use the participant portal to view and manage your account

NOTE: New enrollee must accept terms of HRA online.

	HSA	HRA with VEBA
Contribute your own money	Yes - per IRS limits	No - city contributions only but can be paired with a health care FSA
Invest the dollars in mutual funds	Yes	Yes
Use it to pay for eligible healthcare expenses any time	Yes - search expenses at wexinc.com/insights/benefits-toolkit/eligible- expenses	Yes - search expenses at wexinc.com/insights/benefits-toolkit/eligible- expenses
Pay for dependent qualified medical expenses	Must be a tax dependent up to age 26 (does not need to be on your medical plan)	Can use for any medical dependent under age 26 (does not need to be on your medical plan)
Tax savings	Triple tax-advantaged for contributions, earnings and withdrawals for eligible expenses	Triple tax-advantaged for contributions, earnings and withdrawals for eligible expenses



MORE INFO: wexbenefitsyou.com/oe-mhc or 866-451-3399

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Flexible Spending Accounts

Why should I choose a Flexible Spending Account (FSA)?

Flexible Spending Accounts (FSAs) are designed to save you money on your taxes. They work in a similar way to a savings account. Each pay period, funds are deducted from your pay on a pretax basis and are deposited to your Health Care and/or Dependent Care FSA. You then use your funds to pay for eligible health care or dependent care expenses.

Important information about FSAs

Your FSA account is administered through WEX. 2024 elections will be in effect through Dec. 31. Claims incurred by Dec. 31, 2024 must be submitted to WEX for reimbursement within 90 days after the end of the plan year to be eligible for reimbursement.

Use-it-or-Lose-it Rule: You may carry over up to \$610* of unused funds each year. Any remaining unused funds over \$610 will be forfeited. This is known as the "use it or lose it" rule and it is governed by IRS regulations. Note that FSA elections do not automatically continue from year to year; you must actively enroll each year.

The Advantages of an FSA

With an FSA, the money you contribute is never taxed - not when you put it in the account, not when you are reimbursed with the funds from the account, and not when you file your income tax return at the end of the year.

Account Type	Eligible Expenses	Annual Contribution Limits	Benefit
Health Care FSA	Most medical, dental and vision care expenses that are not covered by your health plan (such as copayments, coinsurance, deductibles, eyeglasses and doctor-prescribed over the counter medications)	Maximum contribution is \$3,050 per year*	Saves on eligible expenses not covered by insurance, reduces your taxable income
Limited Purpose Dental & Vision expenses for those enrolled in an HSA plan		Maximum contribution is \$3,050 per year*	Save on eligible expenses; reduces taxable income
Dependent Care FSA	Dependent care expenses (such as day care, after school programs or elder care programs) so you and your spouse can work or attend school full-time	Maximum contribution is \$5,000 per year (\$2,500 if married and filing separate tax returns)	Reduces your taxable income

Save on Your Taxes

Here is an example of how much you can save when you use the FSAs to pay for your predictable health care and dependent care expenses.	With FSA	Without FSA
Your taxable income	\$50,000	\$50,000
Pretax contributions to Health Care and Dependent Care FSA	\$2,000	\$0
Federal and Social Security taxes*	\$15,696	\$16,350
After-tax dollars spent on eligible expenses	\$0	\$2,000
Spendable income after expenses	\$32,304	\$31,650
Tax savings with the Medical and Dependent Care FSA	\$654	



*This is an example only, and may not reflect your actual experience. It assumes a 25% federal income tax marginal rate and a 7.7% FICA marginal rate. State and local taxes vary, and are not included in this example. However, you will also save on any state and local taxes as well.

MORE INFO: wexbenefitsyou.com/oe-mhc or 866-451-3399

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- Find a list of benefits-eligible expenses



Wellness with Medica

My Health Rewards - Rewards for a Healthy Lifestyle

Medica has partnered with Virgin Pulse Health to offer you a more personalized health and wellness experience based on your own health status and interests.

The My Health Rewards by Medica suite of online programs helps you work on the areas that matter to you: eating healthy foods, getting more sleep, moving more, working on relationships, saving money and more.

To get started with My Health Rewards, download the Virgin Pulse app, free in the App Store and on Google Play. Then, connect your fitness device such as Apple Health, fitbit, Garmin, IHealth and myfitnesspal or use the city-provided Max Buzz device.

Two ways to earn rewards depending on your medical plan: Gift cards or HSA contributions

Earn up to \$225 per year in the My Health Rewards Traditional Program if you are enrolled in our Medica \$3,000-0% HRA with VEBA Medical Plan

- Track your steps, sleep and healthy activities to earn up to \$225 per year in gift cards.
- Spouses enrolled in our medical plan may participate and earn their own rewards.

Visit medica.com/wellness/my-health-rewards-members to learn more.

Earn up to \$900 per year in the My Health Rewards Invest Program if you are enrolled in our Medica \$3,200-0% HSA or \$3,200-0% HSA RX Medical Plans

• Track your steps, sleep and healthy activities to earn up to \$75 per month deposited into your HSA for a potential earnings of \$900 per year.

Visit medica.com/wellness/my-health-rewards-invest to learn more.





Life Time Digital provided by Medica



Work out anytime, anywhere on your device for FREE

Join Life Time fitness instructors over a digital platform for 500-plus weekly cardio, strength, yoga classes and more. Livestreaming and on-demand classes allow you to join the class that works for you at the time that works for you.

To enroll:

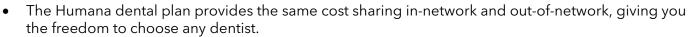
- 1. Log in to your member account at Medica.com/SignIn
- 2. Select "Programs + Tools" under the "Wellness" section in the navigation menu
- 3. Under "Life Time Digital," click "Sign up"

4. Once you've signed up for your Life Time Digital account, download the Life Time Digital app from the Apple Store or Google Play to begin your journey

MORE INFO: Call Member Services at the number on the back of your Medica ID card (TTY: 711) or find answers to commonly asked questions in your member account at **Medica.com/SignIn**.

Voluntary Dental Benefits

The Humana Dental Plan gives you the opportunity to save money on dental care using pre-tax dollars.



Humana

- When you go to an out-of-network dentist, Humana will pay the same as 90% of dentists in the area, so you pay less out-of-pocket than with other out-of-network plans.
- After the plan has paid the annual maximum, they will continue to pay 30% for all in-network and outof-network services.

Monthly Employee Premiums				
Employee Only	\$43.33			
Employee + Family	\$114.27			
	In Network	Out of Network		
Annual Maximum Benefit*	\$2,250	\$1,250		
Deductible Per Person	\$25	\$25		
Deductible Max Family	\$75	\$75		
Deductible Waived on Preventative?	Yes	Yes		
Percentile of Usual and Customary	N/A	90% U&C		
*After the annual maximum is met, Human network with no maximum. Co-Insurance breakdown	a pays 30% coinsurance on all covered se	ervices in-network and out-of-		
Preventative/Diagnostic	100%	100%		
Basic Restorative	80%	80%		
Basic Oral Surgery	80%	80%		
Complex Surgical Extractions	80%	80%		
Basic Endodontic Therapy	80%	80%		
Basic Periodontal Services	80%	80%		
Complex Surgical Periodontal	80%	80%		
Major Restorative	50%	50%		
Prosthetic Services / Repairs	50%	50%		
Implants	50%	50%		
Cleanings Frequency	3 times per year			
X-ray Frequency	Panoramic X-rays 1 per 36 months Bitewings 1 per 12 months			
White Fillings	White fillings for front and back teet	h		
Waiting Period	No waiting periods			

The material contained in the above table is for informational purposes only and is not an offer of coverage. Please note that the above table provides only a brief, general description of coverage. For a complete listing of your coverage, including exclusions and limitations relating to your coverage, please refer to your Certificate of Coverage.



MORE INFO: finder.humana.com/finder/dental

- Find a new dentist or look up whether your dentist is in the Humana network
- Under "Select a lookup method," choose PPO and then PPO/Traditional Preferred network.

Voluntary Vision Insurance

If you are enrolled in the city's medical plan, your annual vision exam is covered by Medica. The city offers a voluntary vision insurance plan to help you pay for contact lenses or glasses for you and your family.



Monthly Employee Premiums					
Employee Only	\$5.85				
Employee + One	\$10.22				
Employee + Family	\$15.18				
Vision Care Services	In-Network Member Benefits	Out-of-Network Reimbursement			
Materials: \$10 copay	(Materials copay applies to frame or spectacle lenses, if applicable)				
Frame Allowance*	Members receive a \$50 wholesale allowance Up to \$150 retail value	Up to \$45.00			
Standard Spectacle Lenses					
Single Visions Bifocal Trifocal Lenticular	Covered in full after materials copay	Up to \$25 Up to \$40 Up to \$50 Up to \$80			
Standard Progressives	Covered up to \$50, plus 20% off retail	Up to \$40			
Other Lens Options					
Lens options are discounted up to	20% off retail				
Contact Lenses (in lieu of frames and spectacle lenses)					
Elective	\$130 allowance	\$130.00			
Medically Necessary	Covered in full	\$250			
Refractive Laser Surgery	Provider discount up to 25% One-time/lifetime allowance of \$150	One-time/lifetime allowance of \$150			
Frequency					
Lenses or Contact Lenses	Once every 12 months	Once every 12 months			
Frame	Once every 24 months	Once every 24 months			



MORE INFO: fap.avesis.com/commercial/provider/search or 800-828-9341

• Access the Provider Directory tool

Voluntary Short-Term Disability

The city's short-term disability program provides a monthly benefit from the 15th day of disability through the 90th day, when long-term disability becomes effective. Short-term disability insurance provides income assistance and a way to



help you pay your bills and keep your life as normal as possible if you become sick or injured and cannot work.

- Protect your income for the first three months of a disability with Short Term Disability insurance.
- Benefits begin on the 15th day of an injury or 15th day of a sickness/maternity and can be payable up to 90 days.
- You may select your level of coverage in \$50 increments from weekly benefits of \$100 up to \$2,300, not to exceed 60% of weekly gross earnings.

Weekly Benefit	Age 0-49	Age 50+
Per \$100	\$3.04	\$2.92

Weekly Benefit	\$100	\$250	\$500	\$600	\$700	\$800	\$900	\$1,000	\$1,250	\$1,500
Age 0-49	\$3.04	\$7.60	\$15.20	\$18.24	\$21.28	\$24.32	\$27.36	\$30.40	\$38.00	\$45.60
Age 50+	\$2.92	\$7.30	\$14.60	\$17.52	\$20.44	\$23.36	\$26.28	\$29.20	\$36.50	\$43.80

Long-Term Disability

Long-term disability insurance offers you a way to replace part of your income if you should suffer a serious illness or injury and can't work. The City of Minnetonka provides a long-term disability plan at no cost to you.

- The benefit can begin after 90 days, and the benefit can continue for up to your normal Social Security Retirement Age.
- Covers 60% of your monthly income.



MORE INFO: Visit insite.minnetonkamn.gov

Life Insurance Plan and Rates



Basic Life

The City of Minnetonka provides a \$35,000 basic life insurance and AD&D plan at no cost to you, as well as the opportunity to purchase supplemental coverage for yourself and eligible family members.

Voluntary Life and AD&D Insurance

In addition to the Basic Life plan, employees can purchase the following Supplemental Life and AD&D insurance:

Employee: \$5,000 to \$500,000 with a new hire guarantee issue amount of \$150,000
Spouse: \$5,000 to \$250,000 with a new hire guarantee issue amount of \$75,000
Dependents: \$10,000 or \$15,000 for each eligible child from birth to 26 years

Amounts elected over the guarantee issue require completion of health questions and approval from Sun Life. If you waive insurance when first offered then elect it or increase your amount at open enrollment, you will be required to complete health questions and be subject to approval from Sun Life.

Features of the plan

The Voluntary Life plan includes Optional Accidental Death and Dismemberment (AD&D) Insurance which would pay an additional benefit, up to the amount of your Optional Life benefit, if you suffer a covered loss due to accident. The plan also includes many special features including Waiver of Premium and Accelerated Benefits.

How to enroll

If you elect to add coverage or increase your coverage, you will need to answer health history questions. Sun Life will review your answers and notify you when your new coverage is approved or denied.

Voluntary Employee, Spouse and Child Life Rates

Optional Life Rates					
A	Employee	Spouse	All eligible children		
Age	Monthly Cost per	[•] \$1,000 of coverage	Monthly Cost		
Under 25	\$0.075	\$0.075			
25-29	\$0.075	\$0.075			
30-34	\$0.108	\$0.108			
35 - 39	\$0.108	\$0.108			
40 - 44	\$0.119	\$0.119	\$.90 for \$10,000		
45 - 49	\$0.185	\$0.185	OR		
50 - 54	\$0.251	\$0.251	\$1.35 for \$15,000		
55 - 59	\$0.416	\$0.416			
60 - 64	\$0.691	\$0.691			
65 - 69	\$1.241	\$1.241			
70 - 74	\$1.846	\$1.846			

*Spouse's rate based on employee's age

18

Optional Group Decreasing Term Life Insurance

Employees can also purchase term life coverage through the Voluntary Group Life Plan with the National Conference on Public Employees Retirement Systems (NCPERS).

This gives you the opportunity to purchase affordable term life insurance with no medical evidence requirements. The monthly cost remains the same regardless of age. This plan provides group decreasing term life insurance for you and your spouse or domestic partner, and a flat benefit for all of your dependent children.

Coverage is available at a lower group cost through the purchasing power of the National Conference on Public Employee Retirement Systems. Every member, regardless of age, pays the same cost – just \$16 a month. Your cost does not increase with age. The plan pays a maximum benefit amount in your younger years and a gradually decreasing benefit amount in your older years.

Electing NCPERS life insurance plan in our enrollment portal does not guarantee enrollment in this plan. You must also complete NCPERS paper enrollment form to receive the coverage.

Advantages

- Guaranteed Acceptance no health questions
- Continuation option at retirement or if you resign
- Affordable \$16 a month regardless of your age
- Easy Payment by automatic payroll deduction
- Coverage for unmarried children up to age 26, even if they don't live with you

New Student Loan Benefit The Student Loan Protection benefit is included in Group Decreasing Term Life Insurance Plan at no extra cost. For members age 45 and under, Prudential will reimburse the amount of student loans you owe up to a maximum of \$50,000, should you become totally disabled under the terms of the policy* and have an outstanding student loan balance.

Schedule of Benefits – \$16 Monthly Contribution (covers you, your spouse or domestic partner, and your children)

Member		Dependent			
Members Age at time of claim	Group Term Life	Group AD & D	Total Benefit for Accidental Death	Group Term Life Spouse/Domestic Partner	Group Term Life Children
Less than 25	\$225,000	\$100,000	\$325,000	\$20,000	
25 - 29	\$170,000	\$100,000	\$270,000	\$20,000]
30 - 39	\$100,00	\$100,000	\$200,000	\$20,000	
40 - 44	\$65,000	\$100,000	\$165,000	\$18,000	\$4,000
45 - 49	\$40,000	\$100,000	\$140,000	\$15,000	
50 - 54	\$30,000	\$100,000	\$130,000	\$10,000	
55 - 59	\$18,000	\$100,000	\$118,000	\$7,000	
60 - 64	\$12,000	\$100,000	\$112,000	\$5,000	
65 and over	\$7,500	\$7,500	\$15,000	\$4,000	1

Payment Examples

- 1. If an insured member at age 38 dies of natural causes, the beneficiary would receive \$100,000. If death is due to a covered accident, \$200,000 would be payable.
- 2. If the spouse or domestic partner of a 42 year old member dies, the member would receive \$18,000.
- 3. If a dependent child less than age 26 dies, the payment to the member would be \$4,000.



Plan Administrator Member Services Website

Prudential | NCPERS 1-800-652-9026 www.mnpera.org

Minnetonka HealthRewards Wellness Program

Earn an extra city contribution each pay period for your healthy habits!

The mission of the HealthRewards program is to promote, develop and maintain the physical, mental and social health and wellbeing of Minnetonka employees, while encouraging and rewarding healthy lifestyles.

All city employees are eligible to participate in HealthRewards activities. Only regular benefit-eligible employees are eligible to receive the financial incentive for successfully completing the program. Employees who are enrolled in the city's medical plan are eligible to receive **\$100 extra city contribution each month** and employees who opt out of the medical plan are eligible to receive **\$50 extra city contribution each month**.

Requirements of the program:

- **Step 1:** Be current on your physical exam, complete a dental or vision exam and complete your health risk assessment.
- **Step 2:** Track your activities throughout the year in the 5 Essential Areas of Total Well-Being: Emotional, Financial, Physical/Nutrition, Professional/Personal Growth and Social/Community.
- Step 3: For each well-being area, complete the minimum number of points.
- **Step 4**: Turn your completed card in to your HealthRewards team member in early December.

Employees who complete the requirements of the program will receive the extra HealthRewards city contribution for the next calendar year. New tracking cards are sent out each year.

Watch inSite and the city's newsletter for events to help you complete the program.

Employee Assistance Program (EAP)

Administered by Sand Creek Group Ltd

All employees, spouses, dependents and household members have access to Sand Creek EAP through:

- In-person counseling (five sessions/year for each different reason for contact)
- Phone/chat/video support 24/7, 365 days a year at 651-430-3383 or 888-243-5744
- Member portal: mylifeexpert.com with code citymtka
- My Life Expert phone app with code citymtka

Sand Creek can help with everyday struggles: Family conflict, anxiety, depression, substance misuse, adoption/child care/elder care, divorce/custody, budgeting, estate planning, wills, real estate, legal assistance, identity theft, home buying, college planning, managing taxes and more.

Retiree Health Savings Plan (RHSP)

MISSIONSQUARE

The Retiree Health Savings Plan (RHSP) helps defray the cost of medical expenses and health insurance premiums for employees, spouses and dependents after the employee leaves employment with the city.

- To be eligible, an employee must have at least 10 years of continuous service as a regular employee.
- A portion of the employee's severance pay will be deposited into this account **tax free**.
- The non-union percentage of severance deposited into a RHSP is 75 percent. Union contract participation and percentage may vary.



Williston Fitness Center & The Marsh Employee Memberships

Effective Jan. 1, 2024, City of Minnetonka employees may enjoy a complimentary membership to Williston Fitness Center or The Marsh.

City employees not performing substantial duties at the facility will be taxed (via payroll) on the residential membership rate. Employees may elect to add a membership to the second facility (a combined Williston-Marsh membership). Dual or family memberships may be purchased for an additional fee.

Visit inSite for the employee membership enrollment form and information on the facilities.

Employee Monthly Rates	The Marsh OR Williston	The Marsh AND Williston	Taxable Amount*
Employee	\$0	\$19	\$48
Dual	\$19	\$29	\$48
Household	\$29	\$44	\$48

*For employees not performing substantial duties at Williston or The Marsh

Williston Fitness Center

Williston Fitness Center is a city-run exercise and fitness center, located at 14509 Minnetonka Drive. Amenities include:

- Fitness center, personal training
- Group fitness studios, classes
- Tennis courts
- Swimming pool, whirlpool, sauna, splash pad
- Baseball and softball cages
- Basketball court
- Treehouse indoor playground

Questions? Contact Williston Fitness Center at 952-939-8370.

The Marsh

The Marsh is a city-run health and wellness center, located at 15000 Minnetonka Blvd. Amenities include:

- Fitness center, personal training
- Group fitness studios, classes
- Lap pool, therapy pool, whirlpool, sauna, steam room

Questions? Contact The Marsh at 952-908-7000.





Contact Information

Plan	Provider	Website	Contact Number
Medical Plan	Medica Group #309892	https://cityofminnetonka. welcometomedica.com/home	952-945-8000 1-800-952-3455
Dental Plan	Humana Group #409611	www.humana.com/dental-insurance	651-437-7977 (option 0 or 3)
Vision Plan	Avesis Group #30912-1049	www.avesis.com	651-437-7977 (option 0 or 3)
HSA, HRA with VEBA, FSA	WEX Group #486405	https//benefitslogin.wexhealth.com/Login	1-866-451-3399
Life and AD&D Insurance	SunLife Group #237725	www.sunlife.com	651-437-7977 (option 0 or 3)
Short Term Disability Insurance	Madison National Life Plan #2810	www.madisonlife.com	651-437-7977 (option 0 or 3)
Long-Term Disability Insurance	Madison National Life Plan #2810	www.madisonlife.com	651-437-7977 (option 0 or 3)
Decreasing Term Life Insurance	National Conference on Public Employees Retirement Systems (NCPERS) Unit #632000	https://mnpera.org/	651-296-7460
Retirement Benefits Information	Public Employees Retirement Association (PERA) Unit #632000	https://mnpera.org/	651-296-7460
Employee Assistance Program (EAP)	Sand Creek Group #9409450	www.SandCreekEAP.com www.mylifeexpert.com Code: citymtka	1-888-243-5744
Minnetonka			
Human Resources	Clarice Kessler	ckessler@minnetonkamn.gov	952-939-8210

The information in this Enrollment Guide is presented for illustrative purposes. The text contained in this Guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the Guide and the actual plan documents the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about this Guide, contact Human Resources.