



# Employee Benefits Guide

January 1, 2024 - December 31, 2024

IMPORTANT INFORMATION ENCLOSED

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# Welcome

Welcome to the Clerk of the Circuit Court Volusia County Benefits Guide for the 2024 plan year. Inside, you will find all the information you need to evaluate benefits for you and your dependents.

Please review the information carefully and contact our Benefits Team with any questions. Florida Health Care Plans (FHCP), Clerk of the Circuit Court's health insurance carrier, is based locally in Central Florida and has been servicing this community since 1974. FHCP is also an affiliate of Florida Blue.

FHCP's Mission: To provide our members with health care and related services through dedicated employees and service partners who manage both the quality and cost of health care.

There have been no changes to the Dental, Vision, Life and Disability product offerings. Dental will continue to be managed by Humana, and Vision will continue to be managed by MetLife. USAble will continue providing our life insurance benefits, and Hartford will manage the Disability products.

These fiscally responsible decisions were made with you in mind!

If you have questions, please contact one of our Benefits staff members:

**Human Resources:**

386-822-5753

**[Humanresources@clerk.org](mailto:Humanresources@clerk.org)**

# Benefits Eligibility

Clerk of the Circuit Court employees regularly scheduled to work at least 30 hours per week are benefits eligible.

## Your Eligible Dependents Include

- Your spouse
- Your children, stepchildren, legally adopted children, or children in your guardianship up to age 26 (Medical, Dental and Vision)
- Dependent Children aged 27-30 must satisfy the following requirements (Medical Only)
  - Unmarried and does not have a dependent;
  - A Florida resident or full-time or part-time student;
  - Not enrolled in any other health coverage policy or plan;
  - Not entitled to benefits under Title XVIII of the Social Security Act unless the child is a handicapped dependent child.
- Your children up to 19 (25 if a full-time student- Dep. Life)

## New Hires/Newly Eligible

New hires or newly benefits-eligible employees are eligible for coverage starting on the first day of the month following the date of hire.

## Changing Your Benefits Outside Of Open Enrollment

The benefits you elect during the 2024 benefits plan year will remain in effect through December 31, 2024. By law, you can only make changes to your coverage during the year if you experience a qualifying life event and notify Benefits within 31 days.

## Qualifying Life Events

A qualifying event is a personal event that may require you to either add or remove coverage for yourself and/or your dependents. These events include:

- Marriage, divorce, or legal separation
- Birth or adoption of a dependent child
- Death of a dependent spouse or child
- Gain or loss of coverage for you or your eligible dependents
- Reaching age 26 for dependent children

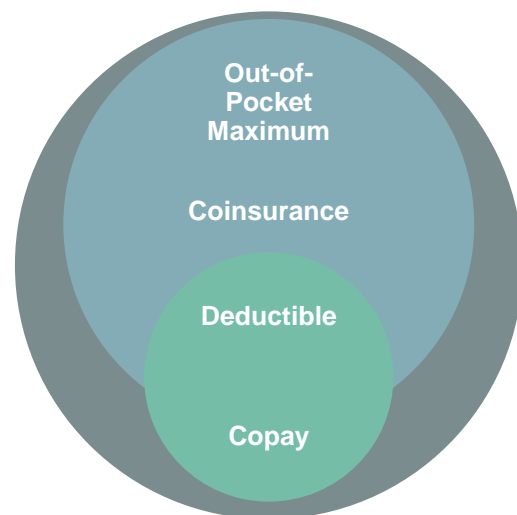
## Important Deadline For Qualifying Event Changes

You must make any coverage change within 31 days of the qualifying event. Report this change to Human Resources with as much information as possible within the 31-day deadline.

**You must include documentation to substantiate your qualifying event. If you miss the deadline or do not provide the supporting documentation, changes will not be approved.**

# Definitions

- **Accidental Death and Dismemberment (AD&D):** Insurance that is a rider to a life insurance policy that covers the accidental death or dismemberment of the insured.
- **Coinsurance:** Your share of the costs of a covered health care service, calculated as a percent of the allowed amount for that service, usually paid after the deductible has been satisfied.
- **Copay:** A fixed amount you pay for a covered health care service, usually when you receive the service.
- **Deductible:** The amount you owe for covered health care services before your health insurance begins to pay.
- **Dismemberment:** Typically, the AD&D policy pay a percentage for the loss of a limb, partial or permanent paralysis, or the loss of use of specific body parts, such as the loss of sight, hearing or speech.
- **Health Maintenance Organization (HMO):** A plan that provides comprehensive medical services within its network, which typically covers a particular geographic area, and features no coverage for services obtained outside the network.
- **In-network:** Doctors, clinics, hospitals and other providers with whom the health plan has an agreement to care for its members. Health plans cover a greater share of the cost for in-network health providers than for providers who are out-of-network.



# Definitions

- **Life insurance:** A contract between an insurer and a policyholder in which the insurer guarantees payment of a death benefit to named beneficiaries upon the death of the insured.
- **Out-of-network:** Treatment received from doctors, clinics, hospitals and other providers who are not in network. A health plan may cover these costs, but covered employees will pay more out-of-pocket to use out-of-network providers than for in-network providers.
- **Out-of-Pocket Maximum (OOPM):** The most you pay during a policy period. When you've reached your OOPM, the Plan will pay 100% of covered health care services for the remainder of the plan year. OOPM includes: deductible, coinsurance, and copays.
- **Point-of-service plan (POS):** A plan that provides coverage through a network of participating health care providers, as well as coverage outside of the network. POS enrollees receive more generous benefits for services within the network and for specialist care authorized by their primary care physicians. Benefits are less generous for care received outside the network and for self-referrals.
- **Premium:** The amount that must be paid for a health insurance plan by covered employees, by their employer, or shared by both. A covered employee's share of the annual premium is generally paid periodically, and deducted from his or her paycheck.
- **Primary Care Physician (PCP):** A physician who is usually the first health professional to examine a patient and who recommends secondary care physicians, medical or surgical specialists with expertise in the patient's specific health problem, if further treatment is needed.



# Benefits Schedule

Plan Name	HDHP/POS T11 / TF1		
Name of Network	HDHP POS (HSA)		
Calendar Year Deductible	Single (T11)	Family Individual (TF1)	Family Combined (TF1)
Individual	\$2,500	\$3,200	N/A
Family	N/A	N/A	\$6,400
Annual Out-of-Pocket Maximum Includes deductible, copays, coinsurance)			
Individual	\$4,000	\$6,900	N/A
Family	N/A	N/A	\$13,800
Coinsurance (Coins) (Amount paid after deductible is met)			
You pay.....	30%		
Physician Services			
Office Visit	Deductible + Coinsurance		
Specialist	Deductible + Coinsurance		
Chiropractic Care	Deductible + Coinsurance		
Adult and Child Wellness Exams	<u>100% Covered</u>		
Hospital Services			
Inpatient Hospital Per Admission	Deductible + Coinsurance		
Emergency Room	Deductible + Coinsurance		
Urgent Care	Deductible + Coinsurance		
Diagnostic Services			
<b>Call Member Services to locate FHCP Contracted Facilities</b>			
Independent Facility – Lab (e.g. Blood Work)/X-ray & Ultrasounds	Deductible + Coinsurance		
Independent Facility – Advanced Imaging (CT, PET, MRI)	Deductible + Coinsurance		
Outpatient Hospital Facility - X-Ray & Ultrasounds	Deductible + Coinsurance		
Outpatient Hospital Facility – Diagnostic Services (CT, PET, MRI)	Deductible + Coinsurance		
Prescription Drugs			
Retail (1 month supply)	FHCP	Walgreens - (After FHCP hours)	
Calendar Year Deductible Applies	Yes	Yes	
Preferred Generic	\$ 3 Copay	\$15 Copay	
Non Preferred Generic	\$10 Copay	\$15 Copay	
Preferred Brand	\$30 Copay	\$35 Copay	
Non-Preferred Brand	\$55 Copay	\$60 Copay	
Preferred Specialty	15% Coinsurance	N/A	
Non-Preferred Specialty	25% Coinsurance	N/A	
Mail Order (3 month Supply)	\$6 / \$27 / \$87 / \$162 Copay	N/A	
Non-Network			
Calendar Year Deductible	\$5,000	\$5,000 (\$10,000 per family)	
Out of Pocket Max	\$6,000 per person	\$8,000 (\$16,000 per family)	
Coinsurance	50%	50%	

# Health Savings Account

If you enroll in the FHCP HDHP T11/TF1 Plan and meet all of the below requirements, you have the option of opening a Health Savings Account with Optum Bank. For open enrollment 2024, If you enroll in the FHCP HDHP T11/TF1 plan and meet all of the below requirements, you must open a Health Savings Account (HSA) with Optum Bank to receive the Clerk's contribution as scheduled below. Throughout the year you may take advantage of pre-tax savings by requesting your own contributions be deducted from each pay check. You are able to change your own deduction at anytime during the year by filling out the Direct Deposit Authorization form with either you change, add, delete request and send it to Human Resources. Do you already have an HSA from another employer? For administrative convenience, an employer can use any one bank exclusively to make payroll deposits. However, you, as the employee and owner of the HSA money, can move that money to another (HSA) if you so desire.

## HDHP-WARNING REGARDING NON-CREDITABLE COVERAGE

**WARNING: The Clerk of Court High Deductible Healthcare Plan (Individual or Family plan) does not provide creditable prescription drug coverage. Are you or a covered dependent currently 65 or will be in 2024?** If so, you or a Medicare enrolled dependent could be penalized by Medicare. The HDHP is not considered to have Creditable Coverage. The Medicare Modernization Act specifies creditable coverage as prescription drug coverage that is expected to pay on average as much as the standard Medicare prescription drug coverage (Part D). During the deductible phase of the HDHP you will be exposed to full costs of prescription drugs. Please call HR to discuss your options.

### Am I eligible for an HSA?

If you can answer yes to the following questions, then you are eligible:

- Are you enrolled in a High Deductible Health Care Plan?
- Do you have no other health coverage except what is permitted by the IRS (Publication 969)?
- Are you not enrolled in Medicare or Tricare?
- Are you not claimed as a dependent on someone else's tax return?

### How much can you contribute?

The IRS sets limits on how much you can contribute to your HSA each year. These limits include any money your employer adds to your account. If you are enrolled in family coverage and your spouse has individual coverage and your spouse has individual coverage, please remember that spouse contributions to their HSA will also count towards the family contribution limit.

	Individual	Family
2024	\$4,150	\$8,300

### Are you 55 or older?

You may be able to contribute an extra \$1,000 per year to help you catch up for retirement!



### Am I eligible for an HSA?

New entrants to the HDHP after open enrollment will be eligible for the Clerk of the Circuit Court contributions to the HSA after the 90-day probationary period as defined below:

January 1	\$2,000.00	July 1	\$1,000.00
February 1	\$1,833.33	August 1	\$833.33
March 1	\$1,666.67	September 1	\$666.67
April 1	\$1,500.00	October 1	\$500.00
May 1	\$1,333.33	November 1	\$333.33
June 1	\$1,166.67	December 1	\$166.67

### Benefits of an HSA

**Tax Savings** - the money contributed to your HSA through payroll deduction is pre-tax - reducing your taxable income and helping you save on taxes you pay.

**Tax-Free Spending** - the money you use from you HSA to pay for qualified medical expenses is never taxed.

**Tax-Free Earnings** - the money in the account earns interest, tax-free

**When You Retire** - you can use it to pay for certain healthcare premiums not associated with Medicare coverage

### Managing your HSA is easy

With Optum Bank you have access to your HSA whenever you need it to do things like:

- Check your balance and transaction history
- Contribute to your HSA
- Pay your healthcare bills
- Reimburse yourself for healthcare expenses

Visit [www.optumbank.com](http://www.optumbank.com) for more information





# Benefits Schedule

Plan Name	HMO T14
<b>Name of Network</b>	<b>Individual, Family or Employer HMO</b>
<b>Calendar Year Deductible</b>	
Individual	\$500
Family	\$1,500
<b>Annual Out-of-Pocket Maximum Includes deductible, copays, coinsurance)</b>	
Individual	\$3,000
Family	\$6,000
<b>Coinsurance (Coins) (Amount paid after deductible is met)</b>	
You pay.....	10%
<b>Physician Services</b>	
Office Visit	\$20 Copay
Specialist	\$35 Copay
Chiropractic Care	Deductible + Coinsurance
<u>Adult and Child Wellness Exams</u>	<u>100% Covered</u>
<b>Hospital Services</b>	
Inpatient Hospital Per Admission	Deductible + Coinsurance
Emergency Room	\$100 Copay
Urgent Care	\$50 Copay
Outpatient Surgical Facility	Deductible + Coinsurance
<b>Diagnostic Services</b>	
<b>Call Member Services to locate FHCP Contracted Facilities</b>	
Independent Facility – Lab (e.g. Blood Work)/X-ray & Ultrasounds	\$0 Copay (Lab) / \$35 Copay (X-ray)
Independent Facility – Advanced Imaging (CT, PET, MRI)	\$75 Copay
Outpatient Hospital Facility - X-Ray & Ultrasounds	Deductible + Coinsurance
Outpatient Hospital Facility – Diagnostic Services (CT, PET, MRI)	Deductible + Coinsurance
<b>Prescription Drugs</b>	
Retail (1 month supply)	<b>FHCP / Walgreens</b>
Preferred Generic	\$3 Copay / \$15 Copay
Non-Preferred Generic	\$10 Copay / \$15 Copay
Preferred Brand	\$30 Copay / \$35 Copay
Non-Preferred Brand	\$55 Copay / \$60 Copay
Preferred Specialty	15% Coinsurance / NA
Non-Preferred Specialty	25% Coinsurance / NA
Mail Order (3-month Supply) (FHCP only)	\$6 / \$27 / \$87 / \$162 Copay

# FHCP Wellness Programs

Network: Florida Health Care Plan Medical

Website: [fitFHCP](#)

Benefit	Description	Cost/ No cost associated	How to access the benefit
Extended Hours Care Centers <i>EHCC</i>	When urgent medical needs arise, visiting FHCP's Extended Hours Care Centers can save you time and money!	\$0	Website: <a href="#">List of Extended Hours Care Centers</a>  Call: FHCP Central Scheduling 386.676.7198
Dr. On Demand	See a board-certified doctor or a licensed psychologist or psychiatrist through live, face-to-face video visits from anywhere! Available 24/7, 365.	\$0 General Medicine  \$30 Behavioral Health	Website: <a href="#">Dr. On Demand</a>
Preferred Fitness Program	This program offers you and your dependents free, unlimited access to over 80 gyms and fitness facilities. We partner with a wide variety of facilities so that you can find your best fit.	No cost associated	Website: <a href="#">Gym List</a>  Contact: Brittany Hawthorne, Wellness Coordinator, 386.676.7100 ext. 6423  Email: <a href="mailto:preferredfitness@fhcp.com">preferredfitness@fhcp.com</a>
Telephonic Health Coaching	FHCP telephonic health coaching can help you with healthy lifestyle changes, that will be tailored to your goals! Coaching sessions are flexible and confidential.	No cost associated	Email us at <a href="mailto:healthcoach@fhcp.com">healthcoach@fhcp.com</a> Provide your Name, Date of Birth, FHCP Member Number, Phone Number & the best email to contact you.
Member Portal	Information you need is always available online and in our Member Portal. In addition to viewing a list of all of our doctors and providers, you can find our Preferred Fitness gym list, health education materials, and much more on our website.	No cost associated	Website: <a href="#">FHCP Member Login</a>
Diabetes and Health Education Program	FHCP offers a variety of programs and services focusing on prevention, early detection, and management of Diabetes and other conditions.	No cost associated	Call: 386-676-7133 Website: <a href="#">Diabetes and Health Education</a>
24-Hour Nurse Hotline	Speak to a skilled registered nurse to be guided through self-care or direct you to your best option for care. Available 24/7, 365!	No cost associated	Call: 1-866-548-0727
Generic Drug Savings Program	Effective June 1st, 2022, select medications are free when filled at your FHCP Pharmacy or FHCP Pharmacy Mail Order	No cost associated	Website: <a href="#">Free Pharmacy Program</a> <i>*Disclaimer* Medications listed are free of charge. Excludes Medicare plans</i>

# FHCP Resources

## WHERE TO GO WHEN YOU NEED MEDICAL ATTENTION

Your Primary Care Physician (PCP) office is your Medical Home and is the first place to call with any health care needs and questions. Your physician has your history and is often able to help you.

### PRIMARY CARE PHYSICIAN



**Reasons to see your Primary Care Physician include:**

- Chronic Conditions like:*
- Hypertension/High Blood Pressure
  - Diabetes/High Blood Sugar
  - High Lipids/Cholesterol
  - Heart Disease
  - Arthritis
  - Depression

- Acute Conditions like:*
- Headache and/or fever
  - Urinary tract infection
  - Minor injuries
  - Low back pain

- Coordination of Care*
- After Hospital, Skilled Nursing Home or Home Health Discharge
  - After ER Evaluation

- Benefits of visiting PCP*
- Low copay for most plans
  - Medical history is available
  - Established relationship with your physician and clinical staff

### DOCTOR ON DEMAND



**Reasons to use a video visit with a physician include:**

- Cough, cold or flu
- Minor strains & sprains
- Bronchitis & sinus infection
- Skin & eye issues
- Upset stomach
- Urinary tract/bladder infections
- Rashes
- Pediatric issues
- Psychological issues
- Visit with a licensed therapist

**Benefits of using Doctor On Demand:**

- Low copay and 24/7 hours
- Board certified physicians
- Licensed psychologists
- Use smartphone or tablet
- Available throughout U.S.
- Use when PCP/EHCC are unavailable to you

Download the app from the App Store on your smartphone or tablet today!

### EXTENDED HOURS CARE CENTERS



**Reasons to visit an EHCC include:**

- Acute minor trauma
- Cough, cold or flu
- Strains & sprains
- Minor allergic reactions
- Immunizations
- Low back pain
- Placement of stitches for a cut/laceration
- Removal of stitches
- Urinary tract/bladder infections

**Benefits of visiting an EHCC:**

- Multiple locations in Volusia and Flagler Counties with physicians and advanced practitioners
- WorkForce Wellness rider is accepted
- Same-day appointments
- Shorter wait time
- Significant savings over ER

*If your local FHCP Extended Hours Care Center is closed, please consider visiting the nearest FHCP participating Urgent Care Center.*

### EMERGENCY ROOM



**Reasons to visit the Emergency Room include:**

- Any life-threatening emergency
- Any severe illness or injury
- Unresponsiveness
- Chest pain
- Weakness on one side
- Inability to speak
- Spine or head injury
- Mental status change
- Difficulty breathing
- Uncontrolled bleeding
- Poisoning



# FHCP Resources

## Save Time & Money!

### *SOME REASONS TO VISIT EXTENDED HOURS CARE CENTERS*



vs.



### *SOME REASONS TO VISIT THE EMERGENCY DEPARTMENT*

- Acute minor trauma
- Cough, cold or flu
- Strains & sprains
- Minor allergic reactions
- Immunizations
- Low back pain
- Placement of stitches for a cut/laceration
- Removal of stitches
- Urinary tract/bladder infections

- Any life-threatening emergency
- Any severe illness or injury
- Unresponsiveness
- Chest pain
- Weakness on one side
- Inability to speak
- Spine or head injury
- Mental status change
- Difficulty breathing
- Uncontrolled bleeding
- Poisoning

#### **Edgewater**

239 N. Ridgewood Avenue  
386-427-4868  
Open Monday – Friday  
7 AM – 7 PM  
Saturday 8 AM – Noon

#### **Daytona Beach**

350 Clyde Morris Boulevard  
386-238-3200  
Open Monday - Friday  
7 AM – 7 PM  
Saturday 8 AM – Noon

#### **Orange City**

2777 Enterprise Road  
386-774-2550  
Open Monday - Friday  
7 AM – 7 PM  
Saturday 8 AM – Noon

#### **DeLand**

937 N. Spring Garden Ave.  
386-736-1948  
Open Monday - Friday  
7 AM – 7 PM  
(Closed Saturday)

#### **Ormond Beach**

461 Nova Road  
386-671-4337  
Open Monday – Friday  
7 AM – 7 PM  
Saturday 8 AM – Noon

#### **Port Orange**

740 Dunlawton Avenue  
386-763-1000  
Open Monday - Friday  
7 AM – 7 PM  
(Closed Saturday)

**To schedule a same-day appointment call 386-676-7198**

**For More Information regarding additional Extended Hours Care Center Locations in Volusia, Flagler, St. Johns, Brevard, & Seminole County please click here: [Extended Hours Care Centers Search](#)**

# FHCP Resources

## FREE Vision Benefit FHCP

Provided by: Florida Health Care Plans

### Florida Health Care Plans (FHCP) Annual Eye Exam

As an FHCP Member you have access to an annual eye exam. Eye care is limited to routine eye care provided by an FHCP participating optometrist. You do not need a referral to see an optometrist.

Your annual eye costs are:

- \$10 copay/exam for Eyeglasses
- \$50 copay/exam for Contact Lenses
- \$10 copay/exam for Eye Disease, Visual Disturbances, etc.

Exclusions and limitations: Eye care including but not limited to the purchase or fitting of eyeglasses or contact lenses.

Questions? Call FHCP Member Services at 386-615-4022

You can also take advantage of various vision discounts on products and services such as Lasik, eye exams, glasses and contacts through Blue365 (example below). Registering is easy! Simply visit [www.blue365deals.com](http://www.blue365deals.com) to begin enjoying your discounts!

Blue365.

PERSONAL CARE 



**EYEMED**  
\$50 Eye Exams and 35% Off Frames When Paired with Prescription Lenses


[VIEW DETAILS](#)


PERSONAL CARE 



**GLASSES.COM**  
Save 35% on Frames When Paired with Prescription Lenses

[VIEW DETAILS](#)

PERSONAL CARE 



**LASIKPLUS**  
Over \$800 Off LASIK

[VIEW DETAILS](#)

# Dental Benefits

Below is your Humana Preferred dental plan, which gives you the freedom to use in-network or out-of-network dentists. Since network providers offer reduced contracted rates, you save money by using network providers for all your dental needs. All benefits received from out-of-network dentists are subject to “reasonable and customary” fees. Any amount that exceeds the dental carrier’s “reasonable and customary” amounts is the patient’s responsibility. You can access the dental provider’s network and find a dentist near you at [www.humana.com](http://www.humana.com) and select Traditional Preferred Network or call member services at 1-800-233-4013.

Dental Services	In-Network	Out-of-Network
Calendar Year Maximum Benefit	Unlimited	
Calendar Year Deductible Individual/Family	\$25 / \$75	\$25 / \$75
<b>PREVENTIVE PROCEDURES:</b>	Deductible Waived	
Routine Exams & Cleaning (prophylaxis) – <i>3 per year</i> Fluoride Treatments – <i>through age 16</i> Bitewing X-rays Sealants – <i>through age 16</i> Periodontal Cleanings	Plan pays 100%	Plan pays 100%*
<b>BASIC PROCEDURES:</b>	Deductible Applies	
Amalgam Fillings Endodontics (Root Canals) Periodontal Surgery Stainless Steel Crowns Simple & Complex Surgery	Plan pays 80%	Plan pays 80%*
<b>MAJOR PROCEDURES:</b>	Deductible Applies	
Crowns Bridges & Dentures Implant Services	Plan pays 50%	Plan pays 50%*
<b>ORTHODONTIC PROCEDURES</b>	Deductible Waived	
Lifetime maximum - \$1,000 Child(ren) only - up to age 18	Plan pays 50%	Plan pays 50%*

See carrier benefit summaries for additional plan information.

\*Percent of reasonable & customary charges

\*\*Enrolled dependents are covered until the end of the month during which the dependent reaches age 26.

# Vision Benefits

Vision benefits is offered through Superior Vision. This plan covers eye exams, prescription lenses and frames, or contact lenses for you and your dependents when you receive services from in-network or out-of-network providers. As you can see from the table below, staying in-network cuts costs down and gives you more of a benefit.

To find a participating provider log on to [www.superiorvision.com](http://www.superiorvision.com) and access the Superior National Network.

Vision Services	In-Network	Out-of-Network
Eye Exams Frequency	\$20 Copay Once every 12 months	Reimbursed up to \$33 (MD) Once every 12 months
<b>BASIC LENSES</b>		
Frequency	Once every 12 months	Once every 12 months
Single vision	\$20 Copay	Reimbursed up to \$28
Bifocal vision	\$20 Copay	Reimbursed up to \$40
Trifocal vision	\$20 Copay	Reimbursed up to \$53
<b>FRAMES</b>		
Frequency* Benefit	Once every 24 months \$100 Allowance + 20% off balance	Once every 12 months Reimbursed up to \$46
<b>CONTACTS</b>		
Frequency* Elective Medically Necessary	Once every 12 months \$100 Allowance + 20% off balance Covered in Full	Once every 12 months Reimbursed up to \$80 Reimbursed up to \$210

\*Contacts and eyeglasses cannot be purchased in the same year

\*\*Enrolled dependents are covered until the end of the month during which the dependent reaches age 26.

# Employee Per-Paycheck Rates

<b>MEDICAL</b>		
	<b>HDHP Plan</b>	<b>HMO Plan</b>
<b>Employee</b>	\$ 0.00	\$ 51.75
<b>Employee/Spouse</b>	\$ 72.00	\$172.30
<b>Employee/Child(ren)</b>	\$ 72.00	\$172.30
<b>Family</b>	\$106.50	\$230.10

<b>DENTAL</b>	
<b>Employee</b>	\$ 0.00
<b>Employee/Spouse</b>	\$11.20
<b>Employee/Child(ren)</b>	\$15.55
<b>Family</b>	\$28.25

<b>VISION</b>	
<b>Employee</b>	\$2.61
<b>Employee/Spouse</b>	\$4.97
<b>Employee/Child(ren)</b>	\$5.23
<b>Family</b>	\$7.68



# Life and AD&D Benefits

## Basic Life and AD&D Insurance:

Life insurance protects your family or other beneficiaries in the event of your death. The death benefit helps replace the income you would have provided and can help meet important financial needs. The Clerk of the Circuit Court provides basic life insurance to our employees through **USable** at **no cost**.

Job Classifications Included	Coverage Amount
Clerk of the Circuit Court Chief Officers Managers	\$50,000
Supervisors Project Specialists Salaried Employees	\$30,000
All other Active Employees	\$15,000

## Voluntary Life Insurance

If you chose to enroll in the additional voluntary life insurance, you may insure you alone or you and your spouse. A summary of this coverage is listed in the table below, if you should have questions on this policy see your USable Certificate of Benefits or visit [www.usable.com](http://www.usable.com). Please note, all voluntary insurance is portable.

Employees have an opportunity to purchase additional Voluntary Life Insurance with **USable** for you alone, you and your spouse, and/or your dependents at a group rate (located on the next page). It includes the features of waiver of premium, accelerated life benefit, portability as described in the USable summary of coverage.

Summary of Insurance	
Guarantee Issue (under age 70)	\$200,000 (under age 70), \$0 (70 and over)
Minimum Benefit Amount	\$10,000
Maximum Benefit Amount	\$500,000 or 7x salary (whichever is less)
Increments of...	\$10,000
<b>Spouse Coverage</b> (under age 70)	
Spouse Guarantee Issue	\$30,000 (under age 70), \$0 (70 and over)
Minimum Benefit Amount	\$5,000
Maximum Benefit Amount	100% of employee amount or \$250,000 (whichever is less)
Increments of...	\$5,000
<b>Dependent Coverage</b>	
Child Guarantee Issue (6 months - 26 years)	\$10,000 (\$1,000 for children birth - 6 months)
Maximum Benefit Amount	\$10,000
Increments of...	\$5,000

# Voluntary Life Rates

## Additional Information:

- **Age reduction:**
  - 35% of original amount at age 65
  - 60% of original amount at age 70
  - 75% of original amount at age 75
- **Age-bracketed premiums:**
  - Premiums increase on plan anniversary after you enter next 5-year age group
- **Evidence of Insurability (EOI) Form**
  - Is required for employees who do not enroll during their initial eligibility period.
  - For those currently enrolled, you can increase by one increment of coverage up to the Guarantee Issue amount without EOI.

## Sample Employee Bi-Weekly Premiums

Age	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
<20	\$.027	\$0.54	\$0.82	\$1.09	\$1.36	\$1.63	\$1.91	\$2.18	\$2.45	\$2.72
20-24	\$.027	\$0.54	\$0.82	\$1.09	\$1.36	\$1.63	\$1.91	\$2.18	\$2.45	\$2.72
25-29	\$0.33	\$0.66	\$0.98	\$1.31	\$1.64	\$1.97	\$2.29	\$2.62	\$2.95	\$3.28
30-34	\$0.44	\$.088	\$1.32	\$1.75	\$2.19	\$2.63	\$3.07	\$3.51	\$3.95	\$4.38
35-39	\$0.49	\$0.99	\$1.48	\$1.98	\$2.47	\$2.96	\$3.46	\$3.95	\$4.44	\$4.94
40-44	\$0.54	\$1.09	\$1.63	\$2.18	\$2.72	\$3.27	\$3.81	\$4.36	\$4.90	\$5.45
45-49	\$0.82	\$1.64	\$2.46	\$3.29	\$4.11	\$4.93	\$5.75	\$6.57	\$7.39	\$8.22
50-54	\$1.26	\$2.51	\$3.77	\$5.02	\$6.28	\$7.53	\$8.79	\$10.04	\$11.30	\$12.55
55-59	\$2.35	\$4.70	\$7.05	\$9.40	\$11.75	\$14.10	\$16.44	\$18.79	\$21.14	\$23.49
60-64	\$3.60	\$7.21	\$10.81	\$14.42	\$18.02	\$21.63	\$25.23	\$28.84	\$32.44	\$36.05
65-69	\$6.94	\$13.87	\$20.81	\$27.75	\$34.68	\$41.62	\$48.56	\$55.50	\$62.43	\$69.37
70-74	\$11.25	\$22.50	\$33.76	\$45.01	\$56.26	\$67.51	\$78.77	\$90.02	\$101.27	\$112.52
75+	\$11.25	\$22.50	\$33.76	\$45.01	\$56.26	\$67.51	\$78.77	\$90.02	\$101.27	\$112.52

## Sample Dependent Bi-Weekly Premiums

Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
<20	\$.014	\$.027	\$0.41	\$0.54	\$0.68	\$0.82	\$0.95	\$1.09	\$1.23	\$1.36
20-24	\$.014	\$.027	\$0.41	\$0.54	\$0.68	\$0.82	\$0.95	\$1.09	\$1.23	\$1.36
25-29	\$0.16	\$0.33	\$0.49	\$0.66	\$0.82	\$0.98	\$1.15	\$1.31	\$1.47	\$1.64
30-34	\$0.22	\$.044	\$0.66	\$.088	\$1.10	\$1.32	\$1.53	\$1.75	\$1.97	\$2.19
35-39	\$0.25	\$0.49	\$0.74	\$0.99	\$1.23	\$1.48	\$1.73	\$1.98	\$2.22	\$2.47
40-44	\$0.27	\$0.54	\$0.82	\$1.09	\$1.36	\$1.63	\$1.91	\$2.18	\$2.45	\$2.72
45-49	\$0.41	\$0.82	\$1.23	\$1.64	\$2.05	\$2.46	\$2.88	\$3.29	\$3.70	\$4.11
50-54	\$0.63	\$1.26	\$1.88	\$2.51	\$3.14	\$3.77	\$4.39	\$5.02	\$5.65	\$6.28
55-59	\$1.17	\$2.35	\$3.52	\$4.70	\$5.87	\$7.05	\$8.22	\$9.40	\$10.57	\$11.75
60-64	\$1.80	\$3.60	\$5.41	\$7.21	\$9.01	\$10.81	\$12.62	\$14.42	\$16.22	\$18.02
65-69	\$3.47	\$6.94	\$10.41	\$13.87	\$17.34	\$20.81	\$24.28	\$27.75	\$31.22	\$34.68
70-74	\$5.63	\$11.25	\$16.88	\$22.50	\$28.13	\$33.76	\$39.38	\$45.01	\$50.64	\$56.26
75+	\$5.63	\$11.25	\$16.88	\$22.50	\$28.13	\$33.76	\$39.38	\$45.01	\$50.64	\$56.26

# Disability Benefits

## Short-Term Disability:

If you become disabled because of a non-occupational illness or injury and cannot work, you can be covered by the short-term disability insurance policy. Benefits can begin on the 15th day following an accident or illness. The short-term disability plan replaces up to 60% of your basic weekly earnings, with a maximum weekly benefit of \$1,000. You can receive short-term disability benefits for up to 13 weeks, **except for the birth of a child.**



**Maternity Leave – pays up to 6 weeks after the delivery, including a 14-day waiting period.**

**This benefit is provided by The Hartford. The cost of this benefit is entirely paid for by the Clerk of the Circuit Court.**

For more information, claim setup, and eligibility, please contact your Human Resources Representative.

## Long-Term Disability:

If you become unable to perform your regular job duties for an extended period of time due to sickness or accidental injury, you can be covered by the long-term disability (LTD) policy.

Your income replacement benefit would equal 60% of your basic monthly earnings. The maximum monthly benefit you can receive is \$5,000. Benefits begin after you have been unable to work for 90 days due to a covered sickness or accident and will continue to be paid for up to 2 years if you are disabled in your own occupation. If you are disabled in any occupation, benefits will be paid until the normal social security age.

Your LTD benefit will be reduced by any disability income you receive from other sources, such as Social Security, worker's compensation, and/or state disability plans, to provide you with a combined monthly benefit equal to 60% of your basic monthly earnings.

The LTD plan contains a pre-existing condition exclusion. The exclusion applies only to conditions for which medical advice, diagnosis, care or treatment was recommended or received or for which a reasonably prudent person would have sought care within the 12-month period prior to the effective date of coverage and the disability begins within 12 months of the effective date of coverage.

**The cost of this insurance is paid entirely by the Clerk of the Circuit Court.**

# Employee Assistance Program

## Emotional wellbeing and work-life balance resources to keep you at your best

SupportLinc offers expert guidance to help you and your family address and resolve everyday issues.



### In-the-moment support

Reach a licensed clinician by phone 24/7/365 for immediate assistance.



### Financial expertise

Consultation and planning with a financial counselor.



### Legal consultation

By phone or in-person with a local attorney.



### Short-term counseling

Access up to **ten (10) no-cost counseling sessions**, in-person or via video, to resolve stress, depression, anxiety, work-related pressures, relationship issues or substance abuse.



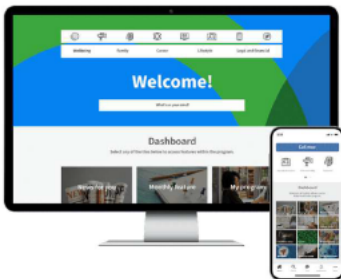
### Convenience resources

Referrals for child and elder care, home repair, housing needs, education, pet care and so much more.



### Confidentiality

Strict confidentiality standards ensure no one will know you have accessed the program without your written permission except as required by law.



### Your web portal and mobile app

- The one-stop shop for program services, information and more.
- Discover on-demand training to boost wellbeing and life balance.
- Find search engines, financial calculators and career resources.
- Explore thousands of articles, tip sheets, self-assessments and videos.

### Convenient, on-the-go support

- **Textcoach®**  
Personalized coaching with a licensed counselor on mobile or desktop.
- **Animo**  
Self-guided resources to improve focus, wellbeing and emotional fitness.
- **Virtual Support Connect**  
Moderated group support sessions on an anonymous, chat-based platform



### Start with Navigator

Take the guesswork out of your emotional fitness! Visit your web portal or mobile app to complete the short Mental Health Navigator survey. You'll immediately receive personalized guidance to access support and resources.



Download the mobile app today!



1-888-881-5462

supportlinc.com  
group code:  
clerk

# Supplemental Benefits

Aflac pays you **cash benefits** to help pay out-of-pocket medical expenses, the rent or mortgage, groceries, or utility bills—the choice is yours. There are four different levels of benefit offerings and the cost to participate is tailored to meet your individual and family needs. (Your eligible dependent children are covered up to age 26 at no additional cost.)

**TO ENROLL – Contact Holly Rorem to schedule a meeting or email [holly\\_rorem@us.aflac.com](mailto:holly_rorem@us.aflac.com)**

**Aflac is different from health insurance; it's insurance for *daily living*. Aflac pays *you* cash benefits to use as you see fit. Aflac benefits help with unexpected expenses.**

## ACCIDENT ADVANTAGE PLAN

- \$200 Initial Injury treatment benefit per accident / Follow-up visits
- \$1,000 Hospital Admission/Daily Hospital Confinement
- Ambulance Benefit / Appliance Benefit (crutches, wheelchairs, etc.)
- \$60 Wellness Benefit / Accidental Death Benefit

## CANCER CARE PLAN

- \$1,000 / \$4,000 Initial Diagnosis Benefit
- Surgical benefits / Hospital Confinement / Radiation Therapy / Chemotherapy
- \$25 / \$75 Cancer Screening Wellness/Skin Cancer Benefit & More

## HOSPITAL ADVANTAGE PLAN

- \$1,000 Hospital Confinement / Rehab \$100 per day
- \$100 Emergency Room Benefit / \$150 Diagnostic & Imaging
- \$25 Physicians Visits/Ambulance Benefit & More

## CRITICAL CARE PROTECTION PLAN

- \$7,500 First-Occurrence Benefit for Heart Attack, Stroke, Coma, Paralysis, Major 3rd Degree Burns & More
- \$300 Daily Hospital Confinement / \$800-\$1,200 Daily Intensive Care Unit
- \$250 Ambulance Benefit / \$125 Daily Continuing Care
- \$1,000 Coronary Angioplasty Benefit

**TO ENROLL: CONTACT HOLLY ROREM, our local Aflac agent  
at 386.290.6385  
[holly\\_rorem@us.aflac.com](mailto:holly_rorem@us.aflac.com)**

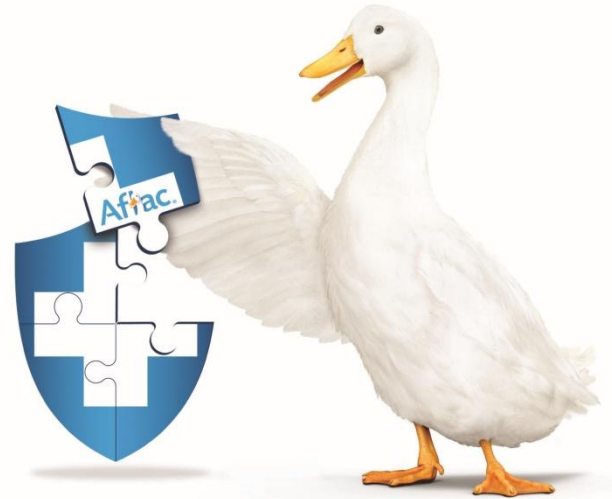
Whether it's accident, cancer, hospitalization or illness, no one will process and pay your claim faster. Our promise to you is to process and pay, not deny and delay.

# Supplemental **Benefits**

## Get help with expenses health insurance doesn't cover

### Aflac for Volusia County Clerk of the Circuit Court

Who hasn't been blindsided by an unexpected medical bill? That's why there's Aflac. We can help take care of the expenses health insurance doesn't cover, so you can take care of everything else.



### **Aflac supplemental insurance**

Our product portfolio is as broad as your needs, with individual insurance policies that help cover the expected – and unexpected – that's sure to come life's way.



**Cancer/Specified-Disease:** Aflac's cancer/specified-disease insurance policy can help you and your family better cope financially if a positive diagnosis of cancer occurs.



**Critical Illness (Specified Health Event):** An Aflac specified health event insurance policy is designed to help with the costs of treatment if you experience a covered health event.



**Hospital Confinement Indemnity:** Hospital stays are expensive. An Aflac hospital confinement indemnity insurance policy can help ease the financial burden of hospital stays by providing cash benefits.



**Accident:** Accidents happen. When a covered accident happens to you, our accident insurance policy pays you cash benefits, unless assigned otherwise, to help with the unexpected medical and everyday expenses that begin to add up almost immediately.

**To learn more, contact your Aflac agent, Holly Rorem, at [holly\\_rorem@us.aflac.com](mailto:holly_rorem@us.aflac.com) or 386-290-6385.**

# Florida Retirement System

The FRS is the primary retirement plan for employees of Florida's state and county government agencies. This benefit is available to all full-time and regular part-time employees and is effective immediately after their date of hire. Employees may choose for contributions to be made into either the Pension Plan or the Investment Plan. The Clerk of the Court makes contributions into the employee's selected retirement plan, and contributions are based on the employee's salary. Effective July 1, 2011 employees must contribute 3% of their salary on a pre-tax basis to their retirement plan.

For more information on this benefit, you can visit [www.myfrs.com](http://www.myfrs.com), call 1-866-446-9377, or see your Human Resources Department.



## Members

The following resources are available to you as an active FRS Investment Plan or Pension Plan member:

 <p>Register for a new MyFRS account.</p>	 <p>Current and past quarterly newsletters.</p>	 <p>The nubs and bubs of planning for retirement.</p>	 <p>Better understand the Investment Plan.</p>
 <p>Active member newsletters.</p>	 <p>Division of Retirement website.</p>	 <p>Advisor Service.</p>	 <p>Your FRS Investment Plan Payout Options and Special Tax Notice.</p>

# Retirement Plan

CLERK OF THE CIRCUIT COURT

## Plan now for a more comfortable retirement



You might be thinking that you have a lot of time before you need to think about retirement. You're right. But you may need to put that time to work.

### Here's why:

- ✓ Your pension might not cover all your living expenses in retirement
- ✓ You want to save more so you can enjoy your time in retirement
- ✓ The more time you have, the easier it is to fill a potential income gap

**The sooner you start, the easier it can be.**

If you wait, it could take much more per pay period to achieve the same goal.

### IT'S TIME TO GET STARTED

### DEFERRED COMPENSATION MAKES IT EASY

**Through your employer's 457(b) deferred compensation plan, you:**

Contribute to your account each pay period

Invest that money so it can potentially grow into a lot more

Use tools to monitor your account and make adjustments as needed

This material is not a recommendation to buy or sell a financial product or to adopt an investment strategy. Investors should discuss their specific situation with their financial professional.



Scan this code to enroll online.



To schedule an individual appointment, scan this code.



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NRM-9461AO.8 (01/23)



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# Contacts/Provider Directory

Benefit	Carrier	Phone #	Web
Medical	Florida Health Care Plans	1.800.352.9824	<a href="http://www.fhcp.com">www.fhcp.com</a>
Cost Estimation	Florida Health Care Plans	1.800.352.9824 x5068	Email: <a href="mailto:CEC@fhcp.com">CEC@fhcp.com</a>
Health Savings Account	Optum Bank	1.844.326.7967	<a href="http://www.optumbank.com">www.optumbank.com</a>
Dental	Humana	1.800.233.4013	<a href="http://www.humana.com">www.humana.com</a>
Vision	Guardian	1.800.507.3800	<a href="http://www.superiorvision.com">www.superiorvision.com</a>
Life	The Hartford	1.888.563.1124	<a href="http://www.thehartford.com">www.thehartford.com</a>
Disability	The Hartford	1.888.301.5615	<a href="http://www.thehartford.com/benefits/myclaim">www.thehartford.com/benefits/myclaim</a>
EAP	Curalinc	1.888.881.5462	<a href="http://supportlinc.com">supportlinc.com</a> Group Code: clerk
FRS	Florida Retirement System	1.866.446.9377	<a href="http://www.myfrs.com">www.myfrs.com</a>
Supplemental Policies	AFLAC	386.290.6385	Email: <a href="mailto:holly_orem@us.aflac.com">holly_orem@us.aflac.com</a>
Retirement Plan	Nationwide Jeff Szak	407.223.9466	<a href="mailto:szak1@nationwide.com">szak1@nationwide.com</a>

# Disclaimer

The information provided by Brown & Brown, Inc. and/or its affiliates (“Company”) in this Guidebook is advisory. Separate plan documents explain each benefit in more detail, and the various benefits are controlled by the language of the plan documents. Benefits may be modified, added, or terminated at any time, at the Company's discretion, or by the insurance company. This information is provided for general information purposes only and should not be considered legal, tax, accounting or other professional advice or opinion on any specific facts or circumstances. Readers are urged to consult their legal counsel, tax or other professional advisor concerning any legal, tax or related questions that may arise. Any tax information contained in this communication (including any attachments) is not intended to be used, and cannot be used, for purposes of (i) avoiding penalties imposed under the U. S. Internal Revenue Code or (ii) promoting, marketing or recommending to another person any tax-related matter. The Company assumes no liability whatsoever in connection with the use of such information or documents.





*This Benefit Guide provides a brief description of plan benefits. For more information on plan benefits, exclusions, and limitations, please refer to the Plan documents or contact the carrier/administrator directly. If any conflict arises between this Guide and any plan provisions, the terms of the actual plan document or other applicable documents will govern in all cases. Benefits are subject to modification at any time.*