

2024 EMPLOYEE BENEFITS GUIDE NORFOLK REDEVELOPMENT AND HOUSING AUTHORITY



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NORFOLK REDEVELOPMENT AND HOUSING AUTHORITY (NRHA) EMPLOYEE BENEFITS GUIDE 2024

WELCOME

The **Norfolk Healthcare Consortium (NHC)** offers a comprehensive benefits package to eligible employees of the **City of Norfolk (the City)**, **Norfolk Public Schools (NPS)**, and **Norfolk Redevelopment and Housing Authority (NRHA)**. The benefits include: medical, dental and vision insurance, Flexible Spending Account (FSA), Health Savings Account (HSA), legal services, an Employee Assistance Program (EAP), and an award winning wellness program. The benefit plan year runs from January 1 through December 31.

Several types of coverage options are available; for each, NRHA may pay a portion of the employee's cost, up to a specified amount. Details of the plans offered, including eligibility requirements, coverage, and fees are described in this Employee Benefits Guide. This guide will assist you and your family in making benefits choices that best meet your needs.

NRHA employees may also be eligible for additional benefits *beyond* those offered by the NHC, including basic life insurance, optional life insurance, retirement programs, paid leave programs, and disability benefits. Please contact Robin Chester at rchester@nrha.us or call 757-314-2674.

Visit <https://www.norfolkhealthcareconsortium.com> for more information. **Select the NRHA Employer icon button for complete details.**

If you have any questions or need assistance, please contact the NHC Benefits team via email: HRBENEFITS@norfolk.gov or phone: 757-664-4486, Option 1, 8:30 a.m. – 5:00 p.m., Monday through Friday.

Note: In all events, the terms of the various benefit plans as set forth in their respective summary plan documents or underlying policy will govern in the case of discrepancy. The Norfolk Healthcare Consortium reserves the right to modify benefit terms during the plan year as it deems necessary.

WHAT'S NEW FOR 2024

- **HSA1500 Deductible Increase (IRS Update)**
 - Plan name change HSA1600
 - In network deductible is \$1600 for individual and \$3200 for family
 - Out of network deductible is \$3200 for individual and \$6400 for family”
- **Effective 10/1/2023, employees in the POS and PPO plans will have \$0 Copays for LiveHealth Online (LHO) Virtual Appointments. For employees in the HSA plan LiveHealth Online (LHO) Virtual Appointment visits will be \$0 cost, after deductible.** Appointments include:
 - [LiveHealth Online Medical \(PCP\)](#)
 - [LiveHealth Online licensed Social Worker/Therapist](#)
 - [LiveHealth Online Psychology](#)
 - [LiveHealth Online Psychiatry](#)
- **[\\$0 Cost for some Preventative Medications](#)**
 - \$0 cost preventative medications for certain conditions such as: diabetes, mental health, heart health, and more
- **Anthem LiveHealth Online Programs**
 - [Building Healthy Families](#) – all-in-one program can help your family grow stronger whether you’re trying to conceive, expecting a child, or raising young children
 - [Online Dermatology](#) – 24/7 visit with a dermatologist online
 - [Healthy Sleep Program](#) – Having trouble sleeping? Visit with a sleep specialist.
 - [Virtual Doctor Visits 24/7](#) - See a doctor anytime, anywhere — no appointment needed.
- **Delta Dental –**
 - [Right Start 4 Kids®](#) –This program provides 100% coverage for diagnostic, preventive, basic and major services, with no deductible, when you visit an in-network dentist for children aged 12 and under. Orthodontic (braces) services are not included.
 - [Special Health Care Needs benefit](#) - This program provides services for those members and dependents who qualify for special health care needs for intellectual or developmental disabilities. No age limit, up to (4) cleanings per year and additional exam benefits.
- **[Rewards Credit Program](#)–**
 - **New Added Activity!** Track Your Steps (use the conversion chart on the My Rewards page to convert your physical activity to steps). Earn up to 30 points (1 point per 10,000 steps or other activity tracked). Reach 120 points to save \$120 on your health insurance premium for next plan year.

WHAT DIDN'T CHANGE IN 2024

- **No increase in insurance premium rates for medical, dental, vision, legal plan and identity theft protection.**
- Anthem Health Guides are still there to help you answer questions about medical and pharmacy benefits, claims and billing, finding a doctor, and accessing Anthem programs and resources. (8am – 8pm Mon – Fri): 833-988-2030.
- Anthem’s Sydney Mobile App is still where you can see your claims, the Rewards Credit Program, access your digital ID card, and schedule virtual appointments.
- LabCorp is still the in-network provider to be used for lab services.

ELIGIBILITY FOR BENEFITS

Employee Eligibility

NRHA offers core benefits for both its full-time and part-time employees. NRHA pays a portion of full-time employee medical and prescription insurance costs. Part-time employees working an average of more than 30 hours a week may be eligible for medical and prescription benefits and pay the full cost of any medical and insurance plan selected. Details of the plans offered, including specific eligibility requirements, coverage, and fees are provided later in this guide. Any questions concerning health care coverage may be referred to NHC Benefits Team: HRBenefits@norfolk.gov, 757-664-4486 (Select Option 1). Materials outlining the benefits of each plan are distributed annually to each eligible employee during an open enrollment period.

Coverage for employees begins the first of the month on or after date of hire. Each newly hired employee receives a *New Hire Benefit email* from the NRHA Human Resources department during onboarding. Employees must complete the appropriate forms for the benefits they select and return them to the NRHA Human Resources within the 14 days of your employment. Insurance coverage for newly hired employees begins the first of the month on or after your date of hire. Example #1: If your hire date is 10/8, your coverage will begin on 11/1. Example #2: If your hire date is 2/1, your coverage will begin on 2/1.

Dependent Eligibility for Benefits

If you are adding a dependent for the first time, you will be required to provide the NHC Benefits team proof of your relationship to the dependent prior to the enrollment deadline (e.g., a marriage license to prove status of a spouse or a birth certificate to prove a parental relationship of a dependent child). [For more information click here.](#) Dependents eligible for coverage in Norfolk Healthcare Consortium (Norfolk Public Schools) benefit plans include:

- Your legal spouse
- Your dependent children up to age 26 (includes stepchildren, and legally adopted children).
- Your dependent child, regardless of age, provided he or she is incapable of self-support due to a mental or physical disability. Proof of disability (handicapped status) must be furnished upon request.

Per IRS regulations, Social Security Numbers (SSNs) are required for all persons (employees and dependents) who wish to be covered by any benefit plan offered. Failure to provide SSNs may result in coverage being dropped or denied.

Dependent Children Turning Age 26

Adult children become ineligible for medical and other benefits at age 26. To properly cancel your adult child's benefits, you must notify NHC Benefits Team within **30 days** of your child's 26th birth date.

If your child needs to remain on a benefit plan due to mental/physical disability, you must contact the NHC Benefits team within **30 days** of your child's 26th birth date to request continued enrollment. You must furnish proof of disability (handicapped status) must be furnished upon request.

Divorce

If you divorce your covered spouse, you must notify the NHC Benefits team within **30 days** of the effective date of the divorce. A copy of the divorce decree showing the effective date must be submitted to the NHC Benefits team within 30-days of the divorce decree. You are required to remove your former spouse from coverage under your benefits, but they may be eligible for coverage under the plan under COBRA continuation coverage.

The Plan will provide Dependent coverage to a child if it is required to do so under the terms of a Qualified Medical Child Support Order (QMCSO). You can request a copy of the Plan's procedures for determining whether an order is a QMCSO by calling or writing to the Benefits Department. Coverage will be effective on the first day of the month following the date on which an Order is deemed qualified by the Norfolk Healthcare Consortium.

[For more information click here.](#) For questions contact the NHC Benefits team via HRBenefits@norfolk.gov or 757-486-4486, Option 1.

ENROLLMENT

How to Enroll

To enroll, log onto Sage HR Employee Self Service (ESS): <https://ess.nrha.us>

- STEP 1: Go to Sage **Employee Self Service (ESS)**
- STEP 2: Log on with your User Name and Password
 - If you don't know your password, click on "Username and Password Help"
 - If you are not previously registered, click on "First Time Users Register Here"
- STEP 3: In the left column, under **Benefits** click on **Open Enrollment**
- STEP 4: Select your benefit plans and coverages (*NOTE: You must decline any plans you are not selecting*)
- STEP 5: You may print a summary of your selections

PLEASE NOTE: Newly hired employees have 14 days after date of hire to make their benefit elections. During annual enrollment employees must make elections and or changes during the annual enrollment period which is usually in October of each year.

When Your Coverage is Effective

Provided that all enrollment requirements are completed on time, your coverage for medical, dental, vision and most other benefits becomes effective at the following times:

- New Hire – First of the month on or after date of hire.
- Annual Enrollment – January 1
- Qualifying Life Event (QLE) – First of the month following approval of the change; date of the event for birth, adoption, or placement for adoption [For more information about QLEs CLICK HERE](#)

Premiums are deducted during the month of coverage.

Annual Benefits Enrollment

Each year employees may change, add, or drop medical, dental, and/or vision coverage for themselves and their dependents and opt in or out of the various plan options during the designated open enrollment period. Changes are not permitted at any other time unless there is an authorized qualifying change in family status. The effective date for benefit open enrollment changes is January 1 through December 31 of the following year. Annual benefits enrollment period is usually in October. Any changes made during Annual Enrollment will start on the first payroll in January.

Effective Date of Healthcare Coverage Other Than New Hire/Open Enrollment

Except for additions due to childbirth, adoption or foster care, family status changes in health care coverage are generally effective on the first of the month after the qualifying life event. Premiums in arrears will be taken from the next available pay period.

Changes – Qualifying Life Event (QLE)

Once an enrollment period closes, you cannot make any changes to your benefits until the next enrollment period unless you experience a QLE. QLEs are governed by the IRS regulations of Section 125 Cafeteria Plans. You must request a change and submit documentation within 30 days of the QLE date. Except in cases of birth or adoption, changes generally become effective the first of the month following the date the request (with supporting documentation) is approved. Approved enrollment due to birth or adoption becomes effective as of the date of the event. During a QLE, you can only change tiers within the elected benefit. Per IRS regulations, Social Security Numbers (SSNs) are required for all persons (employees and dependents) who wish to be covered by any benefit plan offered. Failure to provide SSNs may result in coverage being dropped or denied. [For more information about QLEs CLICK HERE.](#)

Employees anticipating a coverage change must contact the Robin Chester at NRHA within 30 days and submit supporting documentation (marriage license, birth certificate, etc.) to: NRHA's Human Resources Assistant Robin Chester at: rchester@nrha.us .

Special Benefit Enrollment, Changes, and Termination Cases

Newborn Children

Newborns are covered effective the date of birth. For a child born between the first and the fifteenth of the month the premium will be for the entire month if the child is added to the employee's coverage. For example, if a child is born between October 1 through October 15, the employee must pay October health insurance premium for the child.

There is no premium charge for a birth month for a child born after the fifteenth of a month, and subsequently added as a dependent. So, if a child is born between October 16 and October 31, the employee is not charged for the newborn in October. The employee will pay for the dependent starting with November's premium. A spouse or other dependents may also be added at this time.

Spouse/dependent coverage changes

Employees must drop spouse/dependents from their health care when they are no longer eligible (i.e., child is no longer a dependent, divorced spouse, etc.). If this is not done, the employee will be responsible for payment of any claims paid by a health care plan after the date of ineligibility.

Termination of medical, dental, and vision coverage

When an employee leaves the NRHA due to retirement or other type of employment separation, their medical, dental, and/or vision coverage ends the last day of that month in which they separate employment. For example, if the employee leaves employment on December 10, their last day of medical, dental, and vision coverage is December 31.

If an employee is placed on pre-disciplinary leave, their medical, dental, and/or vision plans will stay in effect if the employee maintains their premium payments. If an employee's employment is terminated, they would still be offered the opportunity to continue their benefits under federal COBRA rules. Flexible Benefit Administrators will inform the employee of their legal right to continue benefits under federal COBRA rules at the time of the employee's separation.

Retirement

If the retirement date is January 1 (with the last day worked being December 31 in the previous month), your last day of coverage will be January 31. See the Retiree Health Information section for more details.

MEDICAL COVERAGE

NRHA offers medical coverage through the Anthem HealthKeepers network. Your employer pays 80 - 85 percent of your medical insurance claims while you, the employee, pay 15- 20 percent depending on the plan you choose. Refer to the Comparison of Medical Plan Benefits In-Network Coverage chart on the next page for details.

Anthem offers highly trained associates and personal support guides to help employees with their health care needs. The aim of the **Anthem Health Guides** is to help you manage an illness or injury, save you unnecessary medical costs, and improve your overall well-being. They can help you connect with the right resources, stay on top of the screenings and tests you need, and find doctors. [Click here to view the Anthem Programs Booklet.](#) **Anthem Health Guides - 1-833-988-2030** – 8 am-8 pm Monday – Friday.

Complete medical coverage details: <https://www.norfolkhealthcareconsortium.com/652/MedicalPharmacy-Services-2024>

COMPARISON OF MEDICAL PLAN BENEFITS IN-NETWORK COVERAGE

Below is a comparison of medical plan benefits based on in-network coverage. This chart does not replace the medical plan document.

PLAN MEDICAL SERVICES	HSA 1600 w/ Health Savings Account	POS 1000	POS 750	PPO 750 OOA (for out of state employees)
General Deductible (individual/family)	\$1,600/\$3,200 *	\$1,000/\$2,000	\$750/\$1,500	\$750/\$1,500
Out of Pocket Maximum (individual/family)	\$5,500/\$11,000	\$5,500/\$11,000	\$5,500/\$11,000	\$5,500/\$11,000
Preventive Care	Covered at 100%	Covered at 100%	Covered at 100%	Covered at 100%
PCP Office Visit	Covered at 80% ^{AD}	\$30 Copayment	\$25 Copayment	\$25 Copayment
Specialist Visit	Covered at 80% ^{AD}	\$60 Copayment	\$50 Copayment	\$50 Copayment
LiveHealth Online Office Visit	Covered at 100% ^{AD}	\$0 Copayment	\$0 Copayment	\$0 Copayment
Maternity	Covered at 80% ^{AD}	\$350 Global Copayment**	\$350 Global Copayment**	\$350 Global Copayment**
Inpatient Care	Covered at 80% ^{AD}	Covered at 80% ^{AD}	Covered at 85% ^{AD}	Covered at 85% ^{AD}
Outpatient Surgery	Covered at 80% ^{AD}	Covered at 80% ^{AD}	Covered at 85% ^{AD}	Covered at 85% ^{AD}
Emergency Room	Covered at 80% ^{AD}	Covered at 80% ^{AD}	Covered at 85% ^{AD}	Covered at 85% ^{AD}
Urgent Care Center	Covered at 80% ^{AD}	\$50 Copayment	\$50 Copayment	\$50 Copayment
Preventive Vision (one per calendar year)	\$15 Copayment for adults; no copayment for pediatric exam	\$15 Copayment for adults; no copayment for pediatric exam	\$15 Copayment for adults; no copayment for pediatric exam	\$15 Copayment for adults; no copayment for pediatric exam
OON^I Deductible	\$3,200/\$6,400	\$2,000/\$4,000	\$2,000/\$4,000	\$2,000/\$4,000
OON OOP^{II} Maximum	\$7,000/\$14,000	\$7,000/\$14,000	\$7,000/\$14,000	\$7,000/\$14,000
OON Coinsurance	Covered at 50% ^{AD}	Covered at 50% ^{AD}	Covered at 50% ^{AD}	Covered at 50% ^{AD}

* This plan has a non-embedded deductible. If you cover dependents (other family members), only the family deductible applies. The family deductible may be met in its entirety by one family member, or by a combination of family members.

** Global Copayment = Includes prenatal care, delivery, and postpartum services. Copayment is in addition to any applicable inpatient hospital coinsurance.

AD = After Deductible **OON** = Out-of-Network **OON OOP** = Out-of-Network Out-of-Pocket Maximum

HEALTH INSURANCE COSTS

Rates are shown per pay period on the tables below:

NORFOLK CONSORTIUM / ANTHEM HSA 1600				
TIER	Total Monthly Premium	Full Time Employee Biweekly Premiums		
		No Premium Discounts	One Premium Discount	Two Premium Discounts
Employee	\$745.10	\$21.68	\$16.68	\$11.68
Employee + Spouse	\$1713.74	\$153.93	\$148.93	\$143.93
Employee + Children	\$1,193.65	\$80.40	\$75.40	\$70.40
Family	\$2,607.87	\$259.84	\$254.84	\$249.84

NORFOLK CONSORTIUM / ANTHEM POS 1000				
TIER	Total Monthly Premium	Full Time Employee Biweekly Premiums		
		No Premium Discounts	One Premium Discount	Two Premium Discounts
Employee	\$759.97	\$28.26	\$23.26	\$18.26
Employee + Spouse	\$1,747.94	\$169.06	\$164.06	\$159.06
Employee + Children	\$1,217.48	\$90.94	\$85.94	\$80.94
Family	\$2,659.90	\$282.86	\$277.86	\$272.86

NORFOLK CONSORTIUM / ANTHEM POS 750				
TIER	Total Monthly Premium	Full Time Employee Biweekly Premiums		
		No Premium Discounts	One Premium Discount	Two Premium Discounts
Employee	\$781.34	\$37.71	\$32.71	\$27.71
Employee + Spouse	\$1,797.08	\$190.80	\$185.80	\$180.80
Employee + Children	\$1,251.71	\$106.09	\$101.09	\$96.09
Family	\$2,734.69	\$315.95	\$310.95	\$305.95

Two Health Premium Discounts Are Available:

- Rewards Credit premium discount: \$5 biweekly (\$120 per year).
- No tobacco use premium discount: \$5 biweekly (\$120 per year).

Rewards Credit Health Insurance Premium Discount

The Live Well Program offers an annual incentive that provides a health insurance premium reduction credit of \$120 for employees enrolled in the Anthem medical plan. This program runs from 1/1/2024 through 8/31/2024. Anyone hired before 8/31/2024 who completes the requirements, will be eligible for the premium credit reduction the following year. Anyone hired after 9/1/2024 can participate in the next program that starts 1/1/2025.

No Tobacco Use Premium Discount

NRHA provides a premium discount of **\$10** per month (**\$120** per year) to employees who certify that they do not use tobacco. Free smoking cessation programs are available.

PLEASE NOTE: Health care premiums are pre-tax for an entire month, without proration. Example: October premiums are paid with the October payroll deductions.

PHARMACY DRUG COVERAGE

NRHA offers pharmacy drug coverage through Anthem/CarelonRx to eligible employees. Enrollment in a group health insurance plan through Anthem automatically enrolls you in pharmacy drug coverage through Anthem/CarelonRx. If you need to fill a prescription you have plenty of choices how and where to get your prescription drugs, including pharmacies or convenient home delivery.

The plan covers most preventative drugs at \$0 cost to the employee. For a list of \$0 preventative drugs [CLICK HERE](#).

If enrolled under HSA1600 health insurance plan, certain preventative medications will have the deductible waived and are available for NO copay. If your medication is not on the preventative list, you will have to reach your deductible before the copay is applied. See table below. For information on preventative medications [CLICK HERE](#).

For all three plans, the Prescription Drug benefits fall under three categories/tiers. Please see the chart below for additional information.

PRESCRIPTION COPAY AMOUNTS		
DRUG TYPE	HSA1600 (after deductible) POS1000 and POS750 30-Day Retail	HSA1600 (after deductible) POS1000 and POS750 90-Day Mail Order
Preventative (If applicable based on NHC enhanced drug list)	Deductible waived, standard copay applies	Deductible waived, standard copay applies
Generics (Tier 1)	\$10	\$20
Plan Preferred Medication (Tier 2)	\$30	\$60
Non-Preferred Medications (Tier 3)	\$60	\$120

For more information on pharmacy coverage call **833-988-2033** or visit [anthem.com](https://www.anthem.com).

Retail Prescriptions

You can purchase your prescribed medications and maintenance medications for 30 or 90-day supplies through a participating retail pharmacy. If purchasing a 90-day supply, it will only be 2 times your copay. Example: If your medication copay is \$10 for a 30-day prescription, you can get a 90-day for a \$20 copay instead of a \$30 copay.

Prescription Home Delivery

Anthem/CarelonRx Home Delivery offers a convenient, cost-effective way to order prescribed long-term, maintenance medications for direct delivery to your home with free standard shipping. Medications obtained through home delivery are limited to a 90-day supply. To maximize your savings, please ask your doctor to write your prescription for a 90-day supply with refills up to one year. Example: If your medication copay is \$10 for a 30-day prescription, you can get a 90-day for a \$20 copay instead of a \$30 copay.

Specialty Prescriptions

If you have a complex health condition that requires specialty drugs for your treatment – drugs that may need special handling or that you may get by injection or infusion are filled through the CarelonRx Specialty Pharmacy. **877-849-5129**

DENTAL COVERAGE

NRHA, through the Norfolk Healthcare Consortium, offers dental insurance through Delta Dental of Virginia: (deltadentalva.com) through payroll deduction at a group rate **fully paid by the employee**. There are three plan options available: High Option, Low Option and Exclusive Provider Organization (EPO). All three plans include the enhanced program features outlined below.

- **[Right Start 4 Kids®](#)** –This program provides 100% coverage for diagnostic, preventive, basic and major services, with no deductible, when you visit an in-network dentist for children aged 12 and under. Orthodontic (braces) services are not included.
- **[Special Health Care Needs benefit](#)** - This program provides services for those - members and dependents who qualify for special health care needs for intellectual or developmental disabilities. No age limit, up to (4) cleanings per year and additional exam benefits.
- **[Healthy Smile, Healthy You](#)** – This program provides individuals with certain medical conditions one additional cleaning and exam beyond the plan’s ordinary limit per benefit period. The medical conditions include: diabetes; high-risk cardiac conditions; pregnancy; cancer being treated via radiation and/or chemotherapy; weakened immune system and kidney failure or dialysis. In addition, patients with the following conditions are eligible for a fluoride application beyond the age limitation of the policy: pregnancy; undergoing cancer treatments; weakened immune systems; kidney failure or dialysis. Enrollment in this program is required to gain access to these benefits.
- **[Prevention First](#)** – This program allows members to stretch their annual benefit maximum dollars. Regular, preventive dental visits and preventive diagnostic services (typically x-rays, exams, and cleanings) will not count against the member’s annual benefit maximum amount within a plan year, freeing up the annual maximum so it may be used for other covered services. Enrollment in this program is automatic for all members.
- **[TeleDentistry.com](#)** – A safe and effective way to receive care and avoid the emergency room. Virtual visits through our partnership with <http://www.TeleDentistry.com> allow you access to care when you have a dental emergency; need access to a dentist after hours; need to consult with a dentist without leaving home or while traveling. Enrollment in this program is automatic for all members; however, you will need to create an online account the first time you utilize this benefit.

DENTAL PLAN COMPARISON

There are three plan options available: High Option, Low Option and Exclusive Provider Organization (EPO).

Plan features	Delta Dental EPO™		Delta Dental PPO Plus Premier™ High Plan		Delta Dental PPO Plus Premier™ Low Plan	
Annual deductible	No deductible		\$50 per patient per calendar year; \$150 per family unit		\$50 per patient per calendar year; \$150 per family unit	
Annual benefit maximum	\$3,000/member/calendar year		\$1,500/member/calendar year		\$1,000/member/calendar year	
Benefits	Plan covers* approximately	You pay* approximately	Plan pays	You pay	Plan pays	You pay
• Diagnostic and preventive services (exams, cleanings, X-rays)	See copay schedule	See copay schedule	100% plan allowance	0% plan allowance	100% plan allowance	0% plan allowance
• Basic services (fillings, oral surgery, endodontics, periodontics)	See copay schedule	See copay schedule	80% plan allowance (after deductible)	20% plan allowance (after deductible)	50% plan allowance (after deductible)	50% plan allowance (after deductible)
• Major services (crowns, bridges, prosthetics and implants)	See copay schedule	See copay schedule	50% plan allowance (after deductible)	50% plan allowance (after deductible)	50% plan allowance (after deductible)	50% plan allowance (after deductible)
• Orthodontic services	50% plan allowance <i>Covers both adult and child ortho</i>		50% plan allowance <i>Covers child ortho only to age 19</i>		Not covered under this plan	
Lifetime orthodontic maximum	\$2,000 lifetime maximum per member		\$1,500 lifetime maximum per member		Not applicable	
Dentist network	Choose any Delta Dental PPO™ dentist or specialist only. No out of PPO network coverage. No need to select a primary care dentist.		Choose any dentist or specialist, but your out of pocket cost may be lower with a Delta Dental PPO™ or Delta Dental Premier® participating dentist.		Choose any dentist or specialist, but your out of pocket cost may be lower with a Delta Dental PPO™ or Delta Dental Premier® participating dentist.	
Benefit/membership services	800.237.6060					

*Refer to the attached Delta Dental EPO Description of Benefits and Copayments for specific covered services and co-payments.

A predetermination of benefits is recommended for dental services that may cost more than \$250. Your dentist can file the predetermination for you. It will let you know before dental services are performed what your share of the cost will be and if the services are covered under your plan.

DENTAL COSTS

TIER	DENTAL PLAN COSTS					
	EPO		LOW OPTION		HIGH OPTION	
	Employee Pays Monthly	Employee Pays Biweekly	Employee Pays Monthly	Employee Pays Biweekly	Employee Pays Monthly	Employee Pays Biweekly
Employee Only	\$22.46	\$11.23	\$22.94	\$11.47	\$33.42	\$16.71
Employee + Child	\$35.92	\$17.96	\$36.64	\$18.32	\$65.40	\$32.70
Employee + Child(ren)	\$53.76	\$26.88	\$50.40	\$25.20	\$88.64	\$44.32
Employee + Spouse	\$44.86	\$22.43	\$45.84	\$22.92	\$66.80	\$33.40
Employee + Family	\$71.74	\$35.87	\$71.96	\$35.98	\$120.02	\$60.01

Find more dental coverage information HERE: <https://www.norfolkhealthcareconsortium.com/656/Dental-2024>

VISION COVERAGE

NRHA offers vision insurance through Blue View Vision to eligible employees through payroll deduction at a group rate **fully paid by the employee**. Call 866-723-0515 for benefit questions or provider locations. **Premiums are deducted during the month of coverage**. Routine eye exam (once every calendar year) is a \$10 copay. The table below lists the employee premium cost for the vision insurance plan:

YOUR BLUE VIEW VISION PLAN BENEFITS	IN-NETWORK	OUT-OF-NETWORK	FREQUENCY
Routine Eye Exam			
A comprehensive eye examination	\$10 Copay	Reimbursed Up To \$50	Once every calendar year
Eyeglass Frames			
One pair of eyeglass frames	\$150 Allowance, then 20% off any remaining balance	Reimbursed Up To \$70	Once every calendar year
Eyeglass Lenses (<i>instead of contact lenses</i>)			
One pair of standard plastic prescription lenses			
<ul style="list-style-type: none"> • Single vision lenses • Bifocal lenses • Trifocal lenses • Lenticular lenses 	\$15 Copay \$15 Copay \$15 Copay \$15 Copay	Reimbursed Up To \$50 Reimbursed Up To \$75 Reimbursed Up To \$100 Reimbursed Up To \$125	Once every calendar year
Eyeglass Lens Enhancements			
<i>When obtaining covered eyewear from a Blue View Vision provider, you may choose to add any of the following lens enhancements at no extra cost</i>			
<ul style="list-style-type: none"> • Transitions Lenses (for a child under age 19) • Standard polycarbonate (for a child under age 19) • Factory Scratch Coating 	\$0 Copay \$0 Copay \$0 Copay	No allowance when obtained out-of-network	Same as covered eyeglass lenses
Contact Lenses (<i>instead of eyeglass lenses</i>)			
<i>Contact lens allowance will only be applied toward the first purchase of contacts made during a benefit period. Any unused amount remaining cannot be used for subsequent purchases in the same benefit period, nor can any unused amount be carried over to the following benefit period.</i>			
<ul style="list-style-type: none"> • Elective conventional (non-disposable) OR • Elective disposable OR • Non-elective (medically necessary) 	\$150 Allowance, then 15% off any remaining balance \$150 Allowance (no additional discount) Covered in full	Reimbursed Up To \$105 Reimbursed Up To \$105 Reimbursed Up To \$210	Once every calendar year

Employee premium costs for the vision insurance plan are:

TIER	VISION PLAN COSTS	
	Employee Pays Monthly	Employee Pays Biweekly
Employee Only	\$5.30	\$2.65
Employee + 1 Child	\$9.30	\$4.65
Employee + Child(ren)	\$10.62	\$5.31
Employee + Spouse	\$9.30	\$4.65
Employee + Family	\$15.44	\$7.72

Find more vision coverage information HERE: <https://www.norfolkhealthcareconsortium.com/657/Vision-2024>

SPENDING ACCOUNTS

The Norfolk Healthcare Consortium offers a Healthcare Flexible Spending Account (HCFSA), a Dependent Care Flexible Spending Account (DCFSA), and a Health Savings Account (HSA) that are designated tax-free through the Internal Revenue Service (IRS) for qualified health plans and eligible Dependent daycare expenses.

The HCFSA and HSA accounts allow you to set aside pre-tax (tax-free) dollars for eligible out-of-pocket medical, dental, and vision expenses. You cannot be enrolled in both the Healthcare FSA and the HSA, so it is important to evaluate both options and decide which is best for you. Another advantage of having a Flexible Spending Account is that it can be used for yourself, your Spouse, or any other eligible Dependents, even if they are not covered by your health plan.

Flexible Spending Accounts (FSA)

The **Flexible Spending Account** for eligible employees administered by Flexible Benefit Administrators allows you to save on health care expenses using pretax dollars to pay for out-of-pocket eligible expenses. There is no waiting to access the full amount of your annual election amount. It is available to you on the first day of the plan year. Balances remaining up to \$640 will be carried over from 2024 into 2025. Participation is optional, but once elected, it cannot be changed unless you experience a qualifying event, such as marriage, divorce, birth of a child, etc. Please Note: The IRS does not release updates to contribution limits until mid to late November. The 2024 Flexible Spending contribution limit is \$3,200 (\$120 minimum). For details on Flexible Spending Accounts refer to the **Flexible Benefit Plan Employee Guide** [HERE](#). [For IRS eligible services and products CLICK HERE](#). (Use the dropdown menu to make a selection).

Eligible expenses include, but are not limited to:

- Copays
- Deductibles
- Prescription drugs
- Other out-of-pocket costs for medical, dental and vision services not paid by insurance
- Certain over-the-counter Drugs and medicines. Please contact Flexible Benefit Administrators regarding whether a specific over-the-counter Drug or medicine is reimbursable through your Flexible Spending Account

Visit the Flexible Benefits Administrators website: www.flex-admin.com

Dependent Care Flexible Spending Account (DCFSA)

The Norfolk Healthcare Consortium provides Dependent Care Flexible Spending Accounts (DCFSA) for eligible employees through Flexible Benefit Administrators to help you save on eligible dependent care expenses by using pre-tax dollars so you can work.

The Dependent Care FSA allows you to save on day care expenses using pre-tax dollars. When you enroll in the benefit, you set aside a portion of your pay each payroll before taxes are deducted. You decide how much to contribute, based on what you estimate you would need for the year. As funds are accrued in your Dependent Care FSA account, you can spend whenever you choose during the Plan Year. You can accomplish this by submitting a claim and opting to have the payment sent to yourself or to your provider. With the Dependent Care FSA, you can only get reimbursement for the amount that is currently available in your account at the time of your request. DCFSA has no carryover available. Any money left in the account at the close of the plan year is forfeited.

Eligibility: Dependent child under the age of 13 who lives with you for more than half of the year; or be a spouse or tax dependent who resides in your home a minimum of eight (8) hours a day and who requires day-to-day living assistance.

Examples of Eligible Expenses

- Daycare centers
- Elder care
- Day camps
- Preschool
- After school care
- Nanny / au pair

Examples of Ineligible Expenses

- Meals
- Overnight camps
- Diapers
- Education expenses, including kindergarten
- Incidental fees, such as activity fees and field trips

Contribution Limits (As set by the IRS)

The maximum amount you can elect to contribute is the smallest of the following:

- \$5,000 (\$120 minimum) – per couple if married and filing federal taxes jointly
- \$2,500 – if married and filing a separate federal tax return
- Your spouse's annual earned income

Please Note: The IRS does not release updates to contribution limits until mid to late November. For details on Dependent Care Flexible Spending Accounts refer to the **Flexible Benefit Plan Employee Guide** [HERE](#). [For IRS eligible services CLICK HERE](#). (Use the dropdown menu to make a selection).

Reimbursements

You have until March 31 after the plan year ends to submit all required information for reimbursement. The services must be provided within that plan year. Failure to submit required documentation requested by Flexible Benefit Administrators by the deadline, will cause your account to be temporarily suspended until the documentation is provided. Once the required information is provided, your account will be released for further usage.

Visit the Flexible Benefits Administrators website for more information: www.flex-admin.com

Health Savings Account (HSA)

NRHA, through the Norfolk Healthcare Consortium, offers a Health Savings Account (HSA) administered by HealthEquity to those employees enrolled in the HSA 1600 health plan. An HSA is a triple tax-advantaged (the funds are not taxed when put into the HSA, earnings through interest and investing are not taxed, and the money is not taxed when it is spent as long as the funds are used for qualified medical expenses) medical savings account that can be used for paying eligible medical, dental, and vision expenses.

To see a full list of qualified medical expenses, visit: <https://www.healthequity.com/hsa-qme>. Funds contributed to the HSA are not subject to federal income tax at the time of deposit. Your financial contribution to your HSA will be withdrawn through payroll deduction and placed in your HSA account. If there is an increase from the current limits and you would like to take advantage of the increase/maximum, please contact HRBenefits@norfolk.gov for assistance.

To be eligible for an HSA:

- You cannot be covered by any other health plan that is not a qualified plan (including spouse's insurance)
- You cannot be enrolled in any part of Medicare or Tricare
- You cannot have accessed VA medical plan benefits in the past 90 days
- You cannot be claimed as a dependent on another person's tax return

If eligible to enroll, NRHA will contribute the following to your Health Savings Account:

- If health insurance starts January 1st to June 30th - **\$500** for an individual / \$1,000 for 2 or more covered on the plan
- If health insurance starts July 1st to December 31st - **\$250** for an individual / \$500 for 2 or more covered on the plan

NRHA will deposit the funds into your HSA account by the first pay period in January. This money can be used to offset your deductible.

Amounts elected will be divided over the 26 pay periods in the year and deductions will begin on the 1st payroll in January. Terminating employees will still be able to utilize what's left in the account; however, contributions will no longer be allowed unless they continue to meet the eligibility requirements noted above. The account may also be subject to a monthly administrative fee following termination based on account balance, and a letter will be mailed to account holders confirming associated changes.

All funds remaining in the account will rollover from year to year, just like a 401K account. You choose whether to pay qualified medical expenses from the account or to save the money for future medical expenses. The HSA is portable and you can maintain the account even if you change employment or medical coverage.

The annual contribution limits include any funds contributed by your employer. You must make sure that your contribution calculations include that figure so that you do not exceed the IRS guidelines. The contribution limits are based on the calendar year. As noted by federal law, the annual contribution limits are:

2024 HSA contribution limit (employer + employee)	Self-only:	\$4,150
	Family:	\$8,300
2024 HSA catch-up contributions (age 55 or older)		\$1,000

For more information visit: www.healthequity.com

WELLNESS PROGRAMS

Live Well (Wellness) Program

The NHC Live Well Program takes a comprehensive approach to support employees in seven focus areas of life: Physical Wellbeing, Emotional Wellbeing, Occupational, Connection, Rewards, Growth, and Resiliency. You can access on demand webinars/courses, tools and resources and details on the Live Well Program, Featured Wellbeing Campaigns, and Employee Assistance Program (EAP) resources. <https://www.norfolkhealthcareconsortium.com/611/Wellness>

Live Well Rewards Credit Incentive - Medical Insurance Premium Discount

The Live Well Program offers an annual incentive that provides a medical insurance premium reduction of \$120 for employees enrolled in the Anthem medical plan. Participating employees have the opportunity to choose from a variety of options to improve their health and earn 120 points for the Rewards Credit incentive.

The Rewards Credit Incentive runs from 9/1/2023 through 8/31/2024.

- Points will start to accumulate on 9/1/2023. It can take up to 45 days from the date of your preventive exam or flu shot to show as completed as claims-based activities rely on when your provider submits your claim to Anthem.
- Login or register at Anthem.com or the [Sydney Health mobile app](#). Locate the My Rewards section of the My Health Dashboard to start earning your 120 points to receive a premium reduction of \$120.
- Anyone who completes the requirements by the 8/31/2024 deadline will be eligible for the premium reduction in 2025.

The Rewards Credit is earned when an employee reaches a total of 120 points by completing a variety of options shown on the next page. Using the Anthem.com or the Sydney Health mobile app (Anthem wellness platform via My Rewards) to complete their actions. Find Frequently Asked Questions (FAQs) [HERE](#).

For more information visit the NHC Live Well Rewards Credit page:

<https://www.norfolkhealthcareconsortium.com/632/Rewards-for-Anthem-Medical-Plan-Particip>.

Choose from the Healthy Activities below to earn 120 points.

REWARDS CREDIT HEALTHY ACTIVITIES	POINTS (Total points must reach 120)
ANNUAL PRIMARY CARE PHYSICIAN (PCP) WELLNESS EXAM	50
ANNUAL WELL WOMAN EXAM	50
PROSTATE CANCER SCREENING (PSA)	50
PUBLIC SAFETY ANNUAL PHYSICAL (for Norfolk Police Department and Norfolk Fire Rescue sworn employees only through NowCare) NOTE: This activity is self-reported via My Rewards and is not claims-based	50
COMPLETE THE MYHEALTH CHECK (health profile assessment)	50
COLORECTAL EXAM (Colonoscopy or fecal test Fit Kit)	30
MAMMOGRAM	30
TRACK YOUR STEPS (use the conversion chart on the My Rewards page to convert your physical activity to steps) 1 point per 10,000 steps or other activity tracked	Up to 30 points
FLU SHOT	20
READ FIVE ARTICLES OR WATCH FIVE VIDEOS (topics on: exercise, healthy eating, sleep, family health and more)	20
<p>Regular checkups and exams can help you stay healthy and catch problems early, when they are easier to treat:</p> <ul style="list-style-type: none"> • Learn how to use your preventive care benefits - Stay on top of your health brochure. • Learn the 5 Steps to help you prepare for your virtual annual preventive care (wellness) visit. 	

Questions? Call an Anthem Health Guide at **833-988-2030** or chat with one on [Anthem.com](https://www.anthem.com) or the [Sydney Health Mobile app](#).

EMPLOYEE ASSISTANCE PROGRAM (EAP)

ComPsych Guidance Resources

Everyone faces changes, stress, or challenges now and then. NHC offers an Employee Assistance Program (EAP) that can help you with personal issues, planning for life events, or simply managing daily life that can affect your work, health, and family.

Our EAP partner, ComPsych® GuidanceResources® offers confidential counseling, expert guidance and assistance to the employee and household members. As an employee, you receive five (5) free in-person or virtual sessions per issue per year for you and your immediate family.

ComPsych® GuidanceResources® provide additional support, resources, and information for personal and work-life issues, anxiety, grief, child, and elder care, and more. GuidanceResources® is available 24/7/365. Trained masters level clinicians will listen to your concerns and refer you to in-person or virtual counseling and other resources. For more information, call 1-844-266-0707 or go to www.guidanceresources.com. (Company Web ID: Norfolk)

<https://www.norfolkhealthcareconsortium.com/624/Employee-Assistance-Program-EAP>

LEGAL SERVICES

Legal Resources offers two plans, a comprehensive Legal Services Plan and an Identity Theft Protection Plan.

Legal Plan

Legal Resources provides 100% coverage for you, your spouse, and qualified dependents for the most often needed legal services. You have access to a network of top-rated law firms in your area and nationwide, with coverage in all 50 states. Whether your legal matter is an everyday legal need, or unexpected event, you, and your family are protected from the high cost of attorney fees. You pay no attorney fees for all Fully Covered Services, which include will preparation, traffic court, real estate matters, divorce, billing disputes, and more! Pre-existing legal matters and less common legal needs are also covered at a 25% discount.

LEGAL BENEFITS RATE (Premium will be deducted the month the benefits start)	
Per Pay Period	Rate Per Month
\$8.50	\$17.00

Identity Theft Protection

Legal Resources Identity Theft Protection Plans feature 24/7 monitoring of your personal and financial information, including any information on the dark web, real time alerts that allow you to act before damage occurs, fully managed restoration, meaning we do all the work for you, and up to \$1 million of identity theft insurance to cover any out-of-pocket expenses incurred in the event of an incident.

IDENTITY THEFT PROTECTION BENEFITS RATE		
LEVEL OF COVERAGE	Per Pay Period	Rate Per Month
Employee Only	\$2.00	\$4.00
Family (includes employee, spouse, and an unlimited number of children up to age 25)	\$5.50	\$11.00

For more information: Call 1-800-728-5768 or go to: www.legalresources.com

OTHER BENEFITS

Basic Life Insurance

NRHA offers **basic life insurance** through Virginia Retirement System (and administered by Securian Financial, a financial services company) without charge to eligible employees. The Basic Life Insurance benefit is equal to your annual salary, rounded to the next highest thousand and then doubled. Coverage is automatic upon employment for eligible employees paid for by the employer. No medical examination is required. The plan carries a conversion option upon termination of employment for reasons other than retirement. For more information visit: <https://www.varetire.org/benefits-and-programs/benefits/life-insurance/basic-group-life-insurance>

Colonial Life Insurance

NRHA offers whole life insurance options via Colonial Life Accident and Insurance Company.

- If you have questions on how to obtain life insurance through NRHA, contact April Brumley at 757-624-8628 or email abrumley@nrha.us.

Optional Life Insurance

NRHA offers **Optional Life** Insurance through Securian Financial (Minnesota Life) to you, your spouse and your dependent children at an age-based group rate fully paid by you. Optional Life Insurance is available to newly hired employees without Evidence of Insurability for Options 1-8 coverage if selected within the first 31 days of hire. Employees can also enroll/make changes at any time during the year. See below for Evidence of Insurability (EOI) rules. You can apply for, add, decrease, or terminate Optional Life Insurance at any time during the year but you cannot do it through PeopleSoft. **A VRS-39 form** must be submitted for new enrollments and a **VRS-39a form** must be submitted to change or to terminate coverage. Enrollment and updates to your Optional Life Insurance can also be made on the web by visiting <https://myvrs.varetire.org/login/>. Once logged in/registered, click My History, Life Insurance, and then the Visit Securian button.

Your spouse and/or dependent's coverage ends when your coverage ends. Your spouse coverage ends also if there is a final divorce decree between you and your spouse. Optional Life coverage for minor children ends when a child turns age 21, or age 25 if he or she is a full-time student. Optional Life also ends when a child marries or becomes self-supporting. Dependents are eligible only if the employee elects optional coverage as well. Your spouse can apply for coverage equivalent to your annual salary for Options 1-4, and 2x your annual salary for Options 5-8.

Evidence of Insurability (EOI)

Evidence of insurability (proof of good health) is not required if members enroll in **amounts up to the lesser of 4x salary or \$400,000 (the guaranteed issue amount)** in the Optional Group Life Insurance Program within 31 days of their employment date. If members participate in the optional plan, they may add dependents within 31 days of a qualifying event, such as marriage or the birth or adoption of a child, without evidence of insurability.

Evidence of insurability (**EOI form**) is required if:

- Members apply after 31 days from their employment date.
- Members wish to add their spouse or dependent child to their coverage after 31 days from their employment date or a qualifying event.
- Members wish to purchase more than \$400,000 for themselves.
- Members wish to increase their optional life insurance coverage for themselves or their spouse.
- The spouse's insurance amount is more than half the member's creditable compensation.

For more information contact Securian Life at: P.O. Box 1193, Richmond, VA 23218-1193 or call 1-800-441-2258.

2024 OPTIONAL LIFE ACCIDENTAL DEATH AND DISMEMBERMENT OPTIONS

Type of Coverage	Option 1	Option 2	Option 3	Option 4
Employee	1X Salary	2X Salary	3X Salary	4X Salary
Spouse	.5 X Salary	1X Salary	1.5X Salary	2X Salary
Child(ren)	\$10,000	\$10,000	\$20,000	\$30,000

2024 OPTIONAL LIFE ACCIDENTAL DEATH AND DISMEMBERMENT OPTIONS

Type of Coverage	Option 5	Option 6	Option 7	Option 8
Employee	5X Salary	6X Salary	7X Salary	8X Salary
Spouse	2X Salary	2X Salary	2X Salary	2X Salary
Child(ren)	\$30,000	\$30,000	\$30,000	\$30,000

2024 OPTIONAL LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT SPOUSE RATE

Employee Age	Employee/Retiree/Spouse – Cost Per \$1,000 Coverage Per Month
34 and Under	\$0.05
35-39	\$0.06
40-44	\$0.08
45-49	\$0.12
50-54	\$0.20
55-59	\$0.31
60-64	\$0.54
65-69	\$1.02
70+	\$2.06

2024 SUPPLEMENTAL LIFE ACCIDENTAL DEATH AND DISMEMBERMENT CHILD(REN) RATE

Option	Coverage Amount	Rate
Option 1	\$10,000	\$0.80
Option 2	\$10,000	\$0.80
Option 3	\$20,000	\$1.60
Option 4	\$30,000	\$2.40

Life Insurance Beneficiaries

A beneficiary or beneficiaries can be named by you, the employee, to receive the death benefit to be paid at your death. It is important that you frequently review and refresh your life insurance beneficiaries. **You can choose different beneficiaries for basic and optional Life and you can change your beneficiaries at any time by logging in to <https://myvrs.varetire.org/login/> OR completing a paper Designation of Beneficiary form and submitting it to the address on the form.**

If all your named beneficiaries predecease you, or if you do not name a beneficiary, the death benefit will be paid in the following order:

- First, to your legal spouse
- Second, if no surviving legal spouse, to your children and descendants of deceased children, per stirpes
- Third, if none of the above, to your parents
- Fourth, if none of the above, to the duly appointed executor or administrator of your estate

- Fifth, if none of the above, to your other next of kin entitled under the laws of your domicile at the time of death.

In the order of precedence, “children” means all children except stepchildren, foster children, minors who happen to be living with you and individuals raised by you as a “child”.

Please note that the employee is the beneficiary of the spouse and children’s optional life coverage.

For more information visit: <https://employers.varetire.org/plans-and-benefits/benefits/life-insurance/optional-group-life-insurance.php>

LEAVE WITHOUT PAY INSURANCE COVERAGE

An employee who is on approved LWOP status due to Family Medical Leave Act (FMLA) for illness or injury may be eligible to remain on the medical, dental, vision, short/long term disability, optional group life insurance, and legal resources plans as long they remain active employees and maintain their monthly premiums. Employees should contact the NRHA’s Human Resources Department for information on how to make payment arrangements. If the employee does not pay their monthly premiums, their insurance will be canceled retro to the last month paid for and they cannot re-enroll until the next open enrollment period.

Employees on military leave or any leave other than sick leave, are responsible for paying the entire premium (NRHA portion + Employee portion) for their health insurance. Employees on Military leave will be able to re-enroll upon their return to work if their benefits are cancelled while on leave. It is the employee’s responsibility to contact the NHC Benefits team to re-enroll under their benefits.

Active employees receiving Workers' Compensation payments are required to make premium payment arrangements with the NHC Benefits team if such premiums are not deducted from their NRHA paycheck.

Flexible Spending Account or Health Savings Account participants will continue to be able to be reimbursed from their accounts. Upon return from LWOP the Flexible Spending Account or Health Savings Account deduction amount will automatically be recomputed to provide the employee with the annual reimbursement account total requested unless the employee takes action allowed under the qualifying family status change provisions to modify this amount.

Contact Robin Chester at NRHA **757-314-2674** or email rchester@nrha.us.

SHORT TERM & LONG TERM DISABILITY

For information about Short Term and Long Term Disability plans contact Robin Chester: rchester@nrha.us or call 757-314-2674

RETIREMENT PROGRAMS & VOLUNTARY RETIREMENT OPTIONS

For information about retirement plans contact Robin Chester: rchester@nrha.us or call 757-314-2674

RETIREE HEALTH CARE

NRHA retirees and their spouses who are enrolled in group health insurance at the time they retire may continue group health insurance until qualified for Medicare at age 65. It is the employee's responsibility to contact the NHC Benefits team if they wish to continue coverage at the time they retire. If a retiree becomes eligible for Medicare before the age of 65, they will need to contact the NHC Benefits team HRBenefits@norfolk.gov to cancel their health insurance.

When a covered retiree reaches the age of 65 or is eligible for Medicare, NRHA health benefits will no longer be available to them. Retiree spouses may continue until the beginning of the month in which they reach age 65. COBRA will be offered to retiree and spouses and dependents once they become Medicare eligible. They can remain on the dental or vision past the age of 65.

Retirees forfeit their rights to enter the Retiree benefit plans if they fail to enroll within 30 days of their retirement date.

A retiree may drop the retiree medical, dental, or vision plan at any time, but in doing so forfeits their enrollment right and they will not be able to re-enroll.

Retirees are required to pay for their premiums by VRS retirement deduction if their retirement check is sufficient to allow the entire deduction. Otherwise, participating retirees must pay by check prior to the first of the month of coverage. Retirees who fail to pay their premium by the last day of the month preceding the first of their coverage month will be given a five (5) calendar day grace period.

Premium conversion (pre-tax payment of health care premiums) is not an available option for retirees. All other rules are the same as for active employees including qualifying family status changes and the provision that covered individuals must live or work in the service area of the health care plan they select.

If a retiree lives outside the service area, their only health care option would be the Out of Area PPO750 plan.

As a retiree, you will receive an annual benefit statement, to remind you of the benefits you currently have, and to inform you of any rate or plan changes for the upcoming plan year. If there are any premium changes, they will be reflected on your December 31st retirement check.

For questions contact Robin Chester: rchester@nrha.us or call 757-314-2674.

REQUIRED BENEFITS NOTICES (COMPLIANCE DOCUMENTS)

The required compliance documents listed below are available on our Norfolk Healthcare Consortium website in the Important Information section: <https://www.norfolkhealthcareconsortium.com>

VENDOR CONTACTS

Anthem Blue Cross and Blue Shield (Medical)	www.anthem.com	833-988-2030
Anthem/CarelonRx (Pharmacy)	https://www.anthem.com/ms/pharmacyinformation/home.html	833-988-2030
Pre-Enrollment Hotline and Anthem Health Guides		833-988-2030
Delta Dental Insurance (Dental)	www.deltadentalva.com	800-237-6060
Blue View Vision Insurance (Vision)	www.anthem.com	866-723-0515
Health Savings Accounts (HSA)	www.healthequity.com	866-346-5800
Flexible Spending Accounts (Flexible Benefit Administrators)	https://fba.wealthcareportal.com/	800-437-3539 757-340-4567
COBRA (Flexible Benefit Administrators)	https://cobrapoint.benaissance.com/	800-437-3539 757-340-4567
ComPsych (Employee Assistance Program)	www.guidanceresources.com	844-266-0707
Legal Resources (Legal Services and Identity Theft Protection)	www.legalresources.com	800-728-5768 757-498-1220
Basic Life Insurance (Securian Financial/Minnesota Life)	https://www.varetire.org/benefits-and-programs/benefits/life-insurance or email rbo@securian.com	800-441-2258
Optional Life Insurance (Securian Financial/Minnesota Life)	https://www.varetire.org/benefits-and-programs/benefits/life-insurance or email rbo@securian.com	800-441-2258
Colonial Life (Optional Life Insurance)	Suzanne Brosemer Suzanne.Brosemer@ColonialLife.com	757-651-8413

VENDOR CONTACTS (CONTINUED)

Virginia Retirement System (VRS)	https://www.varetire.org	
Voya deferred compensation (457 Plans and ROTH IRA)	www.voya.com Bob Giorgi robert.giorgi@voyafa.com	800-262-3868 800-295-9680



★★★★★
LIVE WELL
★★★★★
NORFOLK HEALTHCARE CONSORTIUM
★★★★★