



Employee Benefits At-A-Glance

January 1, 2024

Coverage will continue with AML for 2024. The plans will remain the same with a choice between two different deductible options. Coverage between the plans is identical, with the deductibles being the only difference.

To locate an In-Network provider visit https://www.arml.org/provider_search/index.php

Medical Summary of Coverage	\$500 Deductible	\$1,200 Deductible
Single Deductible		
In-Network	\$500	\$1,200
Out-of-Network	\$500	\$1,200
Family Deductible		
In-Network	\$6,000	\$6,000
Out-of-Network	\$6,000	\$6,000
PCP Copay		
In-Network	\$20 + 20%	\$20 + 20%
Out-of-Network	Deductible + 50%	Deductible + 50%
Specialist Copay		
In-Network	\$20 + 20%	\$20 + 20%
Out-of-Network	Deductible + 50%	Deductible + 50%
Preventive Care Copay		
In-Network	Covered at 100%	Covered at 100%
Out-of-Network	Deductible + 50%	Deductible + 50%
Urgent Care Copay		
In-Network	\$20 + 20%	\$20 + 20%
Out-of-Network	Deductible + 50%	Deductible + 50%
Emergency Room Copay		
In-Network	\$250 + 20%	\$250 + 20%
Out of Network	Deductible does not apply	Deductible does not apply
Inpatient Hospital		
In-Network	Deductible + 20%	Deductible + 20%
Out of Network	Deductible + 40%	Deductible + 50%
Outpatient Hospital		
In-Network	Deductible + 20%	Deductible + 20%
Out of Network	Deductible + 50%	Deductible + 50%
Coinsurance		
In-Network	20%	20%
Out-of-Network	50%	50%
Single Out-of-Pocket Maximum		
In-Network	\$4,000	\$4,000
Out-of-Network	Unlimited	Unlimited
Family Out-of-Pocket Maximum		
In-Network	\$8,000	\$8,000
Out-of-Network	Unlimited	Unlimited
Pharmacy		
Generic	\$10	\$10
Preferred Brand	\$30	\$30
Non-preferred Brand	\$50	\$50
Specialty Rx	\$100 / \$200	\$100 / \$200
Per Pay Period Deductions - Medical & Dental		
Employee	\$94.38	\$3.75
Family	\$302.65	\$99.37

Dental—Arkansas Municipal League

Deductible —per covered person	\$50
Calendar Year Maximum	\$1,200 per person
In-Network	Plan pays 100/80%
Out-of-Network	Plan pays 50%
Orthodontics (lifetime max)	50% up to \$1,000

Dental enrollment is matched to the medical plan so if you have family medical, you will be enrolled in family dental.

Life and AD&D – AUL One America

The City provides employees with basic term life insurance. Full-Time employees receive \$25,000. If you have eligible family members covered under the medical plan then they also receive basic life coverage. Spouses under age 70 receive \$10,000 and children under age 25 have \$7,500 of coverage. There are age reductions to the benefits at ages 70, 75, 80, 85 and 90.

Employees can purchase additional life insurance for themselves, their spouse, and children.

Voluntary Life and AD&D—AUL One America

Employee Benefit	\$10,000—\$500,000 Not to exceed 5 x salary Guarantee Issue—\$150,000
Spouse Benefit	\$5,000—\$250,000 Max of 50% of employee benefit Guarantee Issue—\$30,000 Must be under age 70
Dependent Benefit	
Live birth to 6 months	\$1,000
6 months to 25 yrs	\$5,000 or \$10,000

Employee Contribution 100%

Evidence of insurability is required for amounts requested over the guarantee issue limit. Age reductions will apply

An eligible dependent is defined in the contract and criteria include but are not limited to:

- Child is not married
- Under age 26
- Not in the military
- Not eligible as an employee under the City plans

Short Term Disability – AUL One America

Eligible after completing one year of service

Benefit Percentage	66.67%
Weekly Benefit Max	\$100, \$200, \$350, \$500 or 66.67% of salary to max of \$1,384 weekly
Employee contribution	100%
Benefit Waiting Period	
Accidents	8th day
Sickness	8th day
Maximum Benefit Period	12 weeks

Benefits are paid directly to you and are in addition to any sick leave benefits you receive..

Flexible Spending Account— Consolidated Admin Services

Healthcare FSA	\$3,200
Dependent FSA	\$5,000
Healthcare FSA Rollover Amount	\$640
Employee Contribution	100%

Long Term Disability – The Hartford

The City provides this coverage for Non-Uniformed Employees.

Monthly Benefit	60% of salary Max monthly benefit \$5,000
Benefit Waiting Period	90 days
Maximum Benefit Period	Social Security retirement age
Employer Contribution	100%

AFLAC

There are several AFLAC products offered through payroll deduction. An AFLAC representative will review those with you and enroll you in the plans you select.

Some plans offered are:

- Critical Illness
- Hospital Indemnity Insurance
- Accident Coverage
- Cancer Plan
- Group Vision Plan

This is not intended to be a complete summary of benefits. Please refer to plan documents and summaries available from Human Resources for full plan details.