



**HRD**

HUMAN  
RESOURCES  
DEPARTMENT

# CITY OF AUSTIN

## 2025 Employee Benefits Guide

*Our Benefits Revolve Around You*

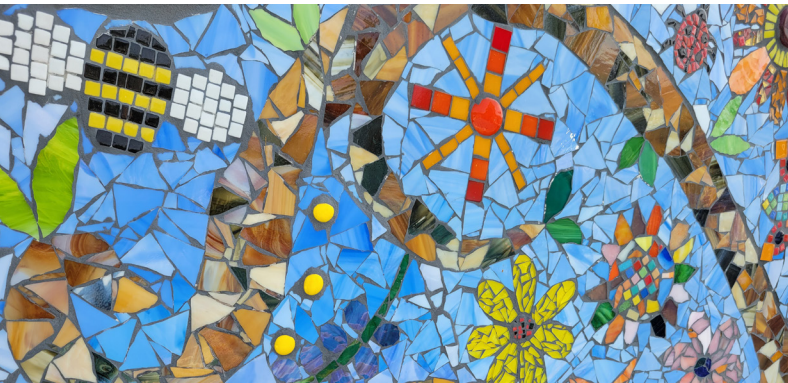






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# CONTACT INFORMATION

## City of Austin Human Resources Department Employee Benefits Division

Benefits staff are available by phone or in person to discuss your benefit questions. For your convenience, please make an appointment before visiting our office.

**Phone Number: 512-974-3284**

**Email: [Benefits.HRD@austintexas.gov](mailto:Benefits.HRD@austintexas.gov)**

**Fax Number: 512-974-3420**

**Office Hours:** Monday–Friday, 8:00 a.m.–5:00 p.m.

**Office Location:** 505 Barton Springs Road, Suite 600

### Online Resources

Resources are available at [CitySpace](#), the City’s intranet website, or on the Internet at [austintexas.gov/benefits](http://austintexas.gov/benefits). Scan the QR code for easy access to the Employee Benefits website.

**HRD** HUMAN  
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# BENEFITS GUIDE INFORMATION

City of Austin employees have access to benefits approved by the City Council each year as part of the budget process. The benefits and services offered by the City may be changed or end at any time. These benefits are not a guarantee of employment with the City.

This Guide is designed to help you understand your benefits and assist you in making your enrollment decisions. Your rights are overseen by each Plan. The terms of the Plan and detailed coverage information are included in the document made available by the Plan, which may be a plan document, evidence of coverage, certificate of coverage, contract, etc.

**In the case of a conflict between information presented in this Guide and the Plan, the Plan’s terms take over.**

## City Benefits

The City is concerned for the health, welfare, and safety of its employees and is committed to providing cost-effective, sustainable benefits that assist employees in being physically and mentally healthy. The benefits offered in this document require employees to assume responsibility for the choices they make and to be informed on how to use their benefits effectively.

The City will search for other areas of benefits to the degree where they fill a need of a major portion of the workforce and to the degree they can be provided cost-effectively and efficiently on a group basis.

## Administration and Consumerism

The overall administration of the benefits program is re-evaluated and revised periodically to ensure it is simple, efficient, cost-effective, and satisfies overall goals. Since rising health care costs affect both the City and its employees, the City will continue to study new coverage options that help control health care costs. The program is designed to be cost-effective, for both the short term and the long term.

Employee contributions are required to help finance the cost of parts of the program.

## Employee Communications

The Human Resources Department publishes newsletters to educate and inform employees about human resources-related issues. It is important for employees to take time to review these publications to avoid missing important information.

- ◆ The Monday Morning Briefing (MMB) is emailed weekly to Human Resources staff in all departments and includes timely information about upcoming meetings, events, and other important HR related topics. To view the MMB, visit <https://cityspace.austintexas.gov/Departments/Departments/Human-Resources/Monday-Morning-Briefing> on CitySpace.
- ◆ CityNews is an online weekly newsletter published by the Communications and Public Information Office. It focuses on the people and projects that define the City of Austin

workforce and provides valuable information about City benefits.

A variety of methods are used to communicate the benefits program to employees and their dependents, including presentations, newsletters, the City’s website, and City News.

In addition, benefits staff are available by phone or in person to discuss benefits questions with employees and their families.

Communication goals of the benefits program include:

- ◆ Educating employees on how to use their benefits.
  - ▶ Employees should understand their responsibility for the choices they make.
  - ▶ Employees should follow the requirements of the plans.
- ◆ Educating employees on how to be better consumers of all benefits.
  - ▶ Employee choices should be appropriate for their needs.
  - ▶ Employees should contribute to the cost-effectiveness of the plans by making informed choices when using their benefits.
- ◆ Increasing employee understanding of the value of their benefits.







# CORPORATE HUMAN RESOURCES DEPARTMENT CAN HELP YOU!

## ADA Division

Ensures that all City services and programs are accessible to all people, including those with disabilities. This office assists with requests for reasonable accommodation, delivers compliance training for employees, and consults on disability-related issues citywide.

## Compensation Division

Provides tools, resources, and information to departments and employees in order to enhance their knowledge and understanding of policies, procedures and trends related to classification and the City's base pay plan.

## Employee Benefits Division

Can assist you with questions about medical, dental, vision, life, disability insurance, and Flexible Spending Accounts, and other benefits such as wellness, childcare, and commuter programs. Staff can also assist with benefits changes due to a qualifying life event, filing disability claims, and life insurance claims.

## Employee Relations Division

Provides support and guidance related to Chapter A of the City's personnel policies and procedures. The division conducts workplace investigations related to discrimination, harassment, and retaliation. Provides guidance on personnel issues and disciplinary actions and oversees the Drug and Alcohol testing for CDL drivers.

## Talent Acquisition Division

Assists applicants, employees, managers, and executives in gaining access to and filling vacant positions with top talent by assessing workforce needs, engaging the community, managing programs, and creating and maintaining City-wide procedures, tools and resources.

## Municipal Civil Service/Civil Service Division

The Civil Service Office serves the Austin Police Department, Austin Fire Department, and the Emergency Medical Services Department. This Office also administers processes regarding the initial selection, advancement, and conditions of employment in accordance with Chapter 143 of the Texas Local Government Code, Civil Service Commission Rules, and agreements with employee (labor) associations.

The Municipal Civil Service Office administers the Municipal Civil Service (MCS) rules and serves as the liaison between the MCS Commission and the City. The MCS Commission hears appeals and makes final, binding decisions in the case of City employees who are denied a promotion, discharged, demoted, suspended, or on disciplinary probation.

## Quality Assurance Division

Implements a broad framework of continuous quality initiatives aimed at evaluating human resources policies and procedures, the delivery of related services, and providing opportunities to either improve, enhance, or re-engineer existing practices.

## Records Division

Updates and maintains City-wide personnel files and provides employment verifications, personnel file review, and employee information updates. All subpoenas and public information requests requiring employee record documents are processed in this division. The division also assists departments in completing personnel actions.

## Risk and Safety Division

Oversees programs designed to prevent and control employee injuries and to provide injury benefits when employees have an occupational injury. The programs include the citywide corporate safety program and the occupational injury program.

## Recruitment Division

The Recruitment Division focuses on diversity and Veteran initiatives and develops and implements a comprehensive, integrated, and strategic focus on diversity and inclusion as a key component of all human resources recruitment, Diversity, Disability, and Veteran programs and other community engagement activities.

For more information or assistance, please call the Human Resources Department at **512-974-3400**.





# EMPLOYEE ELIGIBILITY

As a City employee, including any person in the initial probationary period, your work status is full-time, part-time, or temporary.

## Full-Time Employees – 30 or more hours per week

If you are in a regular budgeted position, you are considered full-time and are eligible to participate in:

- ▶ Medical
- ▶ Dental
- ▶ Vision
- ▶ Life Insurance
- ▶ Short Term & Long Term Disability
- ▶ Health Care FSA
- ▶ Dependent Care FSA
- ▶ Group Legal Plan
- ▶ Wellness Program
- ▶ Employee Assistance Program
- ▶ Child Care Programs
- ▶ Commuter Program
- ▶ Retirement (Mandatory)
- ▶ Deferred Compensation

As a full-time employee, you are eligible for three types of coverage at no cost:

- ▶ CDHP w/HSA - Employee Only
- ▶ Basic Life Insurance
- ▶ Short Term Disability

## Part-Time Employees – 20 to 29 hours per week

If you are in a regular budgeted position, you are considered part-time and are eligible to participate in:

- ▶ Medical
- ▶ Dental
- ▶ Vision
- ▶ Life Insurance
- ▶ Short Term & Long Term Disability
- ▶ Health Care FSA
- ▶ Dependent Care FSA
- ▶ Group Legal Plan
- ▶ Wellness Program
- ▶ Employee Assistance Program
- ▶ Commuter Program
- ▶ Deferred Compensation

## Part-Time Employees – Less than 20 hours per week

If you are in a regular budgeted position, you are considered part-time and are eligible to participate in:

- ▶ Medical
- ▶ Dental
- ▶ Vision
- ▶ Life Insurance
- ▶ Health Care FSA
- ▶ Dependent Care FSA
- ▶ Group Legal Plan
- ▶ Wellness Program
- ▶ Employee Assistance Program
- ▶ Commuter Program
- ▶ Deferred Compensation

## Temporary Employees

If you are in a temporary (non-seasonal) position you are eligible to participate in:

- ▶ Medical – If employed continuously for more than 12 months
- ▶ Dental - If employed continuously for more than 12 months
- ▶ Wellness Program
- ▶ Employee Assistance Program
- ▶ Commuter Program
- ▶ Deferred Compensation

## Affiliated Employees

If you are an Affiliated Employee you are eligible to participate in:

- ▶ Medical
- ▶ Dental
- ▶ Vision
- ▶ Life Insurance
- ▶ Long Term Disability
- ▶ Health Care FSA
- ▶ Dependent Care FSA
- ▶ Group Legal Plan
- ▶ Employee Assistance Program
- ▶ Deferred Compensation, if applicable

## Surviving Dependents

If you are a surviving dependent of an active benefit eligible employee who passes in the line of duty, you are eligible to participate in:

- ▶ Medical
- ▶ Dental





# DEPENDENT ELIGIBILITY

## Enrolling Dependents for Benefits

If you are a full-time or part-time employee, your dependents are eligible for:

- ▶ Medical
- ▶ Dental
- ▶ Vision
- ▶ Life Insurance
- ▶ Health Care FSA
- ▶ Dependent Care FSA
- ▶ Group Legal Plan
- ▶ Wellness Program
- ▶ Employee Assistance Program

## Eligible Dependents

- ◆ **Spouse:** Your legally married spouse.
- ◆ **Domestic Partner:** The individual who lives in the same household and shares the common resources of life in a close, personal, intimate relationship with a City employee if, under Texas law, the individual would not be prevented from marrying the employee on account of age, consanguinity, or prior undissolved marriage to another person. A domestic partner may be of the same or opposite gender as the employee.
- ◆ **Children:** Your biological children, stepchildren, legally adopted children, children for whom you have obtained court-ordered guardianship or conservatorship, qualified children placed pending adoption, and children of your domestic partner, if you also cover your domestic partner for the same benefit. Your children must be under 26 years of age.
- ◆ **Dependent Grandchildren:** Your unmarried grandchild for whom you have legally adopted, obtain court-ordered guardianship or court-ordered conservatorship.
- ◆ **Disabled Children:** To continue City coverage for an eligible dependent past the age 26, the child must be covered as a dependent at the time, unmarried, and must also meet the following definitions:
  - ▶ A disabled child must rely on you for more than 50% of support.
  - ▶ A child is considered disabled if they are incapable of earning a living at the time the child would otherwise cease to be a dependent and depend on you for principal support and maintenance, due to a mental or physical disability.
  - ▶ A disabled child continues to be considered an eligible dependent if the child remains incapacitated and dependent on you for principal support and maintenance, and you continuously maintain the child's coverage as a dependent under the plan from the time they otherwise would lose dependent status.
  - ▶ A dependent child who loses eligibility and later becomes disabled is not eligible for coverage. A disabled child who was not covered as a dependent immediately prior to the time the child would otherwise cease to be a dependent is not eligible for coverage.

- ▶ A disabled child dependent must be covered continuously on the medical and dental plans. If coverage is dropped, the disabled child will not be allowed to re-enroll.

## Persons Not Eligible

### Dependents do not include:

- ◆ Individuals on active duty in any branch of military service (except to the extent and for the period required by law).
- ◆ Permanent residents of a country other than the United States.
- ◆ Parents, grandparents, or other extended family members not listed under the Eligible Dependents section.

**Covering dependents who are not eligible for the City's insurance programs unfairly raises costs for all participants in the programs, as well as for the City.**







# DEPENDENT DOCUMENTATION

If you are adding a dependent under any of the City's benefits programs, you must provide documentation that supports your relationship to the dependent. Social Security Numbers must be provided for all eligible dependents.

Dependent Type	Acceptable Documents
<b>Spouse</b>	A marriage certificate or Declaration of Informal Marriage which has been recorded as provided by law.
<b>Domestic Partner</b>	A Domestic Partnership and Tax Dependent Status Form and supporting documentation as noted on the Form.
<b>Child</b>	A certified birth certificate, Verification of Birth Facts issued by the hospital (newborns only), or court order establishing legal adoption, guardianship, or conservatorship, or qualified medical child support order, or be the subject of an Administrative Writ.
<b>Child of a Domestic Partner</b>	The documentation listed above must also be provided and Domestic Partnership and Tax Dependent Status Form.
<b>Stepchild</b>	The documentation listed above must also be provided and a marriage certificate or Declaration of Informal Marriage indicating the marriage of the child's parent and stepparent.
<b>Dependent Grandchild</b>	A copy of the child's parent birth certificate, and a court order establishing legal adoption, legal guardianship, or legal conservatorship.
<b>Disabled Child</b>	A completed Dependent Eligibility Questionnaire verifying an ongoing total disability, including written documentation from a physician verifying an ongoing total disability.
<b>Qualified Child Pending Adoption</b>	For children already placed in your home, an agreement executed between you and a licensed child-placing agency, or the Texas Department of Family and Protective services, meeting the requirements listed in Dependent Eligibility.





# COVERAGE INFORMATION

## Enrolling Benefits

Insurance Benefits for you and/or your dependents are effective the first of the month after your date of hire or work status change, provided you submitted any required documentation to the Employee Benefits Division by the enrollment deadline. You have 30 days from your date of hire or work status change to enroll in benefits.

If you are declining benefits coverage for yourself, you must complete enrollment and waive coverages.

## Changing Your Benefits Coverage Enrolling Benefits

You can request changes to your benefits coverage:

- ◆ Within 31 days of your date of hire or work status change.
- ◆ Within 31 days of a Qualifying Life Event.
- ◆ During Open Enrollment (occurs mid-October through mid-November, benefits changes are effective January 1 of the following year).

## Duplicate Benefits Coverage

An individual is not eligible to be covered:

- ◆ As both a City employee and a City retiree, for the same benefit.
- ◆ As both a City employee or City retiree and as a dependent of a City employee or City retiree, for the same benefit.
- ◆ As a dependent of more than one City employee, or City retiree, for the same benefit.

It is your responsibility to ensure that you and/or your dependents are not double covered for the same benefit. Duplicate claims will not be paid, and premiums will not be refunded.

## Coverage Ending Dates

Coverage for you and your dependents will end on the earliest of the following:

- ◆ The date the plan in question ends.
- ◆ The date the coverage in question ended or is reduced.
- ◆ The date the plan is amended to end coverage for you or your class of dependents.
- ◆ The last day of the month in which you voluntarily drop coverage.
- ◆ The last day of the month in which your employment ends.
- ◆ The last day of the month in which you or your dependents no longer meet eligibility requirements.

## Taxable Fringe

If you choose benefits coverage for a dependent who does not qualify to be claimed on your federal income tax return, you may have to pay taxes on the amount of money the City contributes for the dependent's medical and dental benefits. This money is considered taxable income, and must be reported to the IRS. The City refers to this money as taxable fringe. A spouse is never subject to taxable fringe. If at least one of the children for whom you have elected medical or dental coverage is a child you claim as a dependent on your federal income tax return, the City's contribution will not be considered taxable income.





# QUALIFYING LIFE EVENTS

Elections made during open enrollment will be effective for the upcoming year, January 1–December 31, 2025. The IRS requires that your benefit elections remain in effect for the entire calendar year unless you experience a Qualifying Life Event.

- ◆ Mid-year benefit changes are only permitted in the event of a Qualifying Life Event.
- ◆ Changes must be made within 31 days from date of the Qualifying Life Event.
- ◆ The event date must be consistent with the information in the Supporting Documentation.
- ◆ Benefit election changes must be consistent with the event.
- ◆ Switching plans during the calendar year is not permitted.
- ◆ You can only make changes to the specific plans where dependents will be affected.
- ◆ Failure to submit the required documents will result in denial of the change.
- ◆ Benefits changes are effective the 1st day of the following pay period.
- ◆ For newborns, benefits are effective the date of birth.

**Important: If you miss your Qualifying Life Event deadline, you or your dependents will not have insurance for the current calendar year. The next opportunity to enroll will be during open enrollment held in the fall.**

Qualifying Event	Supporting Documentation	Dependent Documentation
<b>Marriage</b>	Marriage Certificate	Birth Certificates are required if adding spouse's children as dependents.
<b>Divorce</b>	Certified copy of Divorce Decree	Birth Certificates are required if adding children not currently enrolled in benefits.
<b>Birth</b>	Birth Certificate, or Verification of birth facts issued by hospital	No additional documentation required.
<b>Adoption</b>	Placement for adoption paperwork, or Legal documentation of the adoption	No additional documentation required.
<b>Death</b>	Death Certificate	No additional documentation required.
<b>Change of spouse's employment OR Loss or gain of coverage other than employment change</b> <b>NOTE: Voluntary cancellation of Cobra or private coverage is not considered an event.</b>	Proof of enrollment or termination of benefit coverage (employer, Medicaid, etc.) Proof must contain effective or termination dates of coverage, type of coverage (medical, dental, vision) and the names of the dependents affected.	Adding Spouse - Marriage certificate/ Declaration of Informal Marriage or 1st page of current year's tax return  Adding Children - Birth Certificate or 1st page of current year's tax return
<b>Flexible Spending Account</b> <b>Medical FSA</b> <b>Dependent Care FSA</b>	Medical FSA - proof of gain or loss of dependent  Dependent Care - proof of enrollment or termination of childcare services	No additional documentation required.



# MEDICAL PLANS

As an employee, you choose the medical plan that best meets your needs. Provider and prescription information is available online at [bcbstx.com/coa](http://bcbstx.com/coa).

## Things to consider when choosing a medical plan:

- ◆ Premium costs for dependent coverage.
- ◆ Amount of copays.
- ◆ Amount of out-of-pocket expenses.
- ◆ Freedom to not designate a Primary Care Physician.
- ◆ Freedom to seek services from a Specialist without a referral.
- ◆ Future expenses and the predictability of inpatient hospital expenses.
- ◆ Your use of maintenance prescription drugs.



**BlueCross BlueShield  
of Texas**

You will have the option of choosing between three medical plans: CDHP w/HSA (BlueChoice PPO), PPO (BlueChoice PPO), and HMO (BlueEssentials).

These plans feature co-insurance, deductibles, and in-network preventive screenings covered at 100%. The CDHP w/HSA and PPO (BlueChoice PPO) feature a nationwide provider network while the HMO (BlueEssentials) connects you to a smaller group of qualified health care providers (Texas only), with your care being directed by a primary care physician.



## CDHP w/HSA

### Benefits of the CDHP w/HSA:

- ◆ No cost for Employee Only coverage and lower medical premiums if you cover dependents.
- ◆ Health Savings Account through HSA Bank established in your name with a HSA Bank debit card.
- ◆ City contribution into a Health Savings Account for Full-Time employees hired on or before December 1 of the current plan year. Part-Time employees (20-29 hours) receive a reduced contribution.
  - ▶ \$1,000 for Employee Only Coverage.
  - ▶ \$1,500 for Employee & Dependent Coverage.
- ◆ Ability to contribute money on a pretax basis into a Health Savings Account.
  - ▶ \$3,300 per year for Employee Only coverage.
  - ▶ \$7,050 per year for Employee & Dependent coverage.
  - ▶ Employees 55 and over can contribute an additional \$1,000.
- ◆ Ability to increase or decrease your HSA per pay period contributions any time during the year.
- ◆ The money remaining in your HSA Account (including the City's contribution) is yours to keep even if you leave employment or retire from the City.
- ◆ Use your HSA debit card to meet your deductible and pay for eligible medical, pharmacy, dental, and vision expenses.



## CDHP Health Savings Account Eligibility:

To be eligible to participate in the HSA, you must meet all the requirements below as determined by the IRS. If all requirements are not met, you and/or your dependents are not eligible to contribute to a HSA. However, you and/or your dependents are eligible to enroll in the CDHP Medical Plan.

- ◆ You or your enrolled dependents cannot be claimed on another person's tax return.
- ◆ You cannot be enrolled in any plan other than a high-deductible plan including: Medicare, Medicaid, and Tricare.
- ◆ You or your enrolled dependents cannot be enrolled in Health Care FSA.
- ◆ You must provide a physical address to HSA Bank (no post office boxes).
- ◆ You must be a legal resident of the United States.

**If eligibility is met, your HSA will be opened automatically.**

## How the CDHP w/HSA Works:

- ◆ Preventive Services – Covered at 100%.
- ◆ Injury or Illness at Network Provider – The amount you pay will be determined after BlueCross BlueShield discounted rates.
- ◆ Calendar year deductible – After you meet the deductible, the plan will pay 80% of covered services for Network Providers.
- ◆ Out-of-Pocket-Maximum – After you meet the out-of-pocket-maximum, the plan pays 100% for all eligible covered medical and pharmacy expenses.

## Differences Between the CDHP HSA and the Health Care FSA:

	CDHP Health Savings Account	Health Care Flexible Spending Account
Is it required that I enroll in a City Medical Plan?	Yes, in the CDHP.	No.
Does the City contribute money into this account?	Yes, and the City's contributions are available immediately.	No.
Am I able to contribute money into this account?	Yes, your contributions are available as they are placed in your account each pay period.	Yes, your annual contributions are available immediately.
Am I able to change my per pay period contributions throughout the year?	Yes, you may increase or decrease your contributions anytime during the year without a Qualifying Life Event.	Yes, but only within 31 days of a Qualifying Life Event.
Will I be issued a debit card?	Yes.	Yes.
Is the account a "Use it or Lose it" account?	No, the City's and your unused contributions roll over each year. There is no deadline.	Yes, you must use your contributions by the IRS deadline.
Do I have to submit receipts?	No, but we recommend that you save your receipts for your records.	Yes, when requested.
Is this an interest-bearing account?	Yes.	No.
Do my dependents who use this account have to be IRS dependents?	Yes.	Yes, your grandchildren, domestic partner, and domestic partner's children.

**Only employees enrolled in the CDHP are eligible to open a Health Savings Account.**



# MEDICAL PLANS SCHEDULE OF BENEFITS

Benefits	CDHP (BlueChoice PPO)		PPO (BlueChoice PPO)	HMO (BlueEssentials)
	Network	Out of Network	Network	Network
Deductible	\$1,650 EO/ \$3,300 Family	\$3,200 EO/ \$6,400 Family	\$600 EO/ \$1,800 Family	No Deductible
Out-of-Pocket Maximum	\$5,000 EO/ \$6,850 Family	\$10,000 EO/ \$20,000 Family	\$4,250 EO/ \$13,250 Family	\$4,750 EO/ \$9,500 Family
Preventative Services	Covered at 100%, No Deductible	40% after Deductible	Covered at 100%, No Deductible	Covered at 100%
Primary Care Physician (PCP)	Selection not required		Selection is not required	Required
PCP Visits (including telehealth)	20% after Deductible	40% after Deductible	\$15 copay	\$15 copay
Specialist Visits (including telehealth)	20% after Deductible	40% after Deductible	\$30 copay	\$40 copay
Urgent Care	20% after Deductible	40% after Deductible	\$40 copay	\$50 copay
Emergency Room	20% after Deductible	40% after Deductible	\$300 copay	\$350 copay
Emergency Room Surgery	20% after Deductible	40% after Deductible	20% after Deductible plus \$300 ER copay	Covered at 100% after \$350 ER copay
Ambulance	20% after Deductible		20% after Deductible	\$300 copay
Virtual Visit - MD Live	Approximately \$49 for general health, \$100 per session for therapy counseling, and \$175 per session for psychiatry	N/A	\$10 copay	\$10 copay
Inpatient Hospital Stay	20% after Deductible	40% after Deductible	20% after Deductible	\$1,750 copay
Outpatient Surgery	20% after Deductible	40% after Deductible	20% after Deductible	\$750 copay
Allergy Services & Immunizations	20% after Deductible	40% after Deductible	Covered at 100%. (Office visit copays may apply)	Covered at 50%. (Office visit copays may apply)





# MEDICAL PLANS SCHEDULE OF BENEFITS

Benefits	CDHP (BlueChoice PPO)		PPO (BlueChoice PPO)	HMO (BlueEssentials)
	Network	Out of Network	Network	Network
Infertility	Lifetime Maximum \$20,000 per person, per lifetime.		Lifetime Maximum \$20,000 per person, per lifetime.	Lifetime Maximum \$20,000 per person, per lifetime.
Acupuncture (12 Visit Limit)	20% after Deductible	40% after Deductible	\$40 copay	Not Covered
CT, MRI, PET Scans*	20% after Deductible	40% after Deductible	\$100 copay	\$150 copay
Mental Health Care Outpatient	20% after Deductible	40% after Deductible	\$15 copay	\$15 copay
Durable Medical Equipment	20% after Deductible	40% after Deductible	20% after Deductible	Member pays \$0
Insulin Pump	20% after Deductible	40% after Deductible	\$100 copay	\$150 copay
Out-of-Network Benefits	Please refer to Out of Network Column.		<p>\$2,000 deductible per covered person/\$6,000 deductible for Family. Member pays 40%, up to maximum allowable charge.</p> <p>Out-of-network benefits are subject to network benefit plan limits, pre-approval, and pre-notification requirements.</p> <p>Inpatient Admission are subject to a \$500 copay per admission.</p>	None, except in case of a medical emergency.
	Network	Out of Network	Network	Network
Referrals Required	No		No	Yes. A referral is required to seek services from a Specialist. No benefit coverage without a referral.
Residency Requirements	None		None	Must receive services in the state of Texas. No benefit coverage outside of Texas.

\* Preauthorization is required



# MEDICAL PLANS - PHARMACY

	CDHP (BlueChoice PPO)	PPO (BlueChoice PPO)	HMO (BlueEssentials)
<b>Pharmacy Benefits</b>			
ACA Preventative Drugs	Covered at 100%, No Deductible	Covered at 100%, No Deductible	Covered at 100%, No Deductible
CDHP w/HSA Preventative Drugs	20%, No Deductible	N/A	N/A
Deductible Per Person Per Calendar Year	20%, after Deductible	\$50 Deductible for Tier 2 & Tier 3 Only	\$50 Deductible for Tier 2 & Tier 3 Only
Basic Drug List Tier 1 (Generic)	20%, after Deductible	\$10	\$10
Basic Drug List Tier 2 (Preferred)	20%, after Deductible	\$40 copay or 20% of cost (\$70 Max)	\$45 copay or 20% of cost (\$80 Max)
Basic Drug List Tier 3 (Non-Preferred)	20%, after Deductible	\$60 copay or 20% of cost (\$110 Max)	\$65 copay or 20% of cost (\$120 Max)
90 Day - Mail Order	20%, after Deductible	2 copays Tier 1, 2, or 3	3 Copays Tier 1, 2, or 3
<b>Hearing &amp; Vision Benefits</b>			
Hearing Aids	20% after Deductible, One pair covered every 36 months*	20% after Deductible, One pair covered every 36 months*	One pair every 48 months
Optometrists	20%, after Deductible	\$15 copay	\$15 copay
Ophthalmologists	20%, after Deductible	\$30 copay	\$40 copay
<b>Diabetic Supplies</b>			
Retail	Supplies are covered at participating pharmacies.		
Mail Order	Copays for insulin needles/syringes and/or diabetic supplies are waived when dispensed on the same day as your insulin and oral agents, but only when the insulin or oral agent is dispensed first.		



# MEDICAL PLANS - RATES

## Medical - Per Pay Period

	CDHP w/HSA (BlueChoice PPO)	PPO (BlueChoice PPO)	HMO (BlueEssentials)
<b>FT &amp; Temporary Employees (30+ Hours Per Week)**</b>			
Employee Only	\$0.00	\$15.00	\$20.00
Employee & Spouse***	\$96.37	\$200.67	\$210.67
Employee & Child(ren)	\$47.79	\$147.84	\$157.84
Employee & Family	\$221.63	\$336.91	\$346.91
<b>PT &amp; Temporary Employees (20-29 Hours Per Week)**</b>			
Employee Only	\$138.08	\$127.03	\$132.03
Employee & Spouse***	\$358.04	\$428.08	\$438.08
Employee & Child(ren)	\$288.22	\$351.04	\$361.04
Employee & Family	\$537.27	\$632.41	\$642.41
<b>PT &amp; Temporary Employees (Less than 20 Hours Per Week)</b>			
Employee Only	\$276.16	\$357.03	\$428.68
Employee & Spouse***	\$619.71	\$801.14	\$978.96
Employee & Child(ren)	\$528.65	\$684.21	\$835.88
Employee & Family	\$852.91	\$1,102.63	\$1,347.18

\*Due to Injury or Surgery

\*\*Temporary employee rates are based on average hours worked after completing 12 months of consecutive employment

\*\*\*Spouse or Domestic Partner



## Using Mail Order



To begin mail order:

- ◆ Have your doctor write a prescription for a 90-day supply of your medication (ask for three refills).
- ◆ Complete the mail order form and attach your prescription.
- ◆ Provide a check or credit card information.
- ◆ Within 10 days, your prescription will be delivered to you, postage paid.

If your doctor allows you to take a generic drug, this should be indicated on the prescription. Three weeks before your mail order supply runs out, you will need to request a refill.

### Your cost:

- ◆ **CDHP w/HSA** participants will pay 20% of the cost once the in-network deductible is met. If the prescription is for a preventive care medication listed on the CDHP w/HSA Preventive Drug List, no deductible is required, and you will only pay 20% of the cost. You can use your HSA Bank debit card to pay for your out-of-pocket expenses.
- ◆ **PPO** participants receive 90 days of medication for **two** copays/coinsurance.
- ◆ **HMO** participants receive 90 days of medication for **three** copays/coinsurance.

For additional information, visit [bcbstx.com/coa](http://bcbstx.com/coa) or call BlueCross BlueShield at **888-907-7880**.

## Diabetic Bundling What Your Medical Plan Does for You



A participant's insulin/non-insulin medication and related diabetic supplies can be purchased through mail order for the cost of the insulin/non-insulin if prescriptions for the insulin/non-insulin and supplies are submitted at the same time.

- ◆ **CDHP w/HSA** participants will pay 20% of the cost once the in-network deductible is met. You can use your HSA Bank debit card to pay for your out-of-pocket expenses.
- ◆ **PPO** participants will pay **two** copays/coinsurance for a 90-day prescription.
- ◆ **HMO** participants will pay **three** copays/coinsurance for a 90-day prescription.

Enroll in the Diabetes Program to receive select diabetes medication and supplies at no cost. This benefit is available to all participants 15 years of age and older enrolled in a City medical plan. Refer to the Employee Wellness section of this Guide for details.

## H-E-B Prescription Delivery Service

Free prescription delivery is available to your home in the following Texas areas: Austin, San Antonio, Waco, Houston, Corpus Christi, and the Border areas within 10 miles of an H-E-B store.



### How does it work?

- ◆ Call your H-E-B Pharmacy and ask for prescription delivery.
- ◆ Pay the applicable prescription copay/coinsurance by a credit card, debit card, or your FSA/HSA debit card.
- ◆ Have someone 18 years or older at home to sign for the delivery.
- ◆ Provides delivery of prescriptions filled Monday–Friday by 4:00 p.m. except for major holidays.
- ◆ Delivers medications as late as 8:00 p.m.

For more information, call your local H-E-B Pharmacy.

## 24/7 NurseLine Services



Coping with health concerns on your own can be tough. With so many choices, it can be hard to know whom to trust for information and support. 24/7 NurseLine services were designed specifically to help you get more involved in your own health care, and to make your health decisions

simple and convenient. They will provide you with:

- ◆ Immediate answers to your health questions any time, anywhere – 24 hours a day, 7 days a week.
- ◆ Access to experienced registered nurses.
- ◆ Trusted, physician-approved information to guide your health care decisions.

### When you call, a registered nurse can:

- ◆ Discuss your options for the right medical care and assist in guiding you to the correct treatment facility (i.e., Urgent Care, Emergency Room, etc.).
- ◆ Help you understand treatment options.
- ◆ Answer medication questions.

Call 24/7 NurseLine services any time for health information and support – at no additional cost. Registered nurses are available any time, day or night. Call NurseLine services at **800-581-0368**.

## Virtual Visits - MDLIVE



Talk to a board-certified physician for both general health and behavioral health services from the comfort of your home or work. There's no driving, no crowded waiting rooms, and it's available 24 hours a day, 7 days a week. Common services include, cold/flu, allergies, asthma, sinus/ear infections, and pink eye. Behavioral health conditions treated include, online counseling, child behavior/learning issues, and stress management.

For the PPO and HMO Plan, virtual visits are a \$10 copay for general or behavioral health. For the CDHP Plan, virtual visits are approximately \$49 for general health, \$100 per session for therapy counseling, and \$175 per session for psychiatry.

Log in to [bcbstx.com/coa](http://bcbstx.com/coa) or download the BCBSTX app on your smartphone to access Virtual Visits powered by MDLIVE. You will need your BlueCross BlueShield medical ID number and your banking/credit card information readily available to charge your copay. If you have questions, please call BlueCross BlueShield at **888-907-7880**.



# DENTAL PLAN

## BlueCare Dental™

BlueCare Dental PPO provides you the option of seeking services from in-network and out-of-network dentists. Selecting a dentist from the BlueCare Dental PPO network will offer you the greatest savings. When contacting a dentist, ask whether the dentist is contracted in the BlueCare Dental PPO network.

To find a dentist, view claims activity, or for more information visit [bcbstx.com/coa](http://bcbstx.com/coa) or call BlueCare Dental at **888-907-7880**. For covered services, exclusions, and the out-of-network Table of Allowances, refer to the BlueCare Dental PPO Plan Document online at [austintexas.gov/benefits](http://austintexas.gov/benefits) or call BlueCare Dental PPO.

BlueCare Dental PPO provides you the option of seeking services from in-network and out-of-network dentists. Selecting a dentist from the BlueCare Dental PPO network will offer you the greatest savings. When contacting a dentist, ask whether the dentist is contracted in the BlueCare Dental PPO network.

**Table of Allowance** - The most BlueCare Dental PPO will pay an out-of-network dentist for covered service or procedure.

BlueCare Dental PPO Schedule of Benefits		
	In-Network	Out-of-Network
Selection of Dentist	Member can go to an in-network dentist. Member will realize greater savings when using in-network dentists.	Member can go to any dentist; however, the member is responsible for the difference over the Table of Allowance.
Annual Deductible	\$50 per person, per calendar year. Deductible does not apply to Preventive Care.	
Covered Services (other than orthodontia)	Preventive Care, Basic Care, and Major Care – covered in full.	Preventive Care, Basic Care, and Major Care – covered up to the Table of Allowance.
Orthodontia	Orthodontia Care – covered in full as work progresses up to the Calendar/Lifetime Maximum.  Orthodontia work already in progress prior to enrolling, is not covered (including banding).	Orthodontia Care – covered up to the Table of Allowance as work progresses.  Orthodontia work already in progress prior to enrolling, is not covered (including banding).
Annual Maximum Benefit	\$2,000 per person, per calendar year.	
Orthodontia Maximum Benefit	\$2,000 per person, per lifetime.	
Claim Forms	Dentists file claims for covered services.	Members file claims to be reimbursed for covered services. (Some dental offices may file claims and bill the balance after the plan has paid).





# ORTHODONTIA TREATMENT

Orthodontia work already in progress prior to enrolling, is not covered (including banding).

Expenses are paid only as the work progresses. For out-of-network services, invoice should be submitted for reimbursement after each visit. Orthodontia benefits paid by the plan are applied toward the calendar year maximum and Lifetime Orthodontia Maximum.

The reimbursable amounts for orthodontia expenses are determined as claims are incurred throughout the course of treatment. The reimbursable amounts through FSA or the HSA is the difference between the amount billed and the amount paid by the dental plan. This amount may not match the payment plan you have set up with your dentist.

## BlueCare Dental PPO - Per Pay Period

	Full Time & Temporary 30+ hours per week	Part Time & Temporary 20-29 hours per week	Part-Time & Temporary less than 20 hours per week
Employees Only	\$2.50	\$9.62	\$27.67
Employee & Spouse or Domestic Partner	\$28.51	\$34.15	\$70.51
Employee & Children	\$28.51	\$34.15	\$70.51
Employee & Family or Domestic Partner & Children	\$32.01	\$37.65	\$74.01

\*Temporary employee rates are based on average hours worked after completing 12 months of consecutive employment.





# VISION PLAN

Healthy eyes and clear vision are an important part of your overall health and quality of life. Avisis will help you care for your sight while saving you money.

To view benefits and locate a provider, visit [myavesis.com](http://myavesis.com) or call **866-563-3589**.

Plan Coverage																									
<b>Covered Service</b>	In-network benefits (limited out-of-network benefits are available).																								
<b>Comprehensive Eye Exam</b>	\$10 copay, one exam per calendar year.																								
<b>Frames</b>	Once per calendar year in lieu of contact lenses. Up to \$125 retail allowance toward provider supplied frame plus 20% off cost exceeding the allowance.* <b>OR</b> Up to \$175 retail allowance if purchased at Vision Works plus 20% off cost exceeding the allowance. <b>OR</b> Up to \$200 retail allowance toward frames if purchased using UVP Online. Additional pair of eyeglasses, 30% off if purchased at the same time as first pair.																								
<b>Contacts</b>	Once per calendar year in lieu of frames. Up to \$120 allowance toward provider supplied contacts plus an additional discount off the cost exceeding the allowance*– 10% for disposable contacts and 15% for standard contacts. <b>OR</b> Medically necessary contact lenses are covered in full with prior approval. Standard & Specialty Contacts - Evaluation, fitting fees, and follow-up care; \$25 copay applies.																								
<b>Standard Eyeglass Lenses</b>	Single, bifocals, trifocals, lenticular, and standard scratch coating. \$25 copay, once per calendar year. Polycarbonate lenses for children are covered in full up to age 19																								
<b>Lens Options</b>	<table border="0"> <tr><td>Standard progressive addition lenses</td><td>\$50</td></tr> <tr><td>Premium progressives (i.e. Varilux, etc.)</td><td>\$90</td></tr> <tr><td>Intermediate-vision lenses</td><td>\$30</td></tr> <tr><td>Blended-segment lenses</td><td>\$20</td></tr> <tr><td>Ultraviolet coating</td><td>\$12</td></tr> <tr><td>Standard anti-reflective (AR) coating</td><td>\$35</td></tr> <tr><td>Premium AR Coating</td><td>\$48</td></tr> <tr><td>Ultra AR Coating</td><td>\$60</td></tr> <tr><td>High-index lenses</td><td>\$55</td></tr> <tr><td>Polarized lenses</td><td>\$75</td></tr> <tr><td>Glass photochromic lenses</td><td>\$20</td></tr> <tr><td>Plastic photosensitive lenses</td><td>\$65</td></tr> </table>	Standard progressive addition lenses	\$50	Premium progressives (i.e. Varilux, etc.)	\$90	Intermediate-vision lenses	\$30	Blended-segment lenses	\$20	Ultraviolet coating	\$12	Standard anti-reflective (AR) coating	\$35	Premium AR Coating	\$48	Ultra AR Coating	\$60	High-index lenses	\$55	Polarized lenses	\$75	Glass photochromic lenses	\$20	Plastic photosensitive lenses	\$65
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Glass photochromic lenses	\$20																								
Plastic photosensitive lenses	\$65																								
*Additional Discounts - Not available at Wal-Mart, Sam's Club, and Costco.																									

Avisis Vision Rates – Per Pay Period	
Employee Only	\$1.98
Employee & Spouse or Domestic Partner	\$4.28
Employee & Children	\$4.06
Employee & Family or Domestic Partner & Children	\$6.47





# FLEXIBLE SPENDING ACCOUNTS (FSA)

A FSA lets you set aside money from your paycheck on a pretax basis to use for eligible out-of-pocket expenses. There are two types of FSA's that you can participate in:

- ◆ Health Care FSA – Allows you to pay for eligible medical, dental, vision, hearing, and prescription drug expenses for you, your spouse, and your eligible tax dependents.
- ◆ Dependent Care FSA – Allows you to pay for eligible child care, before and after school care, nursery school, preschool, and summer day camp.

Both accounts are regulated by Internal Revenue Service (IRS) code Section 125 and are administered by Total Administrative Services Corporation (TASC).

**IMPORTANT:** CDHP participants are not eligible to enroll in the Health Care FSA. You can participate in the CDHP Health Savings Account (HSA) and Dependent Care FSA.

## Health Care FSA

- ◆ You can contribute pretax dollars from your paycheck, up to the IRS limit of \$3,200 per year (minimum \$5).
- ◆ Your full contribution is available immediately to pay for eligible health care expenses. It covers you, your spouse, and/or your tax dependents for:
  - ▶ Copays, coinsurance, and deductibles
  - ▶ Dental expenses like orthodontia, crowns, and bridges

- ▶ Vision expenses like LASIK eye surgery, glasses, and contacts
- ▶ Prescription drugs and prescribed over-the-counter items

For a complete list of eligible health care expenses, call TASC at **800-422-4661** or visit [irs.gov](https://www.irs.gov).

## Dependent Care FSA

- ◆ You can contribute pretax dollars from your paycheck, up to the IRS limit of \$5,000 per year (minimum \$5).
- ◆ Your contributions are available as the funds are deducted from your paycheck.
- ◆ Funds are for your dependents under age 13, or age 13 or older if physically or mentally incapable of self-care, and spends at least eight hours a day in your home.

*To calculate your pay period contribution, estimate your out-of-pocket expenses for the calendar year (24 pay periods). If you enroll mid-year, estimate your expenses for the number of eligible pay periods remaining for the calendar year. Refer to the worksheets in this section to assist you in calculating your per pay period contribution amounts.*

Per Pay Period	Paycheck with Health Care FSA	Paycheck without Health Care FSA
Gross Pay	\$1,600.00	\$1,600.00
Health Care expenses deducted before taxes	-\$118.00	\$0.00
Taxable Pay	\$1,482.00	\$1,600.00
Social Security/Medicare at 7.65% of taxable pay	-\$113.37	-\$122.40
Income Tax at 12% tax bracket	-\$177.84	\$192.00
After-Tax Pay	\$1,190.79	\$1,285.60
Paying for Health Care after taxes	\$0.00	-\$118.00
<b>Take-Home Pay</b>	<b>\$1,190.70</b>	<b>\$1,167.60</b>

**Note:** You will realize the same type of savings enrolling in Dependent Care FSA.







## Pay with Ease

- ◆ Swipe your TASC debit card to pay for your eligible Health Care and Dependent Care expenses. When you use the TASC debit card your expense is automatically paid from your FSA. Note: Dependent Care funds are available as they are deducted from your paycheck.
- ◆ File a claim: Pay your eligible expenses by cash, check or credit card. Then submit a claim form along with your receipt to pay yourself back. For speed, upload your documentation to your TASC app. Your money will be deposited directly into your MyCash account, checking, or savings account within 48–72 hours following the submission of complete and accurate reimbursement request. Note: Claims are not processed on Saturdays.

## What is MyCash?

When you submit for a reimbursement, your money will be deposited into your MyCash account. The money can be accessed by the swipe of your TASC card, withdrawn at an ATM, or transferred to your personal checking or savings account. Your money in MyCash is not tied to any Plan year and does not expire. **Note:** If you choose to withdraw your money at an ATM, ATM/bank fees may apply.

## Here are a Few FSA Reminders:

- ◆ Save your itemized statements and detailed receipts. You may need to provide documentation to support a claim to TASC or the IRS.
- ◆ TASC will request documentation for unsupported claims which you must provide.
- ◆ **Use-it-or-Lose-it rule.** This means you'll lose any unused funds not claimed by the IRS set deadlines below.
  - ▶ March 15, 2026 – deadline to incur expenses.
  - ▶ May 31, 2026 – deadline to submit your claims for reimbursement from your 2025 account.

- ◆ You can enroll in or change your contribution if you are a new employee, have a Qualifying Life Event, or during Open Enrollment.
- ◆ Orthodontia expenses: The amounts reimbursable for orthodontia expenses are determined as claims are incurred throughout the course of treatment. The amount reimbursable through Health Care FSA is the difference between the amount billed and the amount paid by the dental plan. This amount may not match the payment plan you have set up with your dentist.
- ◆ If you do not participate in Open Enrollment, your annual elections will continue the following year.

## Dependent Care FSA and the City's Child Care Programs

If you participate in both the Dependent Care FSA and one of the City's Childcare Programs during the same year, funds you receive from the combined programs cannot exceed the \$5,000 IRS limit.

If you have questions, call the Employee Benefits Division at **512-974-3284**.

## Leaving City Employment

- ◆ Health Care FSA – If you terminate employment with the City, you have until May 31, 2026 to submit claims to TASC for expenses that were incurred while you were employed with the City and contributed to your Health Care FSA.
  - ▶ If you have money remaining in your Health Care FSA, you may continue your participation through COBRA to incur expenses or to continue to use your FSA funds.
- ◆ Dependent Care FSA – If you terminate employment with the City, you will have until March 15, 2026 to incur expenses and submit claims to TASC by May 31, 2026 to receive reimbursement for funds accrued in your Dependent Care FSA.

## Dependent Care FSA

If you are...	...this limit applies for your family each year. These limits may be reduced if you also participate in a City Childcare Program
Single	<b>\$5,000</b>
Married, filing a joint tax return	Lesser of <b>\$5,000</b> , your income, or your spouse's income
Married, filing a separate tax return	Lesser of <b>\$2,500</b> , your income, or your spouse's income
Married with a spouse who is disabled or is a full-time student at least five calendar months of the year	<b>\$2,500</b> if you have one dependent; <b>\$5,000</b> if you have two or more dependents



# DISABILITY

## Short Term Disability (STD)

Coverage is provided at no cost for employees who are in a regular budgeted position and are scheduled to work 20 or more hours per week. STD covers off-the-job injuries, illnesses, and disability due to pregnancy.

## Definition of Disability

Total disability or totally disabled means that you are prevented from performing the essential duties of your job due to a physical or mental impairment from pregnancy or a non-work-related illness or injury, which is expected to last for a continuous period of over 30 calendar days as certified by your healthcare provider.

## Benefit Amount

If approved, the benefit amount is 70% of your budgeted workweek hours for up to 60 calendar days. For 40-hour per week employees, 28 hours per week are paid, while the remainder of time is unpaid. Hours are prorated for part-time employees based on their work schedule. This is a taxable benefit.

## Coverage Period

You must satisfy a 30-day waiting period. During the waiting period, you may use paid leave, but you must be off work continuously for 30 calendar days. Benefits are payable beginning on the 31st day from date of disability, up to the 90th calendar day.

## Managing Benefits

For employees in an active status, payroll deductions for benefits may continue for any hours paid through the STD program. Employees in an inactive status should contact HRD Benefits to discuss their options for benefit continuation.

## Filing a Claim

You must submit your STD claim to the Department Leave Coordinator within 30 calendar days of your disability date or as soon as you anticipate an absence exceeding 30 days. For planned absences, such as childbirth or scheduled surgery, claims may be submitted up to four weeks in advance. The submission must include the Application for Short Term Disability Benefits, Authorization to Obtain Information, and Health Care Provider Certification, which must provide proof of disability to substantiate your request. The HRD Leave Administrator will review the claim and notify the Department Leave Coordinator in writing of the approval decision, and the Department Leave Coordinator will inform the employee.

## Termination of STD Benefit

An employee's STD benefits end on the earliest of the following: when the employee is no longer certified as disabled by a healthcare provider, upon the employee's death, upon eligibility for or receipt of other COA benefits (e.g., Workers' Compensation, Wage Continuation, Long Term Disability), on the 91st day from the disability date, or upon separation from the City.



## Long Term Disability (LTD)

Coverage is an employee-paid benefit offered to employees who are in a regular budgeted position and are scheduled to work 20 or more hours per week. The following information is only a summary of the program. LTD covers on- and off-the-job injuries, illnesses, and pregnancies.

### Definition of Disability

During the 90-day benefit waiting period and until benefits have been paid for 24 months, you are considered disabled if, as a result of physical disease, mental disorder, injury, or pregnancy, you are unable to perform the material duties of any occupation, and you are unable to earn 60% or more of your indexed earnings.

After benefits have been paid for 24 months, you are considered disabled if, as a result of physical disease, mental disorder, injury, or pregnancy, you are unable to perform the material duties of any occupation.

### Benefit Amount

If approved, the benefit amount is 60% of your base monthly salary, up to \$10,000 per month. The minimum monthly payment is the greater of \$100 or 10% of your monthly benefit prior to any reduction for other income benefits. This is a non-taxable benefit.

### Coverage Period

You must satisfy a 90-day waiting period. During the waiting period you may use paid leave or STD benefits, but you must be off work a total of 90 days. Benefits are payable until you are no longer disabled or are no longer qualified for LTD.

### Reduction in Benefits

Once approved for LTD benefits, you must stop using any paid leave. Your LTD benefits will be reduced by any paid leave or work earnings you receive from the City.

### Filing a Claim

You must file a claim with disability vendor within 180 days of your disability date. The disability carrier can be reached at **800-459-2780** (select prompt two to file a new disability claim) or online at [myNYLGBS.com](http://myNYLGBS.com). If you need assistance please contact the Employee Benefits staff. The disability carrier determines whether the claim is approved and notifies you in writing.

### Eligibility for Other Benefits

While receiving LTD benefits, you may be eligible to continue medical, dental, vision, life insurance, and other benefits. Your eligibility depends on if you:

- ◆ Return to work.
- ◆ Go on an approved Leave of Absence.
- ◆ Go on FMLA leave.
- ◆ Pay any required premiums.
- ◆ Retire or terminate employment.

### When Benefits End

Your LTD benefits automatically end on the earliest of the following dates:

- ◆ The date you are no longer disabled.
- ◆ The date you fail to furnish proof of loss.
- ◆ The date you are no longer under the care of a doctor.
- ◆ The date you refuse the carrier's request to submit to an examination by a physician or other qualified medical professional.
- ◆ The date you refuse to participate in a rehabilitation program.
- ◆ The date your maximum benefit period ends.
- ◆ The date of your death.

If you are filing for benefits at age 62 or older, the chart below indicates how many months you are eligible to receive LTD benefits.

Age	Maximum Benefit Period
62	42 months
63	36 months
64	30 months
65	24 months
66	21 months
67	18 months
68	15 months
69 or older	12 months

### Exclusions and Limitations

LTD coverage has the following exclusions and limitations:

- ◆ An intentionally self-inflicted injury.
- ◆ Due to war or any act of war (declared or not declared).
- ◆ Your commission of or attempt to commit a felony or your engagement in an illegal occupation.
- ◆ Not under the ongoing care of a physician.
- ◆ A pre-existing condition.
- ◆ Exceeds the limited benefits period for disability. Some conditions are limited to 24 months. Please refer to the policy booklet for details.

If you have another LTD policy, check with your insurance carrier or agent to determine whether its benefits are affected by the City's LTD program.





# LONG TERM DISABILITY WORKSHEET

Your LTD premium is based on your base annual salary and age. Base annual salary does not include shift differential, overtime, Service Incentive Pay, lump sum payments, or stipends.

To estimate your pay period cost for LTD coverage, follow these steps, or calculate online at [austintexas.gov/benefits](http://austintexas.gov/benefits).

1. Determine your **Base Annual Salary**. Do not include any hours for overtime.

$$\underline{\hspace{2cm}} \text{ Hour Work Week} \times 52 \text{ weeks} = \underline{\hspace{2cm}} \text{ Hours} \times \$ \underline{\hspace{2cm}} = \$ \underline{\hspace{2cm}}$$

Hourly Rate                      Base Annual Salary

2. To find the **Number of \$100 Units** of coverage you may buy, divide your **Base Annual Salary** (from Step 1) by 100.

$$\$ \underline{\hspace{2cm}} \div 100 = \underline{\hspace{2cm}}$$

Base Annual Salary                      Number of \$100 Units

3. To find your **Annual Cost**, multiply the **Number of \$100 Units** (from Step 2) by the **Cost Per \$100 of Base Annual Salary** for your age group (see chart below). Your answer in Step 3 is your estimated annual cost.

$$\$ \underline{\hspace{2cm}} \times \$ \underline{\hspace{2cm}} = \$ \underline{\hspace{2cm}}$$

Number of \$100 Units                      Cost per \$100                      Annual Cost

4. To find your **Pay Period Cost**, divide your **Annual Cost** (from Step 3) by 24 pay periods. The answer in Step 4 is your estimated cost per pay period.

$$\$ \underline{\hspace{2cm}} \div 24 \text{ pay periods} = \$ \underline{\hspace{2cm}}$$

Annual Cost                      Pay Period Cost

Age	Cost Per \$100 of Base Annual Salary
29 and under	\$0.082
30 to 39 years	\$0.108
40 to 49 years	\$0.236
50 to 59 years	\$0.442
60 to 69 years	\$0.338
70 and older	\$0.118





# GROUP TERM LIFE INSURANCE

## Basic Life Insurance

Provided at no cost for full-time employees. You receive one times your base annual salary. Base annual salary does not include shift differential, overtime, Service Incentive Pay, lump sum payments, or stipends. Part-time employees may purchase Basic Life Insurance.

## Supplemental Life Insurance

Paid entirely by you. You must have the City's Basic Life Insurance to purchase Supplemental Life Insurance. You may purchase Supplemental Life Insurance in amounts equal to one, two, three, or four times your base annual salary.

Your Supplemental Life coverage amount is rounded down to the nearest \$1,000. Your cost is based on your age, salary, and the amount of insurance selected. You may increase your Supplemental Life coverage annually during Open Enrollment by one coverage level each year, up to a maximum of four times your base annual salary.

Your Supplemental Life Insurance premiums may be deducted from your pay on a before or after-tax basis. You must indicate your choice on your Benefits Enrollment Form.

To calculate your per pay period cost, visit [austintexas.gov/benefits](http://austintexas.gov/benefits) or complete the Supplemental Life Insurance Worksheet at the end of the Life Insurance section.

## Choosing a Beneficiary

In the event of your death, your Basic and Supplemental Life are paid to your named beneficiary or beneficiaries. Unless prohibited by law, your life insurance benefits will be distributed to the beneficiaries you named. Current Texas law states a legally married spouse is entitled to 50% of the policy, and if not listed as a named beneficiary, the spouse may contest.

If you are legally married and designate less than 50% of your life insurance to your spouse, upon your death the life insurance carrier may contact your spouse for confirmation of this reduced percentage. If your spouse is not in agreement and an agreement is not reached between the beneficiaries listed, the Texas court will make the decision.

If your named beneficiary is under 18 years of age at the time of your death, court documents appointing a guardian may be required before payment can be made. You should talk with an attorney to make sure that benefits to a minor will be paid according to your wishes.

If you designate a testamentary trust as beneficiary (i.e. created by will), you should recognize the possibility that your will which was intended to create a trust may not be admitted to probate (because it is lost, contested, or suspended by a later will).

## Your Beneficiary Designation

It is important to keep your beneficiaries current.

You may review and update your City of Austin beneficiary information at any time in the online benefits enrollment system.

To change your beneficiary designations for other benefits, do one or more of the following:

- ◆ City of Austin Employees' Retirement System (COAERS) participants should call COAERS at **512-458-2551**.
- ◆ City of Austin Police Retirement System (PRS) participants should call PRS at **512-416-7672**.
- ◆ If you participate in the Deferred Compensation Plan, you can designate a beneficiary online at [dcaustin.com](http://dcaustin.com).
- ◆ If you participate in the CDHP w/HSA, you can designate a beneficiary online at [HSABank.com](http://HSABank.com).

## Accidental Death and Dismemberment (AD&D) Coverage

If you are enrolled in Basic and/or Supplemental Life Insurance, you also have AD&D coverage equal to the total amount of your life insurance.

If you have an injury that results in a covered loss you may be eligible for a percentage of your AD&D coverage in effect on the date of the accident. The loss must occur within 365 days of the accident. Injury means bodily injury caused by an accident, occurring while coverage is in force, and resulting directly and independently of all other causes in a loss covered by the AD&D policy.



## Imputed Income (I50)

The IRS requires the City to withhold taxes on the value of employer paid group term life insurance coverage over \$50,000. This includes your combined Basic Life and Supplemental Life Insurance coverage. The life insurance coverage premium exceeding the \$50,000 limit is taxable and is referred to as imputed income, and is also known by the IRS code "I50."

Example: John Smith is 45, and his annual salary is \$60,000. Unless he caps his basic life benefit paid by the City at \$50,000 he will have imputed income on the premiums for \$10,000 of coverage. According to the IRS, the taxable value of a 45-year-old individual is \$0.15 per \$1,000. Therefore, John's monthly imputed income is  $10 \times \$0.15 = \$1.50$ . To calculate your imputed income, visit [irs.gov](https://www.irs.gov) to view the premium table.

Using the example above, John also elects four times his annual salary in Supplemental Life Insurance. John should select "no" on his enrollment form for before-tax premiums. The result is no imputed income will be reported on his supplemental life value because premiums are deducted from his pay after taxes are calculated. Imputed income is coded as I50 on your paycheck. This income is subject to federal income tax and FICA (OASDI and Medicare), and is deducted on a monthly basis.

## Your Right to Convert

The Life Insurance that you have as an employee for you and your dependents will terminate when you separate employment with the City, because the group policy is Term Life insurance. Upon retirement or termination, you can convert your group policy, to an individual policy with the life insurance carrier (subject to plan limitations). If you convert to an individual policy please be aware that the cost of an individual policy may be significantly higher than the group plan due to your age. You must apply and pay your first premium no later than 31 days after the date the coverage has ended. For additional information on conversion to an individual policy, call the Employee Benefits Division at **512-974-3284**.

## Dependent Life Insurance

Dependent Life Insurance is available for your spouse, domestic partner, and children. AD&D coverage is not available for dependents. You must be covered under Basic Life Insurance offered by the City to be eligible to purchase Dependent Life Insurance. You have two options to choose from when purchasing coverage for your dependents. If you choose to enroll your dependents for Dependent Life Insurance coverage, you are the beneficiary under the plan.

Dependent Life Insurance Rate - Per Pay Period		
Option 1	Coverage Amount	Rate
Spouse or Domestic Partner	\$10,000	\$0.87
Children	\$5,000	\$0.14
Option 2	Coverage Amount	Rate
Spouse or Domestic Partner	\$20,000	\$2.04
Children	\$10,000	\$0.35





# SUPPLEMENTAL LIFE INSURANCE WORKSHEET

Employees must have Basic Life Insurance offered by the City to purchase Supplemental Life Insurance.

You may purchase Supplemental Life Insurance in amounts equal to 1, 2, 3, or 4 times your base annual salary. Base annual salary does not include shift differential, overtime, Service Incentive Pay, lump sum payments, or stipends.

To estimate your pay period cost for Supplemental Life Insurance, follow these steps, or calculate online at [austintexas.gov/benefits](http://austintexas.gov/benefits).

1. Determine your **Base Annual Salary**. Do not include any hours for overtime.

$$\underline{\hspace{2cm}} \text{ Hour Work Week} \times 52 \text{ weeks} = \underline{\hspace{2cm}} \text{ Hours} \times \$\underline{\hspace{2cm}} = \$\underline{\hspace{2cm}}$$

Hourly Rate Base                      Base Annual Salary

2. To find the **Supplemental Life Amount**, multiply your **Base Annual Salary** (from Step 1) by 1, 2, 3, or 4. Then round your answer down to the next closest \$1,000.

$$\begin{matrix} \$\underline{\hspace{2cm}} & \times 1, 2, 3, \text{ or } 4 & = & \$\underline{\hspace{2cm}} \\ \text{Base Annual Salary} & & & \text{Supplemental Life Amount} \end{matrix}$$

3. To find your **Number of \$1,000 Units**, divide the **Supplemental Life Amount** (from Step 2) by 1,000.

$$\begin{matrix} \$\underline{\hspace{2cm}} & \div 1,000 & = & \underline{\hspace{2cm}} \\ \text{Supplemental Life Amount} & & & \text{Number of \$1,000 Units} \end{matrix}$$

4. To find your **Pay Period Cost**, multiply the **Number of \$1,000 Units** (from Step 3) by the **Cost Per \$1,000 of Coverage** for your age group (see chart below). The answer in Step 4 is your estimated cost per pay period.

$$\begin{matrix} \$\underline{\hspace{2cm}} & \times & \$\underline{\hspace{2cm}} & = & \$\underline{\hspace{2cm}} \\ \text{Number of \$1,000 Units} & & \text{Cost per \$1,000} & & \text{Pay Period Cost,} \end{matrix}$$

Age	Cost Per \$1,000 of Coverage
34 and under	\$0.031
35 to 39 years	\$0.036
40 to 44 years	\$0.047
45 to 49 years	\$0.078
50 to 54 years	\$0.115
55 to 59 years	\$0.177
60 to 64 years	\$0.230
65 to 69 years	\$0.366
70 and older	\$0.844



# LEGAL INSURANCE PLAN

Legal is everywhere. Protect yourself and your family with legal insurance

Have you ever stopped to think about how many events in your life have a legal element to them? There are the joys — like getting married or buying the house of your dreams. And the challenges — like when true love doesn't work out or you find yourself fighting a speeding ticket.

With ARAG® legal insurance, your network attorney fees are 100% paid in full for a wide variety of covered legal matters.



## What does legal insurance cover?

- ◆ Wills and estate planning
- ◆ Real estate and home ownership
- ◆ Traffic tickets and license suspension
- ◆ Disputes with a landlord
- ◆ Family law matters
- ◆ Small claims court
- ◆ Personal property disputes
- ◆ Student loan debt
- ◆ Bankruptcy
- ◆ Tax audit
- ◆ Divorce
- ◆ School Administrative Hearings
- ◆ And more

To see a full list of coverages available under your plan, visit [ARAGlegal.com/myinfo](http://ARAGlegal.com/myinfo) and enter access code 17886coa. For any legal matters not covered and not excluded under the plan, you are eligible to receive at least 25% off the network attorney's normal rate.

## How legal insurance benefits you

- ◆ Receive 100% paid-in-full coverage on attorney fees for most covered legal matters when you work with a network attorney.
- ◆ On average, save \$368 per hour on attorney fees.\*
- ◆ Access a nationwide network of more than 15,000 attorneys who average 20 years of experience.
- ◆ Address your covered legal situations with a network attorney for legal help and representation.
- ◆ Use DIY Docs® to create any of 350+ legally valid documents, including state-specific templates.

## Learn more

Call ARAG Customer Care at **800-247-4184**, Monday–Friday, 7:00 a.m.–7:00 p.m. Central time.

ARAG Legal Rates - Per Pay Period	
Employee Only	\$4.99
Employee & Family	\$6.77

\* \$368 is the average hourly rate for a U.S. attorney with 11 to 15 years' experience according to The Survey of Law Firm Economics: 2018 Edition, The National Law Journal and ALM Legal Intelligence, October 2018.

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# HEALTHYCONNECTIONS

Prioritize your health and earn up to **16 hours** of Wellness Administrative Leave (WADL) and **\$150** in Healthy Rewards each calendar year.

With your supervisor's approval, you may be able to attend wellness activities on work time or use flex time to make up the time later in the week.

## Get Engaged in Wellness

Visit the HealthyConnections website on [CitySpace](#) for more information and links to register. For questions, call **512-974-3284** and ask to speak with a Wellness Consultant or email [HealthyConnections@austintexas.gov](mailto:HealthyConnections@austintexas.gov).

## Healthy Rewards Wellness Incentive Program

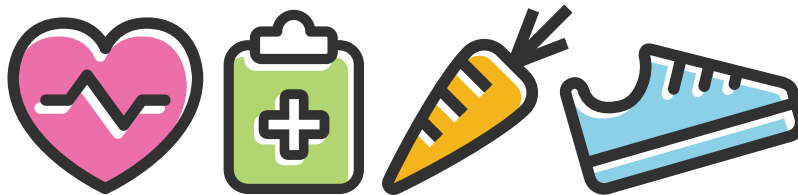
Healthy Rewards is a financial incentive program designed to engage employees in HealthyConnections campaigns and improve overall health status. Employees can participate in a variety of activities to earn up to **\$150 (taxable)** added to their mid-November paycheck.

Visit the HealthyConnections website on CitySpace to see a list of eligible wellness activities and preventive screenings.



### To Earn Healthy Rewards

- ◆ You must be enrolled in a City medical plan.
- ◆ You must be employed by the City at the time of November payout.
- ◆ You must complete the health assessment between January 1 and September 30.



## HealthyConnections

City of Austin Wellness Program



# Know Your Numbers

City of Austin Wellness Program

**Know your health numbers and prevent diseases like obesity, diabetes, hypertension, and heart disease.**

## Health Assessment: Earn 8 hours of WADL

Employees can earn eight hours of WADL for getting their health numbers and completing the health assessment. WADL must be used by December 31 and may be used by employees during their probationary period with supervisor approval.

### Step 1: Get your Health Numbers at a City Health Screening or your Annual Physical

- ◆ To register for a free biometric health screening at a City worksite, call **512-974-3284** or visit the HealthyConnections website on CitySpace. The complete schedule is posted on the HealthyConnections website.
- ◆ **OR**
- ◆ Use lab results from your most recent annual physical.

### Step 2: Complete the Health Assessment

Get a snapshot of your health, identify risk factors and create a game plan to a healthier you.

- ◆ Use your health numbers to complete the online Health Assessment.
- ◆ Employees enrolled in a City medical plan can earn the incentive once per calendar year.
- ◆ No personal health information is shared with the City.
- ◆ The online Health Assessment must be completed by September 30.



# Get Active

City of Austin Wellness Program

**Engage in heart healthy exercise that can prevent obesity, lower blood pressure and reduce stress.**

## PE Program – Earn up to 8 hours of WADL

HealthyConnections offers free exercise classes at City worksites to help employees improve their fitness and overall health. WADL must be used by December 31 and may be used by employees during their probationary period with supervisor approval.

Classes are offered on a quarterly basis, and registration can be accessed through the HR Portal at [hrportal.coacd.org/login.cfm](http://hrportal.coacd.org/login.cfm). Employees (excluding temporary employees) who attend 10 out of 12 workouts and complete the health assessment can earn four hours of WADL. A total of eight hours of WADL can be earned in quarters one through three. During quarter four, t-shirts will be given to employees who meet attendance requirements.

PE Anytime allows employees to track their exercise via the Map My Fitness app or Garmin/Fitbit fitness tracker and earn PE WADL. This option offers flexibility for individuals with challenging schedules or those wanting to exercise on their own.

## City of Austin Olympics – Earn Healthy Rewards

Form teams with your coworkers and compete in a Spring sports tournament including softball, basketball, kickball, sand volleyball and disc golf. Other events include a 5k, Kids 1K, organized bike ride, horse shoes, and washers. Attendees can visit healthy vendors, learn about Wellness & Benefits programs, and enjoy concessions.





**Make healthy lifestyle changes that improve health and wellness and prevent chronic diseases.**

### **Diabetes Control Program – Receive Diabetes Medications and Supplies at No Cost**

Learn how to manage your diabetes, get personalized diabetes care, and receive approved diabetes medications and testing supplies at no cost. This program is offered to employees and dependents who are diabetic or prediabetic and enrolled in a City medical plan. To enroll, visit the HealthyConnections website on CitySpace or call **512-974-3284**.

#### **Participants Receive:**

- ◆ Approved diabetes medications and testing supplies at no cost
- ◆ Comprehensive diabetes education
- ◆ Screenings through a pharmacist
- ◆ Nutritional counseling and support

### **Hinge Health**

City of Austin partners with Hinge Health to help you conquer back and joint pain, recover from injuries, prepare for surgery, or stay healthy and pain free. Their programs are available to you and your eligible dependents enrolled in a City medical plan at no cost and provide all the tools you need to get moving again from the comfort of your home. Your treatment plan will be tailored to you, and could include one-on-one physical therapy sessions, and wearable sensors to give live feedback on your form in the app.

### **Maternity & Lactation Support**

The City of Austin is dedicated to fostering healthy babies and families and is proud to be a Texas Mother-Friendly Worksite. Employees are allowed reasonable break times to express breast milk for up to one year after the child's birth. Mother-Friendly rooms are available in many City of Austin workplace facilities for mothers returning to work.

More information about the Mother-Friendly Worksite accommodations offered by the City of Austin can be found in Administrative Bulletin 13-01 or by contacting the Mother-Friendly Worksite Workgroup at [COAMotherFriendly@austintexas.gov](mailto:COAMotherFriendly@austintexas.gov).

For breast feeding support, contact Mom's Place at **512-972-6700** or visit [momsplace.org](http://momsplace.org) or [breastmilkcounts.com](http://breastmilkcounts.com).

### **Tobacco Cessation 101 – Receive Cessation Medications**

Gain the resources and support needed to quit using tobacco products. Tobacco Cessation program is available on-demand online by webinar or by one-on-one telephonic coaching. Individuals who complete the program are eligible to receive cessation medication (including over-the-counter products) free for six months with a doctor's prescription. Employees, spouses and eligible dependents (age 18 years and older) who are enrolled in a City medical plan are eligible for this benefit. Check the HealthyConnections website for more information.

### **Tobacco Premium**

Employees and spouses/domestic partners enrolled in a City medical plan who use tobacco will each pay \$12.50 per pay period. To stop the tobacco premium, employees and spouses using tobacco must complete the Tobacco Cessation 101 class. The scheduled classes can be found on [CitySpace](#). Spouses/domestic partners can attend a class without registering.



# EatWell

City of Austin Wellness Program

Learn heart healthy eating habits and simple strategies that can lead to a healthier you.

## Wondr Online Weight Management Program

This simple, online program helps employees lose weight and improve their health. It's not a diet. There are no points to count, no starving, and no eating diet food! The program teaches participants when and how to eat the foods they love while losing weight, boosting their energy and improving their health. By learning new techniques about how and when you should eat, you can continue eating your favorite foods while improving your health, reducing your chance of developing chronic disease, and losing weight. To enroll, call HealthyConnections at **512-974-3284** and ask to speak to a Wellness Consultant.

## Health Coaching

Supporting wellness in the workplace. Our Health Coaches can meet with employees in person or virtually to provide coaching. Get assistance with setting appropriate health and fitness goals, identifying barriers to success, and maintaining motivation along the way. Weight reduction, improving nutrition, and managing stress are examples of issues that can be addressed through nutritional counseling. Visit the HealthyConnections website to set up an appointment.





# EMPLOYEE ASSISTANCE PROGRAM (EAP)

ComPsych GuidanceResources® services provides short-term confidential counseling to help you and members of your household deal with life's stresses. The EAP provides resources to help you address a wide variety of issues. Services are available 24 hours a day, seven days a week at no cost to you.

Your EAP benefits will give you and the members of your household confidential support, resources, and information for personal and work-life issues.

ComPsych GuidanceResources® can help you with:

- ◆ Marital/family problems
- ◆ Stress, Anxiety & Depression
- ◆ Grief & Loss
- ◆ Work/vocation issues
- ◆ Domestic violence
- ◆ Psychological issues

**COMPSYCH**<sup>®</sup>  
GuidanceResources® Worldwide

ComPsych Guidance Resources can also assist with work/life issues such as:

- ◆ Legal Guidance – Including a free 30-minute consultation
- ◆ Financial Guidance
- ◆ Child/elder care referral
- ◆ Home repair
- ◆ Online Support and more

For assistance

Call: **866-586-1456** TTY: **800-697-0353**

Or

Visit: [guidanceresources.com](http://guidanceresources.com)

Web ID: [austintexas.gov](http://austintexas.gov)

Go Mobile! Access your GuidanceResources® program anytime, anywhere!

The GuidanceNow<sup>SM</sup> app gives you fast, easy access to Employee Assistance Program resources.

Check it out! Download the app from your smartphone or tablet.

- ◆ Search GuidanceResources (one word)
- ◆ Install GuidanceNow
- ◆ To register, click the Register link. Enter [austintexas.gov](http://austintexas.gov) as the Organization Web ID.







# CHILD CARE ASSISTANCE PROGRAM

The City of Austin offers up to a \$5,000 benefit to Full-time (minimum 30 hours), regular City employees with children under the age of 13 used to cover care-related costs that allow you to work, look for work, or attend school.

## To qualify:

1. Participants must be a regular City of Austin employee scheduled to work at least 30 hours a week.
2. Eligibility is based on the Employee's Gross Income Limit Table below. For example, a family of four with a gross income of \$138,600 a year qualifies for assistance. Participants must also meet all program eligibility requirements listed in the Child Care Application.
3. Employees will receive a Bi-weekly benefit of \$208.33 for eligible children 12 and under. Contributions begin the pay period in which you are approved for the program.

Family Size	2025 Gross Income Limit
2	\$110,880
3	\$124,740
4	\$138,600
5	\$149,710
6	\$162,965

## How the Program Works:

1. Employee submits application.
2. Benefits office reviews eligibility.
3. If approved, a Dependent Care FSA is created with Total Administrative Services Corporation (TASC). Contributions will be sent to this account on the 1st and 2nd pay date of each month after approval.
4. TASC will mail a debit card to new participants. Those enrolled in an FSA can continue to use their existing card.
5. Employees may use the debit card to pay for eligible expenses or file a claim with TASC for reimbursement.

## Qualifying Expenses

Examples of qualifying services include:

- ◆ Before- and after-school care (but not tuition)
- ◆ Late pick-up fees
- ◆ Licensed day care centers
- ◆ Nursery schools or preschools
- ◆ Day camps

**Applications for the program are accepted at any time throughout the year based on available funding. Annual contribution amounts will be reduced for late enrollees.**



# GET THERE ATX

Join the movement and change your commute! The City of Austin Employee Commute Program helps City of Austin employees understand their sustainable commute options and take action to reduce their drive-alone work trips, especially during peak travel time. The goal is to minimize the impact these commutes have on traffic congestion and air quality in our region.

## Free Annual CapMetro Transit & Bikeshare Passes

**CapMetro Transit:** All regular and temporary City employees can ride any Capital Metro bus, rail, or Pickup service at any time of day using their free employee transit pass (\$495 value). Employees can also use MetroAccess for free. Annual transit passes are available from your department's HR representative. Visit [capmetro.org](https://capmetro.org) for more information.

**CapMetro Bikeshare:** CapMetro Bikeshare provides a bikeshare network of 80 stations and a fleet of 800+ bikes throughout central Austin with plans to expand. All regular and temporary City employees can redeem a free annual CapMetro Bikeshare membership (\$86.80 value). The membership includes the use of electric pedal assist bicycles that are available 24/7, year-round for unlimited use. Sign up here: <https://atd.knack.com/smart-mobility#bike-benefit/>

## CapMetro's Pickup Services

CapMetro's Pickup Service allows employees with current City of Austin transit passes to be picked up from their home and taken anywhere within the Pickup service area. Visit <https://capmetro.org/pickup> for more information.

## CapMetro's Vanpool Program

CapMetro's Rideshare Vanpool Program provides eligible groups of 4-12 people with a month-to-month vanpool lease agreement including insurance, maintenance, 24-hour roadside assistance, etc.

All regular and temporary City employees can take advantage of Capital Metro's vanpool services for free, or at a discounted cost, through a subsidy of up to \$85 a month per person or \$500 a month per group. To learn more visit: <https://www.capmetro.org/ourservices/vanpool>.

## Austin Energy E-Ride Rebate & Incentives

Austin Energy provides the following benefits to all City of Austin residents who are Austin Energy customers:

1. **E-Ride Rebate** - Earn up to a \$600 E-Ride rebate when you purchase a qualifying personal e-bike, scooter, moped, motorcycle, or any other electric two or three-wheel vehicle. For more information visit: <https://austinenergy.com/green-power/plug-in-austin/more-ways-to-go-electric/e-ride-rebate>.
2. **Home Charging Station Rebate** – Austin Energy offers EV owners a rebate of 50% of the purchase and installation cost of an approved Level 2 (240V) charging station. For more information visit: <https://austinenergy.com/green-power/plug-in-austin/home-charging>.
3. **Charge-On-The Go** – Austin Energy's DC Fast Chargers are conveniently located near major transit routes in Austin, these chargers are perfect for quickly charging your EV. Charge up and get on your way for only \$0.21 per minute, plug-in to plug-out. Additionally, the Austin Energy Plug-In Everywhere network offers charging at their 1,600+ Level 2 charging ports. Level 2 charging stations charge \$0.09 per kWh. For more information visit: <https://austinenergy.com/green-power/plug-in-austin/everything-charging>.
4. **Electric Vehicle Buyer's Guide** - Austin Energy customers can receive incentives and tax credits when purchasing an electric vehicle. For more information visit: <https://ev.austinenergy.com>.

## My Commute Solutions

Looking for a biking buddy or carpool to join?

Interested in participating in a sustainable trip contest to earn a cool prize? Sign up here:

<https://mycommutesolutions.com/#/pages/austin>

Want more information or have a question? Check out our Get There ATX Employee Page (<https://www.getthereatx.com>) or contact us at: [getthereatx@austintexas.gov](mailto:getthereatx@austintexas.gov).

## Service Incentive Pay (SIP)

Regular employees who have completed three years of continuous service by December 1 will receive Service Incentive Pay of \$100 for every year of continuous service, up to \$1,500.

By law, this benefit is subject to withholding tax. Taxes are withheld according to your W-4 Form. The benefit payment is included in the first paycheck issued in December.

For more information, call the Compensation Division at **512-974-3292**.

## Tuition Reimbursement Program

The City of Austin offers tuition reimbursement to City employees to improve their job skills and career potential. The program is designed for employees who take City career-enhancing credit courses at almost any accredited, degree-granting college or university in the country. Employees (full- or part-time) in regular (non-temporary) positions who have completed the new hire probationary period are eligible for reimbursement.

For more information on the procedure and application, visit the Compensation page on CitySpace at [cityspace.austintexas.gov/Departments/Departments/Human-Resources/Divisions/Compensation](https://cityspace.austintexas.gov/Departments/Departments/Human-Resources/Divisions/Compensation). You may also contact the Tuition Reimbursement Coordinator at **512-974-3227** or via email at [tuitionreimbursement@austintexas.gov](mailto:tuitionreimbursement@austintexas.gov).

## Direct Deposit

It's safe, quick, and easy. To begin direct deposit, all you have to do is complete a City of Austin Direct Deposit Authorization Agreement form on the Financial Services Department website. Visit [coa.payroll@austintexas.gov](mailto:coa.payroll@austintexas.gov).

## Affordable Small Dollar Loans

Employees have access to affordable small dollar loans and free one-on-one financial coaching through the Community Loan Center (CLC) of Austin. Apply online at [clcofaustin.org](http://clcofaustin.org), no credit check requirements! For additional customer service assistance call **956-356-6600** or **214-688-7456**.

- ◆ Loans range from \$400-\$1000.
- ◆ 12 month terms based on your payroll schedule at 18% interest rate.
- ◆ One-time \$20.00 loan processing fee and easy to use online account management profile.
- ◆ No pre-payment penalty fees. Payments can be deducted from your paycheck or drafted from your checking account.
- ◆ One-on-one financial coaching at no cost.
- ◆ Benefit Eligibility requirements include over 90 days of employment, minimum 18 years of age and a checking account.

## Homebuyer Assistance Program

The Housing Department manages programs with area home builders and non-profit agencies to help eligible employees achieve home ownership, including education and down payment assistance. For more information, call **512-974-3199** or email [HPDCS@austintexas.gov](mailto:HPDCS@austintexas.gov).

## Other Benefits

- ◆ Tax Preparation Assistance, if eligible. Visit [foundcom.org](http://foundcom.org).
- ◆ Free entry to City parks and pools, including Deep Eddy and Barton Springs pools (does not include Zilker Botanical Gardens, Emma Long Park, and golf courses).
- ◆ Free parking permits to Zilker Park are available at the Parks and Recreation Department.



## Leave Programs

The following information summarizes current leave policies. The benefits described do not imply a guarantee of employment or a continuation of the leave program. Leave policies are subject to change.

Refer to the City's Personnel Policies for more information. If there is a conflict between the information provided in this section of the Guide and the Personnel Policies, the Personnel Policies take over.

If you have any questions about leave, call the Human Resources Department at **512-974-3400**.

### Paid Leave

Paid leave benefits are available for a number of approved reasons. Examples of paid leave benefits include:

- ◆ Official holidays
- ◆ Vacation leave
- ◆ Sick leave
- ◆ Personal holidays

The paid leave benefits described in this section apply to you if you are a full-time employee in a regular budgeted position. As a part-time employee, you earn leave benefits on a prorated basis.

### Official Holidays

City holidays for 2025 are listed below. You may be required to work on an official holiday.

Let Texas Vote Day is an optional holiday for City employees and should not impact City services. Employees must request time off for this holiday by submitting a Leave Request Form at least one week in advance of the holiday to their supervisors.

Holiday	Date Observed
New Years Day	January 1
Martin Luther King, Jr. Day	January 20
Presidents' Day	February 17
Memorial Day	May 26
Juneteenth	June 19
Independence Day	July 4
Labor Day	September 1
Let Texas Vote (Optional)	November 4
Veterans Day	November 11
Thanksgiving Day	November 27
Thanksgiving Friday	November 28
Christmas Eve Observed	December 24
Christmas Day Observed	December 25

### Vacation Leave

You may use vacation leave for any reason. The amount that you earn depends on how long you have worked continuously for the City and the number of hours you work each week, based on 24 pay periods annually.

The number of hours you earn per pay period as a full-time regular employee working 40 hours per week is listed in the following chart. If you are scheduled to work other than a 40-hour work week, you accrue vacation leave at a different rate. Civil service employees also accrue vacation leave at a different rate.

You should keep in mind a few other things about vacation leave:

- ◆ You may request vacation leave at any time after you have accrued it.
- ◆ If you become ill while you are on vacation leave, you may request that your vacation leave be temporarily stopped and your absence be charged to sick leave.
- ◆ Payment of unused vacation leave upon resignation or retirement is limited up to 240 hours.
- ◆ You may use vacation leave while on family or medical leave.

Years Worked	Hours You Earn
Less than 5	4.34
5 but less than 10	5.34
10 but less than 15	6.00
15 but less than 20	6.67
20 or more	7.67

Maximum accrual is 400 hours.

### Sick Leave

You earn four hours of sick leave per pay period, based on 24 pay periods annually, as a full-time, regular employee working 40 hours per week. If you are scheduled to work other than a 40-hour work week, you accrue sick leave at a different rate. Civil service employees also accrue sick leave at a different rate.

Sick leave must be earned before it can be used. If you do not use your sick leave, you may carry unused hours forward into the next year. Sick leave may be accrued on an unlimited basis. If you are on sick leave for five work days or more due to your own health condition, a return to work release form must be completed by your health care provider and given to your supervisor before you will be allowed to return to work.

### Sick Leave for Temporary Employees

Sick leave is available for a temporary employee after they have worked for one pay period.

- ◆ Hours are based on the employee's projected workweek.
- ◆ Available hours will appear when their paycheck is received.

- ◆ Hours are earned as listed in the following chart, up to the maximum amount in one year.
- ◆ Sick leave balances will carry over from the previous year; however, the balance will not exceed the maximum accrual amount..
- ◆ If requested sick leave is more than three (3) consecutive work days, supporting documentation may be required.

Hours per work week	Accrue per pay period	Maximum accrual hours
40 hours	3.00	72.00
More than or equal to 30 and less than 40	3.00	54.00
More than or equal to 20 and less than 30	2.00	36.00
Less than 20	1.00	18.00

### Personal Holidays

Upon completion of your six-month probationary period, the following pay period you are eligible to take three personal holidays each year. If you do not use your personal holidays in the year earned, they cannot be carried over into the following year.

### Family and Medical Leave (FMLA)

The Family and Medical Leave Act (FMLA) entitles eligible employees to take unpaid, job-protected leave for specific qualifying family, medical, or military support needs with continuation of group health insurance coverage under the same terms and conditions as if the Employee had not taken leave. When requested and approved, appropriate paid and unpaid leave can be used and will count toward the family and medical leave entitlement.

You are eligible for unpaid, job-protected leave under the FMLA if you have been employed with the City for at least 12 months and worked 1,250 hours during the 12 months prior to the start of the leave. The 12 months of employment need not be consecutive. For employees who experience a break in service in fulfillment of the Uniformed Services Employment and Reemployment Rights Act (USERRA), the months employed and the hours that were actually worked for the City should be combined with the months and hours that would have been worked during the 12 months prior to the start of the leave requested, had it not been for the military leave.

Eligible employees are entitled to job-protected, unpaid leave in a calendar year, based on the Employee's normal work week, for one or more of the following reasons:

- ◆ The birth and care of your newborn child.
- ◆ The placement with the employee of a child for adoption or foster care.
- ◆ To care for the employee's husband, wife, domestic partner, son, daughter, or parent with a serious health condition.

- ◆ A serious health condition that makes the employee unable to perform one or more essential functions of their job.

Family leave must be taken within 12 months after the birth of a child or the placement of a child for adoption or foster care. FMLA leave may be used before the actual placement or adoption if the absence is required for the placement or foster care. Intermittent use of family leave requires approval from the Department Director.

An employee should notify their department FMLA Coordinator at least 30 days prior to a planned medical treatment that requires FMLA leave. If advanced notification is not practical or the reason is unplanned, you must give notice as soon as possible, generally within one or two business days. Your Department Director may require you to provide satisfactory proof of the proper use of medical leave. If satisfactory proof is not provided, your request for FMLA may be denied.

If you are on paid or unpaid Leave of Absence, please contact the Employee Benefits Division at **512-974-3284** to discuss how your Leave affects your benefits.

### Qualifying Exigency Leave

Under the FMLA, eligible employees may take leave for qualifying exigencies arising out of the active duty or call to active duty of a family member who is a member of the National Guard, Reserve, or active duty armed forces. This leave allows families to manage their affairs while their family member is on active duty in support of a contingency operation.

### Military Family Leave

#### ***Military Caregiver Leave (also known as Covered Service Member Leave)***

Eligible employees who are family members of covered service members may take up to 26 workweeks of FMLA leave in a single 12-month period to care for a covered service member who has incurred a serious illness or injury in the line of duty while on active duty. This 26-workweek entitlement is an extended provision under the FMLA, offering job-protected leave beyond the normal 12 weeks of FMLA leave.

### Employees on Leave of Absence

As a City employee, you may be granted a leave of absence under certain circumstances. All requests for leave of absence must be approved by your Department Director, and requests for leave of more than 30 days must also be approved by the City Manager. The maximum total time for which a leave of absence may be granted is one year.

If you are on leave for five or more consecutive work days due to your own health condition, a return to work release form must be completed by your health care provider stating that you are able to resume work and returned to your department Human Resources before you will be allowed to return to work.

If you are participating in the Deferred Compensation loan program and you are on an unpaid leave of absence, automatic deductions are not possible. You must contact the Deferred Compensation office to prevent default on your loan.

If you are on unpaid Leave of Absence call the Employee Benefit Division at **512-974-3284** to discuss how your Leave of Absence affects your benefits.

**Parental Leave**

Effective October 6, 2024, Non-sworn employees in a regularly budgeted position who qualify for FMLA may receive up to 12 weeks of paid leave (prorated based on budgeted workweek) for the birth and care of a child, or placement of a child for adoption or foster care during the FMLA period. Documentation for birth, adoption, or foster care must be provided to the Department Leave Coordinator before an employee can code the time on the timesheet. Temporary employees are not eligible.

Effective July 18, 2024, Sworn employees in the Emergency Medical Services Department may receive up to 10 weeks of paid leave (prorated based on budgeted workweek) for the birth and care of a child, or placement of a child for adoption or foster care during the FMLA period.

Effective October 6, 2024, the City of Austin will begin a pilot program for female sworn firefighters who give birth between 10/6/24 and 9/30/25, offering up to 400 hours (10 weeks) of continuous paid leave in addition to the 240 hours of Paid Parental Leave, for a total of up to 640 hours (16 weeks). This leave must be taken within the FMLA period and used continuously at no more than 40 hours per week.

HOURS AWARDED FOR PARENTAL LEAVE				
Budgeted Work Week	Non-Sworn	EMS Sworn	Fire & Police Sworn	Female Fire Sworn
40+	480	400	240	640
30 - 39	360	300	180	
20 - 29	240	200	120	
Less than 20	120	100	60	

**Leave Bank**

Employees who are on approved FMLA leave who do not have enough personal accrued leave in order to be paid for the time they are off work due to the FMLA-qualifying reason are eligible to apply for leave bank hours. Through a donation of accrued sick and/or vacation leave, you can become a member of the Leave Bank and apply for hours based on your budgeted workweek. Membership in the Leave Bank is annual and must be renewed each year during the Benefits Open Enrollment period by donating the required number of hours. There is no limit to the number of hours you can donate to become

a member. A non-member who seeks leave from the Leave Bank due to an unforeseen FMLA-qualifying event may enroll to become a member outside of the Open Enrollment Period. However, the required donation of hours is more, and the hours they are eligible to receive is reduced.

HOURS AWARDED FOR LEAVE BANK		
Budgeted Work Week	Joined by donating 8 hours during Open Enrollment	Joined by donating 16 hours due to an unforeseen FMLA event
40	240	120
30 - 39	180	90
20 - 29	120	60
Less than 20	60	30

**Shared Accrued Leave Program**

The City of Austin’s Shared Accrued Leave Program offers vital support to employees during catastrophic personal or family medical emergencies. To qualify, the medical condition or injury must meet specific criteria. Donations are made directly to the recipient and recipients must exhaust all accrued leave, resulting in at least 40 hours (or prorated workweek) without pay. Recipients must not be eligible for or receiving Workers’ Compensation or other City-paid benefits like long-term disability, short-term disability, or wage continuation. An application and certification by a healthcare provider are required. Donations are capped at 520 hours, with an additional 520 hours available under special circumstances for the same condition or event, and a lifetime maximum of 1040 hours. The program covers the recurrence of the original qualifying event, and unused donated leave is redistributed on a prorated basis. This program operates independently of FMLA definitions and does not extend FMLA work guarantees.

**Child Bereavement Leave**

The City of Austin provides up to four weeks of paid leave through the Child Bereavement Leave Program for full-time or part-time employees in regularly budgeted positions ensuring that employees have the necessary time to grieve and begin healing during this difficult period. This leave is available for the death of a child, including biological, adopted, foster children, stepchildren, children of a person standing in loco parentis, or a legal ward under age 18, as well as for stillbirths as defined by the CDC.



## Recruitment Division - Diversity and Veteran Initiatives

The City of Austin is a Five Star Employer with a Diversity and Veteran Initiatives Division. This division develops and implements a comprehensive, integrated, and strategic focus on diversity and inclusion as a key component of all human resources recruitment, Diversity, Disability, and Veteran programs and other community engagement activities.

### The City's Veteran program:

- ◆ Provides training to departments about their responsibilities under USERRA, the Uniformed Services Employment and Reemployment Rights Act. This Federal legislation addresses a wide range of issues such as hiring, leave, and benefits.
- ◆ Partners with community organizations to participate in job fairs to hire Veterans for open City positions.

### City benefits include the following or Veteran Employees:

- ◆ 15 days of paid military leave per fiscal year.
- ◆ Military Pay Supplement Program.
- ◆ Veteran's preference in the City hiring process.
- ◆ Service credit toward City retirement for military service.
- ◆ Continuation of benefits through Family and Medical Leave (FMLA).

For more information, call the Veteran Services Consultant at **512-974-3306**.

## Workers' Compensation

Workers' Compensation is a program for managing medical treatment and loss of wages if you are injured on-the-job. The City provides this coverage for compensable injuries and illnesses according to state law. Workers' Compensation benefits are provided to you at no cost.

### If you are injured on-the-job, you may be eligible for payment of:

- ◆ All reasonable and necessary medical treatment.
- ◆ 70% or 75% of your average weekly wage, depending on your hourly rate.

If you are injured on-the-job, the Departmental Workers' Compensation Representative (DWCR) in your department who is assigned to your case can answer questions about your Workers' Compensation benefits. You must report your claim immediately to your supervisor. Ask your doctor to complete and sign the proper work status form and return it to your DWCR.

For more information, call Risk Management in Human Resources at **512-974-3447** or your DWCR.





# RETIREMENT

## Employee Retirement Systems

As part of your compensation, the City provides retirement benefits. Several programs are available to help you prepare for your retirement. These programs include mandatory participation in one of three separate retirement systems, an optional Deferred Compensation Program, and City contributions to Social Security on your behalf.

Employees are eligible for retirement when they meet one of the following age and service requirements. For more information about your defined benefit retirement plan, contact your retirement system.

### City of Austin Employees Retirement System (COAERS)

Call 512-458-2551, or visit [coaers.org](http://coaers.org).

#### Group A –

**Employees hired on or before December 31, 2011.**

- ◆ 23 years of creditable service at any age
- ◆ 20 years of creditable service at age 55
- ◆ Any number of years creditable service at age 62

**Group B – Employees hired on or after January 1, 2012.**

#### Normal Retirement

- ◆ 30 years creditable service at age 62
- ◆ 5 years of creditable service at age 65

#### Early Retirement

- ◆ 10 years of creditable service at age 55
- ◆ Reduced annuity

### Austin Fire Fighters Relief and Retirement Fund (AFRS)

Call 512-454-9567, or visit [afrfund.org](http://afrfund.org).

#### Normal Retirement

- ◆ 10 years of service at age 50
- ◆ 25 years of service at any age

#### Early Retirement

- ◆ 10 years of service at age 45
- ◆ 20 years of service at any age

### City of Austin

#### Police Retirement System (PRS)

Call 512-416-7672, or visit [ausprs.org](http://ausprs.org).

#### Group A –

**Employees hired on or before December 31, 2021**

#### Normal Retirement

- ◆ 23 years creditable service at any age (excluding prior military service)
- ◆ 20 years creditable service at age 55 (excluding prior military service)
- ◆ Any number of years creditable service at age 62

#### Early Retirement

- ◆ None

**Group B – Employees hired on or after January 1, 2022**

#### Normal Retirement

- ◆ 25 years creditable service at age 50 (excluding prior military service)
- ◆ Any number of years creditable service at age 62

#### Early Retirement

- ◆ None

### Social Security

Social Security pays benefits once you meet certain eligibility requirements when you retire, become disabled, or die. Social Security taxes are paid by you and the City. At the current time, this amount is 6.2% for Old Age, Survivors and Disability Insurance (OASDI) and 1.45% for Medicare Tax. However, these amounts are subject to any changes made by the United States Congress.

Contributions by firefighters to Social Security may vary, and in some cases, may not be made at all. If you are a firefighter, contact the Austin Fire Fighters Relief and Retirement Fund for more information about your Social Security benefits.

Questions about Social Security benefits may be directed to the Social Security Administration at **800-772-1213**, or visit [socialsecurity.gov](http://socialsecurity.gov).



# DEFERRED COMPENSATION (457 PLAN)

## Benefits of the City of Austin Deferred Compensation Plan

How much do you need to retire? Your pension and/or Social Security may not cover your income needs in retirement. Consider enrolling in the City of Austin Deferred Compensation Plan to take advantage of benefits like these:

### Flexible account options

- ◆ **A variety of investing options** – Whether you are a hands-on investor or prefer a pre-diversified target date fund,<sup>1</sup> the Plan has a range of options to choose from.
- ◆ **Before-tax or after-tax Roth** – You can contribute on a before-tax or after-tax Roth basis (or both!).
- ◆ **Purchase service credit** – You may be eligible to purchase service credit or Supplementary Service Credit by transferring all or some of your 457 account balance (before-tax only; after-tax Roth monies not eligible).
- ◆ **No early withdrawal penalty** – If you retire or separate from service before age 59½, you won't pay the 10% early withdrawal penalty that applies to many retirement savings accounts, including IRAs.<sup>2</sup>

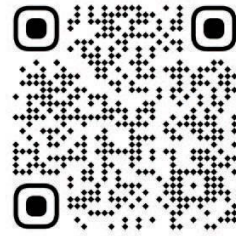
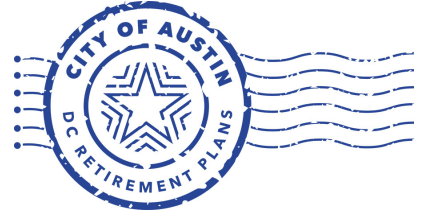
### Get a head start

Put time on your side by starting with \$25 or 1% of your salary per paycheck. You can change, stop or restart at any time. See how \$25, \$75 or \$150 per paycheck can make a big difference in your potential income in retirement.

FOR ILLUSTRATIVE PURPOSES ONLY. This hypothetical illustration is not intended as a projection or prediction of future investment results. It assumes 26 pay periods per year, a 5% annual rate of return during retirement, a 25% federal income tax bracket, reinvestment of earnings, retirement at age 65, and that the payee lives 20 years in retirement. Rates of return may vary. Distributions from a tax-deferred retirement plan may be taxable as ordinary income. The illustration does not reflect any fees, which could change the outcomes provided.

## Local help when you need it

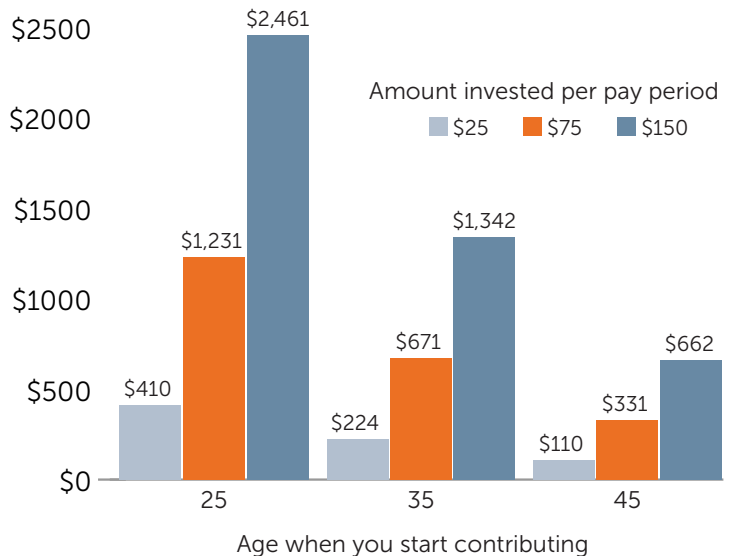
Local Retirement Plan Counselors, dedicated to the City of Austin's Plan, are available to help you plan for your retirement at no cost to you. If you have questions about the Plan or want to schedule an individual appointment, visit [dcaustin.com](http://dcaustin.com), call 866-613-6189 or scan the QR code.



## Enroll today!

Enroll online at [dcaustin.com](http://dcaustin.com) or call 866-613-6189 to get started.

## Potential monthly income in retirement



1 Asset allocation and balanced investment options are subject to the risks of their underlying investments.

2 Before-tax withdrawals are subject to ordinary income tax. After-tax withdrawals are not subject to ordinary income tax provided that the distribution occurs after age 59½, death or disability and at least five years after your first contribution. Money from other types of plans or accounts that are rolled over into a 457 plan may still be subject to the 10% federal tax penalty.

Investing involves risk, including possible loss of principal.

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# 2025 PER PAY PERIOD RATES

Medical			
FT & Temporary Employees (30+ Hours Per Week)	CDHP w/HSA (BlueChoice PPO)	PPO (BlueChoice PPO)	HMO (BlueEssentials)
Employee Only	\$0.00	\$15.00	\$20.00
Employee & Spouse**	\$96.37	\$200.67	\$210.67
Employee & Child(ren)	\$47.79	\$147.84	\$157.84
Employee & Family	\$221.63	\$336.91	\$346.91
PT & Temporary Employees (20-29 Hours Per Week)			
Employee Only	\$138.08	\$127.03	\$132.03
Employee & Spouse**	\$358.04	\$428.08	\$438.08
Employee & Child(ren)	\$288.22	\$351.04	\$361.04
Employee & Family	\$537.27	\$632.41	\$642.41
PT Employees (Less than 20 Hours Per Week)			
Employee Only	\$276.16	\$357.03	\$428.68
Employee & Spouse**	\$619.71	\$801.14	\$978.96
Employee & Child(ren)	\$528.65	\$684.21	\$835.88
Employee & Family	\$852.91	\$1,102.63	\$1,347.18

Dental				
	Employee Only	Employee & Spouse**	Employee & Child(ren)	Employee & Family
FT Employees (30+ Hours Per Week)	\$2.50	\$28.51	\$28.51	\$32.01
PT Employees (20-29 Hours Per Week)	\$9.62	\$34.15	\$34.15	\$37.65
PT Employees (Less than 20 Hours Per Week)	\$27.67	\$70.51	\$70.51	\$74.01

Vision			
Employee Only	Employee & Spouse**	Employee & Child(ren)	Employee & Family
\$1.98	\$4.28	\$4.06	\$6.47

Dependent Life Insurance		
Option 1	Coverage Amount	Rate
Spouse or Domestic Partner	\$10,000	\$0.87
Children	\$5,000	\$0.14
Option 2	Coverage Amount	Rate
Spouse or Domestic Partner	\$20,000	\$2.04
Children	\$10,000	\$0.35

Supplemental Life Insurance	
Age	Cost per \$1,000 of Coverage
34 and under	\$0.031
35 to 39 years	\$0.036
40 to 44 years	\$0.047
45 to 49 years	\$0.078
50 to 54 years	\$0.115
55 to 59 years	\$0.177
60 to 64 years	\$0.230
65 to 69 years	\$0.366
70 and older	\$0.844

Long Term Disability	
Age	Cost per \$100 of base annual salary
29 and under	\$0.082
30 to 39 years	\$0.108
40 to 49 years	\$0.236
50 to 59 years	\$0.442
60 to 69 years	\$0.338
70 and older	\$0.118

ARAG Legal Rates - Per Pay Period	
Employee Only	Employee & Family
\$4.99	\$6.77

\* Temporary employee rates are based on average hours worked after completing 12 months of consecutive employment

\*\* Spouse or Domestic Partner





# CONTACT INFORMATION

Below you will find contact information for the vendors that provide services to City employees and their dependents. Plan documents, claim activity, provider search can be found on the websites listed below

Benefit	Vendor	Phone Number	Website
<b>Medical</b> PPO - Group No. 246681 HMO - Group No. 246682 CDHP - Group No. 246683	BlueCross BlueShield	888-907-7880	<a href="http://bcbstx.com/coa">bcbstx.com/coa</a>
<b>Dental</b> Group No. 299988	BlueCross BlueShield	888-907-7880	<a href="http://bcbstx.com/coa">bcbstx.com/coa</a>
<b>Vision</b> Group No. 9614	Avesis	866-563-3589	<a href="http://myavesis.com">myavesis.com</a>
<b>Health Savings Account</b>	HSA Bank	855-731-5220	<a href="http://hsabank.com">hsabank.com</a>
<b>Flexible Spending Accounts</b>	TASC	800-422-4661	<a href="http://tasconline.com">tasconline.com</a>
<b>Short Term Disability</b> <b>Long Term Disability</b>	New York Life	800-459-2780 Spanish: 866-562-8421	<a href="http://mynylgbs.com">mynylgbs.com</a>
<b>Legal</b> Group No. 17886	Arag	800-247-4184	<a href="http://araglegal.com/myinfo">araglegal.com/myinfo</a>
<b>Cobra &amp; Self Pay</b>	Inspria Financial	888-678-7835	<a href="http://mybenefits.inspirafinancial.com">mybenefits.inspirafinancial.com</a>
<b>457 Plan</b>	Empower Retirement	866-613-6189	<a href="http://dcaustin.com">dcaustin.com</a>
<b>Employee Assistance Program</b>	ComPsych	866-586-1456	<a href="http://guidanceresources.com">guidanceresources.com</a>

## Retirement Systems

		Phone Number	Website
<b>Austin Fire Fighters Relief &amp; Retirement Fund (AFRS)</b>	Retirement	512-454-9567	<a href="http://afrs.org">afrs.org</a>
<b>City of Austin Police Retirement System (PRS)</b>	Retirement	512-416-7672	<a href="http://ausprs.org">ausprs.org</a>
<b>City of Austin Retirement System (COAERS)</b>	Retirement	512-458-2551	<a href="http://coaers.org">coaers.org</a>



# IMPORTANT BENEFITS INFORMATION

## Summary of Benefits and Coverage (SBC)

Under the law, insurance companies and group health plans must provide consumers with a concise document detailing, in plain language, simple and consistent information about health plan benefits and coverage. This summary will help consumers better understand the coverage they have and allow them to easily compare different coverage options. It summarizes the key features of the plan and coverage limitations and exceptions. For a copy of the SBC of the City's medical plans, visit [austintexas.gov/benefits](https://austintexas.gov/benefits), or call the Employee Benefits Division at **512-974-3284**.

## ADA Compliance

The City is committed to complying with the Americans with Disabilities Act (ADA). Reasonable accommodation, including equal access to communications, will be provided upon request. For more information, call the Human Resources Department at **512-974-3284**, use the Relay Texas TTY number **800-735-2989** for assistance, or visit [austintexas.gov/ada](https://austintexas.gov/ada).

## Governing Plan

Your rights are governed by each plan instrument (which may be a plan document, evidence of coverage, certificate of coverage or contract), and not by the information in this Guide. If there is a conflict between the provisions of the plan you selected and this Guide, the terms of the plan govern. City of Austin employees have access to benefits approved by the City Council each year as part of the budget process. The benefits and services offered by the City may be changed or terminated at any time. These benefits are not a guarantee of your employment with the City.

## The Health Insurance Portability & Accountability Act of 1996 (HIPAA)

Group health plans sponsored by State and local governmental employers must generally comply with Federal law requirements in title XXVII of the Public Health Service Act. However, if the employer's group health plan is self-funded rather than provided through an insurance policy, these employers are permitted to elect to exempt their group health plan from the requirements listed below. The City of Austin has elected to exempt all its self-funded medical plans, CDHP, PPO, and HMO, from all the following requirements. However, while exempt from these provisions, the City of Austin medical plans do provide benefits to employees that are comparable to those required by the Public Health Service Act:

1. Protection against limiting hospital stays in connection with the birth of a child to less than 48 hours for a vaginal delivery, and 96 hours for a cesarean section.
2. Protections against having benefits for mental health and substance use disorders be subject to more restrictions than apply to medical and surgical benefits covered by the plan.
3. Certain requirements to provide benefits for breast reconstruction after a mastectomy.
4. Continued coverage for up to one year for a dependent child who is covered as a dependent under the plan solely based on student status, who takes a medically necessary leave of absence from a postsecondary educational institution.

The exemption from these Federal requirements will be in effect for the plan year beginning January 1, 2025 and ending December 31, 2025. The City of Austin may renew this election for subsequent plan years.

## The Women's Health and Cancer Rights Act of 1998

This law was enacted on October 21, 1998. It provides certain protections for breast cancer patients who elect breast reconstruction in connection with a mastectomy. Specifically, the act requires that health plans cover post-mastectomy reconstructive breast surgery if they provide medical and surgical coverage for mastectomies. Coverage must be provided for:

- ◆ Reconstruction of the breast on which the mastectomy has been performed.
- ◆ Surgery and reconstruction of the other breast to produce a symmetrical appearance.
- ◆ Prostheses and physical complications of all stages of mastectomy, including lymph edemas.
- ◆ Secondary consultation, whether such consultation is based on a positive or negative initial diagnosis.

The benefits required under the **Women's Health and Cancer Rights Act of 1998** must be provided in a manner determined in consultation with the attending physician and the patient. These benefits are subject to the health plan's regular copays and deductibles.

## Patient Protection and Affordable Care Act

As part of the Patient Protection and Affordable Care Act (Health Reform) effective January 2013, medical plans which exceed a threshold level established by the federal government will have to pay a 40% excise tax. The City of Austin is committed to designing a medical plan that is below the threshold level. However, if the threshold is reached, the cost of the excise tax will be passed on to employees and retirees.

## COBRA

The Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), as amended, is a federal law that requires employers to offer qualified beneficiaries the opportunity to continue medical coverage, vision coverage, dental coverage, or participation in the Health Care FSA at their own cost in the case of certain qualifying events. Continuation of your life insurance, short term disability, long term disability, Dependent Care FSA, and group legal plan is not available under COBRA.

**COBRA Notice Requirements:** Each employee or qualified beneficiary is required to notify the Employee Benefits Division of the Human Resources Department within 60 days of a divorce, legal separation, a child no longer meeting the definition of dependent, or entitlement to Medicare benefits. Erisa, the City's COBRA administrator, will then notify all qualified beneficiaries of their rights to enroll in COBRA coverage. Notice to a qualified beneficiary who is the spouse or former spouse of the covered employee is considered proper notification to all other qualified beneficiaries residing with the spouse or former spouse at the time the notification is made.

## Continuation of Coverage for Domestic Partners

The City offers covered individuals the opportunity to continue medical coverage, vision coverage, and dental coverage at their own cost in the case of certain qualifying events. Continuation of life insurance is not available under Continuation of Coverage for Domestic Partners.

Each employee or covered individual is required to notify the Employee Benefits Division of the Human Resources Department within 31 days of dissolution of the Domestic Partnership, a child no longer meeting the definition of dependent, or entitlement to Medicare benefits. Erisa, the City's administrator, will then notify all covered individuals of their rights to enroll in Continuation of Coverage for Domestic Partners coverage. Notice to a covered individual who is the Domestic Partner or former Domestic Partner of the covered employee is considered proper notification to all other covered individuals residing with the Domestic Partner or former Domestic Partner at the time the notification is made.

## USERRA Continuation of Coverage

The Uniformed Services Employment and Reemployment Rights Act (USERRA) provides that if you are required to be absent from work for a period of time due to voluntary or involuntary military service or training, you have certain reemployment and medical benefits continuation rights during your absence. You and your family members have the opportunity to continue your benefits from the date coverage otherwise would end, provided you pay the premium. However, for absences of less than 31 days, you may continue benefits while paying only your usual share of the cost. When you return to work, no exclusions or waiting periods will apply.

## Surviving Dependent Coverage

Your dependent may be eligible for Surviving Dependent medical, dental, and vision coverage only if you meet one of the following requirements and your dependent completes a Surviving Dependent Benefits Enrollment Form within 31 days from

- ◆ You are a City retiree under the City of Austin Employees' Retirement System, Austin Fire Fighters Relief and Retirement Fund, or City of Austin Police Retirement System.
- ◆ You are an active City employee who is eligible to retire with the City but chose to continue to work for the City.
- ◆ You are a City retiree who has returned to active employment with the City.

If eligible, your dependent will be able to continue his or her coverage through the City after your death, provided your dependent was enrolled in medical, dental, and vision coverage at the time of your death. The coverage offered is the same coverage offered to City retirees.

## Surviving Family/Work-Related Coverage

If you are a Police Officer, Firefighter, or EMS employee and are killed in the line of duty (your accident must be considered compensable under the City's Workers' Compensation program) while working for the City, your dependents who are enrolled in a City medical or dental plan at the time of your death are allowed to continue their coverage, if they complete a Surviving Family Benefits Enrollment Form and pay the premium within 90 days from the date of your death. The City will continue to subsidize the premium.

Surviving Family/Work-Related Coverage is not available to active employees who are also City retirees who have returned to work for the City and have declined active employee benefits. The City will notify your surviving dependents of their eligibility for Surviving Family/Work-Related Coverage.

For more information or to receive a Surviving Family/Work-Related Benefits Guide, call the Employee Benefits Division at **512-974-3284**.

## Your Prescription Drug Coverage and Medicare

### Beneficiary Creditable Coverage Disclosure Notice

This notice has information about your current prescription drug coverage with the City of Austin and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining a Medicare drug plan, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in this area. There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. On January 1, 2006, new prescription drug coverage became available to individuals with Medicare Part A. This coverage is available through Medicare prescription drug plans, also referred to as Medicare Part D. All such plans provide a standard, minimum level of coverage established by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. The City of Austin has determined that prescription drug coverage offered through City health plans is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.



## Other Important Considerations

- ◆ If you currently have prescription drug coverage through a City health plan, you may choose to enroll in Medicare Part D annually between October 15 and December 7, or when you first become eligible for Medicare Part D.
- ◆ If you decide to join a Medicare drug plan, your current City of Austin medical coverage will not be affected.
- ◆ If you do decide to join a Medicare drug plan and drop your current City of Austin coverage for your dependents, you may be able to get this coverage back during an Open Enrollment period.
- ◆ You should also know that if you drop or lose your current coverage with the City of Austin and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later. If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go 19 months without Creditable Coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium.
- ◆ You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.
- ◆ If you are enrolled in Medicare Part D or a Medicare Advantage Plan and are also enrolled in the City health plan, you may have duplicate prescription coverage. If you would like to review your coverage or for more information, call the Employee Benefits Division of the Human Resources Department at **512-974-3284**.

## More information about Medicare Part D prescription drug coverage

More detailed information about Medicare plans that offer prescription drug coverage is in the *Medicare & You* handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans. You can also:

- ◆ Visit [medicare.gov](https://www.medicare.gov) for personalized help.
- ◆ Call the **Health and Human Services Commission of Texas** toll free at **888-834-7406**, local number **800-252-9330**.
- ◆ Call **800-MEDICARE (800-633-4227)**.
- ◆ TTY users should call **877-486-2048**.

Financial assistance may be available for individuals with limited income and resources through the **Social Security Administration (SSA)**. For more information, visit the SSA website at [socialsecurity.gov](https://www.socialsecurity.gov) or call **800-772-1213**. TTY users should call **800-325-0778**.

## Health Insurance Marketplace

### **PART A: General Information**

The Health Insurance Marketplace is a new way to purchase health insurance in the United States. As you evaluate health insurance options for you and your family, this notice provides some basic information about the new Marketplace and employment based health coverage offered by your employer, the City of Austin.

#### **What is the Health Insurance Marketplace?**

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in October for coverage starting as early as January 1.

#### **Can I Save Money on my Health Insurance Premiums in the Marketplace?**

Regular full-time employees will not experience savings because the City pays the entire premium for the CDHP and the majority of the PPO and HMO premium. Part-time employees may realize savings by going to the Marketplace.

Temporary employees with less than 12 months of service are not eligible for City-provided medical coverage. Temporary employees and their dependents can purchase health insurance through the Health Insurance Marketplace, designed to provide affordable health insurance.

#### **Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?**

Yes. The City of Austin offers coverage that meets government standards. If you are in a regular budgeted position and work full-time, you will not be eligible for a tax credit at the Marketplace.

If you are in a regular budgeted position working part-time, and the premium you would pay for the City's lowest cost medical plan (Employee Only) is more than 9.5% of your household income for the year, you may be eligible for a tax credit at the Marketplace. If you are a temporary employee, and therefore not eligible for medical coverage under a City medical plan, you are eligible for medical coverage through the Marketplace and may also qualify for a tax credit.

**Note:** If you purchase a health plan through the Marketplace instead of accepting health coverage offered by the City of Austin, then you may lose the City's contribution (if any) to the employer-offered coverage. Also, the City's contribution as well as your employee contribution to City offered coverage is usually excluded from income for federal and state income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

#### **How Can I Get More Information?**

For more information about your coverage offered by the City of Austin, review this guide, or visit [austintexas.gov/benefits](http://austintexas.gov/benefits) for your summary plan description, or call the Human Resources Department at **512-974-3284**.

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit [healthcare.gov](http://healthcare.gov) for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

## Health Insurance Marketplace

### PART B: Information About Health Coverage Offered by the City

This section contains information about health coverage offered by the City of Austin. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information. This information is numbered to correspond to the Marketplace application.

<b>3. Employer name:</b> City of Austin		<b>4. Employer Identification Number:</b> 74-6000085	
<b>5. Employer address:</b> P.O. Box 1088		<b>6. Employer phone number:</b> 512-974-3284	
<b>7. City:</b> Austin	<b>8. State:</b> Texas	<b>9. ZIP code:</b> 78767	
<b>10. Who can we contact about employee health coverage at this job?</b> Human Resources Department, Employee Benefits Division			
<b>11. Phone number:</b> 512-974-3284		<b>12. Email address:</b> <a href="mailto:Benefits.HRD@austintexas.gov">Benefits.HRD@austintexas.gov</a>	

### Basic Health Care Coverage Information

As your employer, the City of Austin offers a health plan to all employees in regular budgeted positions and to temporary employees with more than 12 months of continuous service.

The City of Austin offers dependent coverage to eligible dependents. Eligible dependents (spouse, domestic partner, children, dependent grandchildren) are detailed in this guide.

The City's coverage meets the minimum value standard, and the cost of this coverage to you is intended to be affordable, based on employee wages.

**Note:** Even though the City of Austin offers affordable coverage, you may still be eligible for a premium discount through the Marketplace. The Marketplace will use your household income, along with other factors, to determine whether you may be eligible for a premium discount. If you are an hourly employee, or have previously been unemployed, you may still qualify for a premium discount.

If you decide to shop for coverage in the Marketplace, [healthcare.gov](http://healthcare.gov) will guide you through the process.



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In the case of a conflict between information presented in this Guide and the Plan, the Plan's terms take over.