

# 2025

# Employee Benefits Guide



BENEFITS DESIGNED

WITH YOU

IN MIND

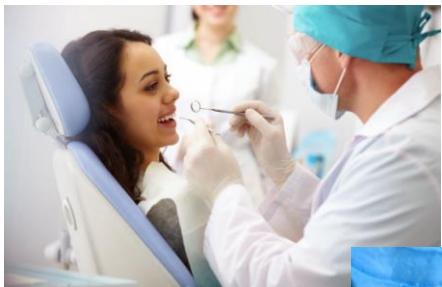


**Lincoln County**  
North Carolina



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## DISCLAIMER

This guide is a brief summary of benefits offered to your group and does not constitute a policy. Your employer may amend the benefits program at any time. Your Summary Plan Description (SPD) will contain the actual detailed provisions of your benefits. The SPD will be available if there are any discrepancies between the information in this guide and the SPD. The language in the SPD will always prevail.

# IMPORTANT POINTS

- Your plan year runs from July 1, 2025 to June 30, 2026. This means your benefit elections will take effect July 1, 2025, unless otherwise noted.
- If you wish to add or make changes to your benefit elections, you may speak with a trusted e3 Benefits Counselor during your scheduled open enrollment.
- Once the enrollment period is over, you will not be able to make changes unless you experience a qualified life event as outlined by the IRS. This also applies if you wish to make changes to your benefits mid-plan year. You **MUST** have a qualifying event to make changes. If you should have a qualifying event, you will have 30 days from the date of the qualifying event to request a change. Certain stipulations do apply, and documentation is required. Please contact your Human Resources Department to make a change.
- **Employees with Other Coverage:** Employees who have other insurance coverage, excluding Medicare or Tricare, will have to choose to keep that other coverage or go on the Lincoln County HSA plan.
- **Note:** Employees **MUST** re-enroll in their Flexible Spending Account and Dependent Care Account each year! **It does not automatically rollover.**
- **Pay Dates:** The first pay date for premium changes to BCBS, Superior Vision & Ameritas Dental is June 12, 2025, due to health care premiums being paid a month in advance. The first pay date for premium changes for all Voluntary Benefits is July 10, 2025.
- **Ameritas Dental:** Your preventive care cost (cleanings etc.) will not be included in your Annual Maximum benefit.
- **MetLife Cancer:** The Cancer plan is guaranteed issue for employees and dependents. If you have not elected the plan, you may elect either the Low or High and you do not have to answer health questions. The Pre-existing condition provision does apply.

## Important note for all newly hired employees:

Since July 1, 2013, Lincoln County has not offered the BCBSNC PPO plan to newly hired employees. For our medical plan, all new hires are offered the Blue Options HSA (Health Savings Account). Lincoln County additionally provides funding into the HSA account upon election.

While we understand that some new hires may have previously been covered under the Lincoln County medical PPO plan as a dependent, our policy has been and will continue to be that new hires can only elect the HSA plan. We have been consistent with this standard since putting it in place.

## QUALIFYING LIFE EVENTS

Open Enrollment selections are generally locked for the plan year, but certain exceptions called Qualifying Life Events (QLEs) can grant you a special enrollment period in which to make midyear changes. You are permitted to change benefit elections if you have a “change in status” and you make an election change that is consistent with the “change in status.”

### Examples of QLEs

The following events will open a special 30-day enrollment period from the date of the event, allowing you to make changes to your coverage.

- Marriage
- Divorce
- Childbirth/Adoption
- Death of a family member
- Loss of parental coverage
- Spouse gains or loses coverage





## The Benefit Resource Center ("BRC") is Always Here to Help!

It doesn't matter if you're a new hire or celebrating your 15<sup>th</sup> year with the same company, benefits and claims can be tricky to navigate. Our Benefits Specialists can help you: choose the right plan, translate confusing jargon and answer questions about which benefits your employer offers. Plus, they can work directly with insurance carriers to resolve issues related to claims and denials of service—and more!

### Benefit Resource Center

[BRCSouth@usi.com](mailto:BRCSouth@usi.com) | Toll Free: 855-874-0835

Monday through Friday 8:00am to 5:00pm Eastern & Central Standard Time

# FILING A CLAIM

## METLIFE GROUP CANCER

Visit <https://www.bbadmin.com/forms> to download your claim form. MetLife Wellness Benefits can also be called in to a Bay Bridge claim's examiner at (800) 845-7519. Please have the following information available:

- Claimant Name
- Date of Service
- Name of Service/Screening
- Provider Name & Phone Number

Claim forms can be submitted:

1. Email: [claims@bbadmin.com](mailto:claims@bbadmin.com)
2. Fax: 512-275-9352
3. Mail: Bay Bridge Administration, Attn: Claims, P. O. Box 161690, Austin, TX 78716



## SUN LIFE DISABILITY

Visit [www.sunlife.com/us](http://www.sunlife.com/us) to download your claim form or complete the statement on-line. There are three options for submitting your Short or Long-Term Disability claim:

1. Call the disability claim team at 800-247-6875 (M-F 8:00 am – 8:00 pm ET) You should have all information available before calling the disability claim team
2. Fax to 781-304-5599
3. Mail to Sun Life Assurance Company of Canada, Group Disability Claims, P. O. Box 81915, Wellesley Hills, MA 02481



## SUN LIFE ACCIDENT, HOSPITAL INDEMNITY & CRITICAL ILLNESS

Monday – Thursday: 8 am to 7 pm EST

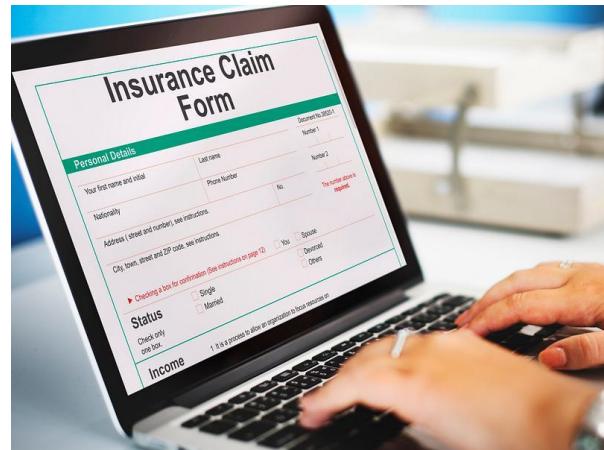
Friday: 8 am to 6 pm EST

PH: 877-820-5306

E-mail: [slfworksitesclaims@disabilityrms.com](mailto:slfworksitesclaims@disabilityrms.com)

## WELLNESS BENEFIT AMOUNTS

- **MetLife Group Cancer** | \$100
- **SunLife Group Accident** | \$50
- **SunLife Group Hospital Indemnity** | \$50
- **SunLife Group Critical Illness (Employee/Spouse/Child)** | \$100



# EMPLOYEE WELLNESS PROGRAM

The Lincoln County Employee Wellness Program is designed to promote the health and well-being of its employees through various initiatives. The program offers a range of wellness challenges aimed at encouraging employees to actively participate in improving their overall health. This proactive approach empowers employees to make positive choices and take control of their well-being.

Additionally, the wellness program offers monthly onsite massages for a nominal fee and a weekly walking club on Saturdays. The goal of the massages is to promote relaxation and reduce stress among employees, while the walking club encourages both physical activity and social interaction.

**NOTE: Employee Health Clinic will provide acute care services Monday-Friday for specific illnesses such as the Flu, COVID-19, and sinusitis. This access to immediate medical attention ensures that employees can receive prompt treatment when needed, promoting quick recovery, and preventing the spread of contagious diseases within the workplace.**

Annually, biometric screenings are held to assess key health metrics and indicators. These screenings play a crucial role in early intervention by identifying potential health issues before they escalate. By monitoring factors such as blood pressure, cholesterol levels, and body mass index, employees can proactively address any health concerns and work towards achieving optimal wellness.

Overall, the Lincoln County Employee Wellness Program is committed to fostering a culture of health and wellness among its employees. While continually growing, the program aspires to include mental health assistance, health focused learning opportunities such as lunch and learns and growing resources to better serve our employees. By offering a comprehensive range of services and wellness challenges, the program empowers individuals to prioritize their health, leading to a more engaged, productive, and healthier workforce.

**Madeline Ferrell is your wellness coordinator and a nurse practitioner. She is focused on providing the resources to better your health and encourages you to take a holistic and realistic approach in your health journey.**





Because health is a big deal<sup>SM</sup>

Did you know that, as BlueCross BlueShield members, you have access to exclusive discounts on gym memberships, wearable, weight loss programs and more? Blue365 offers the best discounts from top brands including:



Visit [www.Blue365deals.com](http://www.Blue365deals.com) to learn more and sign up today!

## Blue365®

### FREQUENTLY ASKED QUESTIONS



Blue365 offers exclusive health and wellness deals, keeping you healthy and happy, every day of the year. Visit [www.Blue365deals.com](http://www.Blue365deals.com) to learn more and sign up today!

## What is Blue365?

Blue365 is a program sponsored by participating local Blue Companies that helps you stay healthier, for less. This program is offered to members of participating Blue Companies as an additional value for being a Blue member. Since 2007, Blue365 has offered discounts for members to save on products and services for a well-balanced lifestyle. The discounts fall into 6 different categories: Financial Health, Fitness, Healthy Eating, Lifestyle, Personal

Care and Wellness. Some previously featured discounts include hearing aids, weight loss coaching programs, workout apparel, pedometers and fitness club memberships.

These "Blue365 Deals" (which are different than the health care benefits that you have with your local Blue Company) can help you maintain a healthy lifestyle, while spending less at some of your favorite Blue365 vendors nationwide.

### FREQUENTLY ASKED QUESTIONS

#### Is Blue365 health insurance?

No. Blue365 is separate from the health care benefits offered by Blue Cross and Blue Shield Companies. The deals are designed to promote healthy living 365 days a year through enjoyable, wellness-focused offers.

#### How to do I join?

Simply go to the website, fill out a quick registration form and choose your deal preferences. Once you are registered, you can access all of the health and wellness deals that Blue365 has to offer.

#### What do I get if I join?

After registration, members can browse and redeem deals and discounts directly through the website. When you see the discount you want, click on "view details." You'll either be given a coupon code that you can apply directly to your purchase on the vendor's site, or you'll be routed to the vendor's site automatically and the discount will have already been applied for you.

Blue365 deals change periodically, so if you see one that you like, go ahead and take advantage of it while it's still available. It may not be there the next time you log in. The discounts change based on what the vendor is

offering, so there's no set timeframe that each deal is available. And every week, an email will be sent directly to your inbox announcing a different deal or discount.

And every month, anyone that registers on the Blue365 website will receive an entry into a drawing for \$25. One winner will be chosen per month.

#### How are the deal vendors selected?

The Blue365 team does independent research to bring new vendors on board. Members can also suggest their favorite brands for future deals directly on Blue365.

#### Have more questions?

Get in touch! You can email Blue365 at [support@blue365deals.com](mailto:support@blue365deals.com) or call us at **1-855-511-BLUE**.

We'll gladly answer any further questions you might have – and until then, here's to your health!



## LEARN MORE ABOUT BLUE365'S EXCLUSIVE DISCOUNTS ON GYM MEMBERSHIPS



As a Blue Cross Blue Shield member, you have free access to Blue365, an exclusive program that offers discounts on health and wellness products, including gym memberships.

Whether you're dedicated to maintaining your workout regimen or just starting on a journey towards a more active life—Blue365 offers savings on a network of national gyms to give you the access and membership that fits your lifestyle.

### HERE ARE SOME OPTIONS YOU CAN CHOOSE FROM:



- Choose from 12,500+ fitness centers in our Standard Program, and 8,500+ boutique studios in our Premium Program.
- 12,000+ on-demand workout videos and hundreds of clinically-approved wellness resources.
- No long-term contracts. Visit any participating location—anytime, anywhere—as often as you like.
- Standard Program: \$28/month with a \$28 enrollment fee.
- Premium Program: 20-70% discount on most studios & centers.

[REDEEM NOW](#)



- Access to up to 13,000+ fitness locations and studios.
- Visit any participating location—anytime, anywhere—as often as you'd like.
- Join live virtual classes like cardio, boot camps, barre and yoga with Burnalong®.
- 24/7 access to On-Demand videos—from strength training to meditation.
- Access 20,000+ health and well-being specialists with up to 50% off services like acupuncture, chiropractic, and nutrition.
- Access to a network of integrated health practitioners including chiropractors, acupuncturists, massage therapists and much more at up to 50% services.
- Pricing starting at \$19/month with a \$19 enrollment fee.

[REDEEM NOW](#)

© 2024 Blue Cross and Blue Shield Association—All Rights Reserved. Blue365 offers access to savings on health and wellness products and services and other interesting items that Members may purchase from independent vendors, which are not covered benefits under your policies with Blue Cross and Blue Shield of North Carolina, its contracts with Medicare, or any other applicable federal healthcare programs. These products and services will be offered to you through the entire benefit year. During the year, the independent vendors may offer additional discounts on these products and services. To find out what is covered under your policies, contact Blue Cross and Blue Shield of North Carolina. The products and services described on the Site are neither offered nor guaranteed under Blue Cross and Blue Shield of North Carolina's contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding your health insurance products and services may be subject to Blue Cross and Blue Shield of North Carolina's grievance process. BCBSA may receive payments from vendors providing products and services on or accessible through the Site. Neither BCBSA nor any Blue Company recommends, endorses, warrants, or guarantees any specific vendor, product or service available under or through the Blue365 Program or Site.

24-026-N18

# UNDERSTANDING THE DIFFERENCES

Below we've outlined the key differences between Health Savings Accounts (HSA) and Flexible Spending Accounts (FSA) so you can see which is right for you and your family, the advantages to each, and why they are offered.

## HEALTH SAVINGS ACCOUNT (HSA)

- An HSA is an individually owned benefits plan funded by the employee.
- Employees must be enrolled in the High Deductible Health Plan (HDHP) to be eligible, which will lower insurance premiums.
- HSA's have a triple-tax advantage, meaning distributions for qualified medical expenses and investment returns are tax-free, and contributions are tax-deductible.
- HSA's can also be invested, which lets employees grow their dollars!
- Contribution Limits: Individual - \$4,300; Family - \$8,550

## FLEXIBLE SPENDING ACCOUNT (FSA)

- An FSA is an employer-owned account that employees use to set aside funds for qualified medical expenses.
- FSA's offer pre-tax savings on eligible expense like medical or dependent care services.
- FSA's will also save you money! For example, if an employee is enrolled in the Medical FSA, he/she reduces the taxable income, which reduces the amount subject to Social Security and Medicare.
- You won't have to pay Social Security or Medicare tax on funds going into an FSA.
- Contribution Limits: Healthcare - \$3,300; Dependent Care - \$5,000



# BCBSNC Blue Options HSA



BlueCross BlueShield  
of North Carolina

Your medical plan is likely the most important decision you will make each Open Enrollment, and we want to make it as easy as possible. The below plan through BlueCross BlueShield of NC offers both in network and out-of-network benefits.

**Lincoln County will contribute \$1,000 toward your HSA account with this plan. This will be paid out \$500 in Nov 2025 and \$500 in May 2026.**

Services	BCBS Blue Options HSA	
	In-Network	Out-of-Network
<b>Office Visit</b>		
Primary Care Physician	20% Coinsurance after Deductible	50% Coinsurance after Deductible
Specialist	20% Coinsurance after Deductible	50% Coinsurance after Deductible
<b>Preventive care, immunizations, cancer screenings</b> (visit <a href="http://bcbsnc.com/preventive">bcbsnc.com/preventive</a> for details)	100% no copay if services are coded as preventive care	In-Network Only
<b>Rx</b> (Generic, brand, non-Preferred, Specialty Rx)	Tier 1, Tier 2, Tier 3, Tier 4, & Tier 5 20% Coinsurance after Deductible Rx contraceptives covered at 100% no copay. See <a href="http://www.bcbsnc.com/preventive">www.bcbsnc.com/preventive</a> for list.	Tier 1, Tier 2, Tier 3, Tier 4, & Tier 5 20% Coinsurance after Deductible
<b>Hospital Services</b> (in-patient & out-patient)	20% Coinsurance after Deductible	50% Coinsurance after Deductible
<b>Coinurance</b>	80%	50%
<b>Deductible</b>		
Individual	\$1,650	\$3,300
Family Member/Family Total	\$3,300	\$6,600
<b>Out of Pocket Maximum (OOP Limit)</b>	(Out-of-pocket limit includes Deductible and Coinsurance)  \$3,500 \$5,000 \$5,000	(Out-of-pocket limit includes Deductible and coinsurance)  \$7,000 \$10,000 \$10,000
<b>ER / Urgent Care Center</b>	20% Coinsurance after Deductible	
<b>Diagnostic tests Outside Provider's Office</b> (CT, MRI, PET, etc.)	20% Coinsurance after Deductible	50% Coinsurance after Deductible
<b>Mental Health / Substance Abuse</b>	20% Coinsurance after Deductible	50% Coinsurance after Deductible
<b>Therapies: Physical/Occupational/Speech</b>	20% Coinsurance after Deductible	50% Coinsurance after Deductible
<b>Lifetime Maximum</b>	Unlimited	



Click on logo to the right  
or  
scan QR code for SBC.



# BCBSNC Blue Options PPO



The below plan through BlueCross BlueShield of NC offers both in network and out-of-network benefits as well as copays for in network office visits and prescriptions.

**NOTE: New hires are NOT eligible for this plan.**

Services	BCBS Blue Options PPO	
	In-Network	Out-of-Network
<b>Office Visit</b>		
Primary Care Physician	\$50 Copay	30% Coinsurance after Deductible
Specialist	\$100 Copay	30% Coinsurance after Deductible
<b>Preventive care, immunizations, cancer screenings</b> (visit <a href="http://bcbsnc.com/preventive">bcbsnc.com/preventive</a> for details)	100% no copay if services are coded as preventive care	In-Network Only
<b>Rx</b> (Generic, brand, non-Preferred, Specialty Rx)  90-day supply is subject to 3 x copay	\$250 Deductible per Member then,  Tier 1: \$10 Copay Tier2: \$10 Copay Tier 3: \$55 Copay Tier 4: \$70 Copay Tier 5: 25% Coinsurance (\$50 Min/\$100 Max)  Rx contraceptives covered at 100% no copay. See <a href="http://www.bcbsnc.com/preventive">www.bcbsnc.com/preventive</a> for list.	\$250 Deductible per Member then,  Tier 1: \$10 Copay Tier2: \$10 Copay Tier 3: \$55 Copay Tier 4: \$70 Copay Tier 5: 25% Coinsurance (\$50 Min/\$100 Max)  Any charges over Allowed Amount will be paid in addition to copay.
<b>Scan QR code for Specialty Pharmacy Network Participants</b>		
<b>Hospital Services</b> (in-patient & out-patient)	20% Coinsurance after Deductible	50% Coinsurance after Deductible
<b>Coinurance</b>	80%	50%
<b>Deductible</b>		
Individual	\$3,500	\$7,000
Family	\$7,000	\$14,000
<b>Out of Pocket Maximum</b> (OOP Limit)	(Out-of-pocket limit includes Deductible, Coinsurance & any Copays)	(Out-of-pocket limit includes Deductible and coinsurance)
Individual	\$7,000	\$14,000
Family	\$14,000	\$28,000
<b>ER / Urgent Care Center</b>	20% Coinsurance after Deductible/ \$100 Copay	
<b>Diagnostic tests Outside Provider's Office</b> (CT, MRI, PET, etc.)	20% Coinsurance after Deductible	50% Coinsurance after Deductible
<b>Mental Health / Substance Abuse</b>	20% Coinsurance after Deductible	50% Coinsurance after Deductible
<b>Therapies: Physical/Occupational/Speech</b>	20% Coinsurance after Deductible	50% Coinsurance after Deductible
<b>Lifetime Maximum</b>	Unlimited	



Click on logo to the right  
or  
scan QR code for SBC.





**Headway**



**BlueCross BlueShield  
of North Carolina**

# We're here to help you get mental health care that fits your needs.

Whether you know what you need or aren't sure where to start, we'll help you find the right fit.



## About Headway

### Personalized Matching Support

Get matched with a provider who fits your needs using our questionnaire or a one-to-one conversation with our support team.

### In-Person or Virtual Care

Book an online or virtual appointment with our providers.

### Affordable and Transparent Pricing

All providers are in-network with Blue Cross and Blue Shield of North Carolina and you can see your price before you book.

### Specialist Network

Diverse network of therapists, psychologists, and psychiatrists committed to providing high quality care.

### Easy-to-Use Platform

Book and manage appointments and payment directly on our website.

### Immediate Availability

On-demand matching with providers who have openings within 48 hours, including for children and adolescents covered as dependents.

## How it Works

- 1 Scan this QR code or go to [headway.co/BlueCrossNC](https://headway.co/BlueCrossNC)



- 2 Tell us what you're looking for

Choose your concerns and/or preferences for therapy to find the best match for you. We'll calculate the exact cost before your session.

- 3 Start therapy

Choose a therapist from your matches and book your first appointment right on Headway.

Blue Cross® and Blue Shield® of North Carolina (Blue Cross NC) provides free aids to service people with disabilities as well as free language services for people whose primary language is not English. Please contact the Customer Service number on the back of your ID card for assistance.

Blue Cross® and Blue Shield® of North Carolina (Blue Cross NC) proporciona asistencia gratuita a las personas con discapacidades, así como servicios lingüísticos gratuitos para las personas cuyo idioma principal no es el inglés. Comuníquese con el número para servicio al cliente que aparece en el reverso de su tarjeta del seguro para obtener ayuda.

Headway is an independent company providing behavioral health services on behalf of Blue Cross NC. Headway does not offer Blue Cross or Blue Shield products or services. BLUE CROSS®, BLUE SHIELD®, and the Cross and Shield symbols are registered marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans. All other marks and trade names are the property of their respective owners. Blue Cross and Blue Shield of North Carolina is an independent licensee of the Blue Cross and Blue Shield Association. U41093, 7/22



amazon pharmacy  
MedsYourWay®

## A NEW WAY to save on medicine

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) is now offering access to Amazon Pharmacy, which lets you easily order and quickly get non-specialty medicines<sup>1</sup> delivered at home.

Plus, you'll get access to MedsYourWay prescription drug discount card pricing, available to all members with pharmacy benefit coverage through Blue Cross NC. The prescription discount card<sup>2</sup> gives you up to 80% savings<sup>3</sup> on brand and generic medicines and is seamlessly built right into the Amazon Pharmacy experience. You can get the lowest cost available on your prescription, all while saving time and money. Using the MedsYourWay discount card is not insurance; however, using it for covered medicines will count toward your Blue Cross NC out-of-pocket maximum.<sup>4</sup>

### **SHOP** – Easy to use

Amazon Pharmacy is just like shopping on [Amazon.com](https://www.amazon.com):

- Easy sign up, which includes the option to have your account auto-populate with your prescription history
- Option for 90+ day fills
- Pharmacist on call 24/7
- Ability to manage your medicine and order history

### **SAVE** – Built-in drug discount card

Some drugs may be available at lower prices with a discount card. MedsYourWay discount pricing is built right into the Amazon Pharmacy experience.

- At checkout, you'll see the lowest cost available for your prescription. That's the price you'll pay.
- MedsYourWay discount card pricing is not insurance; however, all prescribed and covered purchases, whether paying a copay or using the discount card pricing, will automatically count toward your annual out-of-pocket maximum.<sup>4</sup>

### **Eligibility**

The MedsYourWay – Home Delivery program is available to all Commercial members with Prime Therapeutics® (Prime) as their Pharmacy Benefits Manager (PBM). Members on the following plans are excluded:

- State Health Plan
- Federal Employee Program® (FEP)
- Senior Market
- Self-funded groups who have carved out their PBM to somebody other than Prime



amazon pharmacy  
MedsYourWay®



## SHIP – Free home delivery

Skip the pharmacy line with home delivery:

- Free, fast delivery: Amazon Prime members get two-day free shipping on most orders; standard free shipping for non-Amazon Prime members is five days but can be expedited to two-day delivery for an additional cost.
- Real-time package tracking from order to delivery.

### Start saving today

Sign up and learn more at [www.Amazon.com/bluecrossNC](http://www.Amazon.com/bluecrossNC).

Then click on the "Get Started" link.

For questions, call Amazon Pharmacy Customer Care at **855-963-4546**, Monday through Friday, 8 a.m. – 10 p.m. ET, and Saturday and Sunday, 10 a.m. – 8 p.m. ET.:

- Open/tap the camera (app) on your smartphone.
- Point your camera over the QR code so it's clearly visible within your camera screen.
- A link will show up on your camera screen. Click on the link, and the Amazon Pharmacy Customer Care site will open.



Amazon Prime members  
get two-day free shipping  
on most orders.

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) provides free aids to service people with disabilities as well as free language services for people whose primary language is not English. Please contact the Customer Service number on the back of your ID card for assistance.

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) proporciona asistencia gratuita a las personas con discapacidades, así como servicios lingüísticos gratuitos para las personas cuya idioma principal no es el inglés. Comuníquese con el número para servicio al cliente que aparece en el reverso de su tarjeta del seguro para obtener ayuda.

1. Amazon Pharmacy does not dispense Schedule 2 controlled substance drugs.

2. MedsYourWay prescription drug discount card, administered by Inside Rx® LLC, is not insurance. You are responsible for the cost of prescription(s) when using the card. Limitations apply.

3. Patients can save up to 80% on brand and generic medications with an average of 50% savings on brand-name diabetes medicines. Actual savings will vary. Source: [insiderrx.com/help](http://insiderrx.com/help) (Accessed September 2022)

4. If your medicine has an unfulfilled requirement, the cost may not count toward your [accumulator] out-of-pocket maximum. Typical requirements include prior authorization (PA) needed, quantity limit exceeded or step therapy needed.

Amazon Pharmacy is an independent company that is solely responsible for the services it provides and does not offer Blue Cross or Blue Shield products or services. MedsYourWay is a prescription drug discount card, administered by Inside Rx LLC. Inside Rx LLC is an independent company that is solely responsible for the services it provides and does not offer Blue Cross or Blue Shield products or services.

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[BlueCrossNC.com](http://BlueCrossNC.com)



BlueCross BlueShield  
of North Carolina

# MEDICAL PREMIUMS



BlueCross BlueShield  
of North Carolina

**BCBS Blue Options HSA Insurance Rates for those Participating in the Wellness Program**  
**Effective July 1, 2025 to June 30, 2026**

MEDICAL					
Coverage Only	Total Cost	Employee Cost	County Cost	Bi-Weekly 1 <sup>st</sup> Payroll	Deductions 2 <sup>nd</sup> Payroll
Individual	\$915.00	\$0.00	\$915.00	\$0.00	\$0.00
Employee/Spouse	\$1,432.43	\$257.15	\$1,175.28	\$128.57	\$128.58
Parent/Child/Children	\$948.75	\$160.92	\$787.83	\$80.46	\$80.46
Family	\$1,641.11	\$457.18	\$1,183.93	\$228.59	\$228.59

**BCBS Blue Options HSA Insurance Rates for those NOT Participating in the Wellness Program**  
**Effective July 1, 2025 to June 30, 2026**

MEDICAL					
Coverage Only	Total Cost	Employee Cost	County Cost	Bi-Weekly 1 <sup>st</sup> Payroll	Deductions 2 <sup>nd</sup> Payroll
Individual	\$945.00	\$30.00	\$915.00	\$15.00	\$15.00
Employee/Spouse	\$1,462.43	\$287.15	\$1,175.28	\$143.57	\$143.58
Parent/Child/Children	\$978.73	\$190.92	\$787.83	\$95.46	\$95.46
Family	\$1,671.11	\$487.18	\$1,183.93	\$243.59	\$243.59



# MEDICAL PREMIUMS



## BCBS Preferred Provider Organization (PPO) Insurance Rates for those Participating in the Wellness Program Effective July 1, 2025 to June 30, 2026

MEDICAL					
Coverage Only	Total Cost	Employee Cost	County Cost	Bi-Weekly 1 <sup>st</sup> Payroll	Deductions 2 <sup>nd</sup> Payroll
Individual	\$993.09	\$78.09	\$915.00	\$39.04	\$39.05
Employee/Spouse	\$1,803.15	\$510.88	\$1,292.27	\$255.44	\$255.44
Parent/Child/Children	\$1,181.95	\$320.91	\$861.04	\$160.45	\$160.46
Family	\$2,108.94	\$807.04	\$1,301.90	\$403.52	\$403.52

## BCBS Preferred Provider Organization (PPO) Insurance Rates for those NOT Participating in the Wellness Program Effective July 1, 2025 to June 30, 2026

MEDICAL					
Coverage Only	Total Cost	Employee Cost	County Cost	Bi-Weekly 1 <sup>st</sup> Payroll	Deductions 2 <sup>nd</sup> Payroll
Individual	\$1,023.09	\$108.09	\$915.00	\$54.04	\$54.05
Employee/Spouse	\$1,833.15	\$540.88	\$1,292.27	\$270.44	\$270.44
Parent/Child/Children	\$1,211.95	\$350.91	\$861.04	\$175.45	\$175.46
Family	\$2,138.94	\$837.04	\$1,301.90	\$418.52	\$418.52



# FLEXIBLE SPENDING ACCOUNT (FSA)



Get reimbursed for out-of-pocket healthcare & child/aged adult day care expenses with tax free dollars!!

- Health care annual contribution maximum: \$3,300
- Dependent care annual contribution maximum: \$5,000

## MAXIMIZE YOUR INCOME

Flexible Spending Accounts (FSAs) allow you to pay certain healthcare and dependent care expenses with pre-tax money. (The key to the Flexible Spending Account (FSA) is that your eligible expenses are paid for with Tax Free Dollars! You will not pay any federal, state or social security taxes on funds placed in the Plan. You will save approximately \$27.65 to \$37.65 on every \$100 you place in the Plan. The amount of your savings will depend on your federal tax bracket.

## ELIGIBILITY

Participation in the plan begins on July 1, 2025 and ends on June 30, 2026. You will be eligible to join the Plan if you are a full-time employee working at least 30 hours or more per week on the first of the month following 30 days of hire. Those employees having a qualifying event are eligible to enroll within 30 days of the qualifying event. Deductions begin on the first pay period following your Plan start date. You must complete an enrollment to participate in the Flexible Spending Accounts each year during the enrollment period. If an enrollment is not completed during open enrollment, you will not be enrolled in the Plan and you will not be able to join until the next Plan Year or if you have a qualifying event.

## THE HEALTH CARE ACCOUNT IS A PRE-FUNDED ACCOUNT

This means that you can submit a claim for medical expenses in excess of your account balance. You will be reimbursed your total eligible expense up to your annual election. The funds that you are pre-funded will be recovered as deductions are deposited into your account throughout the Plan Year.

Click here for:  
More FSA information  
FBA Benefits Card  
Healthcare Portal & Mobile App!

## ELECTION CHANGES

Election changes are only allowed if you experience one of the following qualifying events:

- Marriage or divorce
- Birth or adoption
- Involuntary loss of spouse's medical or dental coverage
- Death of dependent (child or spouse)
- Unpaid FMLA or Non-FMLA leave
- Change in dependent care providers

## REIMBURSEMENT SCHEDULE

All manual or paper claims received in the office of Flexible Benefit Administrators, Inc. will be processed within one week via check or direct deposit. You may also use your Benefits Card to pay for expenses. Please refer to the Benefits Card section for details.

## ONLINE ACCESS

Flexible Benefit Administrators, Inc. provides on-line account access for all FSA participants. Please visit their website at <https://fba.wealthcareportal.com/> to view the following features:

- FSA Login – view balances, check status and view claims history, download participation forms
- FSA Educational Tools – FSA calculator: estimate how much you can save by utilizing an FSA.

## HEALTH CARE REIMBURSEMENT

With this account, you can pay for your out-of-pocket health care expenses for yourself, your spouse and all your tax dependents for healthcare services that are incurred during your plan year and while an active participant. Eligible expenses are those incurred "for the diagnosis, cure, mitigation, treatment, or prevention of disease, or for the purpose of affecting any structure or function of the body." This is a broad definition that lends itself to creativity.



**masaAccess<sup>+</sup>**



## Stay prepared with MASA<sup>®</sup> Emergent Plus

**Coverage for medical transportation  
and care in the event of an emergency**

### Plan includes:



#### **Emergency Ground Ambulance Coverage**

MASA provides coverage for emergency ground transportation in the U.S. or Canada to a medical facility.



#### **Emergency Air Ambulance Coverage**

MASA provides coverage up to \$20,000 for emergency air transportation in the U.S. or Canada to a medical facility.



#### **Hospital to Hospital Ambulance Coverage**

If specialized care is required but not available at the initial emergency facility in the U.S. or Canada, MASA provides coverage for ground medical transfer or up to \$20,000 for air ambulance transfer to the nearest appropriate medical facility.



#### **Repatriation Near Home Coverage**

If you're traveling in the U.S. or Canada and experience an emergency that requires extensive inpatient care and your care provider has approved continued care at a hospital nearer to your home, MASA coordinates your transfer and provides coverage for medical transportation to the approved medical facility.



### **Did you know?**

**54.1M**

**medical emergencies  
occur each year in the U.S.**

Source: NEMSIS, 2024 (National EMS Information Systems)

### **About MASA**

MASA is coverage and care you can count on to protect you from the unexpected — no network needed. Simply send us your emergency transport bill when it arrives, and we'll work to resolve the claim and provide your coverage. Plus, we offer expert coordination services to manage many of the complex needs that can arise after an emergency.

**\$7 / pay period  
family**

This material is for informational purposes only and does not provide any coverage. The benefits listed, and the descriptions thereof, do not guarantee coverage and do not represent the full terms and conditions applicable for usage and may only be offered in some memberships or policies. Premiums, benefits, and coverage vary depending on the plan selected. For a complete list of benefits, premiums, terms, conditions, and restrictions, please refer to your member services agreement or policy on your member portal. For additional information and disclosures about MASA plans, visit: <https://info.masaglobal.com/disclaimers>

## Stay prepared with MASA<sup>®</sup> Emergent Premier

New

**Coverage for medical transportation  
and care in the event of an emergency**

**Plan includes:**

 **Emergency Ground Ambulance Coverage**

MASA provides coverage in the U.S. or Canada for emergency ground transportation to a medical facility.

 **Emergency Air Ambulance Coverage**

MASA provides coverage in the U.S. or Canada up to \$20,000 for emergency air transportation to a medical facility.

 **Hospital to Hospital Ambulance Coverage**

If specialized care is required but not available at the initial emergency facility in the U.S. or Canada, MASA provides coverage for ground medical transfer or up to \$20,000 for air ambulance transfer to the nearest appropriate medical facility.

 **Repatriation Near Home Coverage**

If you're traveling in an extended coverage area<sup>1</sup> and experience an emergency that requires extensive inpatient care and your care provider has approved continued care at a hospital nearer to your home, MASA coordinates your transfer and provides coverage for medical transportation to the approved medical facility.

 **Minor Return Transportation Coverage**

If your minor child traveling with you in an extended coverage area<sup>1</sup> is left unattended due to your emergency transport, MASA helps you coordinate their return trip and reimburses expenses up to \$2,500 for their safe travel home.

 **Pet Return Transportation Coverage**

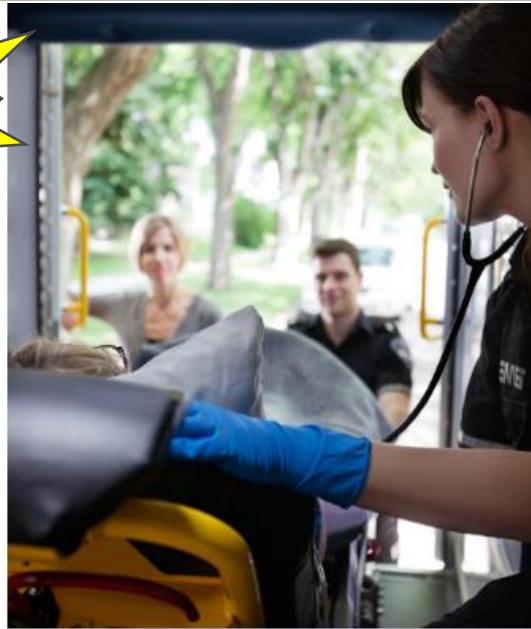
If your pet traveling with you in an extended coverage area<sup>1</sup> is left unattended due to your emergency transport, MASA helps you coordinate their return trip and reimburses expenses up to \$2,500 for their safe return home.

 **Post Admission Continued Care  
Transportation Coverage**

If you need care in a rehabilitation facility, skilled nursing facility, long-term care facility, hospice, or at home after an emergency, MASA will reimburse up to \$500 for ride-hailing, taxi, or public transportation in the U.S. to these appointments annually for each member.

 **Sick While Away From Home Expense Protection**

If you are traveling away from home and are required to isolate while recovering from an illness, MASA will reimburse up to \$5,000 for out-of-pocket expenses you incur due to your extended stays up to twice per year, worldwide.<sup>2</sup>



### Did you know?

**1 in 15**

**families need  
emergency medical  
transportation each year**

Source: Milliman, 2024

### About MASA

MASA is coverage and care you can count on to protect you from the unexpected — no network needed. Simply send us your emergency transport bill when it arrives, and we'll work to resolve the claim and provide your coverage. Plus, we offer expert coordination services to manage many of the complex needs that can arise after an emergency.

**\$9.50/ pay period  
family**

**Coverage territories**

1: Extended coverage areas include the United States, Canada, Mexico, the Caribbean (excluding Cuba), the Bahamas and Bermuda.

2: Worldwide coverage to include any region with the exclusion of Antarctica and not prohibited by U.S. law or U.S. travel advisories.

**Disclaimers**

This material is for informational purposes only and does not provide any coverage. The benefits listed, and the descriptions thereof, do not guarantee coverage and do not represent the full terms and conditions applicable for usage and may only be offered in some memberships or policies. Premiums, benefits, and coverage vary depending on the plan selected. For a complete list of benefits, Premiums, terms, conditions, and restrictions, please refer to your member services agreement or policy on your member portal. For additional information and disclosures about MASA plans, visit: <https://info.masaglobal.com/disclaimers>

# DENTAL PLAN



As an employee of Lincoln County, you have the option of choosing between 3 dental benefit plans. The Standard and Standard Plus plans are reimbursed based on the zip code of the dental provider (U&C – Usual and Customary). The PPO plan is reimbursed based on network allowance (MAC – Maximum Allowable Charge). All three (3) plans include Orthodontia and Preventive Plus. **The Standard Plus plan includes adult orthodontia!**

**Preventive Plus:** Benefits for Type 1 (Preventive) procedures are not deducted from the plan member's

annual maximum benefit. This saves the entire annual maximum for the Type 2 (Basic) and Type 3 (Major) procedures that are covered by your plan.

**\*\*Important: Members enrolling in the PPO Option should always utilize network providers in order to fully benefit from the plan. Services will be reimbursed at network allowances, even if a member does not visit a network provider.**

Plan Benefit	Standard Plan	Standard Plus Plan	PPO Plan
Type 1 – Preventative	100%	100%	100%
Type 2 – Basic	80%	80%	80%
Type 3 – Major	50%	50%	50%
Deductible	\$50 per person, per plan year; \$150 family maximum; Type 2 & 3; Waived Type 1	\$50 per person, per plan year; \$150 family maximum; Type 2 & 3; Waived Type 1	\$50 per person, per plan year; \$150 family maximum; Type 2 & 3; Waived Type 1
Maximum (per person)	\$1,000 per plan year	\$1,500 per plan year	\$1,250 per plan year
Allowance	90 <sup>th</sup> Usual & Customary (U&C)	90 <sup>th</sup> Usual & Customary (U&C)	Maximum Allowable Charge
Waiting Period	None	None	None
Annual Open Enrollment	Included	Included	Included
Preventive Plus	Included	Included	Included
Orthodontia	50%; \$1,000 lifetime maximum; Child only under age 19	50%; \$2,000 lifetime maximum; Adult and Child	50%; \$1,000 lifetime maximum; Child only under age 19

Click or scan for  
Standard Plan Summary.



Click or scan for  
Standard Plus Plan Summary.



Click or scan for  
PPO Plan Summary.



## In-Network Dentists:

- Comfort & Care Dentistry
  - Austin Dentistry
  - Lincoln Family Dentistry

## Out of Network Dentists:

- John Cloniger, III DDS
- Dedmond & Tallent Dentistry
- John Lassiter Family Dentistry

# DENTAL continued

## Ameritas Dental Semi-Monthly Rates



Standard Plan	Total Cost	Employee Cost	County Cost	Bi-Weekly 1 <sup>st</sup> Payroll	Deductions 2 <sup>nd</sup> Payroll
Employee Only	\$33.22	\$0.00	\$33.22	\$0.00	\$0.00
Employee + Spouse	\$67.49	\$23.97	\$43.52	\$11.99	\$11.98
Employee + Child(ren)	\$50.08	\$17.78	\$32.30	\$8.89	\$8.89
Employee + Family	\$94.81	\$39.12	\$55.69	\$19.56	\$19.56

Standard Plus Plan	Total Cost	Employee Cost	County Cost	Bi-Weekly 1 <sup>st</sup> Payroll	Deductions 2 <sup>nd</sup> Payroll
Employee Only	\$42.00	\$8.78	\$33.22	\$4.39	\$4.39
Employee + Spouse	\$86.00	\$42.48	\$43.52	\$21.24	\$21.24
Employee + Child(ren)	\$64.00	\$31.70	\$32.30	\$15.85	\$15.85
Employee + Family	\$120.00	\$64.31	\$55.69	\$32.16	\$32.15

PPO Plan	Total Cost	Employee Cost	County Cost	Bi-Weekly 1 <sup>st</sup> Payroll	Deductions 2 <sup>nd</sup> Payroll
Employee Only	\$37.00	\$0.00	\$37.00	\$0.00	\$0.00
Employee + Spouse	\$74.76	\$26.30	\$48.46	\$13.15	\$13.15
Employee + Child(ren)	\$55.71	\$19.51	\$36.20	\$9.76	\$9.75
Employee + Family	\$104.93	\$42.92	\$62.01	\$21.46	\$21.46

If you have any questions about the PPO, Standard plan or Standard Plus plan, please call: Ameritas Group Claims Department at 1-800-487-5553 or, visit the Ameritas website at [www.AmeritasGroup.com](http://www.AmeritasGroup.com)

Click picture below for informational video:



Click picture below for Member Portal Info:



# SUPERIOR VISION PLAN



Exam & Material Plan		Materials Only	
Co-Pays		Co-Pays	
Exam	\$10	Exam	N/a
Materials	\$10	Materials	\$10
Contact lens fitting	\$10	Contact lens fitting	\$10
Services/Frequency		Services/Frequency	
Exams	12 month	Exams	n/a
Frames	12 month	Frames	12 month
Contact lens fitting	12 month	Contact lens fitting	12 month
Lenses	12 month	Lenses	12 month
Contact Lenses	12 month	Contact Lenses	12 month

Benefits	In-Network	Out-of-Network	In-Network	Out-of-Network
Exam (MD)	Covered	Up to \$44	N/a	N/a
Exam (OD)	Covered	Up to \$39	N/a	N/a
Frames	\$150 retail allowance	Up to \$60	\$150 retail allowance	Up to \$60
Contact Lens Fitting (standard)	Covered in full	Not covered	Covered in full	Not covered
Contact Lens Fitting (specialty)	\$50 retail allowance	Not covered	\$50 retail allowance	Not covered
Lenses (standard) per pair				
Single vision	Covered	Up to \$26	Covered	Up to \$26
Bifocal	Covered	Up to \$34	Covered	Up to \$34
Trifocal	Covered	Up to \$50	Covered	Up to \$50
Progressive lens upgrade	See description	Up to \$50	See description**	Up to \$50
Contact Lenses	\$150 retail allowance	Up to \$100	\$150 retail allowance	Up to \$100

Discounts on Covered Materials	
Frames	20% off amount over allowance
Conventional Contacts	20% off amount over allowance
Disposable lenses	10% off amount over allowance

**These discounts apply to the glasses and contacts that are covered under the vision benefits.**

# SUPERIOR VISION PLAN *continued*



Discounts on Non-Covered Exam & Materials	
Exams, Frames and prescription lenses	30% off retail
Contacts, miscellaneous options	20% off retail
Disposable	10% off retail
Retinal imaging	\$39 maximum member out-of-pocket

Lens Type	Member-Out-Pocket
Scratch coat	\$15
Ultraviolet coat	\$12
Tints, solid	\$15
Tints, gradient	\$18
Polycarbonate	\$40
Blue light filtering	\$15
Digital single vision	\$15
Progressives' lenses – Standard, premium, ultra, unlimited	\$55/\$110/\$150/\$225
Anti-reflective coating – Standard, premium, ultra, unlimited	\$50/\$70/\$85/\$120
Polarized lenses	\$75
Plastic photochromic lenses	\$80
High index – 1.67. 1.74	\$80/\$120

## LASER VISION CORRECTION (LASIK)

A National LASIK Network of laser vision correction providers, featuring QualSight, offers Superior Vision members a discount on services. These discounts should be verified prior to service.

## HEARING DISCOUNTS

A National Hearing Network of hearing care professionals, featuring Your Hearing Network, offers Superior Vision members discounts on services, hearing aids and accessories. These discounts should be verified prior to service.

Not all providers participate in Superior Vision Discounts, including the member out-of-pocket features. Call your provider prior to scheduling an appointment to confirm if he/she offers the discount and member out-of-pocket features. The discount and member out-of-pocket features are not insurance. Discounts and member out-of-pocket are subject to change without notice and do not apply if prohibited by the manufacturer. Lens options may not be available from all Superior Vision providers/all locations.

Superior Vision Semi-Monthly Rates		
	Exam & Materials	Materials Only
Employee Only	\$3.96	\$3.03
Employee + Spouse	\$7.92	\$6.06
Employee + Children	\$9.02	\$6.80
Employee + Family	\$13.93	\$10.53

We offer discounts on unlimited materials after the initial benefit is utilized.

The above table highlights some of the most popular lens types and is not a complete listing. This table outlines member out-of-pocket costs and are not available for premium/upgraded options unless otherwise noted.

# CANCER PLAN: VOLUNTARY BENEFIT OPTION



Voluntary benefit options that enhance you and your family's well being. Lincoln County offers a cancer plan featuring the following:

- Donor Benefits
- Wellness Benefits
- Many benefits have no lifetime maximum
- Covers certain lodging & transportation
- Portable (take it with you)
- In & Out of hospital benefits
- Pays regardless of other coverage

<b>Benefit Highlights</b>		
<b>Benefit</b>	<b>Option 1 - Low</b>	<b>Option 2 - High</b>
Hospital Confinement	\$100	\$100
Surgical	Up to \$4,500	Up to \$4,500
Radiation/Chemotherapy	\$2,500 per month	\$5,000 per month
First Diagnosis	\$2,500	\$5,000
Colony Stimulating Factors	\$1,500 per month	\$1,500 per month
Wellness	\$100 per year	\$100 per year

<b>Semi-Monthly Rates for Cancer Plan</b>		
<b>Coverage Tier</b>	<b>Option 1 - Low</b>	<b>Option 2 - High</b>
Individual	\$11.49	\$14.37
Individual + Spouse	\$23.42	\$29.28
Individual + Child(ren)	\$16.01	\$19.53
Family	\$27.94	\$34.44

<b>Semi-Monthly Rates for Optional Intensive Care Rider</b>		
<b>Can be added to either Cancer plan</b>		
<b>Coverage Tier</b>	<b>\$325 per day</b>	<b>\$625 per day</b>
Individual	\$1.36	\$2.61
Individual + Spouse	\$2.74	\$5.27
Individual + Child(ren)	\$2.24	\$4.30
Family	\$3.62	\$6.96



Click logo to the right  
or scan QR code for  
plan summary.



# Critical Illness Insurance



## Why Buy Critical Illness Insurance Video:



### ► HELPS PROTECT YOUR FINANCES FROM AN ILLNESS.

When you, your spouse or child is diagnosed with a covered condition, you can receive a cash benefit to help pay unexpected costs not covered by your health plan.

### ► HELPS COVER RELATED EXPENSES.

While health plans may cover direct costs associated with a critical illness, you can use your benefit to help with related expenses like lost income, child care, travel to and from treatment, deductibles and co-pays.

### ► PAYS A CASH BENEFIT DIRECTLY TO YOU.

Critical Illness insurance can be used however you want, and it pays in addition to any other coverage you may already have.

What's more, all family members on your plan are eligible for a wellness-screening benefit, also paid directly to you once each year per covered person.

#### **Included:**

**Health Navigator Help Line** for expert guidance with health needs and medical billing questions.

Click or scan for plan summary.



#### **BENEFITS** (You can purchase this coverage at a group rate.)

For you	You can choose between <b>\$10,000</b> and <b>\$40,000</b> of coverage, in increments of \$10,000. No medical questions asked.
For your spouse	If you elect coverage for yourself, you can choose between <b>\$10,000</b> and <b>\$40,000</b> of coverage, in increments of \$10,000. No medical questions asked. Not to exceed 100% of your coverage amount.
For your child(ren)	If you elect coverage for yourself, you can choose between <b>\$5,000</b> and <b>\$20,000</b> of coverage, in increments of \$5,000. No medical questions asked. Not to exceed 50% of your coverage amount.  An eligible child is defined as your child from birth to age 26.

LINCOLN COUNTY GOVERNMENT

All Eligible Employees

POLICY #: 948306

Sun Life Assurance Company of Canada

2363047 SEQ15 CL1 03/29/2024 08:54:40

800-247-6875 • [sunlife.com/us](http://sunlife.com/us)

Critical Illness Insurance

# GROUP CRITICAL ILLNESS RATES



# Sun Life

## Rates

Rates are effective as of July 1, 2025.

The chart below shows possible coverage amounts and their **semi-monthly** costs.

Find your age bracket (as of the effective date of coverage) to see the cost for the coverage amount you choose.

### Employee Critical Illness - Choice 1 Non-tobacco rates | Age and cost - pay period (semi-monthly) premium

Coverage amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$10,000	1.95	2.65	3.05	4.00	5.10	5.45	9.90	9.10	25.35	25.35	25.35	25.35
\$20,000	3.90	5.30	6.10	8.00	10.20	10.90	19.80	18.20	50.70	50.70	50.70	50.70
\$30,000	5.85	7.95	9.15	12.00	15.30	16.35	29.70	27.30	76.05	76.05	76.05	76.05
\$40,000	7.80	10.60	12.20	16.00	20.40	21.80	39.60	36.40	101.40	101.40	101.40	101.40

### Employee Critical Illness - Choice 1 Tobacco rates | Age and cost - pay period (semi-monthly) premium

Coverage amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$10,000	2.65	3.45	4.35	6.05	7.65	8.15	15.05	14.45	38.55	38.55	38.55	38.55
\$20,000	5.30	6.90	8.70	12.10	15.30	16.30	30.10	28.90	77.10	77.10	77.10	77.10
\$30,000	7.95	10.35	13.05	18.15	22.95	24.45	45.15	43.35	115.65	115.65	115.65	115.65
\$40,000	10.60	13.80	17.40	24.20	30.60	32.60	60.20	57.80	154.20	154.20	154.20	154.20

Spouse rates are based on the employee's age.

### Spouse Critical Illness - Choice 1 Non-tobacco rates | Age and cost - pay period (semi-monthly) premium

Coverage amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$10,000	1.95	2.65	3.05	4.00	5.10	5.45	9.90	9.10	25.35	25.35	25.35	25.35
\$20,000	3.90	5.30	6.10	8.00	10.20	10.90	19.80	18.20	50.70	50.70	50.70	50.70
\$30,000	5.85	7.95	9.15	12.00	15.30	16.35	29.70	27.30	76.05	76.05	76.05	76.05
\$40,000	7.80	10.60	12.20	16.00	20.40	21.80	39.60	36.40	101.40	101.40	101.40	101.40

### Spouse Critical Illness - Choice 1 Tobacco rates | Age and cost - pay period (semi-monthly) premium

Coverage amounts	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$10,000	2.65	3.45	4.35	6.05	7.65	8.15	15.05	14.45	38.55	38.55	38.55	38.55
\$20,000	5.30	6.90	8.70	12.10	15.30	16.30	30.10	28.90	77.10	77.10	77.10	77.10
\$30,000	7.95	10.35	13.05	18.15	22.95	24.45	45.15	43.35	115.65	115.65	115.65	115.65
\$40,000	10.60	13.80	17.40	24.20	30.60	32.60	60.20	57.80	154.20	154.20	154.20	154.20

### Child(ren) Critical Illness - Choice 1

Coverage amounts	Cost - pay period (semi-monthly) premium
\$5,000	0.30
\$10,000	0.60
\$15,000	0.90
\$20,000	1.20

# Hospital Indemnity Insurance



Coverage	Cost per pay period*
Employee	\$9.04
Employee + Spouse	\$18.12
Employee + Child(ren)	\$14.43
Employee + Family	\$23.51

## ► HELPS PROTECT YOUR FINANCES.

When you, your spouse or child are facing a hospital stay, you can receive a benefit to help pay unexpected expenses not covered by your plan.

## ► HELPS COVER RELATED EXPENSES.

While health plans may cover direct costs associated with an illness or injury, you can use your hospital indemnity benefits to help cover related expenses like lost income, child care, deductibles and copays.

## ► PAYS CASH BENEFITS DIRECTLY TO YOU.

Hospital Indemnity insurance payments can be used however you want, and it pays in addition to any other coverage you may already have. Benefits are payable directly to you.

Why Buy  
Hospital  
Indemnity  
Insurance Video:



You can purchase this coverage for you and your family. Child coverage is available to age 26.

Click or scan for plan summary.



### BENEFITS

Benefits are payable for hospital stays due to:

- Sickness
- Accidents\*
- Routine pregnancy
- Complications of pregnancy
- Newborn complications
- Mental and nervous disorders
- Substance abuse

Additional reasons to sign up:

- No medical questions to answer - guaranteed issue coverage
- Benefits add up - many of your benefits can all be payable on the same day

\*Confinements due to an accident must be within 365 days of the accident.

LINCOLN COUNTY GOVERNMENT

All Eligible Employees

POLICY # 948306

Sun Life Assurance Company of Canada

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800-247-6875 • [sunlife.com/us](http://sunlife.com/us)

Hospital Indemnity Insurance

# Accident Insurance



Why Buy  
Accident  
Insurance  
Video:



You can purchase this coverage for you and your family. Child coverage is available to age 26.

Coverage	Cost per pay period*
Employee	\$8.30
Employee + Spouse	\$15.47
Employee + Child(ren)	\$14.29
Employee + Family	\$21.47

## ► HELPS YOUR FINANCES AFTER A MISHAP.

When you, your spouse or child has a covered accident, like a fall from a bicycle that requires medical attention, you can receive cash benefits to help cover the unexpected costs.

## ► HELPS COVER RELATED EXPENSES.

While health plans may cover direct costs associated with an accident, you can use accident benefits to help cover related expenses like lost income, child care, deductibles and co-pays.

## ► PAYS CASH BENEFITS DIRECTLY TO YOU.

Accident Insurance can be used however you want, and it pays in addition to any other coverage you may already have. Benefits are payable directly to you. And get this – there are no health questions or pre-existing conditions limitations.

What's more, all family members on your plan are eligible for a wellness-screening benefit, also paid directly to you once each year per covered person.

## ACCIDENT FAST FACTS



### Falls

are the leading cause of injuries treated in emergency rooms every year, for people of all ages.<sup>1</sup>

This coverage pays benefits whether your covered accident happens at work, at home, or away (also known as 24-hour coverage).

LINCOLN COUNTY GOVERNMENT

All Eligible Employees

POLICY # 948306

Sun Life Assurance Company of Canada

800-247-6875 • [sunlife.com/us](http://sunlife.com/us)

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Accident Insurance

# Short-Term Disability Insurance

VOLUNTARY



## COMMON CAUSES OF DISABILITY

- ✓ Pregnancy
- ✓ Injuries
- ✓ Joint disorders
- ✓ Back disorders
- ✓ Digestive disorders

### ► PROTECTS YOUR INCOME WHEN YOU CAN'T WORK.

If you're unable to work because of a covered disability, Short-Term Disability insurance replaces a portion of your income in addition to providing other services and benefits that help you return to work.

### ► PROVIDES YOU WITH A WEEKLY CHECK.

After your claim is approved, you will receive a check for your benefits that helps you pay everyday expenses like your mortgage or rent, childcare and groceries.

#### BENEFITS (You can purchase this coverage at a group rate.)

Weekly benefit after your claim is approved	Get a weekly check of <b>\$100 to \$1,500</b> , in any <b>\$25</b> increment you choose, to replace a portion of your income-up to <b>70%</b> of your Total Weekly Earnings.
When benefits begin	Benefits begin on the first day of disability if you are unable to work due to an injury and as soon as <b>8 days</b> from the date you are unable to work due to an illness.
Benefits may be paid for	Up to <b>13 weeks</b> , as long as you are still unable to work due to a covered disability.
Additional plan information	This plan provides a benefit for covered disabilities resulting from illness or injury that occur on or off the job.

#### SHORT-TERM DISABILITY FAST FACTS

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All Eligible Employees  
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**1 in 4 workers**  
will miss up to 3 months of  
work due to disability during  
their career.<sup>1</sup>

**More than three-quarters of**  
workers are living paycheck to  
paycheck.<sup>2</sup>

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Short-Term Disability Insurance

Weekly coverage amounts	Cost
\$100	4.00
\$125	5.00
\$150	6.00
\$175	7.00
\$200	8.00
\$225	9.00
\$250	10.00
\$275	11.00
\$300	12.00
\$325	13.00
\$350	14.00
\$375	15.00
\$400	16.00
\$425	17.00
\$450	18.00
\$475	19.00
\$500	20.00
\$525	21.00
\$550	22.00
\$575	23.00
\$600	24.00
\$625	25.00
\$650	26.00
\$675	27.00
\$700	28.00
\$725	29.00
\$750	30.00
\$775	31.00
\$800	32.00
\$825	33.00
\$850	34.00
\$875	35.00
\$900	36.00
\$925	37.00
\$950	38.00
\$975	39.00
\$1,000	40.00
\$1,025	41.00
\$1,050	42.00
\$1,075	43.00
\$1,100	44.00
\$1,125	45.00
\$1,150	46.00
\$1,175	47.00
\$1,200	48.00
\$1,225	49.00
\$1,250	50.00
\$1,275	51.00
\$1,300	52.00
\$1,325	53.00
\$1,350	54.00
\$1,375	55.00
\$1,400	56.00
\$1,425	57.00
\$1,450	58.00
\$1,475	59.00
\$1,500	60.00

# Long-Term Disability Insurance

VOLUNTARY



## COMMON CAUSES OF DISABILITY

- ✓ Musculoskeletal conditions
- ✓ Circulatory conditions
- ✓ Cancer
- ✓ Nervous system disorders
- ✓ Injuries

### ► HELPS YOU KEEP YOUR LIFE ON TRACK.

If you're unable to work because of a covered disability, Long-Term Disability insurances replaces a portion of your income. After your claim is approved, you will receive a monthly check for your benefits that helps you pay everyday expenses like your mortgage or rent, childcare and groceries.

### ► HELPS YOU RETURN TO WORK.

If you are able, Sun Life has benefits and services, including guidance from vocational rehabilitation counselors, to help you return to work.

#### BENEFITS (You can purchase this coverage at a group rate.)

Monthly benefit after your claim is approved	Get a monthly check of <b>\$500 to \$2,000</b> , in any <b>\$500</b> increment you choose, to replace a portion of your income-up to <b>60%</b> of your Total Monthly Earnings.
When benefits begin	Benefits begin as soon as <b>90 days</b> from the date of your disability.
Benefits may be paid for	Up to 5 years if you are under age 61 at the start of disability. If you become disabled at age 61 or after, a reduced benefit duration applies.
Additional plan information	This plan provides a benefit for covered disabilities resulting from illness or injury that occur on or off the job.

#### LONG-TERM DISABILITY FAST FACTS

**34.6 months**

The length of the average long-term disability claim.<sup>1</sup>

You may receive additional benefits if your covered disability begins with a hospital stay of 14 days or more.

**Employee - Coverage and semi-monthly cost for Long-Term Disability.**

Monthly Coverage Amounts	Cost (all age bands)
\$500	\$3.38
\$1,000	\$6.75
\$1,500	\$10.13
\$2,000	\$13.50

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All Eligible Employees  
POLICY # 948306

Sun Life Assurance Company of Canada

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Long-Term Disability Insurance

# Voluntary Life Insurance



## ► MORE PROTECTION FOR YOUR LOVED ONES.

The people you love and support could face financial challenges without you. Life insurance provides your loved ones with money they can use for household expenses, tuition, mortgage payments and more.

## ► HELPS YOU CLOSE ANY COVERAGE GAPS.

You may have life insurance today, either on your own or through your employer. Now is a good time to ask yourself if you need more coverage.

### BENEFITS (You can purchase this coverage at a group rate.)

<b>For you</b>	<p>You can choose from <b>\$10,000 to \$200,000</b>—in increments of \$10,000. No medical questions asked <b>up to the Guaranteed Issue amount of \$200,000</b>. Benefits are reduced at age 65 and may reduce again in subsequent years as noted in your Certificate.</p> <p>You may need to complete health questions for you and/or your spouse if you don't elect coverage when it is first available to you or if you want to increase coverage. See your benefit counselor for details.</p>
<b>For your spouse</b>	<p>If you elect coverage for yourself, you can choose from <b>\$5,000 to \$25,000</b>—in increments of \$5,000. No medical questions asked <b>up to the Guaranteed Issue amount of \$25,000</b>.</p> <p>The amount you select for your spouse cannot exceed 100% of your coverage amount. Benefits may reduce as noted in your Certificate.</p>
<b>For your child(ren)</b>	<p>If you elect coverage for yourself, you can choose <b>\$10,000</b>. No medical questions asked.</p> <p>The amount you select for your child(ren) cannot exceed 100% of your coverage amount. Benefits may reduce as noted in your Certificate. Child(ren) must primarily depend on the employee for 50% or more of their support.</p> <p>A full benefit is payable for a dependent child from birth to 26.</p>

LINCOLN COUNTY INC

All Eligible Employees

POLICY #: 948306

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Voluntary Life Insurance

**Employee** - Coverage and **semi-monthly** cost for Employee Voluntary Life.

Coverage amounts	Age and cost										
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$10,000	0.30	0.30	0.40	0.45	0.55	0.85	1.40	2.40	3.35	6.35	10.30
\$20,000	0.60	0.60	0.80	0.90	1.10	1.70	2.80	4.80	6.70	12.70	20.60
\$30,000	0.90	0.90	1.20	1.35	1.65	2.55	4.20	7.20	10.05	19.05	30.90
\$40,000	1.20	1.20	1.60	1.80	2.20	3.40	5.60	9.60	13.40	25.40	41.20
\$50,000	1.50	1.50	2.00	2.25	2.75	4.25	7.00	12.00	16.75	31.75	51.50
\$60,000	1.80	1.80	2.40	2.70	3.30	5.10	8.40	14.40	20.10	38.10	61.80
\$70,000	2.10	2.10	2.80	3.15	3.85	5.95	9.80	16.80	23.45	44.45	72.10
\$80,000	2.40	2.40	3.20	3.60	4.40	6.80	11.20	19.20	26.80	50.80	82.40
\$90,000	2.70	2.70	3.60	4.05	4.95	7.65	12.60	21.60	30.15	57.15	92.70
\$100,000	3.00	3.00	4.00	4.50	5.50	8.50	14.00	24.00	33.50	63.50	103.00
\$110,000	3.30	3.30	4.40	4.95	6.05	9.35	15.40	26.40	36.85	69.85	113.30
\$120,000	3.60	3.60	4.80	5.40	6.60	10.20	16.80	28.80	40.20	76.20	123.60
\$130,000	3.90	3.90	5.20	5.85	7.15	11.05	18.20	31.20	43.55	82.55	133.90
\$140,000	4.20	4.20	5.60	6.30	7.70	11.90	19.60	33.60	46.90	88.90	144.20
\$150,000	4.50	4.50	6.00	6.75	8.25	12.75	21.00	36.00	50.25	95.25	154.50
\$160,000	4.80	4.80	6.40	7.20	8.80	13.60	22.40	38.40	53.60	101.60	164.80
\$170,000	5.10	5.10	6.80	7.65	9.35	14.45	23.80	40.80	56.95	107.95	175.10
\$180,000	5.40	5.40	7.20	8.10	9.90	15.30	25.20	43.20	60.30	114.30	185.40
\$190,000	5.70	5.70	7.60	8.55	10.45	16.15	26.60	45.60	63.65	120.65	195.70
\$200,000	6.00	6.00	8.00	9.00	11.00	17.00	28.00	48.00	67.00	127.00	206.00

**Spouse** - Coverage and **semi-monthly** cost for Spouse Voluntary Life.

Spouse rates are based on the spouse's age.

Coverage amounts	Age and cost										
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$5,000	0.15	0.15	0.20	0.23	0.28	0.43	0.70	1.20	1.68	3.18	5.15
\$10,000	0.30	0.30	0.40	0.45	0.55	0.85	1.40	2.40	3.35	6.35	10.30
\$15,000	0.45	0.45	0.60	0.68	0.83	1.28	2.10	3.60	5.03	9.53	15.45
\$20,000	0.60	0.60	0.80	0.90	1.10	1.70	2.80	4.80	6.70	12.70	20.60
\$25,000	0.75	0.75	1.00	1.13	1.38	2.13	3.50	6.00	8.38	15.88	25.75

**Child** - Coverage and **semi-monthly** cost for Child Voluntary Life.

Coverage amounts	Cost per pay period
\$10,000	0.25



Note: This coverage will be replacing MassMutual Whole Life for payroll deduction. If you choose, you will be able to keep your MassMutual coverage via personal bank draft.

# Aflac Group Life Term to 120 Insurance



If something happens to you, will your family be prepared to handle the expenses of daily life? Aflac makes simple and affordable life coverage available to keep your loved ones financially secure, when you can no longer provide for them.

## Aflac Group Life Term to 120 is designed to offer:

- Guaranteed-issue death benefits.
- Guaranteed-issue living benefits if you are diagnosed with a chronic condition.
- Spousal coverage at 50% of face value up to \$50,000.
- Rates that won't increase over time with the predictability of a whole-life plan.
- Portability – If you leave your current employment, your coverage will go with you.
- An optional child term life insurance add-on.



## Coverage to count on

Should you experience an unexpected chronic condition<sup>1</sup> or pass away, you can rest easy knowing Aflac will pay cash benefits directly to you or your beneficiary, unless otherwise assigned. This means that you and your loved ones will have financial resources to help take care of immediate and future needs.

## Your family depends on you to protect their financial future.

Count on Aflac for more than just Life.

**Underwritten by Continental American Insurance Company**



<sup>1</sup>A chronic condition is a permanent inability to perform without substantial assistance from another individual two or more activities of daily living (ADLs) or permanent severe cognitive impairment and similar forms of dementia. Coverage is underwritten by Continental American Insurance Company (CAIC), a proud member of the Aflac family of insurers. CAIC is a wholly owned subsidiary of Aflac Incorporated and underwrites group coverage. CAIC is not licensed to solicit business in New York, Guam, Puerto Rico or the Virgin Islands.

This is a brief product overview. The plan has limitations and exclusions that affect benefits payable. Refer to the plan for complete details. The terms and conditions for the Aflac Group Life Term to 120 Insurance are set forth in policy form number 10C22-C93100 or applicable state variation.

Continental American Insurance Company | Columbia, SC | 1-800-433-3036 toll-free.

**Click or scan for plan summary.**



**Click or scan for rates.**



# PET INSURANCE



Lincoln County offers employees with the opportunity to save on veterinary costs with Pet Insurance through Nationwide. This plan allows you to get reimbursed for eligible vet bills. See the summary of services below.

- ✓ **Cash back** on eligible vet bills  
Choose from three levels of reimbursement:  
90%, 70% or 50%\*
- ✓ **Simple pricing** based on just two factors:  
ZIP code and species of pet. We're the only company to offer this kind of pricing
- ✓ **Available exclusively for employees**, not to the general public. We're the only company with a dedicated product for voluntary benefits

- ✓ **Same price for pets of all ages**  
Your rate won't go up because your pet had a birthday
- ✓ **Use any vet, anywhere**  
No networks, no pre-approvals
- ✓ **Optional wellness coverage available**  
Includes spay/neuter, dental cleaning, exams, vaccinations and more

	MyPetProtection* (with wellness)	MyPetProtection*
<b>Accidents</b> , including poisonings and allergic reactions	✓	✓
<b>Injuries</b> , including cuts, sprains and broken bones	✓	✓
<b>Common illnesses</b> , including ear infections, vomiting and diarrhea	✓	✓
<b>Serious/chronic illnesses</b> , including cancer and diabetes	✓	✓
<b>Hereditary and congenital conditions</b>	✓	✓
<b>X-rays, MRIs and CT scans</b>	✓	✓
<b>Prescription medications and therapeutic diets</b>	✓	✓
<b>Wellness exams</b>	✓	
<b>Vaccinations</b>	✓	
<b>Spay/neuter</b>	✓	
<b>Flea and tick prevention</b>	✓	
<b>Heartworm testing and prevention</b>	✓	
<b>Routine blood tests</b>	✓	

Pre-existing conditions are not covered. Any illness or injury a pet had prior to start of policy will be considered pre-existing\*

## VethelpLine



Unlimited, 24/7 access to veterinary professional (\$150 value).

Easy online account management.



Mobile claims submission with the free VitusVet app.



Fast, convenient electronic claim payments



Multiple-pet discounts applied when enrolling more than one pet.



Plans also available for birds, rabbits, reptiles and other exotic pets.

Visit <https://www.petinsurance.com> to create a personalized quote.

# AUTO & HOMEOWNERS INSURANCE



Employee benefits now include savings on auto and home insurance! Lincoln County Government has teamed up with Liberty Mutual to offer employees Group Savings Plus®. This unique program allows you to purchase high-quality auto, home and renters insurance at low group rates through the convenience of bank draft.

## LIBERTY GUARD AUTO INSURANCE

Liberty Guard Auto Insurance provides coverage from collision to theft and includes extra benefits to help make insurance easier for you. Here is a brief list of some of the coverages that come with a Liberty Guard Auto Insurance policy.

### LIABILITY COVERAGE

- If you cause an accident, your policy will pay the damages up to your policy limits.
- We will pay the legal expenses if a suit is brought against you.

### MEDICAL PAYMENTS COVERAGE

In some states, Medical Payments Coverage is required and is included in your policy. In other states, you may choose to purchase Medical Payments Coverage at an additional cost. This coverage covers anyone injured in your vehicle for reasonable medical and funeral expenses for up to three years after the accident.

### UNINSURED MOTORIST COVERAGE

In some states, Uninsured Motorist Coverage is required and is included in your policy. In other states, you may choose to purchase Uninsured Motorist Coverage at an additional cost. If you are in an accident with someone who does not have enough, or any, insurance, this coverage will protect you up to your policy limits.

### YOU CAN PURCHASE COVERAGE FOR DAMAGE TO YOUR AUTO THAT BEST FITS YOUR NEEDS—

Collision coverage provides protection if your car rolls over, is hit by another car, or hits another car or object. Other Than Collision coverage protects your car when it is damaged by other perils, such as birds, animals, fire, theft, vandalism, windstorm, earthquake, and hail. Towing and Labor coverage provides for towing each time you need it.

## LIBERTYGUARD®

### DELUXE HOMEOWNERS INSURANCE

Your home is not only one of the largest investments you'll ever make, it is also one of the most important assets you and your family have. You need to feel secure about your home and its contents, and that starts with the right insurance coverage.

A Liberty Mutual LibertyGuard® Deluxe Homeowners Insurance policy protects your home and other structures on your premises against direct physical loss on your premises. We'll protect your belongings if they are damaged or stolen, and we'll even protect your pets against claims for accidental bodily injury or property damage.

Think you need to live near water to need flood insurance? Think again. Floods can be caused by storms, hurricanes and even melting snow. Don't get caught in rising water – protect your home with flood insurance. Flood insurance is provided by Liberty Mutual authorized by the Federal Emergency Management Agency for over 18,000 participating communities. Flood coverage must be purchased as a separate policy as flood damage is not covered under homeowner policies.

## LIBERTYGUARD®

### TENANTS INSURANCE

Insurance is not just for homeowners. If you rent your home, you should consider protecting your possessions with a LibertyGuard® Tenants Insurance policy. It covers you for items such as computer equipment, jewelry, stereo equipment, furniture, and clothing if these belongings are stolen or damaged, whether they are at home or anywhere in the world. You will also have protection against claims for accidental bodily injury or property damage, at or away from your home. Watercraft Insurance can be added to your Tenants policy as well as many other endorsements for an additional cost.

# CONTINUATION OF BENEFITS

## SUN LIFE GROUP POLICIES

You may continue your Sun Life Accident, Hospital Indemnity and/or Critical Illness plans by having the premiums currently deducted from your paycheck drafted from your bank account or billed to your home. For more information, contact Sun Life at 1-877-820-5306.

## SUN LIFE SHORT-TERM AND/OR LONG-TERM DISABILITY

Once an employee is on the Sun Life disability plan for 3 months, you can port the coverage for one year at the same cost without evidence of insurability. You have 31 days from your date of termination to apply for portability. For more information, contact Sun Life at 1-800-247-6875.

## BCBS MEDICAL, SUN LIFE DENTAL & SUPERIOR VISION PLANS

Under the group Medical, Dental & Vision plans, you and your covered dependents are eligible to continue medical coverage through COBRA if you experience certain "qualifying events". If you and your dependents are enrolled in these plans, you will be eligible to continue coverage through COBRA after you leave your employment for a specified period. In addition, while covered under the plans, if you should die, become divorced or legally separated, or become eligible for Medicare, your covered dependents may be eligible to continue coverage through COBRA. For more Cobra information, contact your Human Resources Department at 704-736-8493.

## FBA Flexible Spending Account(s)

If you have a positive balance (payroll deductions are greater than the amount you have received in reimbursement) in your Health Care Spending Account at the time of your termination, you may continue participation in the Plan for the remainder of the Plan year through COBRA. If you prefer to terminate your participation and contribution to the Plan, any balance in your account on the date of termination will be forfeited if expenses were not incurred prior to the date of termination. For more information contact, Flexible Benefit Administrators at 1-800-437-3539.

## METLIFE GROUP CANCER

You may continue your MetLife Cancer policy for yourself and eligible dependents who are covered when you terminate employment. For more information please contact: For more information, contact MetLife | Bay Bridge Administrators at 1-800-845-7519.

## LIBERTY MUTUAL

When you leave employment, you may continue the coverage that you have with Liberty Mutual. If you have questions, you may contact Micah Dison with Liberty Mutual at 704-450-4373.

## SUN LIFE TERM LIFE

When you leave employment, you may convert the existing group term coverage you have through your employer to a guaranteed issue individual whole life policy. You also have the option of porting your existing coverage as well. It is the responsibility of the employee to convert or port coverage. You must apply for conversion or portability within 31 days from the date your employer terminates your term life coverage. For more information and a quote, please contact Sun Life at 1-800-247-6875. If you do not convert or port your group term life insurance, coverage will terminate when you leave your employer.

## AFLAC TERM LIFE 120

When you leave employment, you may continue your AFLAC Term Life 120 coverage by having the premiums that are currently deducted from your paycheck drafted from your bank account. You may do that by visiting [www.aflacgroupinsurance.com](http://www.aflacgroupinsurance.com) and completing the Continuation of Coverage form. If you have questions, you can reach out to AFLAC at 1-800-433-3036.

## MASSMUTUAL WHOLE LIFE

Effective 7/1/2025, MassMutual will no longer be payroll deducted. You may continue your Mass Mutual Life coverages by having the premiums that are currently deducted from your paycheck drafted from your bank account. You may do that by contacting Mass Mutual Life at 1-800-272-2216.



# BENEFITS AVAILABLE FOR RETIREES

## NORTH CAROLINA RETIRED GOVERNMENT EMPLOYEES' ASSOCIATION

The Standard Dental and Superior Vision Insurance Plans for Retirees of State or Local Government Offered Through North Carolina Retired Governmental Employees' Association, Inc.

With over 54,000 members, the North Carolina Retired Governmental Employees' Association is the largest single group representing retirees before the N.C. General Assembly, the Retirement Systems Boards of Trustees, and the State Health Plan trustees. For retirees or future retirees of state or local governments in North Carolina (including teachers, legislators, National Guard, and judicial), NCRGEA is your voice for sustaining and increasing your benefits after retirement.

Additionally, there are many benefits included with membership at no additional cost (\$10,000 AD&D Insurance, bimonthly newsletter, weekly electronic legislative updates while the General Assembly is in session, a toll-free number to call for information and assistance, hearing assistance and vision care discount programs, and free district meetings).

The Association also offers optional The Standard Dental Insurance and Superior Vision Insurance plans for our members. Those premiums are conveniently deducted from your retirement benefit check monthly. Please contact us at NCRGEA, P.O. Box 10561, Raleigh, NC 27605, 1-800-356-1190, or go to our website, [www.ncrgea.com](http://www.ncrgea.com), for further information.



# CONTACT INFORMATION

Carrier	Website	Phone Number
Blue Cross Blue Shield of NC	<a href="http://www.bluecrossnc.com/members">www.bluecrossnc.com/members</a>	1-877-275-9787
Flexible Benefit Administrators	<a href="https://fba.wealthcareportal.com">https://fba.wealthcareportal.com</a>	1-800-437-3539
Ameritas Dental	<a href="http://www.ameritasgroup.com">www.ameritasgroup.com</a>	1-800-487-5553
Superior Vision	<a href="http://www.superiorvision.com">www.superiorvision.com</a>	1-800-507-3800
MetLife Cancer	<a href="http://www.bbadmin.com/forms">www.bbadmin.com/forms</a>	1-800-845-7519
Sun Life Critical Illness/Hospital Indemnity/Accident	<a href="http://www.sunlife.com/us">www.sunlife.com/us</a>	1-877-820-5306
Sun Life Short-Term & Long-Term Disability/Voluntary Term Life	<a href="http://www.sunlife.com/us">www.sunlife.com/us</a>	1-800-247-6875
AFLAC Term Life 120	<a href="http://www.aflacgroupinsurance.com">www.aflacgroupinsurance.com</a>	1-800-433-3036
Nationwide Pet Insurance	<a href="http://www.petinsurance.com">www.petinsurance.com</a>	1-800-540-2016
Liberty Mutual Auto & Homeowners Insurance	<a href="http://www.libertymutual.com">www.libertymutual.com</a>	1-800-225-2467
USI Benefit Resource Center (BRC)	<a href="mailto:www.brcsouth@usi.com">www.brcsouth@usi.com</a>	1-855-874-0835





