

2023 BENEFITS GUIDE

Questions?

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This piece is not a contract, but a summary of your benefits. Please refer to your contract (Summary Plan Description or Certificate of Coverage(s)) for more detailed information. In case of conflict, your contract will prevail for all claim adjudication.



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MBC is committed to your total health.

The employees and families of MBC are the most valued assets of the organization. MBC provides coverages, tools, and programs to get healthy, stay healthy and obtain the best care possible when you need it. Some tools are for employees and families on the medical plan, and other offerings are for everyone. Throughout the year, you will have a variety of opportunities to learn about available resources, check your health, and participate in activities to get and stay healthy.

Eligibility

Employees are eligible for MBC sponsored benefits on the first day of the month following the first 30 days of employment. All elections are in effect for the entire plan year and can only be changed during Open Enrollment unless you experience a qualified life event.

Eligible Dependents

Your eligible dependents may participate in the medical and dental plans. Eligible dependents include:

- Your spouse the person to whom you are legally married
- Your children under age 26
- Your disabled children of any age

The term "children" includes:

Natural children, stepchildren, adopted children and legal wards

Qualifying Life Events

A qualifying event (such as gain or loss of other group coverage, marriage, divorce, birth, adoption, death, etc.) may allow you to change your plan elections mid-year. Depending on the nature of the change, you may be able to:

- Enroll for coverage
- Waive coverage
- Switch from single to family coverage or from family to single coverage

The requested change must be consistent with your change in status and you must submit your change to the human resource department within 31 days after the change.



Health Plan Summary

Heelth Dley Devette	\$2,000 - \$20% Plan	
Health Plan Benefits	In-Network	Out-of-Network
Deductible per calendar year	\$2,000 /single \$4,000/family	\$3,000 /single \$6,000/family
Out of Pocket Max per calendar year	\$3,000 /single \$6,000/family	\$6,000 /single \$12,000/family
Preventive Services well childcare, Immunizations, prenatal care, mammograms, colonoscopies, annual preventive visits, routine vision & hearing exams	You pay \$0 You pay 40% after dedu	
Physician Services office visits, urgent care, retail health clinics, chiropractic manipulation, specialist visit, mental health, and substance abuse	You pay 20% after deductible	You pay 40% after deductible
Imaging CT/PET scans, MRI	You pay 20% after deductible	You pay 40% after deductible
Ambulance, Emergency Room, Durable Medical Equipment	You pay 20% after deductible	You pay 40% after deductible
Hospital, Outpatient, or Inpatient	You pay 20% after deductible	You pay 40% after deductible
Retail Prescription Drugs, 31 days		
Generic	You pay \$10	You pay 40% after deductible
Preferred Brand	You pay \$25	You pay 40% after deductible
Non-Preferred Brand	You pay \$50	You pay 40% after deductible
Preferred Specialty Brand	You pay \$25	Not covered
Non-Preferred Specialty Brand	You pay \$50	Not covered
Mail Order Prescription Drugs, 93 days		
Generic	You pay \$20	You pay 40% after deductible
Preferred Brand	You pay \$50	You pay 40% after deductible
Non-Preferred Brand	You pay \$100	You pay 40% after deductible
Preferred Specialty Brand	Not covered	Not covered
Non-Preferred Specialty Brand	Not covered	Not covered

Always use a provider within your chosen network for the highest level of benefits. Out-of-network coverage is included. If you see an out-of-network provider your out-of-pocket costs will be higher.

Refer to the plan specific Summary of Benefits & Coverage (SBC) or certificate of coverage for a more detailed explanation of your health plan benefits.

Questions? Call customer service at (800) 952-3455 or visit medica.com.

Health Plan Networks

Our health plans offer four choices in provider networks. You will need to select one of the networks described below, Medica Choice Passport, Medica Elect or one of the ACO's. Your covered spouse and dependent children must elect the same network as you.

Medica Choice Passport: This network is one of the largest with nationwide in-network coverage. There are no referrals needed when you see in-network providers.

Medica Elect[®]: This network is a medium-sized regional network. You must enroll in a Primary Care Clinic. Your Primary Care Clinic is associated with a care system. Each family member can choose a different Primary Care Clinic. The following care systems are some examples of those included in the Medica Elect Network; Allina, Children's, Hennepin Healthcare, Park Nicollet, Integrity, Lakeview, Minnesota Healthcare, Riverway/North Suburban and St. Luke's. If you need to see a specialist or go the hospital, make sure they are in your care system.

Accountable Care Organizations (ACOs): ACOs are networks or teams of health care providers that collaborate with Medica to make health care more efficient and improve the member experience. ACOs deliver improvements in costs, member experience. ACOs deliver improvements in costs, member engagement and care coordination.

Network		
Park Nicollet	Western and South MN metro 20 primary care clinics and 4 hospitals/medical centers including • TRIA Orthopedic • Same day primary care appointments • 24/7 nurse and advisor line	 Plan Features Same day primary care appointments 24/7 nurse and advisor line
VantagePlus	MN metro 655 clinics and 12 hospitals including Health Fairview, and North Memorial	 Plan Features Same day primary care appointments Personalized on-boarding Dedicated help from a specialized pharmacist

Health Plan Premiums

MBC pays 90% of medical insurance premiums for employee and family members under the age of 26. The MBC offers four (4) Medica benefit plans to employees with two (2) coverage options:

- Single for employee only coverage
- Family for employee + dependent(s) coverage.

	Bi-weekly		Моі	nthly
	Single	Family	Single	Family
Medica Choice Passport	\$47.23	\$132.02	\$94.45	\$264.04
Medica Elect	\$41.32	\$115.52	\$82.65	\$231.03
VantagePlus	\$40.14	\$112.22	\$80.29	\$224.43
Park Nicollet	\$40.14	\$112.22	\$80.29	\$224.43

Dental Plan Summary



The MBC pays 100% of dental insurance premiums regardless of the plan option. The MBC offers two (2) Delta benefit plans to employees with four (4) coverage options:

- Single
- Employee + Spouse
- Employee + Child(ren)
- Family.

We offer the Delta Dental Millennium Choice Enhanced dental plan.

There are two dental options: Plan Option I and Plan Option II.

The major difference between the plan options is the level of coverage and the network size of available providers.

- **Plan Option I** requires use of a Delta Dental PPO or Delta Premier network provider to obtain the highest level of benefit coverage.
- **Plan Option II** requires use of a Delta Premier network provider to obtain the highest level of benefit coverage.

	Plan C	Plan Option I	
	Delta PPO	Delta Premier	Delta Premier
Features			
Annual Maximum	\$2,000	\$2,000	\$1,000
Annual Deductible Does not apply to diagnostic & preventive	None	\$25/person; \$75/family	\$25/person; \$75/family
Diagnostic & Preventive Cleanings, x-rays, fluoride	You pay \$0	You pay 20%	You pay \$0
Basic Restorative Care Amalgam (silver) fillings, sealants	You pay 10%	You pay 50%	You pay 20%
Oral Surgery Simple extractions	You pay \$0	You pay 50%	You pay 20%
Complex Oral Surgery Surgical	You pay 20%	You pay 20%	You pay 20%
Other Complex Oral Surgery Tooth reimplantation	You pay 20%	You pay 20%	You pay 20%
Endodontic Therapy Root canal treatment	You pay 20%	You pay 50%	You pay 50%
Periodontics Gum disease treatment	You pay 20%	You pay 50%	You pay 50%
Major Restoratives Posterior composite resins, crowns	You pay 50%	You pay 50%	You pay 50%
Prosthetics and Implants	You pay 50%	You pay 50%	You pay 50%
Orthodontics Only available for ages 8-18		You pay 50% \$1,000 lifetime mo	X

Questions? Call customer service at (800) 448-3815 or card or visit deltadentalmn.org.

Voluntary Employee Beneficiary Association (VEBA)

- To be eligible to receive VEBA contributions, you must be an active employee and covered under one of MBC's medical health plan.
- VEBA contributions are deposited on the 1st & 2nd paycheck of the month (24 paychecks).
- Administered by BRi.

Coverage Level	Monthly VEBA Contribution
Single	\$90.00
Family	\$190.00

Flexible Spending Accounts

We offer Flexible Spending Accounts (FSAs) administered by BRi. FSAs allow you to set aside money to pay certain out-of-pocket expenses pre-tax. You make contributions to your FSAs from your paycheck with pre-tax dollars, which reduces your taxable income.

Medical FSA

You can use the Medical FSA to pay for medical, dental, and vision expenses not paid by your health plan, such as deductibles, coinsurance, and copayments. The maximum amount you can contribute to this account in 2023 is \$3,050.

Note that at the end of the plan year, up to \$610 may be rolled over into the next plan year. Any amount over \$610 will be forfeited.

Dependent Care FSA

You can use this account to pay for work-related daycare expenses that are necessary to allow you and your spouse to work or attend school. Expenses can include daycare, preschool, summer day camp, before or after school programs or eligible senior centers. Eligible dependents include children under age 13 and disabled dependents of any age who are incapable of self-care.

The maximum amount you can contribute to this account in 2023 is \$5,000 for individuals or married couples filing jointly, or \$2,500 for a married person filing separately.

Transportation Reimbursement Account

Set aside pre-tax contributions for transit passes, commuter highway vehicles and qualified parking benefits up to \$300/month. You can rollover your unused contribution from month to month.

Filing a Claim

Download BRI's mobile app. You can also go online to benefitresource.com.

To fully utilize your Medical FSA, check out the list of eligible health care expenses on the IRS website at **irs.gov**.

Questions? Call customer service at (800) 473-9595, email <u>participantservices@benefitresource.com</u> or visit <u>benefitresource.com</u>.

Basic Life and AD&D

The MBC provides Basic Life and Accidental Death and Dismemberment (AD&D) insurance through The Standard to all benefit-eligible employees. This coverage is paid in full by MBC.

Employees are covered by a term life insurance and AD&D benefit of 1x your base annual salary up to a maximum of \$50,000. Benefit reductions apply as you age.

Voluntary Life Insurance and AD&D

Employee Benefit	Available election
	 Up to 5 x annual salary to a maximum of \$500,000 Can purchase in \$10,000 units \$50,000 guaranteed for new employees; any amount over \$50,000 requires health history questions Life can be elected stand alone or include AD&D Life and AD&D amounts must match
Spouse Benefit	 Available election Up to \$150,000 Can purchase in \$5,000 units \$10,000 guaranteed for new employees; any amount over \$10,000 requires health history questions Life can be elected stand alone or include AD&D Life and AD&D amounts must match
Child(ren) Benefit	Available election
(to age 26)	 \$5,000 Amount is guaranteed Life can be elected stand alone or include AD&D Life and AD&D amounts must match

Benefit-eligible employees may elect voluntary life and accidental death and dismemberment (AD&D) insurance through The Standard. These plans are paid 100% by you and are intended to supplement the Basic Life and AD&D. You may also purchase coverage for your spouse and child(ren). You must elect coverage for yourself to elect coverage for spouse and child(ren). If you do not elect coverage when you are first eligible, any future amounts will require health history questions. You will not pay premium nor have coverage until your evidence of insurability form is approved by The Standard. Benefit reductions apply as you age.

VOLUNTARY LIFE/AD&D INSURANCE RATES

The premiums are shown per \$1,000 increments

Child(ren), regardless of # of children:

• **Life:** \$.20 per \$1,000

• **AD&D:** \$.045 per \$1,000

Employee's Age	Life
Less than 30	\$.06
30-34	\$.08
35-39	\$.09
40-44	\$.108
45-49	\$.18
50-54	\$.33
55-59	\$.43
60-64	\$.695
65-69	\$1.27
70-74	\$2.06
75+	\$2.06
AD&D	\$.06

Spouse's Age	Life
Less than 30	\$.073
30-34	\$.0.74
35-39	\$.082
40-44	\$.126
45-49	\$.179
50-54	\$.312
55-59	\$.529
60-64	\$.823
65-69	\$1.464
70-74	\$3.194
75+	\$12.109
AD&D	\$.06

Long-Term Disability

The MBC provides long term disability insurance through The Standard to all benefit-eligible employees. It is paid in full by MBC. This coverage is designed to replace a portion of your income when you're disabled for an extended period due to an illness or injury.

Benefits begin after 90 days for a qualifying disability. The benefit amount is 60% of monthly earnings to \$6,000 maximum per month. The benefit duration is to your social security normal retirement age (SSNRA) when a qualifying disability occurs before age 60. There are some benefit limitations based on illness, mental health, and substance abuse. Please refer to the contract concerning plan limitations and exclusions.

Metropass

The MBC offers a discount on a metropass for all MBC employees. A metropass provides unlimited access to buses and trains in the metro area.

- The cost of a metropass is \$83/month and is deducted from the 2nd paycheck of each month.
- The cost of the metropass is deducted on a pre-tax basis.

Questions? Get route and schedule information by calling (612) 373-3333 or visit metrotransit.org.

Retirement

PERA - MBC employees earn a pension.

The MBC participates in the Public Employees Retirement Association (PERA). You and the MBC both contribute a percentage of your pay to fund future benefits.

In 2023, the employee contribution is 6.5% of gross salary, and the employer contribution is 7.5% of that same salary.

Questions? Call (651) 296-7460 or visit mnpera.org.

Minnesota Deferred Compensation Plan (MNDCP)

The Minnesota Deferred Compensation Plan (MNDCP) is a voluntary savings plan intended for long-term investing for retirement. The MNDCP is available to all MBC employees. The MNDCP allows you to build retirement savings through automatic payroll deductions - you control how your money is invested.

You are eligible to withdraw savings from your MNDCP account at any age upon retirement, termination of employment, or disability. If you are still employed, you are eligible to withdraw your MNDCP savings any time after age 59½. Upon your death your designated beneficiary(ies) can withdraw funds.

Questions? Call (651) 296-2761 or visit msrs.state.mn.us.

Employee Assistance Program

Master's level staff will provide you and your family with extra support to help you with a variety of issues 24/7, 365 days per year, including:

- Stress reduction
- Childcare, divorce, parenting, adoption
- Senior care
- Pet care
- Budgeting/Debt Management
- Substance abuse
- Free face to face counseling sessions; 3 visits per person, per issue

Paid Time Off

Sick Leave: Earn 3.70 hours of sick leave per 2 week pay period. 12 days a year.

Vacation Leave: Earn 3.70 hours of vacation leave per 2 week pay period. Accrued hours increase per years of service. Accrual starts at 12 days a year.

Years of Service	Day Accrued Per Year
1 - 4	12 Days
5 - 7	15 Days
8 - 9	16 Days
10 - 15	18 Days
16 - 17	21 Days
18 - 20	22 Days
21+	26 Days

Holidays: Eleven (11) paid holidays per year.

Holiday	Observed
New Year's Day	January 1
Martine Luther King Day	Third Monday in January
President's Day	Third Monday in February
Memorial Day	Last Monday in May
Juneteenth	June 19
Independence Day	July 4
Labor Day	First Monday in September
Veterans Day	November 11
Thanksgiving Day	Fourth Thursday in November
Thanksgiving Friday	Day after Thanksgiving
Christmas Day	December 25

Personal Business Day: One (1) personal business day per year.

Parental Leave: 120 hours (3 weeks) of paid parental leave within 12 weeks following the birth or adoption of a child.

Worker's Compensation

MBC employees have protection under the Minnesota Worker's Compensation laws. Workers Compensation Insurance provides compensation to employees who have a work-related injury or disease. The goals of the workers compensation system are to 1) help the employee return to work as soon as possible, and 2) to restore the employee as much as possible to their economic status before the work-related injury.

To ensure coverage, the employee must report any injury/disease to their supervisor immediately. An employee's failure to promptly report the work-related injury or disease might result in the delay of benefits or in some cases, in the denial of benefits to the employee. Employees who are injured on the job and seek medical attention, are required to provide medical verification that they are clear to return to work. Hennepin County administers the MBC's worker's compensation claims. Questions can be directed to Hennepin County Claims Adjuster Shawna Holewinski at (612) 348-3163 or Shawna.holewinski@hennepin.us.

Employee Training and Development

The MBC believes a work environment that promotes continuous learning and development benefits both the employee and the organization. The MBC encourages employees to seek opportunities that will enhance their effectiveness in their position and allow them to contribute with enhanced expertise, skills, and abilities. The following is a summary of training and development opportunities and services that the MBC provides subject to budgetary guidelines:

- Tuition reimbursement for approved technical school, college, and graduate classes.
- Seminars and workshops offered through Hennepin County or City of Minneapolis or outside organizations.
- Professional and trade society Memberships.
- Subscriptions and reference materials.

Public Service Loan Forgiveness (PSLF)

As an employee of the MBC, you may be able to receive loan forgiveness under the Public Service Loan Forgiveness (PSLF) Program.

PSLF forgives the remaining balance on your Direct Loans after you have made 120 qualifying monthly payments under a qualifying repayment plan while working full-time for a qualifying employer.

Questions? Call (855) 265-4038 or visit studentaid.gov.

This Benefits Guide provides a summary of your benefits. It does not contain all the details described in the official plan documents and contracts. If there is any discrepancy between what is summarized here or any verbal descriptions of the plan and the official plan documents and contracts, the plan documents and contracts will govern.
Your employer reserves the right to change, amend, suspend, or terminate any or all the plans described in the guide at any time and for any reason. This Benefits Guide is not a contract, and participation in any of the plans does not guarantee employment.