



2024-2025 EMPLOYEE BENEFITS GUIDE



GOODYEAR



It's a
Great time to be in Goodyear.

Dear Goodyear Team Members,

As we step into fiscal year 2025, we extend our warm wishes for your health and prosperity. Recognizing the profound influence of organizational culture on individual wellbeing, we remain steadfast in fostering an environment where each team member can embrace their best self and deliver their finest work. Our strategy for empowering every team member to achieve their optimal state revolves around the 5 Pillars of Wellbeing. We are thrilled to unveil the enhancements we've implemented in our benefits program for FY2025. These enhancements directly align with the pillars of wellbeing, aiming to significantly enhance your overall health and sense of wellbeing.



Lyman Lockett
Human Resources Director

Thanks to the Goodyear City Council backing and support of the executive leadership team, we are delighted to incorporate retiree healthcare benefits into our comprehensive total rewards program. This benefit acknowledges the immense value our retirees have contributed to the city and recognizes the ongoing benefit they bring as city advocates and potential volunteers.

Along with this enhancement, we are pleased to inform you that the city has contracted with Innovest, an award-winning consulting firm that works on behalf of our 457 deferred compensation plan participants to provide education, fiduciary oversight and expertise for retirement plan savings and investing. As part of this effort, we have established a committee of team members to act as plan fiduciaries and assist us in working directly with Innovest to consolidate our plans, provide investment education and reduce fees so that returns on your investment contributions are maximized.

Lastly, for the upcoming plan year, we have increased the orthodontia lifetime maximum from \$1,500 to \$2,500. We also added Invisalign as an option to the dental plans.

Please use this Benefits Guide as a resource for learning about the comprehensive benefit package provided to you as a member of Team Goodyear.

Thank you for your continued hard work and dedication.

Warm regards,

Lyman Lockett, Human Resources Director



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The information in this Benefits Guide provides an overview of your benefits, including eligibility, plan options, rates, how to enroll and other important information. This information is a general description of your coverage and does not replace the official benefits plan document. If descriptions, percentages and dollar amounts in this guide differ from what is in the official benefits plan documents, the official benefits plan documents prevail. For a detailed description of the benefits available, please refer to the official benefits plan documents and the Benefit Summaries, available online at [glnet > Human Resources > Employee Benefits](#).

What's New for FY2025

Here's an overview of what you can expect:

This will be an active open enrollment which means everyone will need to complete open enrollment.

Medical

- New requirements to receive the wellbeing engagement rates. See page 7 of this guide.
- The coverage of all three medical plans will remain unchanged from the current year, however, there will be a 5% rate increase on plan premiums.

Dental

The following plan enhancements will be added effective July 1, 2024:

- For the PPO dental plan, the orthodontia lifetime maximum is increasing from \$1,500 to \$2,500. If you or your dependents are currently under orthodontia treatment, have your provider verify your maximum coverage effective July 1, 2024.
- Invisalign benefits will be covered under both the HMO and PPO dental plans.

New Benefit Programs

- **Retiree Health Plan:** Under this benefit, eligible employees will be able to participate in the retiree medical plans until they become Medicare-eligible. Retirees will have the option to cover their eligible spouse and/or dependent(s) who are enrolled in the city's medical and dental plans at the time of retirement. For more information, see page 20 of this guide.
- **Parental Leave:** Parental leave went into effect in February 2024. This program provides eligible employees up to four weeks of paid leave to bond with their newborn, adopted child or child placed through parentage in connection with surrogacy. For more information, see page 23 of this guide.



The IRS contribution limits for 2024 are:

Health Savings Account (HSA)

- Individual Coverage: \$4,150
- Family coverage: \$8,300

If you are age 55 or older, you can make an extra catch-up contribution of \$1,000.

Flexible Spending Accounts (FSAs)

- Health Care: \$3,200
- Dependent Care: \$5,000

For more information, see pages 9-10 of this guide.

Enrollment

The benefits enrollment website is Employee Self-Service (ESS). You can access ESS using Google Chrome from work or home.

- **Website:** goodyearaz.gov/ess
- **Enter your Username and Password:** If you are a first-time user, your Password is the last four digits of your social security number.

Open Enrollment:

From the menu, select Benefits > Open Enrollment.

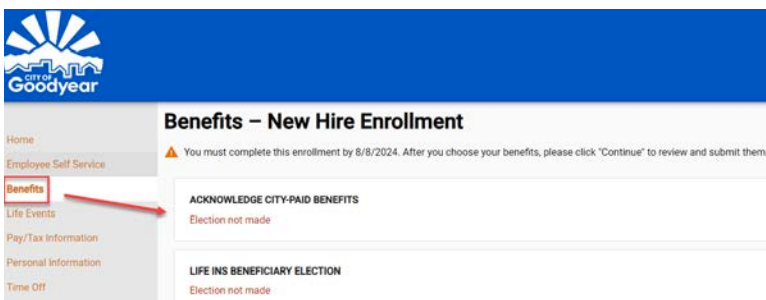


Click "Continue" at the bottom of the screen after you have made your benefit elections and then click on "Submit Choices" on the following page.

Once your choices are submitted, you will receive a confirmation message on the screen that will say "Thank you for completing your benefits enrollment!"

New Hire Enrollment:

From the menu, select Benefits.



Benefits Enrollment
goodyearaz.gov/ess

Questions:
hrbenefits@goodyearaz.gov

Eligibility

For all benefit-eligible employees, benefits are effective on the first of the month following date of hire. Please see plan documents for specific eligibility requirements for each benefit plan. If you do not enroll in your benefits within 31 days of eligibility, your next opportunity to enroll will be at open enrollment.

Dependent Eligibility

If you elect coverage, you may also cover your eligible dependents. Your eligible dependents include:

- Your legal spouse;
- Your eligible children up to age 26 (children are defined as your natural children, stepchildren, legally adopted children and children for whom you are the legal guardian by a court order); and
- Your dependent children of any age who are physically or mentally unable to care for themselves.



You will be required to provide proof of dependent eligibility to establish eligibility (i.e. birth certificate or marriage license, loss of coverage, etc.) when you add dependents who don't have your last name or due to a qualifying life event(s).

Coverage Termination

Coverage for most benefits will end on the last day of the month in which your employment with the city ends due to resignation or termination of employment, or if no longer working in a benefit eligible status. Coverage for your dependents ends on the last day of the month that the dependent is no longer eligible.

COBRA Coverage

The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you and your dependents when group health coverage would otherwise end. For more information about your rights and obligations under the Plan and under federal law, you should review the Plan's Summary Plan Description or contact the Plan Administrator. COBRA continuation coverage is a continuation of Plan coverage when it would otherwise end because of a qualifying life event.

Qualifying Life Events

You can add or remove dependents and make certain benefit changes if you have a qualifying life event during the plan year. **However, you must make your enrollment changes within 31 days of the qualifying life event and provide appropriate documentation.**

Qualifying life events include, but are not limited to:

- Change in eligible dependents due to the birth, adoption or death;
- Gain or loss of dependent status (i.e., your child reaches the age limit for eligibility);
- Change in legal marital status (i.e., marriage, divorce or death of spouse);
- Change in employment status, such as starting or ending employment, for your spouse or your children.

Important Deadlines Apply

You must log on to Employee Self Service (ESS) at goodyearaz.gov/ess to report the qualifying life event within 31 days of the qualifying life event AND turn in required paperwork (including proof of the change) within 31 days of the event date.

- If you do not make the changes within 31 days, you will have to wait until the next open enrollment to make new elections.
- Newborns are not automatically covered by the medical plan. You must log on to ESS to report the life event in order to enroll your child within 31 days of birth to elect coverage.

Questions? hrbenefits@goodyearaz.gov



Employee Support Services

Cigna One Guide Concierge Service

The Cigna One Guide is a concierge service and a resource that provides personalized guidance in reviewing health plan options available to you and your dependents in order to make an informed decision about choosing the right plan. These services are available to help guide you through your plan options.

Pre-enrollment personalized guidance:

- Easily understand the basics of health coverage
- Identify the types of health plans available to you
- Check if your doctors are in-network to help you avoid unnecessary costs
- Get answers to any other questions you may have about the plans or provider networks available to you

Support after enrollment:

- Resolve health care issues
- Save time and money
- Get the most out of your plan
- Find hospitals and health care providers in your plan's network
- Get cost estimates and avoid surprise expenses
- Understand your bills

Call a Cigna One Guide representative for personalized guidance.



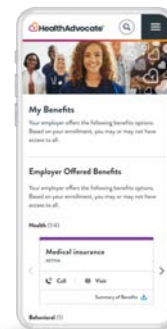
mycigna.com
888-806-5042
Group Number: 3208752

Health Advocate Services

Health Advocate provides expert and confidential assistance on a wide range of healthcare related and insurance issues at no cost to help you and your eligible family members (legal spouse, dependent children, parents and parents-in-law).

Contact Health Advocate through phone, chat, web message or email for 24/7 support in the following areas and more:

- Resolve claims and billing issues
- Find doctors and arrange second opinions
- Explain coverage and costs for services you may need
- Clarify health conditions
- Help you understand your insurance coverage



Download the mobile App



answers@HealthAdvocate.com
866-799-2731
HealthAdvocate.com/goodyear

Employee Assistance Program (EAP)

Your EAP through Cigna is a network of services that helps you to find a solution, restore peace of mind, and handle any personal or professional challenges you may face. It is free and offers resources to consult whenever and wherever you need them. These services are confidential and available to you 24/7, by phone or online.

Benefits provide up to five free sessions for you and your household members. For sworn personnel, you receive 12 sessions per issue plus an additional 24 employer-paid visits under HB 2502 Public Safety: Traumatic Event Counseling.

We encourage you to take advantage of this valuable resource, that offers:

- **Counseling:** Face-to-face sessions with a counselor in your area
- **Consultation and support by phone:** To address questions about behavioral health related topics, assistance with problem identification, problem-solving skills and approaches and/or resources to address behavioral concerns
- **Legal assistance:** Free, 30-minute consultation with an attorney face-to-face or by phone
- **Financial:** Free 30-minute consultation by phone with a qualified specialist on issues such as debt counseling or planning for retirement
- **Child care:** Resources and referrals for child care providers, before and after school programs, camps, adoption organizations and information on parenting questions and prenatal care
- **Elder care:** Resources and referrals for home health agencies, assisted living facilities, social and recreational programs and long-distance care giving
- **Pet care:** Resources and referrals for pet sitting, obedience training, veterinarians and pet stores
- **Identity theft:** 60-minute free consultation with a fraud resolution specialist

Dedicated EAP Counselor

The city has a dedicated EAP counselor for convenient access to virtual coaching sessions or to help employees navigate through the EAP and other available resources. With 30 years of counseling experience, Jodi Livermon, M.Ed., LPC, LISAC, has worked with:

- First responders
- Victims of domestic violence
- Couples
- Individuals contemplating suicide
- Substance abusers and their families
- Persons dealing with stress, anxiety and/or depression

To schedule an appointment, call Jodi Livermon, at 520-836-0440. Services are available to employees whether or not enrolled in the city's medical plan.

If you are in crisis, call 988, 911, or the Maricopa County Crisis Line at 602-222-9444 or 800-631-1314.



Medical & Pharmacy

The city offers three medical plans administered through Cigna. A brief description of each plan is listed below. For detailed information on each medical plan, see the Summary Plan Description located at [g|net > Human Resources > Employee Benefits](#).

Open Access Plus in Network (OAPIN)/HMO

This plan offers in-network coverage only. No out-of-network coverage under the (OAPIN/HMO) medical plan. You pay a copay for most services. For inpatient hospitalization and outpatient surgery, you pay a deductible.

Open Access Plus (OAP)/PPO

This plan offers in-network and out-of-network provider services. This plan requires copays for some services and a deductible for other services.

High Deductible Health Plan (HDHP) with HSA

This plan offers in-network and out-of-network provider services. All covered services, including prescriptions, are part of your deductible. This means you pay the contracted rate for services until you meet the deductible. Once the deductible is met, you pay 10% of the cost as coinsurance until you meet the out-of-pocket maximum. If you cover any family member, the entire family deductible must be met before any family member can move to coinsurance. This plan allows you to contribute to a Health Savings Account (HSA) and receive the employer HSA contribution (see page 9 for more details).

Eligible employees who are enrolled in one of the city's medical plans may be eligible to participate in the Retiree Health Plan until they become Medicare-eligible. For more information and eligibility, see page 20 of this guide and the Policy and Guideline.

| Employee Biweekly Premium | | | | | | |
|---|----------------------|----------|----------|------------|------------|------------|
| Premiums will be deducted biweekly for 24 pay periods per year. | | | | | | |
| Employee Wellbeing Engagement Premium* | City Monthly Premium | | | | | |
| | OAP/HMO | HDHP/HSA | OAP/PPO | OAP/HMO | HDHP/HSA | OAP/PPO |
| Employee | \$26.72 | \$23.06 | \$27.43 | \$710.11 | \$612.73 | \$728.55 |
| Employee + Spouse | \$153.28 | \$125.61 | \$147.84 | \$1,496.74 | \$1,226.51 | \$1,443.55 |
| Employee + Child(ren) | \$107.73 | \$105.53 | \$133.07 | \$1,051.92 | \$1,030.47 | \$1,299.30 |
| Employee + Family | \$191.25 | \$182.56 | \$214.31 | \$1,867.51 | \$1,782.54 | \$2,092.65 |

*Wellbeing Engagement Rate Requirements

Employees must complete the following requirements annually by April 30 to receive the wellbeing engagement rate for the following plan year: a Personal Health Assessment (PHA) at the PHA annual event or through the Goodyear Wellness Center and an HR assignment in Vector Solutions.

Sworn employees required to complete an annual medical examination as a job requirement will automatically receive the wellbeing engagement rate on their medical premiums.

| Employee Standard Premiums | | | City Monthly Premium | | | |
|----------------------------|----------|----------|----------------------|------------|------------|------------|
| | OAP/HMO | HDHP/HSA | OAP/PPO | OAP/HMO | HDHP/HSA | OAP/PPO |
| Employee | \$64.90 | \$56.00 | \$66.59 | \$665.45 | \$546.85 | \$650.22 |
| Employee + Spouse | \$243.45 | \$199.49 | \$234.79 | \$1,382.23 | \$1,078.73 | \$1,269.64 |
| Employee + Child(ren) | \$171.09 | \$167.61 | \$211.34 | \$971.45 | \$906.33 | \$1,142.77 |
| Employee + Family | \$303.75 | \$289.94 | \$340.37 | \$1,724.64 | \$1,567.77 | \$1,840.52 |



mycigna.com
800-244-6224
Group Number: 3208752

Medical Plan Comparison

As you consider which of the three medical plans is right for you, it's important to note what they have in common. **All three medical plans:**

- Use the same network of providers, The Open Access Plus (OAP), which is Cigna's largest network.
- Preventative care is covered at 100% for you and your covered dependents.
- Pharmacy coverage with a 30-day retail supply and a 90-day mail order is offered on all three plans.
- No referrals required for covered services.

| | OAPIN/HMO | HDHP with HSA** | OAP/PPO |
|---|---|---|--------------------------------------|
| Network Used | OAP | OAP | OAP |
| Referral Required | No | No | No |
| Out-of-Network | No | Yes | Yes |
| Deductible | \$750 per person \$1,500 Family | \$1,750 Employee Only \$3,200 Family | \$500 per person \$1,000 Family |
| Out of Pocket Maximum (Deductible Included) | \$1,250 per person \$2,500 Family | \$2,750 Employee Only \$4,200 Family | \$1,000 per person \$2,000 Family |
| What is included in the Out-of-Pocket Maximum? Deductible, Coinsurance and ALL Copays (Office Visits, Urgent Care, ER and Prescriptions) | | | |
| Primary Care Physicians | \$20 Copay | *You pay 10% after deductible | \$25 Copay |
| Specialists | \$35 Copay | *You pay 10% after deductible | \$50 Copay |
| Telehealth | \$0 | \$55 until deductible is met | \$0 |
| Urgent Care | \$50 Copay | *You pay 10% after deductible | \$75 Copay |
| Emergency Room | \$200 Copay | *You pay 10% after deductible | \$250 Copay |
| Laboratory Services | Plan Pays 100% (Doc Office & Independent Lab) | *You pay 10% after deductible | *You pay deductible only |
| Radiology Services | Plan Pays 100% after deductible | *You pay 10% after deductible | *You pay deductible only |
| Complex Imaging (MRI, CT, PET) | Plan Pays 100% | *You pay 10% after deductible | *You pay deductible only |
| Preventive Care | NO COST for certain Screenings, Immunizations, Routine Physicals, Mammography | | |
| Inpatient Hospital / Surgery | You pay deductible only | *You pay 10% after deductible | \$100 Copay, after deductible |
| Outpatient Surgery | You pay deductible only | *You pay 10% after deductible | \$100 Copay, after deductible |
| Ambulance | Plan Pays 100% | *You pay 10% after deductible | Plan Pays 100% after deductible |
| Goodyear Wellness Center | No Copay | \$20 for non-preventative services | No Copay |
| Prescription Cost | | | |
| Prescription-Tier 1 (30-day) | \$10.00 | *You pay 10% after deductible | \$15.00 |
| Prescription-Tier 2 (30-day) | \$30.00 | *You pay 10% after deductible | \$35.00 |
| Prescription-Tier 3 (30-day) | \$50.00 | *You pay 10% after deductible | \$60.00 |
| Prescription-Mail Order (90-day) | \$25 / \$75 / \$125 | *You pay 10% after deductible | \$38 / \$88 / \$150 |

*When you go to a contracted provider, you receive the Cigna contracted discount. What you pay will then be applied towards your deductible and out-of-pocket maximum. *Please note the benefits shown above are In-Network ONLY. Refer to plan summaries for detailed information for Out-of-Network benefits.*

**The city's HSA contribution is as follows: \$500 Employee, \$1,000 Employee + Legal Spouse and/or Child(ren).

Health Savings Account (HSA)

A Health Savings Account (HSA) is a personal savings account that you can use to pay out-of-pocket health care expenses with pre-tax dollars. Your contributions are tax free and the money remains in the account for you to spend on eligible expenses no matter where you work or how long it stays in the account. If you enroll in the city's high deductible health plan (HDHP), you may be eligible to fund an HSA and receive city contributions.

HSA Eligibility

You are eligible to open and fund an HSA if:

- You are enrolled in the city HDHP.
- You are not covered by a non-HSA plan, health care FSA or health reimbursement arrangement.
- You are eligible for a Limited-purpose Flex Spending Account (excludes medical reimbursement).
- You and/or your dependents are not eligible to be claimed as a dependent on someone else's tax return.
- You are not enrolled in Medicare, Medicaid or TRICARE for Life.

HSA Contributions

Annual contributions made by the employee and the city are front-loaded the first of the month following the employee's hire date for new employees and July 1 each year thereafter (if enrolled).

Contributions to an HSA (including city contributions) cannot exceed the annual IRS contribution maximums.

2024 IRS HSA contribution maximums:

- Individual coverage: **\$4,150**
- All other coverage tiers: **\$8,300**
- Employees age 55+ by Dec. 31 may contribute an additional **\$1,000**

HSA Advantages

Tax Advantage:

Your HSA contributions go into your account before taxes. The money you save to your HSA lowers your taxable income so you may pay less in taxes. You can use your HSA pre-tax funds to pay towards coinsurance, copays, deductibles, and for other medical expenses such as dental care, orthodontia, contacts, and eyeglasses.

Future Savings and Portability: Unused funds, including your contribution and the city's contribution, roll over each year, which gives you a way to save for future health care expenses. You can take all the money in your HSA with you if you change employers or retire.



mycigna.com
800-244-6224
Group Number: 3208752

Note: City contributions are prorated for new hires based on their hire date.

City Contributions to Employee's HSA

| | |
|--|---------|
| Employee Only | \$500 |
| Employee + Spouse and/or Child(ren) | \$1,000 |

You must have qualifying coverage as defined by the IRS in order to contribute to an HSA or you will risk adverse tax consequences. If you are enrolled in another plan that is not considered qualifying under the IRS guidelines, you are not eligible to receive the city's employer HSA contribution or contribute your own monies on a pre-tax basis. Please refer to IRS Publication 969 (irs.gov/uac/About-Publication-969) for additional requirements and a list of eligible expenses.

Flexible Spending Accounts (FSAs)

A Flexible Spending Account (FSA) allows you to have pre-tax dollars withheld from your paycheck to pay for eligible health care and daycare expenses. This means every dollar you set aside reduces the amount you pay in income taxes. The city offers a Health Care FSA and a Dependent Care FSA.

| | | |
|---|---|--|
| <p>What can be reimbursed and which savings account can I enroll in?</p> | <p>Health Care FSA A Health Care FSA offers you the opportunity to pay for eligible out-of-pocket medical, dental and vision expenses with pre-tax dollars for you and your eligible dependents. You can enroll in this account if you are enrolled in the city's HMO or PPO medical plan, or if you are not enrolled in any medical plans.</p> <p>Limited-purpose FSA: If you are covered by the city's high deductible medical plan, you can elect a limited health care FSA which allows you to use these funds for eligible vision and dental expenses.</p> | <p>Dependent Care FSA A Dependent Care FSA allows you to pay for day care services. Typical expenses under this account include charges for day care, nursery school and elder care for spouse (not for medical care).</p> <p>Important Note: Both spouses must work or attend school full time to take advantage of this benefit.</p> <p>If you have a qualifying child or dependent that requires care, you can enroll in this account.</p> |
| <p>What is the maximum amount an employee can elect for FY2025?</p> | <p>The maximum allowable is \$3,200. You may carryover up to \$640 of the previous year's balance into the next plan year.</p> | <p>The maximum allowable is \$5,000 per family, per year. There is no carry over allowed into the next plan year.</p> |
| <p>How do I use my FSA funds or get reimbursed?</p> | <p>You use a debit card to pay for eligible expenses or you can submit a reimbursement request form to Cigna.</p> <p>Note: you may be required to provide itemized receipts and other supporting documentation for your expenses.</p> | <p>You will be required to submit a reimbursement request form to Cigna and provide supporting documentation for your dependent care services. Only the amount that has been deducted from the paycheck to date can be reimbursed.</p> |

For more information and to access a detailed list of FSA eligible expenses and the reimbursement request form, register on mycigna.com or call Cigna's customer service at 800-244-6224.

What to consider before you contribute to an FSA

- Eligible expenses must be incurred by June 30 of each year and submitted by Sept. 30 to be eligible for reimbursement.
- You cannot stop or change your FSA contribution amount until the next open enrollment unless you experience a qualifying life change event consistent with your change in contributions.
- If you terminate employment, only expenses incurred before your termination date are eligible expenses.

Telehealth Through Cigna

If you have Cigna insurance through the city of Goodyear, you and your covered dependents are eligible to use the Cigna telehealth benefit. You have access to virtual medical care 24/7 with board certified doctors and pediatricians for minor medical conditions and behavioral or mental health through MDLIVE. The cost of this plan is free to HMO and PPO plan participants. There is a \$55 cost for HSA plan participants, but you can use Recuro Health for free.

Minor medical virtual care

Board-certified doctors and pediatricians can diagnose, treat and prescribe most medications for minor medical conditions, such as:

- Acne
- Allergies
- Asthma
- Bronchitis
- Cold and flu
- Constipation
- Diarrhea
- Earaches
- Fever
- Headaches
- Infections
- Insect bites
- Joint aches
- Nausea
- Pink eye
- Rashes
- Respiratory infections
- Shingles
- Sinus infections
- Skin infections
- Sore throats
- Urinary tract infections

Behavioral/Mental health virtual care

Licensed counselors and psychiatrists can diagnose, treat and prescribe most medications for non-emergency behavioral/mental health conditions, such as:

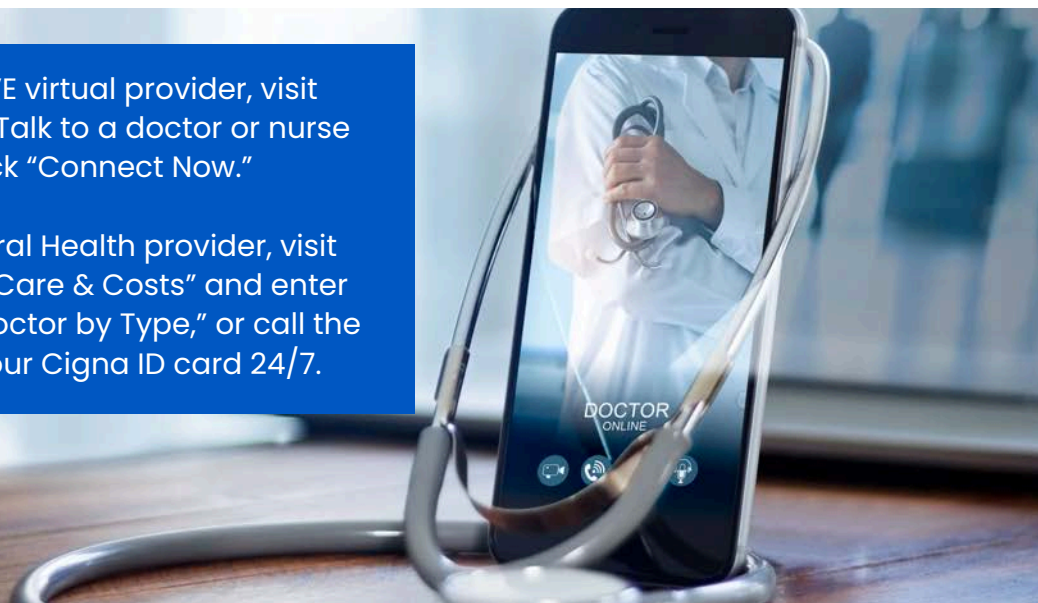
- Addictions
- Bipolar disorders
- Child/Adolescent issues
- Depression
- Eating disorders
- Grief/Loss
- Life changes
- Men's issues
- Panic disorders
- Parenting issues
- Postpartum depression
- Stress
- Trauma/PTSD
- Women's issues
- Relationship and marriage issues

Connect with virtual care your way

- Contact your in-network provider or counselor
- Talk to an MDLIVE medical provider on demand on **myCigna.com**
- Schedule an appointment with an MDLIVE provider or licensed therapist on **myCigna.com**
- Call MDLIVE 24/7 at 888-726-3171

To connect with an MDLIVE virtual provider, visit **myCigna.com**, locate the "Talk to a doctor or nurse 24/7" callout and click "Connect Now."

To locate a Cigna Behavioral Health provider, visit **myCigna.com**, go to "Find Care & Costs" and enter "Virtual counselor" under "Doctor by Type," or call the number on the back of your Cigna ID card 24/7.



Telemedicine Through Recuro Health

The city provides employees telemedicine benefits through Recuro Health, a partner of CareATC. This benefit is at no cost to employees even if you're not enrolled in the city's medical plan through Cigna. Your dependents may also participate as long as you sign them up for the Wellness Center benefit as a new hire or during open enrollment. You and your dependents may seek medical care virtually 24/7 with board-certified doctors for minor medical conditions.

Conditions Treated

- Acne/Rashes
- Allergies
- Cold/Flu/Cough
- GI Issues
- Ear Problems
- Fever/Headache
- Insect Bites
- Nausea/Vomiting
- Pink Eye
- Respiratory Issues
- UTI's/Vaginitis
- And more



Telemedicine is a great solution when you need expert care and guidance – fast.

Step 1 - Download the CareATC app. Follow the prompts to verify your identity and set up your account.

Step 2 - In the CareATC app, select "Access Telemedicine" and then select "Start a Telemedicine Visit." The Recuro Care app will open.

Step 3 - Confirm your account information in the Recuro Care app and begin using services.



**Show Me
The App!**



Get peace of mind by preparing for the unexpected. Download the CareATC app to access telemedicine 24/7. Telemedicine is also available 24/7 by phone at 877-230-9404 and in the CareATC Patient Portal at www.careatc.com/patients.

Dental

The city offers two dental plans through Cigna. These are some of the plan highlights to help you choose the right plan for you and your covered dependents.

HMO

This plan offers in-network coverage only. No out-of-network coverage under this dental plan. This plan has a scheduled copay for all services, including orthodontia for adults and children. The summary of scheduled copays can be found at [glnet > Human Resources > Employee Benefits](#).



mycigna.com
800-244-6224
Group Number: 3208752

PPO

This plan allows you and your covered dependents to use dental providers both in- and out-of-network. Preventative services are covered at 100% and not counted towards your annual maximum.

How WellnessPlus Rewards works in the PPO:

You have an opportunity to increase your annual maximum benefit amount by \$100 each year under the Wellness Plus rewards. By getting your preventative dental care, which includes two routine cleanings each year, you can increase your annual maximum benefit amount from \$1,800 up to \$2,000.

| | DHMO | PPO |
|---|--|---|
| Deductible (July 1 thru June 30) <i>Waived for Preventative Services</i> | None | \$50 Individual/\$150 Family |
| Preventative Services: <i>Cleaning, Bitewing Xrays</i> | *No charge | **Plan pays 100% |
| Basic Services: <i>Fillings, Simple Extractions</i> | Scheduled copays (See Plan Summary) | **Plan pays 100% after the deductible |
| Major Services <i>Root Canals, Deep Cleanings, Crowns, Bridges, Dentures, Implants</i> | Scheduled copays (See Plan Summary) | **Plan pays 60% after the deductible |
| Orthodontia/Braces | Scheduled copays for children & adults | **Plan pays 50% / children and adults |
| Annual Maximum Benefit | Unlimited Benefits | \$1,800 or up to \$2,000 with WellnessPlus® option |
| Ortho Lifetime Benefit | Unlimited Benefits | \$2,500 per person |
| Additional Plan Information | Limited Network – Referrals Needed | Ability to go to a contracted or non-contracted Dentist |

| | Employee Biweekly Premium <small>Premiums will be deducted biweekly for 24 pay periods per year.</small> | | City Monthly Premium | |
|------------------------------|---|---------|----------------------|----------|
| | HMO | PPO | HMO | PPO |
| Employee Only | No Cost | \$1.06 | \$11.43 | \$40.18 |
| Employee + Spouse | | \$12.32 | \$22.61 | \$58.46 |
| Employee + Child(ren) | | \$17.72 | \$31.94 | \$82.67 |
| Employee + Family | | \$23.36 | \$42.09 | \$109.00 |

*Charges apply for additional services or services that are outside of the allowed time frame.

**These are In-Network Benefits. Refer to the full PPO Plan Summary for Out-of-Network Benefits.

The vision plan through Avesis provides you vision benefits at an affordable cost. Benefits include coverage for routine eye exams, eyeglasses and contact lenses. You receive the most of your benefits when you choose an in-network provider, but also have the option to use out-of-network providers.

| Vision Care Services | In-Network |
|---|---|
| Vision Examination Once every plan year (includes Refraction) | Covered in full after \$10 copay |
| Contact Lens Fit and Follow-up Standard Contact Lens Fitting Custom Contact Lens Fitting | Covered in full Up to \$50 allowance |
| MATERIALS* | \$20 copay (Materials copay applies to frame or spectacle lenses, if applicable.) |
| Frame Allowance † (once every plan year) (Up to 20% discount above frame allowance.) | Members receive a \$50 wholesale allowance. Up to \$150 retail value |
| Standard Spectacle Lenses (once every plan year) Single Vision, Bifocal, Trifocal, Lenticular | Covered in full after \$20 copay |
| Progressive Lenses (once every plan year) Level 1 Progressives Level 2 Progressives All other Progressives Other Lens Options | Covered in full after \$0 copay Covered in full after \$110 copay \$120 allowance + 20% discount Discount Pricing |
| Contact Lenses ‡ (once every plan year) (in lieu of frame and spectacle lenses) Elective (10% discount on amount exceeding allowance) | \$130 allowance |
| Medically Necessary | Covered in full |
| Retinal Imaging | Up to \$45 copay |
| Refractive Laser Surgery | Onetime/lifetime \$150 allowance Provider discount up to 25% |
| Diabetic Rider Eye Exam (Up to two additional exams per year) Gonioscopy, Extended Ophthalmoscopy, Fundus Photography | \$20 copay Covered in full |
| Out-of-Network Reimbursement | The vision plan has benefits for out-of-network services. See summary of benefits for full details on coverage at glnet > Human Resources > Employee Benefits . |

Discounts are not insured benefits.

*Provider wholesale frame pricing for your plan is \$50. Participating Walmart/Sam's Club locations, cover frames up to a \$68 retail value. At participating Costco locations, retail pricing is \$54.99. †Value may be less depending on the provider's retail pricing. ‡Prior authorization is required for medically necessary contacts.

 **myavesis.com**
800-828-9341
Group Number: 30781-1013

Employee Biweekly Premium

Premiums will be deducted biweekly for 24 pay periods per year.

| | |
|------------------------------|--------|
| Employee Only | \$2.99 |
| Employee + Spouse | \$5.30 |
| Employee + Child(ren) | \$6.29 |
| Employee + Family | \$7.82 |

Wellbeing

The city focuses on The Whole Employee, which includes career, physical, financial, community and social wellbeing. We encourage everyone to “be your best self, personally and professionally” – and understand that employees who are healthy in all these realms are healthier and perform better.



The city has been recognized for its commitment to creating a healthy workplace.

The Safety and Wellbeing programs have been recognized with the following awards:

- City of Goodyear is the highest-ranked local government workplace by National Research Center of Polco
- Four times - Healthy Arizona Worksite Award
- Healthiest Employee by the Phoenix Business Journal
- Workforce Wellbeing by the American Heart Association
- OSHA Voluntary Protection Program (VPP)
- National Solid Waste Association of North America
- Institute for Health and Productivity Management Leadership Award

Wellbeing Programs

The city's Wellbeing program offers flexibility for individual or group engagement to help support each employee in their journey of wellbeing. Here are some of the programs that the city makes available to employees:

Career

- Goodyear Grows Mentorship Program
- Individual Development Plans
- Department Certifications
- Working Scholars
- Tuition Assistance (see page 26)
- Arizona State University
- Northern Arizona University
- Grand Canyon University
- Western Governors University



Social

- Smoothie Bar
- Employee-led Committees
 - Wellbeing
 - Safety
 - Volunteer
 - People Master Plan
 - Self-Insured Trust
 - Deferred Compensation
 - We Care Recognition

Financial

- Dave Ramsey Smart Dollar
- 1:1 Mission Square
- 1:1 Nationwide
- MetLife Retirewise

Community

- Fill-a-Need
- Make a Difference Day
- City/Library joint events
- Master Gardener
- UofA Nutrition Class
- Vitalant Blood Drive
- Heart & Sole Walk & 5k
- American Heart Association Walk & 5K



2023 Fill-A-Need

Physical

- Skin Cancer Screenings
- Hydrations Packs
- Mobile Onsite Mammography (MOM)
- Site on Sight
- Jet Dental
- Employee Assistance Program (see page 6)
- Goodyear Recreation Center
- Active & Fit
- Walker Tracker
- Pickle Ball Clinics
- Cornhole Tournament
- Instinctive Movement System
- Total Stretching
- On-Site Chair Massages
- Sound Healing Meditation
- Wellness Center (see pages 17-18)



Dr. Tony

To sign up for classes and events go to [glnet > Applications > Vector Solutions > My Events](#).

Complete your annual Personal Health Assessment (PHA) and your assignment in Vector Solutions to receive the wellbeing engagement rate on your medical premiums. See page 7 of this guide.

The city brings Wellbeing where you are



Wellness Center

The city partners with CareATC to provide employees with convenient and affordable medical care. The Wellness Center provides all regular full-time employees and eligible dependents (legal spouse and dependent children ages 2 thru age 26) access to helpful health and wellbeing resources.

Care with no out-of-pocket*

Whether your goal is disease prevention, chronic disease management or convenient and fast care for an unexpected illness or injury, we're here for you.

Your CareATC benefits give you access to:

- No out-of-pocket costs for office visits, labs and medications provided at your visit*
- Fast and easy appointment scheduling
- Little to no wait time
- More time with your provider

CareATC Health Care Services Available At No Cost To You*

Preventative Care

- Annual Physicals
- Health Screenings
- Vaccinations
- Women's and Men's Health
- Pap Smears

Chronic Condition Care

- High Blood Pressure
- Heart Disease
- High Cholesterol
- Diabetes
- Thyroid Conditions
- Weight Management
- Asthma and Emphysema
- Depression and Anxiety

Urgent Care

- Colds and Flu
- Sore Throat
- Sinus Infection
- Seasonal Allergies
- Muscle and Joint Pain
- Sprain and Strains
- Urinary Tract Infection
- Skin Cuts and Rashes
- Nausea and Vomiting
- Diarrhea and Constipation
- Headaches and Migraines
- Referral Services

Additional Services

- 24/7 Telemedicine Visits
- Medication and Prescription Refills
- Lab Services
- Personal Health Assessments

***HSA Plan members receive preventative care services at no cost. A \$20 co-pay for non-preventative services and \$5 for medications are required until deductible is met.**

Wellness Center



Location:

Goodyear Wellness Center
14455 Van Buren St, Ste C-103
Goodyear, AZ 85338

Hours:

Monday - Friday
7 a.m. - 3:30 p.m.
(closed for lunch at 11:30 a.m. - Noon)

Three ways to schedule an appointment

- 📞 623-401-6566
- 💻 www.careatc.com/patients
- 📱 CareATC app

Need to activate your CareATC patient account?

www.careatc.com/activate, or download the CareATC app



Show Me
The App!



Retirement Benefits

Arizona State Retirement System (ASRS)

Non-Sworn employees

The ASRS Defined Benefit Plan is the primary plan for ASRS members and will provide, upon retirement, lifelong monthly benefits. Both you, as the employee, and the city, as the ASRS employer, contribute equally towards your retirement. When you retire, you will recover your own contributions within approximately three to five years from the start of your benefit payments.

If you terminate employment and no longer contribute with an ASRS employer, options are available to you regarding your retirement account, including early retirement, normal retirement or requesting a refund of your contributions. For more details, go to azasrs.gov.

Public Safety Personnel Retirement System (PSPRS)

Sworn Fire and Police Employees

PSPRS administers retirement benefits in the Defined Benefit Plan (DB Plan), wherein retirement benefit payments are determined using a formula. PSPRS also administers a 401(a) Public Safety Personnel Defined Contribution Retirement Plan (PSPDCRP or DC Plan), managed through Nationwide Retirement Solutions (psprsdcp.com), in which benefits are determined based on employee/employer contributions and investment earnings on those contributions.

During your career, and as a requirement of membership, you must contribute a percentage of your pensionable wages each paycheck. Your contribution rate may vary each fiscal year depending on your membership tier and if you are in the DB Plan, DC Plan and/or DC Hybrid Plan for Non-Social Security positions. For more details, go to psprs.com.

457 Deferred Compensation Plans and Roth IRAs

The city's 457 Deferred Compensation Plans and Roth IRAs provide you with the opportunity for additional retirement savings. The 457 and Roth IRA plans are offered through MissionSquare Retirement and Nationwide Retirement Solutions. This means you can choose your retirement plan administrator.

Both MissionSquare Retirement and Nationwide offer a variety of investment options that you can choose from, and they offer you the option for traditional rollover and after-tax Roth IRAs. The city provides a 457 deferred compensation contribution. Your contribution and the city's contribution to this plan will vary based on employee group. Non-represented employees will be eligible to receive a 2% city contribution into a 457 deferred compensation as long as the employee also makes a 1% contribution.

In order to take advantage of this benefit, complete an election form available online at glnet.gov > Human Resources > Employee Benefits and submit to Human Resources at hrbenefits@goodyearaz.gov.

Retirement Benefits (cont'd)

Retirement Health Savings (RHS)

The RHS plan is designed to help you and your eligible dependents pay for further health care costs. The funds in this account can be used for medical premiums and medical expenses after separation of employment.

For the city's RHS plan, both employee and employer contributions are required.

All employees (except those represented by the Fire MOU) will contribute \$12.50 per paycheck into the RHS plan and the city will contribute \$22.50 per paycheck.

Retiree Healthcare Program

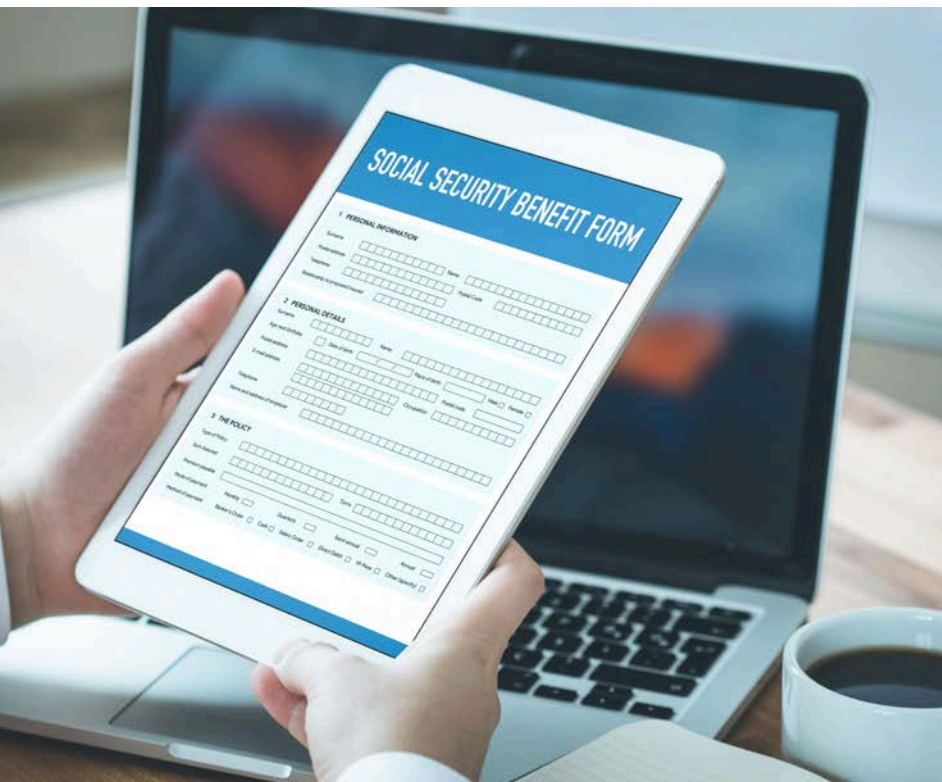
This benefit provides healthcare coverage to city retired employees and eligible dependents up to age 65 or when they become Medicare eligible.

To qualify, the employee must:

1. Provide at least 31 days notice of intent to retire and participate in the retiree healthcare program by emailing hrbenefits@goodyearaz.gov; and
2. Have completed ten consecutive years of service with the city of Goodyear immediately preceding retirement; and
3. Commence retirement from ASRS or PSPRS and be drawing retirement*.

*Refer to the Policy and Guideline for more details.

For questions, contact Human Resources at hrbenefits@goodyearaz.gov.



The federal government provides Social Security benefits. Monthly Social Security benefits may be paid to you or your dependents when you retire, become disabled or pass away.

For information about the benefits, visit the Social Security Administration website at ssa.gov or call 800-772-1213.

The city does not contribute into Social Security for sworn Fire personnel.

Life Insurance

Basic Life and Accidental Death and Dismemberment (AD&D) Insurance

Life insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump sum payment if you pass away while employed. The city offers eligible employees basic life insurance at no cost. As an eligible employee, you are covered in the amount of two times your annual base salary up to \$400,000. The city provides a \$2,000 flat insurance benefit for legal spouse and a \$1,000 flat life insurance benefit for dependent children.

The city also provides AD&D coverage at no cost. AD&D will cover you if death is a result of an accident. Your beneficiary receives an amount equal to two times your annual base salary. If dismembered (such as loss of sight in an eye, loss of a hand, foot, limb, hearing, speech, etc.), benefits will be paid to the employee as a percentage of the basic life amount.

Supplemental Life

The city also offers additional life insurance coverage for you to purchase for yourself, your legal spouse and your dependent children. You may enroll in supplemental life insurance as a new hire or make a new election and changes year-round. Evidence of Insurability (EOI) is required for any amounts above the guaranteed issue amount.

Employees may elect employee, spouse and child supplemental life year-round. An EOI will be required outside of the 31-day new hire period.

Employee:

- Minimum insurance amount: \$10,000
- Maximum insurance amount: \$300,000
- New Hire: \$100,000 guaranteed issue amount in the first 31 days of hire and EOI is required for amounts above \$100,000.



Legal Spouse:

- Minimum insurance amount: \$5,000
- Maximum insurance amount: 50% of your supplemental life employee amount.
- New Hire: \$50,000 guaranteed issue amount in the first 31 days of hire or marriage and EOI is required for insurance amounts above \$50,000.
- Rates for legal spouse life are based on employee's age.

Child(ren):

- \$10,000 per child guaranteed issue amount in the first 31 days of hire or qualifying life event.

Business Travel/Commuter Travel Life Insurance

The city provides Business Travel/Commuter Travel Accident Life Insurance coverage equal to \$150,000 (\$250,000 for directors and councilmembers) in the event the employee passes away as a result of an accident that occurs while traveling on city business. This benefit is provided at no cost to the employee.

Disability benefits are available as a source of income replacement in the event an employee cannot work due to an illness, injury or medical condition. The city offers both short-term and long-term disability benefits.

Short-Term Disability (STD)

Short-Term Disability (STD) benefits is a city-paid benefit and is designed to replace a portion of your weekly salary in the event you are unable to work due to an illness, injury or medical condition. Benefit calculations are based off your regular weekly rate of pay, not including bonuses, over time or other compensation.

This benefit will pay 75% of the employee's basic weekly earnings up to an unlimited maximum benefit per week minus any income that is listed in the Benefit Reductions provisions.

- Benefits begin on the 30th day for an accident and/or for sickness/illness.
- Benefits are paid on a biweekly basis for a maximum of 22 weeks.
- Checks will be issued through the city payroll process.
- For questions about eligibility and extension provisions contact Guardian at 800-268-2525

Public Safety Personnel Retirement System (PSPRS) Disability Retirement (Sworn Fire/Police only)

During the course of your career, there may come a time when due to injury or illness, you are unable to perform, your duties as a firefighter or police officer. Should that occur, the PSPRS provides special disability pension benefits that you may be eligible to receive.

More details about this benefit are available at psprs.com.

Long-Term Disability (LTD)

Long-Term Disability (LTD) benefits provide income protection if you are unable to perform the duties of your job due to an injury, illness or medical condition. There is a six-month waiting period from the date of disability and the LTD administrator must approve the disability claim before you receive disability compensation.

ASRS Members (non-sworn):

The Long-Term Disability income plan provides a benefit to you as an active ASRS member in case you become unable to perform your job due to injury, illness or other disability before retirement. Benefits are paid up to two years or until the employee is no longer disabled; whichever comes first. The ASRS LTD benefit pays up to 66 2/3% of the employee's salary. For more information, visit the Arizona State Retirement System (ASRS) website at azasrs.gov.

Sworn Fire/Police:

The city provides Long-Term Disability (LTD) benefits at no cost if you are unable to perform the duties of your job due to injury or illness. Benefits are paid for up to two years or until the employee is no longer disabled; whichever occurs first. The LTD plan provides up to 60% of the employee's salary at the time of disability, up to \$6,000 per month. Benefits may be coordinated with other income received.

If you need to file a long-term disability claim, contact Human Resources at hrbenefits@goodyearaz.gov.

Leave Benefits

Bereavement Leave

An employee may be authorized to use up to three (3) days (not to exceed 24 hours) of city-paid funeral leave per occurrence to attend the funeral of an immediate family member, and a 56-hour work week employee may be authorized up to two (2) shifts, not to exceed 48 hours.

For funerals requiring out-of-state travel:

- Two (2) additional days (not to exceed 16 hours) will be given.
- A 56-hour work week employee may be authorized up to two (2) additional shifts not to exceed 48 hours.

For city-paid funeral leave for extended family members, see the Policy and Guideline for more details.

Parental Leave

Parental Leave is available to eligible employees and provides up to four weeks of paid leave to bond with a newborn, adopted child or child placed through parentage in connection with surrogacy. Leave is available for use within 90 days of birth, adoption or placement.

Employees who work a 40-hour week schedule may receive up to 160 hours and employees who work a 56-hour week schedule may receive up to 240 hours of paid parental leave. See the Policy and Guideline for more information.

Military Leave

Military Leave is available to eligible employees to recognize those who are called serve active duty and attend training. See the Policy and Guideline for more information.

Family and Medical Leave Act (FMLA)

FMLA gives eligible employees up to 12 weeks of unpaid leave within a 12-month period:

- For the birth and care of a newborn child or placement of a child for adoption or foster care;
- To care for the employee's spouse, child or parent with a serious health condition;
- For a serious health condition that makes the employee unable to perform the functions of the employee's job;
- Because of any qualifying urgent need (exigency) arising out of the fact that the spouse, son, daughter or parent (does not include next of kin) of the employee is on covered active duty (or has been notified of an impending call or order to covered active duty) in the Armed Forces (hereinafter referred to as covered active duty leave).

In order to be eligible for FMLA, an employee must have been employed by the city for at least 12 months (not necessarily continuously) and have worked at least 1,250 hours during the 12-month period immediately preceding the commencement of the leave.

For more details, see the Policy and Guideline.

For help managing your FMLA, short-term disability, and/or parental leave contact the leave administrator in Human Resources.

Supplemental Benefits

City-Paid Cancer Benefit provided through Guardian

Non-Sworn employees

The city-paid cancer benefit with Guardian provides payments directly to the employee for expenses related to cancer including an initial diagnosis, treatments and wellness screenings. In order to initiate this benefit, a claim form must be completed and filed with Guardian. The claim form can be found at [glnet > Human Resources > Employee Benefits](#).

PSPRS

Sworn Fire and Police employees

The city pays for a cancer insurance program (CIP) for sworn fire and police employees through PSPRS. This benefit helps offset expenses related to cancer diagnosis and treatments. There are direct payments and/or reimbursements for out-of-pocket costs. In order to initiate this benefit, a claim form must be completed and filed with PSPRS. For more details regarding this benefit including the claim form, visit [psprs.com](#).



Accident Advantage, Hospital Advantage and Cancer Care through Aflac

Aflac's Accident Advantage, Hospital Advantage and Cancer Care are voluntary benefits that pay you cash to help with out-of-pocket expenses. They help you focus less on bills and more on getting better by helping pay for groceries, rent and bills. As health care costs continue to rise, it's easy to see why Aflac's supplemental insurance policy makes sense.

Accident Advantage

The Aflac Accident Advantage plan pays you if you are injured (on or off the job). The benefits include hospitalization, physical therapy, major diagnostic benefits (MRI/CT) and follow ups, along with many others. It's there for you for those unexpected costs of an accident.

Hospital Advantage

The Aflac Hospital Advantage plan covers you if you are hospitalized or need surgery as the result of an accident, illness or condition. In addition, there are benefits for physician visits, ambulance and emergency room visits. As with all Aflac plans, the benefits are paid directly to you to use how you see fit.

Cancer Care

The Aflac Cancer Care plan pays a cash benefit upon initial diagnosis of a covered cancer, and other benefits payable throughout cancer treatment such as hospitalization, surgeries and skin cancer benefits.



For more information and to enroll, email voluntarybenefitconsultants@gmail.com or call customer service at 602-229-1970. Group Number: PQ456

Additional Benefits

Aura Identity Protection

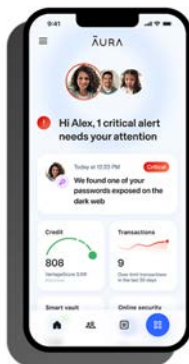
Aura monitors your credit, bank account, social security number and other personal information for suspicious activity and provides protections if your identity is stolen. It also provides protection against online threats. **The city offers three plan options:**

The **Value plan** is free to eligible employees with an option to upgrade to the **Premier plan** or **Total plan** options. All Plans Include:

- \$5M identity theft insurance for each enrolled adult
- Lost wallet protection with \$500 emergency cash
- 24/7 customer care
- White glove fraud resolution Service
- Restoration services for pre-existing fraud events
- Unemployment & tax fraud resolution

| Employee Biweekly Premium | | | |
|---|-------|--------|---------|
| Premiums will be deducted biweekly for 24 pay periods per year. | | | |
| Plan Option | Value | Total | Premier |
| Employee Only | \$0 | \$1.23 | \$2.38 |
| Employee + Family | \$0 | \$3.63 | \$5.38 |

Activate your account at:
<https://my.aura.com/start/cityofgoodyear>



Download the Aura mobile app.

support@aura.com
 833-552-2131

MetLife Legal

For **\$5.25** per pay period and automatic payroll deductions, the MetLife Legal Plan offers you and your covered dependents legal services from experienced attorneys. This plan offers legal assistance for personal legal matters with no waiting periods, no deductibles and no claim forms when using a network attorney.

Services provided include:

- Court appearances
- Document review & preparation
- Debt collection defense
- Will or living trust
- Family law
- Real estate matters
- Identity theft and fraud protection

You may only elect this plan as a new hire or during open enrollment. Once you enroll, you must remain in the plan for the entire plan year.



To access services, contact MetLife Legal at info.legalplans.com or 800-821-6400 and provide your personal information for coverage verification.



Additional Benefits (cont'd)

Tuition Assistance

The city provides tuition assistance to regular full-time employees for attendance at a regionally or nationally accredited college or university, Working Scholars through Study.com or qualifying certification programs. Eligible employees may receive up to **\$5,250** in tuition assistance as approved by city council each year. Courses eligible for tuition assistance shall be job-related to an existing position in the city and part of an approved degree program or a qualifying certification program. Employees are eligible for one undergraduate and one graduate degree under the city's tuition assistance program. For more details see the Policy and Guideline.

Development Award Program

The city recognizes employees who successfully complete a college degree program while working at the city. To receive the award, eligible employees will need to submit the Professional Development Award Request form and provide a copy of their certificate degree.

To learn more about these programs and eligibility contact Human Resources at hadminitems@goodyearaz.gov or call 623-882-7762.

Pet Care Insurance

The city offers you the option of enrolling in pet care insurance through Nationwide with the convenience of having automatic payroll deductions. You can be reimbursed up to 70% for veterinary expenses such as surgeries, diagnostic tests, hospitalization, prescriptions, vaccinations and more. It covers many items other policies do not such as spay/neuter, hereditary conditions, prescription therapeutic diets and dental. The plan has a \$250 annual deductible and a \$7,500 maximum annual limit.

In addition, Nationwide offers unlimited, 24/7 access to veterinary professionals. Contact Nationwide at petinsurance.com/goodyearaz or call 877-738-7874 to learn more about coverage options and premiums. Let them know you are an employee to receive the preferred pricing.



Employer ID: cityofgoodyear



Paid Time Off

Vacation Leave

Full-time regular employees are eligible to receive paid vacation time, which gives employees work/life balance and allows employees to spend time with their families, focus on their hobbies or just take a break from work.

Vacation accruals will be based on total service of years with ASRS, PSPRS, City of Phoenix and/or City of Tucson retirement systems and/or CORP.

| Hours Earned Per Pay Period | | |
|-----------------------------|--------------------|-------------------|
| Years of Service | Standard Work Week | 56-hour Work Week |
| 0-4 | 4.39 | 6.65 |
| 5-9 | 5.30 | 7.92 |
| 10-14 | 6.15 | 9.12 |
| 15-20 | 7.05 | 10.38 |
| 21+ | 7.36 | 10.81 |

Longevity Pay

Full-time regular employees who have completed their sixth year of service by Dec. 1 are eligible for longevity pay.

| Years of Service | Amount | Years of Service | Amount |
|------------------|---------|------------------|---------|
| 6 | \$750 | 13 | \$1,500 |
| 7 | \$750 | 14 | \$1,500 |
| 8 | \$900 | 15 | \$1,750 |
| 9 | \$900 | 16 | \$1,750 |
| 10 | \$1,250 | 17 | \$1,750 |
| 11 | \$1,250 | 18 | \$2,000 |
| 12 | \$1,250 | 19 | \$2,000 |
| | | 20+ | \$2,400 |

Sick Leave

Sick leave provides income protection when employees are unable to report to work because of personal illness or whose immediate family member becomes ill and the employee must care for the family member.

| Hours Earned Per Pay Period | |
|-----------------------------|------|
| Standard work week | 3.70 |
| 56-hour work week | 5.18 |

Paid Holidays/Floating Holiday

These are the holidays observed by the city and paid to eligible employees:

| | |
|------------------------|---|
| New Year's Day | Labor Day |
| Martin Luther King Day | Veterans Day |
| Presidents Day | Thanksgiving |
| Memorial Day | Friday after Thanksgiving |
| Juneteenth | Christmas |
| Independence Day | One (1) floating holiday (granted on Jan. 1 only) |

Flexible Holiday

Each year on Jan. 1, eligible employees will receive a bank of **24 flexible hours** to supplement holiday hours if working an alternative work schedule or to use as additional time off. Unused hours will not carry over to the next year. Employees hired after Jan. 1 will be prorated with two hours per holiday for remaining holidays in the calendar year.

Contacts

| BENEFIT | PROVIDER | POLICY/ GROUP NO. | PHONE | WEBSITE |
|---|--|----------------------|--------------|-----------------------------|
| Health Advocate | Health Advocate | City of Goodyear | 866-799-2731 | healthadvocate.com/members |
| Medical | Cigna | 3208752 | 800-244-6224 | mycigna.com |
| Health Coaching | Cigna | 3208752 | 855-246-1873 | mycigna.com |
| Mail Order Pharmacy | Cigna | 3208752 | 800-835-3784 | mycigna.com |
| Health Savings Account | H.S.A. Bank | 3208752 | 800-244-6224 | mycigna.com |
| Employee Assist. Program (EAP) | Cigna Behavioral Health | goodyearaz | 877-622-4327 | mycigna.com |
| Nurse Line 24/7 | Cigna | 3208752 | 800-244-6224 | mycigna.com |
| Telehealth | MDLive (Cigna) | N/A | 888-726-3171 | mycigna.com |
| Goodyear Wellness Center | CareATC | N/A | 623-401-6566 | careatc.com/cityofgoodyear |
| Telemedicine | Recuro Health (CareATC) | N/A | 877-230-9404 | careatc.com/cityofgoodyear |
| Flexible Spending Account | Cigna | N/A | 800-244-6224 | mycigna.com |
| Dental | Cigna | 3208752 | 800-244-6224 | mycigna.com |
| Vision | Avesis | 30781-1013 | 800-828-9341 | avesis.com |
| Life Insurance | The Standard | 752920 | 888-937-4783 | standard.com/lifeneeds |
| Family Medical Leave | FMLA Source/Guardian | N/A | 877-462-3652 | fmlasource.com |
| Short Term Disability | Guardian | 485474 | 800-268-2525 | guardiananytime.com |
| Long Term Disability | Guardian | 301909 | 800-268-2525 | guardiananytime.com |
| Deferred Compensation /Roth IRAs | MissionSquare | 301909 | 800-669-7400 | missionsq.org |
| Deferred Compensation /Roth IRAs | Nationwide (ASRS Plan) | 0062548 | 877-677-3678 | azsrsp.com |
| State Pension Plan | Arizona State Retirement System (ASRS) | N/A | 602-240-2000 | azasrs.gov |
| State Pension Plan (Public Safety) | Public Safety Personnel Retirement System (PSPRS) | Fire #136 PD #137 | 602-255-5575 | psprs.com |
| Pet Insurance | Nationwide Pet Insurance | N/A | 877-738-7874 | petinsurance.com/goodyearaz |
| Legal Services | MetLife Legal Plans | N/A | 800-821-6400 | members.legalplans.com |
| Identity Fraud Protection | Aura | N/A | 855-443-7748 | my.aura.com |
| Accident Advantage | Aflac | PQ456 | 602-229-1970 | aflac.com |
| Hospital Advantage | Aflac | PQ456 | 602-229-1970 | aflac.com |
| Cancer Care | Aflac | PQ456 | 602-229-1970 | aflac.com |
| City Paid Cancer Benefit (Non-Sworn) | Guardian | 00485474 | 800-541-7846 | guardianlife.com |
| City Paid Cancer Benefit (Sworn Fire and Police) | PSPRS | N/A | 602-255-5575 | psprs.com |

Legal Notices

Summary Plan Description & Summary of Benefits & Coverage Notification

The Affordable Care Act (ACA) requires health plans and health insurance issuers to provide applicants and enrollees with a concise document providing simple and consistent information about health plan benefits and coverage. The document, which is called a summary of benefits and coverage (SBC), is intended to help health plan consumers better understand the coverage they have and help them make easier comparisons when shopping for new coverage. The city's Summary Plan Descriptions (SPDs) and Summary of Benefits & Coverage are available to view in a printable format on the gInet under Human Resources. You can also request a hard copy by emailing hrcbenefits@goodyearaz.gov or call 623-882-7762.

Genetic Information Nondiscriminatory Act of 2008 (GINA) Disclosure

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, the city of Goodyear asks you not provide any genetic information when responding to a request. "Genetic information" as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, notice that an individual or an individual's family member sought or received genetic services and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services. Please do not include any family medical history or any information related to genetic testing, genetic services, genetic counseling or genetic diseases for which an individual may be at risk.

Privacy Notice

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 requires health plans to comply with privacy rules. These rules are intended to protect your personal health information (PHI) from being inappropriately disclosed. They also provide you with additional rights concerning your health care information. The city's HIPAA Privacy Notice explains how the group health plan and your employer handles your PHI. You can request a copy of this Notice from the Human Resources Department. Additional information on how your medical information may be used and disclosed and how you can gain access to this information is available on

HIPAA Special Enrollment Notice

If you decline to enroll for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage available to you, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that coverage (or if the employer offering this coverage stops contributing towards your or your dependents' coverage). Loss of eligibility includes but is not limited to:

- Loss of eligibility for coverage as a result of ceasing to meet the plan's eligibility requirements (e.g., divorce, cessation of dependent status, death of an employee, termination of employment, reduction in the number of hours of employment);
- Loss of HMO coverage because the person no longer resides or works in the HMO service area and no other coverage option is available through the HMO plan sponsor;
- Elimination of the coverage option a person was enrolled in, and another option is not offered in its place;
- Failing to return from an FMLA leave of absence; and
- Loss of eligibility under Medicaid or the Children's Health Insurance Program (CHIP).

Unless the event giving rise to your special enrollment right is a loss of eligibility under Medicaid or CHIP, you must request enrollment within 31 days after your or your dependent's(s') other coverage ends (or after the employer that sponsors that coverage stops contributing toward the coverage).

If the event giving rise to your special enrollment right is a loss of coverage under Medicaid or CHIP, you may request enrollment under this plan within 60 days of the date you or your dependent(s) lose such coverage under Medicaid or CHIP. Similarly, if you or your dependent(s) become eligible for a state-granted premium subsidy toward this plan, you may request enrollment under this plan within 60 days after the date Medicaid or CHIP determine that you or the dependent(s) qualify for the subsidy.

If you have a Qualifying Life Event during the year, log on to Employee Self Service (ESS) to process your life event within 31 days after the event. Changes become effective on the day of the event. To request special enrollment or obtain more information, email hrcbenefits@goodyearaz.gov.

Wellbeing Program Disclosure

The city of Goodyear Wellbeing program is a voluntary wellness program available to all employees. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the Wellbeing program you will be asked to complete a voluntary Physical Health Assessment (PHA) or biometric screening, which will include a blood test for to find abnormalities in blood lipid concentrations to identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

You are not required to complete the PHA/biometric screening or other medical examinations. However, employees who choose to participate in the PHA/biometric screening and other prescribed wellbeing programs will receive an incentive of a reduced premium for medical insurance. Although you are not required to complete the PHA or participate in the biometric screening, only employees who do so will receive the wellness engagement medical premium rates. If you are unable to participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting your department Business Partner or Wellbeing Coordinator at 623-882-7807.

PHA's are collected by a third-party provider, your individual personal health information is not shared with the city. Only aggregate data is shared with the city's for the purpose of designing wellbeing programs that address health risks that are prevalent in the city.

The information from your PHA will be used to provide you with information to help you understand your current health and potential risks and may also be used to offer you services through the Goodyear Wellness Center. You also are encouraged to share your results or concerns with your own doctor.

Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the Wellbeing program may use aggregate information to design a program based on identified health risks in the workplace, the Wellbeing program will never disclose any of your personal information, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law.

Medical information that personally identifies you that is provided in connection with the Wellbeing program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment. Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the Wellbeing program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the Wellbeing program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the Wellbeing program will abide by the same confidentiality requirements.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the Wellbeing program, we will notify you immediately.

Legal Notices

Premium Assistance under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, the state may have a premium assistance program that can help pay for coverage, by using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs. You may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information:

Website for Arizona:

azahcccs.gov/applicants/default.aspx or phone (in state) 1-877-764-5437

All Other States: <https://www.healthcare.gov/medicaid-chip/childrens-health-insurance-program/>

If you or your dependents are not currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan. If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 1-866-444-EBSA (3272).

Newborn's and Mother's Health Protection Act

Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or the insurance issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

Dependents Ineligible for Health Coverage

Employees selected for audits will be required to provide documentation proving that each person enrolled in their health plan meets the eligibility definition. If the audit determines an ineligible dependent, the following actions will be taken:

- Claims pending for ineligible dependents will be stopped
- Claims paid for ineligible dependents will be reversed; if reversal is unsuccessful, claims paid for ineligible dependent(s) will be calculated at the non-contracted rates and will be deducted from the employee's wages through payroll deduction, collections, and other means as available
- Disciplinary action, up to and including dismissal may be recommended.

Women's Health Health and Cancer Rights Act Notice

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. Therefore, the deductibles and coinsurance listed in this Guide (and/or your health plan's Summary Plan Description) apply.

If you would like more information on WHCRA benefits, contact your plan administrator at hrcbenefits@goodyearaz.gov.



hrbenefits@goodyearaz.gov
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