2025 BENEFITS GUIDE

Welcome to Columbus Metropolitan Library





We recognize the importance of providing a comprehensive benefits program that satisfies the diverse needs of our workforce.

Please review this information carefully. Eligibility for various benefits is based on hours worked.

Contact the Payroll and Benefits Team at payrollbenefits@columbuslibrary.org with any questions.



columbuslibrary.org 614-645-2275

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WHAT'S NEW IN 2025

Providing great benefit choices to you and your family is just one of the many ways we support the physical, financial and emotional well-being of our most treasured assets - you.

MINIMUM ESSENTIAL COVERAGE PLAN (MEC)

To complement our existing Preferred Provider Organization (PPO) and High Deductible Health Plan (HDHP) offerings, we have added an MEC plan that provides an affordable healthcare option. This lower premium cost option covers essential health benefits such as preventive services, wellness visits and basic outpatient care. In-network preventative services are at no cost; however, deductibles, copayments and out-of-pocket maximums are higher in comparison to PPO and HDHP plans. Be sure to review the Summary of Benefits & Coverage (SBC) on the Employee Benefits webpage.

PRICE EDGE TECHNOLOGY

UHC members will have access to UHC's/Optum Rx Price Edge technology to assist in finding lowest cost available prescriptions. Price Edge scans available prices and automatically provides the lowest available pricing. The cost of the Rx will count toward the deductible and out-of-pocket maximum. This tool will be accessible via myuhc.com.



SUMMARY OF BENEFITS



(1-19 Hours; 20-39 Hours; 40+ Hours)

ADDITIONAL BENEFITS FOR EMPLOYEES WHO WORK 20-39 AND 40+ HOURS PER WEEK

- Basic Life Insurance
 - Accidental Death and Dismemberment Insurance (ADD)¹

ADDITIONAL BENEFITS FOR

EMPLOYEES WHO WORK

40+ HOURS PER WEEK

- Long-Term Disability¹
- Basic Dependent Life

- Ohio Public Employees Retirement System (OPERS)⁴
- 403(b) Investment Program
- Employee Assistance Program¹
- Cancer Bridge¹
- Headspace15
- Pet Insurance
- ID Theft Protection

457 Deferred Comp

• On Our Sleeves - Bloom

- Short-Term Disability
- Medical/Choice Plus PPO24
- Medical/High Deductible Health Plan with Health Savings Account (HDHP/HSA)²⁴
- Medical/Minimum Essential Coverage Health Plan with Health Savings Account (MEC/HSA)^{2,4}
- Dental²⁴
- Vision^{2 4}
- Flexible Spending Account (Health, Dependent Care, Limited Purpose³)
- Legal Insurance
- Voluntary Insurance: Employee, Spouse, Dependent Life
- Accident Insurance
- Critical Illness Insurance
- Hospital Indemnity Insurance

¹ CML paid benefits ² FT rates apply at avg. 30 hrs/week ³ If enrolled in the HDHP/HSA ⁴ Jointly paid by CML and staff ⁵ CML email address is required

Your benefits eligibility is determined by the number of hours you are regularly scheduled to work each week.

MyVoyage

Decision-making support tool that offers personalized digital guidance to help you and your family optimize your household spending across health, emergency savings and retirement. It helps you make smart choices that optimize your benefit dollars. This platform is hosted by VOYA. You can access the tool via myhealthwealth.voya.com/go/cml.

Dependent Documentation Requirements

If you are eligible based on the table above, you may also cover your dependents. New dependents require specific documentation to be submitted in order to be eligible for coverage.

Currently covered spouses or domestic partners may also require specific documentation to be submitted annually to prove continued eligibility.

Documentation varies by relationship. Examples of documentation include birth certificate, tax documents and others. For specifics, see the Dependent Eligibility Documentation on MyCML> Benefits>Enrollment, Changes & Forms>Dependent Eligibility.

Note: Benefits for dependents turning 26 years old terminate on the last day of their birth month. Email <u>payrollbenefits@columbuslibrary.org</u> with questions.

Spouse/Domestic Partner Additional Charge

To control plan costs for all staff, Columbus Metropolitan Library's health plans have a \$200 per month (\$92.31 per pay period) additional health premium charge for employees covering their spouses/domestic partners who have the option to elect health insurance through their employers. If both you and your spouse/domestic partner are employed at CML, this additional charge does not apply.



If you elect to enroll your spouse/domestic partner in a CML health plan and they are not employed or don't have the option for health insurance coverage through their employer, you will be asked to attest to this fact and sign the Spousal/Domestic Partner Additional Charge Removal Form.

CML requires the attestation to be renewed every year. This form is available in columbuslibrary.org/employee-benefits/enrollment. Once a signed form is submitted to payrollbenefits@columbuslibrary.org, the additional \$200 monthly charge (\$92.31 per pay period) will be removed from your premium deductions. This form may be submitted at any time during the plan year. The additional charge will be removed on the check that follows the submission of the form.

ACTION NEEDED FOR NEW HIRES OR NEWLY ELIGIBLE EMPLOYEES

For **new hires or newly eligible employees**, there are many important decisions to make regarding your benefits – some of which must be decided within 31 days of your date of hire or when you become eligible for benefits due to an internal transfer/promotion. The chart below identifies benefits eligibility based on the number of hours worked each week.

All library employees should note:

All library employees are automatically enrolled in the Ohio Public Employees Retirement System (OPERS) retirement plan.

In your first **180** days of employment, you may work directly with OPERS to select your OPERS Retirement Plan. If no selection is made, it defaults to the Traditional Pension Plan.

During the year, you may also elect to contribute or change contribution levels to:

- The Ohio Public Employees Deferred Compensation (457) plan.
- The Newport 403(b) plan.

During the next open enrollment, you will:

· Confirm current coverage and enrolled dependents or make changes for the following year.

If you regularly work 20-39 hours per week, you are eligible for those benefits above in addition to those in this category.

All part-time employees are **automatically enrolled** in **Short-Term Disability**. (New Hires have a 6-month waiting period.)

Within **31 days** of your hire date:

- Elect to participate in the health care and/or dependent care FSA.*
- Designate your life insurance beneficiaries in MyHR.
- Complete enrollment for Health, Dental and Vision coverage, even if you decline.*
- Complete enrollment for Voluntary Life and Supplemental Life health plans, if electing coverage.

*Effective date of coverage for part-time medical, dental and vision benefits is the first of the month after 30 days of employment.

If you regularly work 40 hours per week, you are eligible for all benefits listed above, plus the following:

All full-time library employees are automatically enrolled in Life and Accidental Death & Dismemberment Insurance. After a 6-month waiting period, employees are also enrolled in Short-Term Disability and Long-Term Disability coverages.

Within **31 days** of your hire date:

- Complete enrollment for Dependent Life, Voluntary Life and Supplemental Life health plans, even if you decline coverage.
- Designate your life insurance beneficiaries in MyHR.
- Complete enrollment for Medical, Dental and Vision coverage, even if you decline.
- Elect to participate in the health care and/or dependent care FSA.

*Full-time employees are eligible for medical, dental and vision coverage on date of hire.

If you make no elections, you will default to "no coverage".



Life Event/Qualifying Status Change

If you experience a qualifying status change (such as a marriage, divorce, new child, or change in employment status), you have 31 days to make a change to your benefits coverage. If you miss this deadline, your next opportunity to change benefits coverage will be during the next open enrollment period. All documentation must be returned to CML within the 31-day enrollment window.

Annual Open Enrollment

You have the opportunity to change your benefits each Fall during open enrollment, after which elections are effective January 1 of the new plan year.

Failure to complete timely enrollments will result in ineligibility for benefits coverage until the next open enrollment period.

HOW TO ENROLL IN YOUR BENEFIT PLANS



To enroll, follow the instructions titled "MyHR: Enrolling in Benefits", found on MyHR>Resources>Tools/References>Information for Staff.

Review the Summary of Benefits chart to confirm your eligibility. The following process must be completed even if you are not electing benefits at this time.

- 1. Log into MyHR
- 2. Select the MYSELF menu
- 3. Select Benefits
- 4. Select Enrollments
- 5. In the Change Your Enrollments area, you will see the start and end date for your New Hire benefit enrollment period.
- 6. Click **START** to begin your enrollment.

Complete the steps to enroll in, or opt out of, health, dental, vision and FSA. You will also elect whether to cover eligible dependents.

If you are electing optional insurance (Voluntary Life, Accident, Critical Illness and/or Hospital Indemnity), complete the steps to enroll. Once you have elected insurance, if electing over the guarantee amount, evidence of insurability instructions will be emailed to you. Evidence of insurability is a questionnaire used by New York Life where you provide information on the condition of your health to be considered for insurance coverage.





HEALTH & PRESCRIPTION DRUG COVERAGE





YOUR HEALTH PLAN CHOICES

Eligible employees have the opportunity to choose from three health plans: The Preferred Provider Plan (PPO), the High Deductible Health Plan (HDHP) paired with an optional Health Savings bank account (HSA) and a Minimum Essential Coverage Plan (MEC) paired with an optional Health Savings bank account. All plans cover the same services and have identical networks. Also, once out-of-pocket maximum is reached, the plans pay 100% of medical costs for the remainder of the year.

Plan Comparison

	PPO	HDHP with HSA	MEC with HSA	
Type of Plan	Allows you to use any doctor or hospital, but benefits are increased when you choose in-network providers.	Allows you to use any doctor or hospital but benefits are increased when you choose in-network providers. The HSA bank account paired with the plan offers tax-free savings and can be used to pay for qualified medical expenses. The account is portable and can be invested and saved for future medical needs, even into retirement.	Suitable for employees who may not require extensive medical coverage but still want to meet the requirements of the Affordable Care Act (ACA). Allows you to use any doctor or hospital but benefits are increased when you choose in-network providers. The HSA bank account paired with the plan offers tax-free savings and can be used to pay for qualified medical expenses. The account is portable and can be invested and saved for future medical needs, even into retirement. CML does not contribute into the HSA Bank Account.	
Premium Contributions	You pay higher premium contributions when you enroll in the PPO.	You pay lower premium contributions when you enroll in the HDHP.	You pay lower premium contributions than PPO or HDHP plans when you enroll in the MEC plan.	
Deductibles	The PPO has a lower deductible. This means you start paying coinsurance sooner.	The HSA Plan has a higher deductible. CML contributes to your Health Savings Account to help offset your higher out-of-pocket costs*.	The MEC plan has a higher deductible than PPO and HSA plans.	
Office Visit Copay	In-network providers: \$25 for primary care office visit; \$40 for specialty doctors.	In-network providers: \$10 after deductible has been met for primary care office visits; \$15 after deductible has been met for specialty doctors.	In-network providers: 25% after deductible has been met for primary care and specialists' visits.	
Health Care Flexible Spending Account (FSA)	You may contribute pre-tax to the Health Care FSA to pay qualified medical, dental and vision expenses. CML does not make employer contributions to the FSA.	You may contribute to a Limited Purpose FSA that lets you set aside money, pre-tax, to help pay for eligible dental and vision expenses.	You may contribute to a Limited Purpose FSA that lets you set aside money, pre-tax, to help pay for eligible dental and vision expenses.	
Preventive Care	Preventive care is 100% covered when enrolled in any plan and using in-network providers . The 100% coverage does not apply if out-of-network providers are used. The guidelines for preventive care services vary based on gender and age. For a complete list of covered services, log on to www.uhc.com/health-and-wellness/preventive-care before you visit a physician. Make sure your physician submits all preventive care claims with the proper coding.			
Prescription Drugs	All plans offer the same three-tier co is based on what tier of drug you chow 1. Tier 1 - lowest cost 2. Tier 2 - moderate cost 3. Tier 3 - highest cost	pay program for retail and mail order pose:	orescriptions. The amount you pay	

^{*}The HSA contribution will be pro-rated in your year of hire or work event depending on your benefits effective date.



Key Features of the Health Plans

	PPO		HDHP with HSA		MEC with HSA	
	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network
Peductible You pay the entire cost for medical services until you meet the deductible.	\$750 for Employee coverage; \$1,500 for all other coverage levels	\$1,500 for Employee coverage; \$3,000 for all other coverage levels	\$1,750 for Employee coverage; \$3,500 for all other coverage levels	\$3,500 for Employee coverage; \$7,000 for all other coverage levels	\$5,000 for Employee Coverage; \$10,000 for all other coverage levels	\$8,000 for Employee Coverage; \$16,000 for all other coverage levels
Coinsurance Your share of the costs of a covered service.	20%	40%	20% after deductible	40% after deductible	25%	50%
Out-of-Pocket (OOP) Maximum (Medical & Rx) After you reach the OOP maximum, CML pays for all remaining expenses during the year, per calendar year.	\$2,500 for Employee coverage; \$5,000 for all other coverage levels	\$5,000 for Employee coverage; \$10,000 for all other coverage levels	\$4,000 for Employee coverage; \$8,000 for all other coverage levels	\$8,000 for Employee coverage; \$16,000 for all other coverage levels	\$6,000 for Employee Coverage; \$12,000 for all other coverage levels	\$12,000 for Employee Coverage; \$24,000 for all other coverage levels
Preventive Care	100% covered; the deductible does not apply	0% coinsurance after deductible	100% covered; the deductible does not apply	0% coinsurance after deductible	100% covered; the deductible does not apply	Needs to meet deductible first
Office Visit	\$25 copay	40% coinsurance after deductible	\$10 after deductible has been met	40% after deductible	25% after deductible	50% after deductible
Specialist Office Visit	\$40 copay per visit; \$25 copay when visiting a premium designated provider	40% coinsurance after deductible	\$15 after deductible has been met	40% after deductible	25% after deductible	50% after deductible
Urgent Care Visit	\$60 copay	40% coinsurance after deductible	\$40 copay after deductible	40% coinsurance after deductible	25% after deductible	50% after deductible
Emergency Room	\$200 copay per visit	\$200 copay per visit	\$150 after deductible	\$150 after deductible	25% after deductible	25% after deductible

PPO (Full-time, Bi-weekly rates)*					
Employee Employer Total Contribution Contribution Premium					
Employee	\$56.97	\$396.30	\$453.27		
Employee +1	\$182.45	\$692.37	\$874.82		
Family	\$238.05	\$913.27	\$1,151.32		

PPO (Part-time, Bi-weekly rates)*					
Employee Employer Total Contribution Contribution Premium					
Employee	\$184.32	\$268.95	\$453.27		
Employee +1	\$411.13	\$463.69	\$874.82		
Family	\$547.36	\$603.96	\$1,151.32		

HDHP (Full-time, Bi-weekly rates)*					
Employee Employer Total Contribution Contribution Premium					
Employee	\$26.81	\$396.30	\$423.11		
Employee +1	\$124.25	\$692.37	\$816.62		
Family	\$161.45	\$913.27	\$1,074.72		

HDHP (Part-time, Bi-weekly rates)*						
Employee Employer Total Contribution Contribution Premium						
Employee	\$154.16	\$268.95	\$423.11			
Employee +1	\$352.93	\$463.69	\$816.62			
Family	\$470.76	\$603.96	\$1,074.72			

MEC (Full-time, Bi-weekly rates)*					
Employee Employer Total Contribution Contribution Premium					
Employee	\$11.43	\$349.34	\$360.77		
Employee +1	\$52.97	\$643.33	\$696.30		
Family	\$68.83	\$847.56	\$916.39		

MEC (Part-time, Bi-weekly rates)*					
Employee Employer Total Contribution Contribution Premium					
Employee	\$91.82	\$268.95	\$360.77		
Employee +1	\$232.62	\$463.69	\$696.30		
Family	\$312.43	\$603.96	\$916.39		

^{*}All premiums are before potential discount(s) and additional charges as outlined in this guide.

Eligible employees must pay any required premiums through payroll deduction. When the cost of elected benefits exceeds an employee's paycheck, the employee is financially responsible for the balance, which must be paid to CML within 31 days of the pay date in which the balance was incurred.





MEDICAL PREMIUM DISCOUNT

CML offers a medical premium discount to employees and spouses (or domestic partners) who have completed an annual preventive care visit. Employees with employee-only coverage may receive up to \$300 per year (\$11.54 per pay period). Employees and spouses (or domestic partners) may receive up to \$600 per year (\$23.08 per pay period). The discount is divided on a per payroll period basis.

An annual preventive care visit is one of the following: an annual well visit with a primary care physician, mammogram, pregnancy care, colonoscopy, or a well visit with a gynecologist. The preventive visit must occur no earlier than January 1 of the previous calendar year to count toward the discount for that next plan year.

Current medical plan enrollees will not have to submit any forms; the Payroll & Benefits team will work directly with UHC on the eligibility for the discount. The discount will be applied as soon as CML receives confirmation that a preventive visit has taken place, as defined above. New hires and newly eligible plan enrollees will be required to complete a physician attestation form documenting a preventive care visit. Contact the Payroll and Benefits Team at payrollbenefits@columbuslibrary.org for more information.

If you completed a preventive visit as previously defined, you can confirm your discount by logging into MyHR (ADP), clicking on Myself>Benefits>Enrollments>2025 Medical Discount Employee & Spouse.





Health Savings and Flexible Spending Account Features

Plan	CML Contributions	Your Contributions	Roll Over	Eligible Expenses
HDHP paired with a Health Savings Account (HSA) Per IRS guidelines, to be eligible for the HSA: 1) You must be covered under a qualified HDHP, 2) You must not be covered under any other health plan that is not a qualified HDHP, 3) You are not enrolled in Medicare, 4) You are not claimed as a dependent on another individual's tax return.	Up to \$600 for Employee coverage and \$1,000 for Family coverage. CML will contribute up to 50% on a per payroll basis.¹	You may contribute based on IRS guidelines. 1. Per IRS guidelines, contributions to the HSA are made pretax, 2. If invested, funds grow tax deferred while in the HSA, and 3. Distributions taken for qualified medical expenses are tax-free 4. Medical expenses and certain insurance premiums can be paid tax-free with HSA distributions after you reach age 65 and enroll in Medicare. 5. Distributions from your HSA after age 65 are never subject to a penalty regardless of how you use your funds, even if funds are not used for qualified medical expenses. You can contribute up to \$4,300 during the plan year if enrolled in employee-only coverage and up to \$8,550 if enrolled in employee +1 or Family.	HSA accounts are personal accounts that are yours and are 100% portable.	Expenses for yourself and/or eligible dependents. Qualified medical expenses, dental expenses, and others as outlined by the IRS.
MEC paired with a Health Savings Account (HSA)	CML does not contribute to MEC plan.	Same as above.	Same as above.	Same as above.
Health Care Flexible Spending Account (FSA) Eligible when enrolled in the PPO or if waiving medical coverages.	CML does not contribute.	You can contribute up to \$3,300 during the plan year for full-time employees, and \$1,500/year for part-time employees. ² The minimum election is \$260/year. ²	\$660 carryover of unused balances into next year — must use carryover balance within 12 months.	Qualified IRS expenses for yourself and/or eligible dependents.
Limited Purpose Flexible Spending Account (LPFSA) Eligible when enrolled in HDHP/HSA.	CML does not contribute.	You can contribute up to \$3,300 during the plan year for full-time employees, and \$1,500/year for part-time employees. ² The minimum election is \$260/year. ²	\$660 carryover of unused balances into next year — must use carryover balance within 12 months.	Covers the cost of eligible dental and vision expenses you, your spouse and dependents incur.

¹CML will match your contribution up to the maximum amount as indicated, dependent on the benefit start date and the amounts the employee has deposited within the plan year.

For a complete list of eligible flexible spending expenses, visit <u>irs.gov</u>, Publication 502.







²The FSA contribution limits will be pro-rated in your year of hire depending on the month in which you begin employment. Your FSA limit may have to be adapted if you are considered a highly-compensated employee (HCE) by the IRS.

Dependent Care Flexible Spending Account

Plan	CML Contributions	Your Contributions	Roll Over	Eligible Expenses
Dependent Care FSA Eligible if working 20+ hours, regardless if enrolled in medical plan.	CML does not contribute.	You can contribute up to \$5,000 of pre-tax dollars during the plan year, or \$2,500 for each parent filing separately. ² The minimum election is \$650/year. ²	Includes a "grace period". If you have money left over in your FSA on December 31, you may incur and submit a claim for qualified expenses through March 15 of the following year.	Expenses for the care of your eligible dependents (child under age 13 or qualifying adult incapable of self-care) while you work.

Direct Deposit for Reimbursements

UHC administers the HDHP/HSA, PPO and FSA plans. They offer direct deposit for medical and FSA claims so you can receive your reimbursement quicker. To enroll, log into myuhc.com and go to your Account Settings.

Debit card for HSA, Health Care FSA and Limited Purpose FSA

Your HSA, Health Care FSA and Limited Purpose FSA come with a Debit MasterCard, which makes it easy to pay eligible expenses directly from your account.







The dental plan is available to all employees working 20 or more hours per week. You can enroll your eligible dependents for an additional cost. The plan is administered by Delta Dental.

For more information, call 800-524-0149 or visit deltadentaloh.com.

Delta Dental (Full-time, Bi-weekly rates)					
Employee Employer Total Contribution Contribution Premium					
Employee	\$0.00	\$18.61	\$18.61		
Employee +1	\$15.41	\$21.28	\$36.70		
Family	\$37.66	\$27.27	\$64.93		

Delta Dental (Part-time, Bi-weekly rates)						
	Employee Employer Total Contribution Contribution Premium					
Employee	\$11.60	\$9.49	\$21.10			
Employee +1	\$26.69	\$14.37	\$41.07			
Family	\$47.68 \$25.67 \$73.35					

VISION PLANS

Vision coverage allows you to save money on eligible eye care expenses, such as periodic eye exams, eyeglasses, contact lenses and more for yourself and your covered dependents. You have the choice of either the Core or Enhanced plans available through UHC Vision.

To access providers, visit <u>myuhcvision.com</u> or call 800 638-3120. You may also view your benefits, search for a provider or print an ID card online at <u>myuhcvision.com</u>.

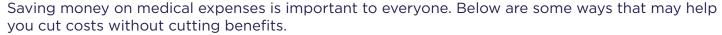
UHC Vision Core (Full-time, Bi-weekly rates)				
	Employee Employer Total Contribution Contribution Premi			
Employee	\$0.00	\$1.83	\$1.83	
Employee + Spouse	\$0.28	\$3.20	\$3.48	
Employee + Child(ren)	\$0.28	\$3.20	\$3.48	
Family	\$0.46	\$4.66	\$5.12	

UHC Vision Enhanced (Full-time, Bi-weekly rates)				
	Employee Employer Total Contribution Contribution Premiu			
Employee	\$0.75	\$2.82	\$3.57	
Employee + Spouse	\$3.61	\$3.20	\$6.81	
Employee + Child(ren)	\$3.61	\$3.20	\$6.81	
Family	\$5.30	\$4.70	\$10.00	

UHC Vision Core (Part-time, Bi-weekly rates)				
	Employee Contribution	Employer Contribution	Total Premium	
Employee	\$0.57	\$1.26	\$1.83	
Employee + Spouse	\$1.60	\$1.88	\$3.48	
Employee + Child(ren)	\$1.60	\$1.88	\$3.48	
Family	\$2.35	\$2.76	\$5.12	

UHC Vision Enhanced (Part-time, Bi-weekly rates)				
	Employee Employer Total Contribution Contribution Premiu			
Employee	\$2.29	\$1.29	\$3.57	
Employee + Spouse	\$4.90	\$1.91	\$6.81	
Employee + Child(ren)	\$4.90	\$1.91	\$6.81	
Family	\$7.20	\$2.80	\$10.00	

WAYS TO SAVE ON YOUR MEDICAL EXPENSES



- Access myuhc.com to explore lower cost-share medication options for you and your family.
 UHC members will have access to UHC's Price Edge technology. This solution scans and
 compares direct-to-consumer pricing with insurance pricing to give UHC members the best
 available price.
- Consider virtual visits to video chat with a doctor 24/7 whenever, wherever. If needed, a virtual visit doctor can treat and prescribe medication for everyday illnesses like the flu, sinus infections, a cough and more. With your UHC PPO plan, the cost is \$25.
- If on the HDHP, use your Health Savings Account, which the library contributes money towards, to offset the cost of medical bills. REMINDER: The HSA can be used for ANY eligible medical expense, including dental and vision costs. In addition, employees can put their own money to their HSA each paycheck (pre-tax) to use for expenses. (The library does not contribute to the Health Savings Account associated with the MEC plan.)
- Get a cost estimate for a procedure BEFORE you have it done. Not all providers charge the same rate for the same procedure, including surgeries, scans, blood draws, etc. A quick call to UHC (using the customer service number) will provide you with which local provider will have the lowest out-of-pocket cost to you. You may also search for procedures on myuhc. com>Find Care & Cost>Cost Estimates.
- When your doctor writes you a prescription, be sure to remind them to prescribe the generic equivalent of your medication. Generic drugs meet the same standards as brand-name drugs for safety, purity, strength and effectiveness. The best part is they are less expensive.

ID CARDS

Newly hired or newly eligible employees will receive via mail an ID card for Medical/Prescriptions and Dental Plans. Vision enrollees may print their cards from <u>myuhcvision.com</u>. Once your benefit selections have been processed, it may take up to 14 business days for the cards to arrive.

If you misplace your medical card - and need to access health care services - you can print a temporary ID card and request a permanent card online at myunc.com. Dental cards are available at deltadentaloh.com.

LIFE INSURANCE & AD&D

Basic Life Insurance

CML provides and pays for basic life insurance for employees working 40+ hours/week. The life insurance plan provides financial protection for your beneficiary(ies) by paying a benefit in the event of your death. The coverage provides a benefit of 1x your annual salary (rounded up to the nearest \$1,000 and up to a maximum of \$100,000).

Accidental Death & Dismemberment (AD&D) Insurance

CML provides and pays for Accidental Death & Dismemberment (AD&D) insurance for employees working 40+ hours/week. The AD&D plan provides financial protection for your beneficiary(ies) by paying a benefit in the event of your accidental death or to you in the event of any other covered loss (such as a dismemberment). This insurance will pay a benefit of 1x your annual salary (rounded up to the nearest \$1,000 and up to a maximum of \$100,000).





DISABILITY INSURANCE

The loss of income due to illness or disability can cause serious financial hardship for your family. CML's disability insurance programs work together to replace a portion of your income when you are unable to work due to your own health condition. CML offers Short-Term and Long-Term disability.

Short-Term Disability

Eligible employees working 20+ hours/week are automatically enrolled in Short-Term Disability (STD) insurance. This benefit is paid by CML. STD insurance pays a benefit if you are unable to work because of a qualified medical condition. PTO is used during the 14 calendar day STD waiting period. PTO does not accrue while receiving STD payments.

Amount of Benefit - Based on income, 70% of weekly earnings, or up to \$1,500 weekly max. Length of Benefit - 13 weeks per disability.

Long-Term Disability

Eligible employees working 40+ hours/week are automatically enrolled in Long-Term Disability (LTD) insurance. This benefit is paid by CML. If you are sick or injured and unable to work, the LTD benefit pays a monthly amount equal to 60% of your pre-disability base pay (up to \$10,000 per month).

VOLUNTARY LIFE INSURANCE PLANS

Dependent Life Insurance

Under the Basic Life Insurance Plan, full-time employees may elect coverage for their spouse and children.

Dependent Life	Coverage Available	Employee Cost
Spouse/Children*	\$5,000/\$2,000	\$0.60 Bi-Weekly

^{*}This benefit is up to age 26.



(1)



Supplemental Life Insurance Plans for Employee, Spouse and Dependent Children

If you work 20+ hours/week, you may elect voluntary life insurance for yourself, your spouse and/or dependent children. To elect coverage for your dependent(s), you must enroll in the voluntary life insurance for yourself.

- You can purchase supplemental life insurance for yourself in units of \$10,000 up to \$600,000. Evidence of insurability is required for any amount of your life insurance over \$190,000.
- You can purchase optional life insurance for your spouse in units of \$10,000 up to the lesser of 100% of your amount of voluntary life insurance, or \$500,000. Evidence of insurability is required for the amount of your spouse's insurance over \$50,000.
- You can purchase optional life insurance of \$10,000 for your dependent children up to age 26. Call New York Life at 1-800-225-5695 or visit www.newyorklife.com for more information.

Participant	Employee ¹	Spouse ¹	Children ^{1,2}
Increments by AGE	Per \$10,000 of coverage	Per \$10,000 of coverage	Per \$10,000 of coverage
Up to 25	\$0.23	\$0.23	\$1.48
25-29	\$0.28	\$0.28	
30-34	\$0.37	\$0.37	
35-39	\$0.42	\$0.42	
40-44	\$0.46	\$0.46	
45-49	\$0.69	\$0.69	
50-54	\$1.12	\$1.12	
55-59	\$1.98	\$1.98	
60-64	\$3.05	\$3.05	
65-69	\$5.86	\$5.86	
70-74	\$9.51	\$9.51	
75 and over	\$17.50	\$17.50	

¹All rates shown are bi-weekly.

SUPPLEMENTAL OPTIONAL PLANS



Critical Illness Insurance

Insurance available through VOYA helps soften the financial and emotional impact surrounding a critical illness such as a heart attack, stroke, invasive cancer and others. When enrolling, you are eligible for the Wellness Benefit. This Wellness Benefit provides an annual benefit payment of \$50 if you complete a covered health screening test. You may also receive a benefit payment of \$50 for your spouse and/or children (\$50 for each covered child) if they are covered.

Participant	Employee ¹	Spouse ¹	Children ^{1,2}
Increments by AGE	\$10,000	\$10,000	\$5,000
Up to 25	\$1.25	\$1.25	\$0.51
25-29	\$1.43	\$1.43	
30-34	\$1.71	\$1.71	
35-39	\$2.17	\$2.17	
40-44	\$3.69	\$3.69	
45-49	\$4.89	\$4.89	
50-54	\$6.42	\$6.42	
55-59	\$8.03	\$8.03	
60-64	\$9.92	\$9.92	
65-69	\$11.82	\$11.82	
70-74	\$16.15	\$16.15	

¹All rates shown are bi-weekly.

²This benefit is up to age 26.





²This benefit is up to age 26.

Hospital Indemnity Insurance

Insurance available through VOYA helps soften the financial and emotional impact surrounding a hospitalization. Pays a cash benefit for occurrences including initial admission into the hospital, daily inpatient hospital stays, discretionary spending and others.

	Bi-Weekly Rate
Employee	\$6.86
Employee + Spouse	\$11.56
Employee + Child	\$10.90
Family	\$15.60

Accident Insurance

Insurance available through VOYA helps financially protect employees when unexpected accidents occur. Pays cash benefits based on a schedule of conditions, including fractures, dislocations, concussions, medical services and treatments, hospitalization and others. When enrolling, you are eligible for the Wellness Benefit. This Wellness Benefit provides an annual benefit payment of \$50 if you complete a covered health screening test. You may also receive a benefit payment of \$50 for your spouse and/or children (\$50 for each covered child) if they are covered.

	Bi-Weekly Rate
Employee	\$2.10
Employee + Spouse	\$4.19
Employee + Child	\$4.50
Family	\$6.59

Legal Insurance

The legal plan through LegalEase offers participants and their eligible dependents access to legal advice and discounted services from a network of attorneys with coverage for many personal legal issues. It is available for \$7.90 bi-weekly.

Pet Insurance

This pet insurance program is available through PetsBest. The cost of pet insurance depends on the pet's age, breed and zip code. Pet insurance is a direct-bill service. This means that you will work directly with PetsBest on the pricing and payment of their services. You can select or drop this insurance at any time throughout the year. For more information, visit www.petsbest.com/CMLPETS or call 888-984-8700.

RETIREMENT PLANS

While employed with CML, your retirement contributions are invested in a state retirement program with the Ohio Public Employees Retirement System (OPERS). New OPERS members have 180 days to decide between OPERS' retirement plans. If you do not make a selection, OPERS automatically enrolls you in the Traditional Plan. Visit <u>opers.org</u> for more information. (CML employees do not contribute to Social Security.)

To help you reach your long-term retirement goals, CML also offers you the opportunity to contribute to two supplemental retirement accounts, a 403b and 457. Both plans allow you to enhance your retirement savings through voluntary pre and post-tax contributions. You may contribute to either or both plans.





	OPERS Pension	403b Tax-Deferred Investment Plan	457 Plan Deferred Compensation Program
Eligibility	Required of all active employees.	Optional for all active employees.	Optional for all active employees.
Your Contributions	As a member of OPERS, you are required to make contributions through payroll deduction on a pre-tax basis.	You can contribute to the 403b up to the annual IRS limits. Contributions are automatically withheld from your pay on a pre-tax basis. An optional Roth 403b post-tax option is available.	You can contribute to the 457 up to the annual IRS limits. Contributions are automatically withheld from your pay on a pre-tax basis. An optional Roth 457 post-tax option is available.
Minimum Contribution	10% member contribution rate.	\$7.69 per pay period (\$200/year).	\$15 per pay period.
Employer Contribution	CML is required to make monthly contributions to OPERS on the basis of a percentage of earnable salary. There is a 14% employer contribution rate to OPERS.	None.	None.
Distributions	Upon retirement. Depends on the plan selected. Refer to OPERS publications (www.opers.org) for details regarding each of their retirement plan options.	Required minimum distribution: you are required to start taking distributions when you reach age 73.	Required minimum distribution: you are required to start taking distributions when you reach age 73.
Withdrawals	While you are employed with an OPERS-covered employer, you cannot make any withdrawals or borrow against your account for any reason.	Severance from employment (including termination or death). Penalty free withdrawals are available after age 59 1/2 and required withdrawals after age 73.	1. At any age upon severance from employment (including termination or death). 2. Unforeseeable Emergency (as defined by Section 457 of the IRS). 3. Small Balance Distribution (see Plan Document for eligibility).
Taxability	Amounts are taxable when distributed if your contributions were not taxed at the time of contribution.	Pre-tax contributions are taxable upon distribution. Roth 403b contributions and related earnings are not taxable upon distribution.	Pre-tax contributions are taxable upon distribution. Roth 457 contributions and related earnings are not taxable upon distribution.
Loans	While you are employed with an OPERS-covered employer, you cannot make any withdrawals or borrow against your account for any reason.	Loans are available subject to plan provisions.	None.
Early Withdrawal IRS Penalty Tax	Not applicable.	Early withdrawal penalty may apply.	None - (normal tax only).
Vesting	You are always 100% vested in employee contributions, plus any earnings they generate.	You are always 100% vested in employee contributions, plus any earnings they generate.	You are always 100% vested in employee contributions, plus any earnings they generate.
Investment Options	Two OPERS Plans: 1. Traditional Pension Plan – OPERS is responsible for managing investments. 2. Member-Directed Plan – You are responsible for managing the investments.	You decide how to invest your account, selecting from investment choices provided under the plan. You can change your investment choices anytime.	You decide how to invest your account, selecting from investment choices provided under the plan. You can change your investment choices anytime.
Enrollment Deadline	You have 180 days from the time your employment begins to select a retirement plan. If you do not select a plan, you will be automatically enrolled in the Traditional Pension Plan.	You may enroll or change your deferral rate at any time.	You may enroll or change your deferral rate at any time.
Enrollment Materials & Contact Information	OPERS Member Services Center www.opers.org 1-800-222-7377	Newport Group/Ascensus www.ascensus.com 1-844-749-9981	Ohio Deferred Compensation www.Ohio457.org 1-877-644-6457



OTHER BENEFITS

CML offers a robust benefits package to support our workforce. Below are benefits available to the entire workforce.

Paid Time Off (PTO)

All employees working 20-40+ hours per week accrue Paid Time Off (PTO). These hours are accrued and paid out in accordance with hours of work, exempt/non-exempt status, and years of service. Employees can view their time off balances and make requests through MyHR. For more information, please review the Paid Time Off Policy in the Employee Handbook.

Employee Assistance Program (EAP)

CML has contracted with Matrix to provide confidential counseling services. This benefit is available to all staff and their family members. The following services are available:

- 1. Confidential Counseling: This no-cost counseling service provided by PhD Psychologists helps you address stress, relationship and other personal issues you and your family may face. You and your family will also have access to 24/7 crisis counseling. You and your family members have access to up to six (6) free sessions per year, per issue.
- **2. Legal & Financial Consultation:** Access to legal and financial consultations by calling a toll-free number and receiving a referral for a telephone consultation or a 60-minute face-to-face consultation with an attorney or financial advisor/planner.
- **3.** Tax consultation and preparation: Access to a 30-minute telephonic income tax planning related consultation per year on each separate tax issue you may encounter.
- **4. Work-Life Resources:** Access to a virtual library of mental health resources, "ask a doctor" email links, and free work and family resources and referrals.
- **5. Fraud Resolution/Identity Theft Services:** Access to a free consultation with an identity theft specialist to assist you in the recovery of your identity in the event of fraud.

Access EAP services at matrixpsych.com or 1-800-886-1171. CML's code is CML624.

Paid Parental Leave

To support our employees, CML offers Paid Parental Leave (PPL) to full-time and part-time employees (scheduled to work 20 hours or more per week). Eligible employees receive 70% of their pay for the six-week leave period for birth and adoption. Biological parents, the spouse or domestic partner of the biological parents and adoptive parents are eligible to request the leave. PPL will run concurrently with FMLA. If Paid Time Off is available, it must be used to complement both STD and PPL. PTO does not accrue while using PPL.

Paid Caregiver Leave

CML offers Paid Caregiver Leave (PCL) to eligible employees caring for a covered family member with a serious medical condition. PCL provides up to six weeks of paid leave at 70% of the employee's regular rate of pay. It must be used concurrently with PTO, if available. PTO does not accrue while using PCL.

College Advantage Plan (529)

A 529 plan allows you to save for college and offers significant tax advantages when you use the money for qualified expenses, like tuition, room and board, books, and more. You can enroll in the 529 plan at any time throughout the plan year by visiting **collegeadvantage.com**.



Cancer Bridge

Cancer Bridge is a confidential information and navigation resource that provides you and your family with unparalleled access to some of the world's foremost experts in cancer research and care. A certified oncology nurse will provide information specific to your cancer inquiry, discuss cancer treatment options and possible next steps. The Cancer Bridge service is available to all employees and their immediate family members: parents, parents-in-law, spouses, partners, children and siblings. Because Cancer Bridge is a private navigation service, you will need your employee ID number when you call. You can find your employee or position ID in MyHR>Myself>My Information>Profile. Service is available Monday through Friday from 8 a.m. to 5 p.m. (EST). A private voicemail is available if you call outside of business hours.

Phone: 1-855-366-7700 mycancerbridge.com

Real Appeal

Real Appeal combines clinically proven science with engaging content that helps teach participants how to eat healthier and be active to help the member manage their weight. The program features personal/group coaching, videos on ways to stay healthy, and nutrition guides. To enroll, UHC members must have their insurance card available.

Headspace

A meditation tool designed to improve mindfulness and sleep through meditation and other exercises. It helps users manage stress, improve focus and enhance overall well-being. This membership is available to CML staff and up to five family members or friends at no cost.

On Our Sleeves - Bloom

Bloom is an online curriculum of short videos and downloadable guides created through a collaboration between behavioral health experts at Nationwide Children's Hospital and Learning & Development experts. These short courses focus on building mental wellness habits, starting mental health conversations and recognizing when kids need help.

Tuition Reimbursement

CML is pleased to offer tuition reimbursement to help our staff reach their maximum potential. Staff who have completed at least one year of service and are meeting performance expectations are eligible to apply. Awards will be granted based on strategic priorities, the educational development needs of the organization, succession planning, and the availability of funding. Specific criteria, deadlines, and notification dates are announced at the beginning of each tuition reimbursement cycle. Additional details are available in the Tuition Reimbursement Policy.

Public Service Loan Forgiveness

CML is a qualified employer for Public Service Loan Forgiveness. For more information, visit studentaid.gov/.

Additional Library Staff Benefits

To learn more about these benefits, please refer to the Employee Handbook found on MyCML.

- **Holidays** Employees that are regularly scheduled to work 20 hours or more are eligible to receive Holiday pay as per the Holiday Policies and Procedures (P&P). The P&P may be found on MyCML.
- Professional Development Support and Training
- Free Parking at all locations
- Paid Leaves: Bereavement, Election Poll Worker and Jury Duty





IMPORTANT CONTACT INFORMATION



































UnitedHealthcare

Online: www.welcometouhc.com to enroll Online: www.myuhc.com after enrollment

Phone: 1-866-844-4864

Rally: 1-855-215-0230 (Must access through

myuhc.com)

Delta Dental

Online: <u>www.deltadental.com</u> Phone: 1-800-524-0149

UHC Vision

Online: <u>www.Myuhcvision.com</u> Phone: 1-800-638-3120

OPERS Retirement Plan

Online: <u>www.opers.org</u> Phone: 1-800-222-7377

Newport Group/Ascensus

Online: www.ascensus.com

457 Plan - Ohio Deferred Compensation

Online: <u>www.Ohio457.org</u> Phone: 1-877-644-645

Cancer Bridge

Online: www.mycancerbridge.com

Phone: 1-855-366-7700

Real Appeal

Online: www.enroll.realappeal.com

New York Life

Online: www.newyorklife.com/group-benefit-solutions/

employees/work-wellness

On Our Sleeves - Bloom

Online: bloom.brainier.com/#/login

PetsBest

Online: www.petsbest.com/CMLPETS

Phone: 1-888-984-8700

LegalEASE

Online: www.legaleaseplan.com/columbuslibrary

Phone: 1-800-248-9000

VOYA (Supplemental Optional Plans

administrator)

Online: presents.Voya.com/EBRC/CML

Headspace

Online: work.headspace.com/columbus metropolitanlibrary/member-enroll

Matrix

Online: <u>www.matrixpsych.com</u> Phone: 1-800-866-1141

ID Theft Protection

Online: www.idwatchdog.com/myplan/CML

Phone: 1-866-513-1518



REQUIRED NOTICES AND OTHER IMPORTANT INFORMATION

You have the right to obtain a paper copy of the Required Notices from the Plan upon request.

Even individuals who agreed to receive this notice electronically may request a paper copy at any time.

Summary of Benefits and Coverage (SBC) and Uniform Glossary of Terms

Under the Affordable Care Act, group health plans and insurance companies must provide participants with SBCs and a uniform glossary of terms commonly used in health insurance coverage. All group health plans and insurance companies use the same standard SBC and glossary.

The SBC is provided to you each year during open enrollment, and is available free of charge at any time upon request from the Payroll and Benefits Manager at 614-849-1069.

All Summary Plan Documents, as well as benefits information, are located under each specific benefit on MyHR>Resources>Tools/References.

DISCLAIMER

This benefits guide is intended to provide a summary of the benefits provided to employees of Columbus Metropolitan Library. The plans are governed by legal plan documents. If there is any discrepancy between the information presented in this guide and the legal plan documents, the legal plan documents shall govern.



