



Employee Benefits



Effective July 1, 2010

Mecklenburg County
Human Resources

Bi-Weekly Rates	County's Premium	Employee	Employee & Child(ren)	Employee & Spouse	Employee & Family
Non-Tobacco					
Standard	\$232.24	\$25.00	\$82.44	\$141.43	\$200.43
Enhanced	\$269.08	\$46.94	\$140.69	\$218.65	\$296.61
Tobacco Use					
Standard	\$232.24	\$57.30	\$116.36	\$175.36	\$234.36
Enhanced	\$269.08	\$86.19	\$181.91	\$259.88	\$337.83

	Benefit Plan Choices for 2010	
	Standard Plan	Enhanced Plan
Deductibles (Individual / Family)		
In-Network	\$400 / \$800	\$200 / \$400
Out-of-Network	\$1,200 / \$2,400	\$600 / \$1,800
Out-of-Pocket Maximums (Individual / Family)		
In-Network	\$2,500 / \$7,500	\$1,000 / \$3,000
Out-of-Network	\$7,500 / \$15,000	\$3,500 / \$10,500
Lifetime Maximum Benefit	\$1,500,000	\$1,500,000
Physician Services		
Office Visit	\$20 copay	\$15 copay
Specialist Office Visit	\$35 copay	\$25 copay
Routine Well Care	\$20 copay	\$15 copay
Well baby care/doctors office	\$20 copay	\$15 copay
Routine Gynecological Exam	\$20 copay	\$15 copay
Maternity	\$35 copay (first visit)	\$25 copay (first visit)
Surgery	20% after deductible	15% after deductible
Allergy Injection (by non-physician)	No charge	No charge
Diagnostic X-Ray/Lab (in doctor's office)	100% after copay	100% after copay
Diagnostic X-Ray/Lab (outside doctor's office)	100%	100%
In-Network Services		
Inpatient Hospital	20% after ded.	15% after ded.
Outpatient Hospital	20% after ded.	15% after ded.
Emergency Room	\$150 copay	\$125 copay
Urgent Care Center	\$35 copay	\$25 copay
Office Visit	\$20 copay	\$15 copay
Specialist Office Visit	\$35 copay	\$25 copay
Preventive Care	\$20 copay	\$15 copay
Out-of-Network Services		
Emergency Room	\$150 copay	\$125 copay
Urgent Care Center	\$35 copay	\$25 copay
Non-Emergency Services	40% after ded.	35% after ded.
Retail Prescription Drugs (30 day supply)		
Retail Generic	\$8 Copay	\$5 Copay
Retail Preferred Brand	20% coinsurance \$25 min., \$35 max.	20% coinsurance \$20 min., \$30 max.
Retail Non-Preferred Brand	40% coinsurance \$50 min., \$70 max.	40% coinsurance \$40 min., \$60 max.
CIGNA Tel-Drug	2x copays and 2x mins and maxes;	
Mail Order Prescription Drugs	co insurances will stay the same for a 3 month supply	
Vision Care		
Routine Eye Exam	\$25 copay (one visit/2 yrs)	\$25 copay (one visit/2 yrs)
Mental Health Benefits		
Inpatient	20% after deductible	15% after deductible
Out patient	\$35 copay	\$25 copay
Chemical Dependency		
Inpatient	20% after deductible	15% after deductible
Outpatient	\$35 copay	\$25 copay

Mecklenburg County offers employees a choice of Cigna Standard or Cigna Enhanced Medical Plans.

Common features of both plans:

Both plans are affiliated with Presbyterian Hospital and Carolinas Medical Center.

Both plans are PPOs and offer network benefits which include **physician** services, emergency care, inpatient and outpatient hospitalization and prescription coverage.

The County pays a portion of the total cost of medical insurance for all active regular employees.

Employees can choose to cover dependents and are responsible for the additional cost.

Medical Plan Opt Out/Waive
Mecklenburg County Employees only

If you have other group coverage and do not want to participate in the County's medical plan for 2010, you may choose to opt out/waive and the County will contribute \$400 to your medical flexible spending account (FSA). The opt out/waive status will remain in effect the entire year unless you have a qualifying family status change. Employees hired during the year receive a prorated FSA contribution. Mecklenburg County reserves the right to request proof of coverage of other medical coverage at any time.

Bi-Weekly Rates	County's Premium	Employee	Employee & Child(ren)	Employee & Spouse	Employee & Family
Standard	\$8.11	\$2.21	\$14.26	\$11.59	\$22.80
Enhanced	\$13.33	\$3.62	\$23.42	\$19.04	\$37.45

	Dental Plan Choices for 2010	
	Standard Plan	Enhanced Plan
Calendar Year Maximum <i>(Class I, II, and III Expenses) (per Individual)</i>		
In-Network	\$1,000	\$1,500
Out-of-Network	\$1,000	\$1,500
Calendar Year Deductibles (Individual / Family)		
In-Network	\$75 / \$225	\$50 / \$150
Out-of-Network	\$75 / \$225	\$50 / \$150
Class I Expenses - Preventive & Diagnostic Care <i>(In-Network/Out-of-Network)</i>	100% / 80% No Deductible	100% / 100% No Deductible
Oral Exams		
Cleanings		
Routine X-Rays		
Fluoride Application		
Sealants		
Space Maintainers (limited to non-orthodontic treatment)		
Non-Routine X-Rays		
emergency Care to Relieve Pain		
Histopathologic Exams		
Class II Expenses - Basic Restorative Care (In-Network/Out-of-Network)	70% / 50% After Deductible	80% / 80% After Deductible
Fillings		
Oral Surgery - Simple Extractions		
Oral Surgery - All Except Simple Extraction		
Surgical Extraction of Impacted Teeth		
Anesthetics		
Major Periodontics		
Minor Periodontics		
Root Canal Therapy/ Endodontics		
Relines, Rebases, and Adjustments		
Repairs - Bridges, Crowns, and Inlays		
Repairs - Dentures		
Class III Expenses - Major Restorative Care (In-Network/Out-of-Network)	40% / Not Covered After Deductible	50% / 50% After Deductible
Crowns / Inlays / Onlays		
Dentures		
Bridges		
Class IV Expenses - Orthodontia (In-Network/Out-of-Network)		
Coverage for Eligible Children Only	Not Covered	50% / 50% No Separate Deductible
Lifetime Maximum	Not Covered	\$1,500
Missing Tooth Provision	Teeth missing prior to coverage under the CIGNA Dental plan are not covered.	
Treatment Review	Available on a voluntary basis when extensive work in excess of \$200 is proposed.	
Out-of-Network Reimbursement	80th Percentile	
Student Age	26	

Employees will have two options in selecting a dental plan: the Standard or Enhanced plan. Below are just a few of the differences between the two plans:

Standard

- Active Network
- Calendar Year Maximum of \$1,000 per individual
- No Orthodontic coverage

Enhanced

- Passive Network
- Calendar Year maximum of \$1,500 per individual
- Orthodontic Coverage (Life time Max \$1,500)

NOTE: Dental cards will NOT be issued to employees.

Check www.cigna.com for your dental provider!



UnitedHealthCare Vision

Contact at www.myuhcvision.com

or at 1-800-638-3120

Bi-Weekly Rates	Employee	Employee & Child(ren)	Employee & Spouse	Employee & Family
Standard	\$2.69	\$5.86	\$5.57	\$9.21
Enhanced	\$5.47	\$10.51	\$10.26	\$15.99

The County offers employees a choice of two voluntary vision plans for a minimal premium which provides coverage for exams, lenses, frames, contacts, etc. at reduced costs.



Co-Pays	Standard	Enhanced
Comprehensive Exam	\$10	\$0
Materials	\$20	\$0

Note: Vision cards will NOT be issued to employees as part of this plan.

Benefit Frequency	Standard	Enhanced
Comprehensive Exam	12 Months	12 Months
Spectacle Lenses	12 Months	12 Months
Frames	24 Months	24 Months
Contact lenses – (in lieu of eyeglasses)	12 Months	12 Months

Frame Benefit

- Private Practice Provider - \$50 wholesale allowance
- Retail Chain Provider - \$130 retail frame allowance

Network Contact Lens Benefit

- Covered-in-full contact lenses in lieu of eyeglasses. The covered-in-full contact lens benefit at network providers includes fitting/evaluation, contacts, and two follow-up visits (after \$20 copay for standard \$20 for the buy-up plan). For those who choose disposable lenses, up to 6 boxes are included when obtained from a network provider.
- Elective contacts – Standard Plan-\$150 and High Option \$150 contact lens allowance is applied to the fitting/evaluation fees as well as the purchase of contact lenses. The materials copay does not apply.

Covered in Full (after applicable copays)

In-Network Benefits

Comprehensive Exam

Lenses

Standard Single Vision

Standard Lined Bifocal

Standard Lined Trifocal

Frame

Contact Lenses (in lieu of eyeglasses)

Elective

*Necessary

Lens Options

- Standard & Enhanced:

Standard Scratch Resistant

Coating

- Enhanced Option: Progressive

Lenses, Edge Coat, Anti –

Reflective & UV Coatings,

Tints, Photochromic,

Transitions, Polycarbonate

lenses

Out of Network Reimbursement

Network copays do not apply

	Std.	Enhanced
	Up to	Up to
Comprehensive Exam	\$40	\$40
Lenses		
Single Vision	\$40	\$40
Bifocal	\$60	\$60
Trifocal	\$80	\$80
Lenticular	\$80	\$80
Frames	\$45	\$45
Contact Lenses (in lieu of eyeglasses)		
Elective	\$150	\$150
*Necessary	\$210	\$210

You do not need to submit a claim for In-Network benefits. However, you must submit a claim to UnitedHealthCare Vision for benefit reimbursement for Out of Network services.

Laser Vision Benefit

UnitedHealthCare Vision has partnered with the Laser Vision Network of America to provide our members with access to discounted laser vision correction providers. 1-888-563-4497



Flex Corp

A flexible spending account (FSA), provided by **Flex Corp**, allows you to set up a tax-free savings account to help pay for your family's health care or dependent day care costs.

The Pierce Group working with **Flex Corp** will be available at designated on-site meetings during the months of October and November to assist in enrolling and to answer your questions. We strongly encourage employees who are interested in participating or are currently participating in an FSA program to attend during these months.

A flexible spending account allows you to set up tax-free savings account to help you pay for your family's health care or dependent day care costs.

What is an FSA?

- A benefit that saves you money!
- An account where you contribute money from your salary, **BEFORE** taxes are withheld, incur eligible expenses and get reimbursed!
- A way to save money on health care services and items and day care for you and your family!
- A way to....
**PAY LESS TAXES AND
SAVE MONEY!!**

Annual Maximum Contributions to each plan are:

Medical:	\$4,000
Dependent Day Care:	\$5,000

** Minimum contribution of \$10 per pay period is required*

To participate in one or both accounts, you must make your selection during enrollment. You may claim your expenses incurred through March 15, 2011 and file claims until April 15, 2011. Unused contributions are forfeited. Debit cards are issued to participants.

How do I contact Flex Corp?

Flex Corp
146 Resource Parkway
Birmingham, AL 35242

Phone: 888-505-4557
Fax: 205-995-4099
Toll Fax: 866-238-8224

Visit their website at:
www.flexcorp.com

Hours of Operation:
8:30 – 5:00

Savings and Retirement

Retirement

Mecklenburg County employees are automatically enrolled into the North Carolina Local Government Retirement System upon their employment. Employees contribute 6% of gross wages and become vested after five years of service. The County also contributes on behalf of all County employees to fund future benefits. Various retirement options are available.

Deferred Compensation

Mecklenburg County offers employees two deferred compensation plans.

The **457 Plan** is administered by ICMA-RC. Employees may defer up to \$16,500 per plan year, \$22,000 if over age 50.

The **401(K) Plan** is administered by Prudential. Employees may defer up to \$16,500 per plan year, \$22,000 if over age 50.

The County contributes 5% of gross salary into a 401(K) plan for sworn law enforcement officers as mandated by the State of North Carolina.



Contacts

Retirement

North Carolina Local Government Retirement System

Phone: 877-627-3287

Fax: 919-508-5350

Visit their website at:

<http://www.myNCretirement.com>

457 Plan

ICMA-Retirement Corporation

Phone: 800-669-7400

Visit their website at:

<http://www.icmarc.org/>

401(K) Plan

Prudential

Phone: 866-627-5267

Visit their website at:

<http://www.prudential.com/ncplans>

529 College Savings Plan

Employees can save for college through payroll deduction with the North Carolina 529 College Savings Plan. The plan offers a wide range of investment options from conservative to aggressive. Investments can be used at any college for qualified educational expenses such as tuition, books, and room and board.



To enroll in the plan, contact the **College Foundation of North Carolina (CFNC)** toll free at 800-600-3453 or visit www.NC529.org. Once you have enrolled and selected the payroll deduction option, a representative from CFNC will contact the County to advise that you've requested that your contributions be payroll deducted.

Savings Bonds

Mecklenburg County employees can invest in U.S. Savings Bonds through payroll deduction. Bonds may be purchased in denominations of \$100, \$200, \$500, and \$1000 at half the face value. For more information, please contact National Bond & Trust at (800) 426-9314.

Life and Disability Benefits

Basic Term Life Insurance

Regular employees are automatically covered with basic term life insurance in the amount equal to their annual salary. Dependent/Spouse coverage of \$10,000 is available.

Supplemental Term Life Insurance

The County offers employees the opportunity to purchase up to six (6) times their annual salary (or up to \$1,000,000) in supplemental term life insurance. Proof of good health is not required if requested coverage does not exceed four (4) times the annual salary or \$300,000 and if enrollment begins immediately upon eligibility. The policy includes an accelerated death benefit for those with terminal illnesses as well as Accidental Death and Dismemberment (AD&D) benefits. Rates are based on age, smoking habits, and amount of insurance requested.

Short Term Disability

This benefit is provided to assist an employee who is disabled due to a non-work related illness or accident. Sixty percent of the employee's weekly earnings will be paid for up to 26 weeks, after a 25-day waiting period. Short Term Disability begins 90 days after employment and excludes pre-existing conditions.

Long Term Disability

Long Term disability replaces 40% of an employee's salary for up to 5 years should he or she become disabled. This benefit is provided by the County for regular full-time employees who have less than 5 years of service with the County. Employees with 5 or more years will refer to the NC Retirement System plan for benefits. Employees can also purchase an additional 20% of coverage. Restrictions apply.

Contact

The Hartford Group Life and Disability

Phone: 800-523-2233

<http://www.thehartford.com>

Voluntary Benefits



Employees can purchase a [Cancer](#) and/or [Accident](#) Insurance Policy through Colonial Life Insurance. Both policies deliver cash benefits directly to the employee, regardless if there is other insurance. These policies are designed to assist employees with out-of-pocket expenses due to cancer or an accident.

Employees interested in obtaining more information or enrolling in these Voluntary insurance plans should call the Employee Services Center at (704) 432-6947.

Wellness

Fitness Centers

For a nominal membership fee, employees can join the County's Fitness Center. The Center has state-of-the-art weight resistance and cardiovascular equipment, locker rooms and showers, and a variety of group exercise classes and wellness programs. Join your fellow employees in a professional, safe, supportive, and goal-oriented fitness program designed to meet your individual needs.



Mecklenburg County Aquatic Center

The Mecklenburg County Aquatic Center, located at 800 East Martin Luther King Jr. Blvd, has state-of-the-art swim facilities including a 50-meter competition pool, 25-yard warm instructional pool, 1-meter and 3-meter diving boards, hot tub, and full circuit fitness center. County employees receive a reduced rate membership.

Employee Assistance Program

This program provides confidential counseling and referral services to employees who are facing personal and work-related problems such as drugs or alcohol abuse, marital or financial problems, caring for older adults, and stress. This program is available to employees and eligible family members at no cost. For free, confidential help, call EAP at **800-633-3353**.



Holidays and Leave

Holidays (10 days annually)

New Year's Day	Labor Day
MLK's Birthday	Thanksgiving Day
Good Friday	Friday after Thanksgiving
Memorial Day	Christmas Day
Independence Day	One other day @ Christmas

Sick Leave (12 days annually)

Sick leave is accrued on a bi-weekly basis at a rate of 0.04615 hours (12 days annually) for each regularly scheduled hour worked. There is no maximum accrual limit.

Sick Leave Donation

In long-term medical situations, employees may donate sick leave to other employees subject to certain conditions.

Leaves of Absences

There are specific types of absences which may be approved as periods of time away from work. Mecklenburg County recognizes the following types of leave. Restrictions apply.

- Administrative Leave – unpaid up to 30 days
- Family/Medical Leave – unpaid up to 12 weeks
- Extended Medical Leave – unpaid up to 52 weeks
- Extended Family Leave – unpaid up to 52 weeks
- Military Leave
- Disaster Response Leave

Bereavement Leave

Mecklenburg County allows time away from work for the death of an immediate family member. Employees may take up to 24 consecutive work hours paid leave.

Vacation Leave

Vacation leave begins accruing on the first day of employment. The accrual rate is based upon years of service. Employees who do not use sick leave or leave without pay for 7 consecutive pay periods earn an additional 4 hours of vacation.

Vacation Accrual Rate

<u>Years of Service</u>	<u>Days per Year</u>
0-1	10
2-4	12
5-9	15
10-14	18
15-19	21
20 +	24

At the end of each calendar year, employees may carry a maximum of 30 days vacation into the New Year, and any excess leave over 30 days will be rolled into the employee's accumulated sick leave balance.



You need to Know

Coverage for Eligible Family Members

County employees may cover eligible family members by paying a bi-weekly payroll deducted premium. Eligible family members include:

- Your legally married spouse
- Your biological/foster/adopted child/ren to age 19 or to age 26 if the child is a full time student and unmarried.
- Your stepchild/ren to age 19 or to age 26 if the child is a full time student and unmarried and if the child/ren live with you in a parent-child relationship.

Do you have a Change in your Family and/or Financial Situation?

What types of changes can I make throughout the year?

Add or drop dependent coverage, based on a qualifying event (such as marriage, birth of a child or dependent has reached maximum age or student ineligibility requirement).

Change or update your life insurance beneficiary information

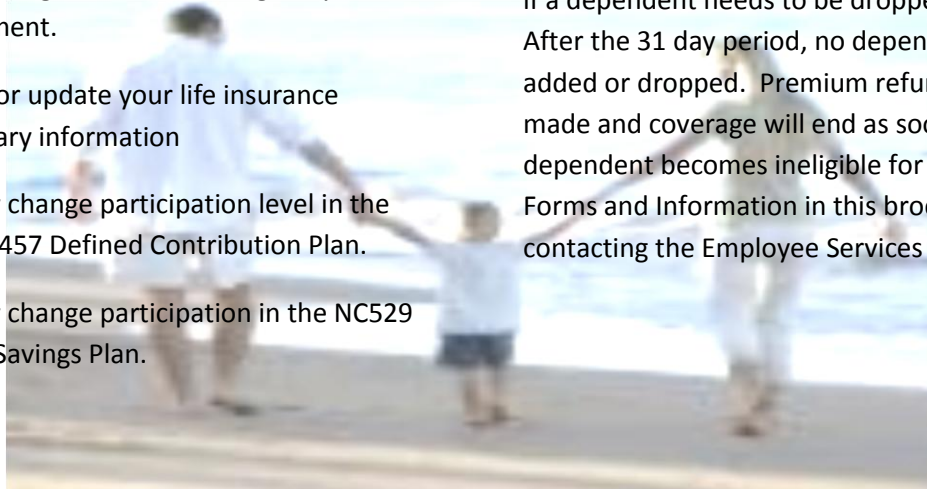
Enroll or change participation level in the 401K or 457 Defined Contribution Plan.

Enroll or change participation in the NC529 College Savings Plan.

Family Status Change

It is the employee’s responsibility to advise the Employee Services Center within 31 days of a qualifying family status change (birth/adoption, marriage/divorce, graduation of child, death, etc) if a dependent needs to be dropped or added.

After the 31 day period, no dependents can be added or dropped. Premium refunds will not be made and coverage will end as soon as the dependent becomes ineligible for coverage. See Forms and Information in this brochure for contacting the Employee Services Center.



Need More Information?



Benefit forms and information are available to County employees on the intranet (MeckWeb). Customer Service is available by phone at our Employee Services Center at (704) 432-6947 and by email at myHR@mecklenburgcountync.gov.

Mecklenburg County Employee Benefits

STATEMENT OF EQUAL EMPLOYMENT OPPORTUNITY AND AMERICANS WITH DISABILITIES ACT

It is the policy of the County to provide equal employment opportunity without regard to race, color, religion, sex, age, disability, or national origin.

Discrimination against any person in the recruitment, examination, appointment, training, promotion, retention, discipline, or any other aspect of personnel administration because of religious belief, affiliation, race, national origin, ancestry, or other factors is prohibited.

Discrimination on the basis of age, sex, or physical disability is prohibited except where age, sex, or disability requirements constitute a bona fide occupational qualification necessary for performance of the essential functions of a job.

The County will comply with the Americans with Disabilities Act (ADA) which prohibits discrimination on the basis of a disability. The County will make reasonable accommodations upon requests of otherwise qualified disabled applicants and employees to enable them to perform essential job functions except where such accommodations may constitute an unreasonable hardship or jeopardize the health and safety of employees, applicants or the general public.

The employee benefits program is administered by Mecklenburg County
Human Resources Department
700 East 4th Street
Charlotte, NC 28202

Employees Services Center:
(704) 432-6947 phone
(704) 336-2731 fax
www.charmeck.org

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