

City of
Gainesville

2027
Open Enrollment

Open Enrollment Period:
Oct. 19-31, 2026

Benefits Effective Date:
Jan. 1, 2027

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Important reminders!

**Open Enrollment for the
2027 Plan Year is open
Oct. 19-31, 2026**

***Benefit elections, changes, and any
dependent documents must be
submitted no later than
Saturday, Oct. 31, 2026***

Workday Availability

Open Enrollment is available online through your Workday account. The Workday platform will be unavailable for weekly service updates for a maximum of three hours from Fridays at 2 a.m. (EST) through Saturdays at 6 a.m. (EST).

Workday Online Enrollment-Changes ONLY!

You only need to log into Workday and go through the Open Enrollment process if you need to make changes to your current benefits or want to enroll in a Flexible Spending Account (FSA). It is highly recommended that all employees check their current benefits prior to determining whether online enrollment is needed or not.

BlueDental DHMO is no longer offered. Choice Plus is new offer.

As a reminder --- there is no longer a 12-month waiting period for coverage of any major or orthodontic services.

Should You Participate?

Do you need to take any action during Open Enrollment? Check all boxes that apply to you.

- ☐ I want to add/terminate a coverage or dependent.
- ☐ I elect to waive my health care coverage through the City of Gainesville.
- ☐ I want to: enroll in, change, or cancel coverage for myself and/or my eligible dependent(s) (e.g., from CoPay Dental to Choice Dental).
- ☐ I want to enroll or re-enroll in STD through AFLAC. You must re-enroll in STD every plan year. For NEW enrollment, you must contact the AFLAC representative for your rate.

- ☐ I currently cover a spouse/other eligible individual under my health benefits, and I want to continue their coverage in 2027.
- ☐ I do not want to make any changes and want to keep the exact same coverage in 2027.
- ☐ I do not want to continue or enroll in a Flexible Spending Account (FSA) for 2027.

No!

If you only selected the above option(s) and did not select any option in the “yes” column, you do not need to participate in Open Enrollment. However, we still recommend you review your benefits options to ensure you’re getting the best coverage.

Yes! If you selected any of the above options, you should participate in Open Enrollment.

Remember, if you do not have health insurance currently and you do not go into Workday to enroll, you will waive health coverage for the year.

Open Enrollment 101

I'm a new employee. What do I need to do?

- If you were hired between Oct. 1-18, 2026, please complete the New Hire event that will be in your Workday inbox before starting your Open Enrollment event. Please pay careful attention to this detail. Due to the structure of Workday's system, your benefits may be automatically removed if the New Hire and Open Enrollment events are completed out of sequence.
- If you are hired on or after Oct. 19, 2026, your New Hire benefit event should become available first. Your Open Enrollment event should also be available; however, you will still need to complete your New Hire event before completing the Open Enrollment event. Your new hire benefits will terminate at the end of 2026, and your Open Enrollment benefits are effective as of Jan. 1, 2027.
- Please notify Risk Management if you start your Open Enrollment benefit prior to your New Hire event.

What do I need to do?

- Review your current benefits and discuss them with your family.
- If you do not want to make any changes to your current benefits (except for Flexible Spending Accounts), you do not need to complete enrollment in Workday. **If you currently waive health coverage and do not enroll, your coverage will continue to be waived.**
- If you want to make a change to your benefits (e.g., add/terminate a dependent, add/terminate a benefit, add/keep a Flexible Spending Account), access Workday and positively elect each benefit you wish to enroll in for 2027.

When are my Open Enrollment elections effective?

- Benefits for 2027 are effective Jan. 1, 2027.
- If you are still on *probation*, you are **NOT eligible** to enroll in a *Flexible Spending Account*.
- If you are a new hire, the earliest your benefits may take effect is the first day of the month following your 30th day of employment.

When may I make changes outside of Open Enrollment?

You may make changes if you have a *qualifying life event* (within 30 days of the event) such as:

- A change in marital status (marriage, divorce)
- Adding/terminating a dependent due to birth, adoption, gaining/losing other health coverage
- Change in employment status (part-time/full-time to part-time or vice versa, as well as converting from a temporary to permanent employee).

Who is eligible to be covered under my benefits?

- You, your spouse, children (biological, step, foster, adopted, legal guardian)
- Certified domestic partner (only able to enroll at new hire and during Open Enrollment. **Must be done in person at Risk Management.**)

Things to Do and Remember During Open Enrollment

- Review your current benefit elections and determine if any updates are needed. If changes are needed, enroll through Workday. If not, no action is needed, and your benefits will remain the same, except for FSAs.
- Verify that your current dependents are eligible for coverage (benefits for dependents terminate at age 26). If dependents need to be added or removed, you must enroll for your 2027 benefits in Workday and update your dependents accordingly.
- Confirm that your beneficiary information is up to date for all relevant benefits:
 - Group Life (beneficiary changes via Workday)
 - Pension (beneficiary changes via Workday)
 - 457 and Roth IRA (beneficiary changes via Mission Square)
 - Supplemental life (enroll online via Workday)
 - 457 and IRA accounts: enroll online through Workday for 457 accounts; enroll online through Workday and Mission Square for IRAs. Go to *page 24-25* for more information.
- If you wish to start or keep a Flexible Spending Account (FSA), **you MUST** enroll via Workday **or you will not have one for 2027**. Please remember that you must have completed probation by the end of Open Enrollment to enroll in an FSA.
- Please confirm that your personal information in Workday is accurate and update it as needed.
- If you are on leave, FMLA, vacation, absent, or otherwise not at work and wish to have benefits for 2027, you must enroll through Workday. If you do not enroll, you will not have benefits for 2027. **Workday can be accessed from any computer or through the Workday mobile app or the browser**. Please remember to submit all required supporting documentation by October 31, 2026, to avoid having your enrollment deemed invalid.

Benefit Options

As an eligible city employee, you may enroll in benefits that support your health, help you grow and protect your finances, and promote a balance of work and life. Below is an overview of all 2027 benefit options.

Health Insurance

Florida Blue

- Blue Options

Dental Insurance

Florida Combined Life

- Choice Plus
- Choice
- CoPayment

Vision Insurance

Humana

- Insight Network

Supplemental Life Insurance

Sun Life Financial

- Employee Life (up to 5x salary)
- Spousal Life (1/2 employee election)
- Child Life (up to age 19 for non-students, 19-25 for students; proof of school enrollment required)
- Accidental Death & Dismemberment (must match employee amount)

Short-Term Disability

AFLAC

- Basic Disability

Flexible Spending Accounts

Benefit Strategies Voya

- Medical– Max is \$3,400* (Must have passed probation)
- Dependent Care–Max is \$7,500* (Must have passed probation)

Legal Plan & Identity Theft Enhanced Plans

LegalShield

- Comprehensive Legal Plan
- Identity Theft
- More dependent types may be covered

Who is a Legal Dependent?

- A spouse (one who is joined in marriage to an employee by a ceremony recognized by the laws of the federal government).
- A certified domestic partner (General Government employees only)
 - A certified domestic partnership affidavit must be completed and notarized **at the Risk Management office no later than Oct. 31, 2026.**
 - Must show proof of 12 months of continuous living together e.g., utility bill in both names, apartment/home lease, etc.)
- An employee's natural, legally adopted, or stepchild under age 26.
- A child under the age of 18, for whom you have legal guardianship (permanent or deemed permanent for insurance purposes).
- A child 26 years or older who is incapable of self-support due to mental or physical disability, and who has a permanent disability.

All children up to age 26, married or single, are eligible for coverage on their parents' health plan.

Dependent Eligibility by Benefit

Health, Dental and Vision

- Legal dependents are eligible to enroll in these benefits until the age of 26 (whether married, a student, or residing with the parent/legal guardian).
- Dependents who are over the age of 26, who are physically or mentally unable to work and are supported by the employee (medical documentation required).
- Grandchildren: Newborns up to 18 months (if the parent of the child is also covered by the plan).

Supplemental Child Life

- Legal dependents are eligible to enroll in this benefit under the age of 19. If a full-time student, they may be covered until age 25.

LegalShield (see pg. 20 for detailed dependent coverage)

- Employee's spouse/domestic partner
- Dependent children of the participant and/or participant's spouse, under 26 years of age.
- Dependent children over 26 living in employees' primary residence (receive advice and consultation only)
- Any dependent child, regardless of age, who is incapable of sustaining employment because of mental/physical disability and chiefly dependent on the employee/employee's spouse for support.
- **New!** With the enhanced plan, parents and grandparents are eligible dependents on this plan.

IDShield (see pg. 20 for detailed dependent coverage)

- Dependents under the age of 18 (10 max)
- Dependents between the ages of 18-26, and 26+ living at home, are not monitored but still able to receive credit restoration services.
- Dependent children **over 26** who are physically/mentally disabled.
- **New!** With the enhanced plan, parents and grandparents are eligible dependents on this plan.

Dependent Eligibility Documentation Requirements

Dependents	Documentation Required
Spouse	Copy of both marriage certificate and Social Security card. If previously married, copy of death certificate or divorce decree.
Removal of Spouse/Child	None at Open Enrollment. Court decree within 30 days of the decree during the contract year.
Natural Child(ren)	Copy of child's birth certificate (showing the parent-child relationship to employee/retiree and/or spouse) and Social Security card.
Adopted Child(ren)	Placement papers signed by the courts, child's birth certificate, and copy of Social Security card.
Disabled Child (26 years and older)	Physician verification of permanent disability, child's birth certificate, and copy of Social Security card.
Foreign Adoptions	Adoption papers signed by the courts; visa showing date of entry to the USA, child's birth certificate, and copy of Social Security card.
Stepchild(ren)	Child's birth certificate (showing parent-child relationship with employee/retiree's spouse); copy of marriage certificate and copy of Social Security card.
Court-Ordered Support	State affidavit; copy of signed court order requiring employee/retiree to provide support for health coverage, children's birth certificate, and copy of Social Security card.
Guardianship	Court-ordered guardianship, birth certificate, and copy of Social Security card.
Domestic Partner	City of Gainesville Domestic Partner Affidavit (completed in-person by both parties at Risk Management and notarized within 30 days of application), as well as proof of 12 months of cohabitation. You may only enroll during Open Enrollment or at new hire.

Ineligible Dependents

You must drop coverage for your enrolled dependent within 30 days of the date they lose eligibility. For example, if you divorce your spouse or end your domestic partnership relationship, you must contact Risk Management to remove your dependent spouse or domestic partner within 30 days of the divorce or end of domestic partnership.

If you fail to remove ineligible dependents, you will be required to pay all costs for any benefits that were paid on their behalf and may be subject to disciplinary action.

The following are examples of individuals who are not considered eligible dependents:

- Your spouse following a divorce
- Someone else's child (such as your nieces or nephews), unless you have been awarded legal custody or guardianship
- Parents, parents-in-law, or grandparents, regardless of their IRS dependent status

The City Invests in You!

Tuition Reimbursement

The city will reimburse employees 100% of the cost of tuition and lab fees for 18 credit hours per fiscal year. Reimbursement will be equal to the actual cost, not to exceed the State of Florida University System credit-hour rate for undergraduate or graduate courses as applicable.

Eligible employees are those appointed to regular positions who have completed their probationary period and are taking courses for college credit at an accredited institution per the U.S. Department of Education database of accredited postsecondary institutions and programs. Interested employees can refer to the Community Builder Hub (<https://gruadmin.sharepoint.com/sites/GGCommunityHub>) or Workday for more details. Applicable contracts may be viewed at www.GainesvilleFL.gov.

Group Term Life Insurance

The city purchases and pays the premiums for a life insurance policy for each regular employee that is equal to 200% of the annual base salary up to the maximum of \$50,000. Term Insurance provides a death benefit only in the face amount stated and will be in force only while you are employed by the city. Each employee must update their beneficiaries in Workday. These cards will be kept on permanent record at the city. If the employee wishes to change the beneficiary, the employee must follow the same process. If additional insurance beyond the group life insurance coverage provided by the city is desired, a supplemental term life option is available.

New Hires

You have a maximum of 60 days from your first day of employment to make elections for your voluntary benefits. If you do not meet this deadline, you will have to wait until the next Open Enrollment period. The only other way to make a change to your coverage is through a qualifying event. Any changes must be requested within 30 days of the qualifying event, and proof of the qualifying event must be provided.

If hired prior to Oct. 1 and your benefits have taken effect, log into Workday only if you want to make changes for 2027. If hired between Oct. 1 and Nov. 1, 2026, you will need to complete your New Hire elections via Workday for benefits to take effect Nov. 1, 2026, or Dec. 1, 2026. If you do not want coverage for 2026, but want benefits during 2027, you must still log in to Workday and waive and submit your 2026 benefits. You must also complete the Open Enrollment process to elect benefits for 2027.

Please allow approximately 7-10 business days to receive your insurance ID cards and/or member information once your benefit elections are submitted to the vendors, which is done once per week.

Vision

Humana is the administrator for the City of Gainesville’s vision plan.



Bi-Weekly Premiums and Summary of Services

Biweekly premium	\$2.70 for the employee only	\$7.31 for the employee+1 or more
Eye Exam	\$10 - once every 12 months	
Lenses	\$15 - once every 12 months	
Frames	\$140 allowance (20% off balance over \$140) - once every 24 months	
Contact Lenses	\$130 allowance - once every 12 months	
	\$55 fitting fee	

Health Plan 03359



The City of Gainesville offers its employees a comprehensive health plan. Presently, the third-party administrator is Florida Blue. Blue Options offers members the ability to choose any medical provider they wish. However, participants can maximize their benefits by choosing Network Blue “in-network” medical providers who participate in the Florida Blue PPO provider network. *Health insurance is also offered to full-time Temporary/Intern employees working an average of 30 hours/week at the full-time rate.*

2027 Bi-Weekly Premiums - Employee Pays

	Employee	Employee + Spouse	Employee + 1 Child	Employee + 2 more (Family)
Full-time (40 hours)	\$79.92	\$369.81	\$252.60	\$469.05
3/4 time (30 hours)	\$168.90	\$490.63	\$343.47	\$631.76
Half-time (20 hours)	\$257.88	\$611.45	\$434.34	\$794.46

Bi-Weekly Premiums - City Pays

	Employee	Employee + Spouse	Employee + 1 Child	Employee + 2 more (Family)
Full-time (40 hours)	\$355.92	\$483.28	\$363.48	\$650.81
3/4 time (30 hours)	\$266.94	\$362.46	\$272.61	\$488.11
Half-time (20 hours)	\$177.96	\$241.64	\$181.74	\$325.41

Health Plan 05774

A lower premium option is available to our selection of health plan benefits. The lower premium can save you money, so be sure to compare to see what is best for you and your family.

2027 Bi-Weekly Premiums - Employee Pays

	Employee	Employee + Spouse	Employee + 1 Child	Employee + 2 more (Family)
Full-time (40 hours)	\$35.64	\$249.01	\$166.92	\$312.34
3/4 time (30 hours)	\$109.95	\$351.62	\$243.58	\$446.16
Half-time (20 hours)	\$184.26	\$454.23	\$321.24	\$579.98

Bi-Weekly Premiums - City Pays

	Employee	Employee + Spouse	Employee + 1 Child	Employee + 2 more (Family)
Full-time (40 hours)	\$312.14	\$430.90	\$322.15	\$562.05
3/4 time (30 hours)	\$237.83	\$328.34	\$245.49	\$428.23
Half-time (20 hours)	\$163.52	\$225.22	\$167.83	\$294.41

Blue Options Health Plan Comparison

Deductibles	Option 03359 Family is 3 or more members		Option 05774 Per person, per calendar year	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Year Deductible (CYD) - Individual	\$600	\$600	\$3,000	\$6,000
Calendar Year Deductible (CYD) - Family	\$1,800	\$1,800	\$9,000	\$18,000
Out-of-Pocket Max - Individual	\$4,500	\$5,000	\$6,350	\$15,000
Out-of-Pocket Max - Family	\$7,500	\$10,000	\$12,700	\$30,000

Office Visits	Option 03359		Option 05774	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Primary Care	\$15 copay	deductible + 40%	\$40 copay	deductible + 50%
Medical Specialist	deductible + 20%	deductible + 40%	\$100 copay	deductible + 50%
Virtual Visits	Primary care provider: \$15 Specialist: deductible + 20%	not covered	Primary care provider: \$0 Specialist: \$100	not covered

Service	Option 03359		Option 05774	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Spinal Manipulation and Therapy	Option 1: \$45 Option 2: \$60	deductible + 40%	Option 1: 100 Option 2: 100	deductible + 50%
Hospital-based Therapy*	Option 1: \$45 Option 2: \$60	deductible + 40%	Option 1: \$100 Option 2: \$100	deductible + 50%

Laboratory Services	Option 03359		Option 05774	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Quest Diagnostics	No charge		No charge	
All other labs	deductible + 40%		deductible + 50%	

*Option 1 is community hospitals. Option 2 is research/teaching hospitals.

Blue Options Health Plan Comparison (cont'd.)

Preventive and Diagnostic Services	Option 03359		Option 05774	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Well Care Visits	no charge	no charge	no charge	deductible + 40%
Mammogram	no charge	no charge	no charge	no charge
Colonoscopy* (routine)	no charge	no charge	no charge	no charge

*Note: For diagnostic colonoscopies, the deductible is waived, but the appropriate coinsurance or copayment will apply based on the location of service.

Hospital Services	Option 03359		Option 05774	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Inpatient Facility*	Copay per admission Option 1: \$750 Option 2: \$1,000	deductible + 40%	Option 1 and 2: deductible + 20% per admission	deductible + 20% per admission
Inpatient Physician	deductible + 20%	in-network deductible + 20%	deductible + 20%	in-network deductible + 20%
Mental Health (inpatient)	\$150/day copay	deductible + 40%	no charge	50% co-insurance

Outpatient and Emergency Services	Option 03359		Option 05774	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Outpatient Facility (hospital)*	Opt. 1: \$150 copay Opt. 2: \$250 copay	deductible + 40% co-insurance	deductible + 20% co-insurance	50% co-insurance
Urgent Care	\$30 copay	deductible + \$30	\$100 per visit	deductible + \$100
Emergency Room (facility)	\$250 copay	\$250 copay	\$400 copay	\$400 copay
Emergency Room (physician)	deductible + 20%	in-network deductible + 20%	deductible + 20%	deductible + 20%

*Option 1 is community hospitals. Option 2 is research/teaching hospitals.

Blue Options Health Plan Comparison (cont'd.)

Surgical and Imaging Services

Service	Option 03359		Option 05774	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Imaging (X-ray)	\$50 copay	deductible + 40%	\$50 copay	deductible + 50%
Advanced Imaging (AIS, MRI, CT, PET, etc.)	\$125 copay	deductible + 40%	\$400 copay	deductible + 50%

Pharmacy Benefits

	Option 03359		Option 05774	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Pharmacy Deductible	\$300 (preferred and non-preferred)		\$300 (preferred and non-preferred)	
Generic	\$10 copay or actual cost (whichever is the least)		\$10 copay or actual cost (whichever is the least)	
Preferred Brand	\$50 copay or actual cost		\$50 copay or actual cost	
Non-preferred Brand	\$80 copay or actual cost		\$80 copay or actual cost	
Specialty Drugs	\$160 copay		\$80 copay or actual cost	
Mail Order (90-day supply)	Generic: \$20 copay Preferred: deductible + \$100 Non-preferred: deductible + \$160		Generic: \$25 copay Preferred: deductible + \$125 Non-preferred: deductible + \$200	

Excluded Services

Option 03359	Option 05774
<p>The following services are not available under Option 03359 (neither in-network nor out-of-network):</p> <ul style="list-style-type: none"> • Cosmetic surgery • Bariatric surgery • Dental care (adult) • Habilitation services • Hearing aids • Infertility treatment • Long-term care • Pediatric dental check-up • Pediatric eye exam • Pediatric glasses • Private-duty nursing • Routine eye care (adult) • Routine foot care unless for treatment of diabetes • Weight-loss programs 	<p>The following services are not available under Option 05774 (neither in-network nor out-of-network):</p> <ul style="list-style-type: none"> • Acupuncture • Bariatric surgery • Children's eye exams, glasses and dental check- ups • Cosmetic surgery • Dental care (adult) • Habilitation services • Hearing aids • Infertility treatment • Long-term care • Private-duty nursing • Routine foot care (unless diabetic) • Routine adult eye care • Weight-loss programs

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Dental

The City of Gainesville offers three dental plans through Florida Combined Life. Review the plan designs carefully and choose the option that best fits your expected dental needs and preferred level of coverage.

Biweekly rates	Employee	Employee +Spouse	Employee +1 Child	Employee +Children	Family
BlueDental Copayment	\$8.49	\$22.77	\$18.57	\$18.57	\$33.79
BlueDental Choice	\$12.42	\$29.68	\$23.58	\$23.58	\$40.86
New! BlueDental Choice Plus	\$16.28	\$29.69	\$30.93	\$30.93	\$53.58

New for 2027: BlueDental Choice Plus

Choice Plus provides the strongest out-of-network benefit level of the three plans. Preventive services are covered at 100% in-and out-of-network; basic services are 80% plan-paid / 20% member-paid; and major services are 50% / 50%. The plan-year maximum is \$1,750 per person. Child orthodontia is covered up to age 19 at 50%, with a \$1,000 lifetime orthodontia maximum. Out-of-network payment is based on the 90th percentile of usual and customary charges, and members may owe fees above the allowed amount.

BlueDental Choice

Choice is a PPO-style plan with a \$50 individual / \$150 family plan-year deductible (no deductible for preventive services). In-network preventive services are covered at 100%, basic services at 80%, and major services at 50%. Child orthodontia is covered to age 19 at 50%, with a \$1,000 lifetime orthodontia maximum. The annual maximum is \$1,500 per person.

BlueDental Copayment

The Copayment plan uses set in-network copayments for listed procedures. Preventive services generally range from \$0 to \$10 in-network. Out-of-network benefits use coinsurance, and the member may also be responsible for charges above the allowed amount. Child orthodontia is covered to age 19 at 50%, with a \$1,000 lifetime orthodontia maximum. The annual maximum is \$1,500 per person.

Dental Plan Comparison

The table below summarizes the major differences shown in the 2027 Florida Combined Life benefit summaries. Refer to the detailed benefit summaries on the following pages for specific procedures, exclusions and limitations.

Feature	Choice Plus	Choice	Copayment
Plan-year deductible	\$50 individual / \$150 family	\$50 individual / \$150 family	\$50 individual / \$150 family
Preventive services	Member pays 0% in-network and 0%out-of-network	Member pays 0% in-network; 20% out-of-network	In-network copays generally \$0-\$10; 30% out-of-network
Basic services	Member pays 20% in-network and 20%out-of-network	Member pays 20% in-network; 50%out-of-network	In-network copay varies by procedure; 50% out-of-network
Major services	Member pays 50% in-network and 50%out-of-network	Member pays 50% in-network; 60%out-of-network	In-network copay varies by procedure; 65% out-of-network
Child orthodontia	To age 19; 50% / 50%	To age 19; 50% / 50%	To age 19; 50%
Annual maximum	\$1,750 per person	\$1,500 per person	\$1,500 per person
Lifetime orthodontia maximum	\$1,000 per person	\$1,000 per person	\$1,000 per person

Important out-of-network notes

Choice Plus: out-of-network payment is based on the 90th percentile of usual and customary charges; you are responsible for fees above the allowed amount.

Choice and Copayment: non-participating dentists may charge more than the plan's fee schedule or allowed charge, and you may be responsible for the difference.

BlueDental Choice Plus

Benefit Summary



Group Name: CITY OF GAINESVILLE

Group Effective Date: 1/1

Deductible	In-Network		Out-of-Network	
No Deductible for Preventive Services (or ortho if selected)				
Per Person Per Plan Year		\$50		\$50
Per Family Per Plan Year		\$150		\$150
Amounts used to satisfy the in-network deductible also satisfy the out-of-network deductible and amounts used to satisfy the out-of-network deductible also satisfy the in-network deductible.				
	We Pay*	You Pay*	We Pay**	You Pay***
Preventive Services	100%	0%	100%	0%
Basic Services	80%	20%	80%	20%
Major Services	50%	50%	50%	50%
Periodic Oral Evaluation (0120)	Preventive			
Comprehensive Oral Evaluation (0150)	Preventive			
Bitewing X-rays, two films (0272)	Preventive			
Cleanings – Adult/Child (1110, 1120)	Preventive			
Fluoride Treatment – Child (1206,1208)	Preventive			
Office Visits (9430)	Preventive			
Space Maintainers – fixed – unilateral (1510)	Basic			
X-rays - Intraoral/Complete Series (0210)	Basic			
Sealant – per tooth (1351)	Basic			
Amalgam Restorations (Silver Fillings) (2140)	Basic			
Resin-Based Restorations – Anterior (2330)	Basic			
Extractions – Routine and Surgical (7140)	Basic			
Root Canal Molar (3330)	Major			
Periodontal Scaling & Root Planing – per quad (4341)	Major			
Osseous Surgery – 4 or more contiguous teeth (4260)	Major			
Crowns – Porcelain fused to noble metal (2752)	Major			
Complete Dentures (5110, 5120)	Major			
Pontic – Porcelain fused to noble metal (6242)	Major			
Partial Dentures (5213, 5214)	Major			
Surgical placement of implant body – endosteal implant (6010)	Major			
Implant supported porcelain fused to metal crown (titanium, high noble metal) (6066)	Major			
Orthodontia Services BlueDental Coverage	Child to age 19 only 50% / 50%			
Maximum Benefits Plan Year (per person) Lifetime Orthodontia (per person)	\$1750 / \$1750 \$1000 / \$1000			
The amount of benefits payable is limited to the in-network maximums. In-network maximums apply toward the out-of-network maximums and out-of-network maximums apply to the in-network maximums.				
Dental Rollover	Opt Out			

The information provided above is a summary of benefits. It is intended to highlight key points of the Dental Plan and is provided to the employee as an aid in deciding whether to enroll in the Plan. This summary should in no way be construed as part of the contract. Possession of this summary in no way implies coverage nor does it guarantee benefits under the plan.

Some limitations may apply.

*Percentage of allowable charge.

**Payment is based on the 90th percentile of U&C

***The majority of dentists' fees are within our allowed charges; however, you will be responsible for any fees in excess of the allowed amount

Florida Combined Life Insurance Company, Inc. (FCL) is an affiliate of Blue Cross Blue Shield of Florida, Inc. (BCBSF). BCBSF and FCL are Independent licensees of the Blue Cross and Blue Shield Association.

22243-0826

BlueDental Choice

Benefit Summary



Group Name: CITY OF GAINESVILLE

Group Effective Date: 1/1

Deductible	In-Network		Out-of-Network	
No Deductible for Preventive Services (or ortho if selected)				
Per Person Per Plan Year	\$50		\$50	
Per Family Per Plan Year	\$150		\$150	
Amounts used to satisfy the in-network deductible also satisfy the out-of-network deductible and amounts used to satisfy the out-of-network deductible also satisfy the in-network deductible.				
	We Pay*	You Pay*	We Pay*	You Pay**
Preventive Services	100%	0%	80%	20%
Basic Services	80%	20%	50%	50%
Major Services	50%	50%	40%	60%
Periodic Oral Evaluation (0120)	Preventive			
Comprehensive Oral Evaluation (0150)	Preventive			
Bitewing X-rays, two films (0272)	Preventive			
Cleanings – Adult/Child (1110, 1120)	Preventive			
Fluoride Treatment – Child (1206,1208)	Preventive			
Office Visits (9430)	Preventive			
Space Maintainers – fixed – unilateral (1510)	Basic			
X-rays - Intraoral/Complete Series (0210)	Basic			
Sealant – per tooth (1351)	Basic			
Amalgam Restorations (Silver Fillings) (2140)	Basic			
Resin-Based Restorations – Anterior (2330)	Basic			
Extractions – Routine and Surgical (7140)	Basic			
Root Canal Molar (3330)	Major			
Periodontal Scaling & Root Planing – per quad (4341)	Major			
Osseous Surgery – 4 or more contiguous teeth (4260)	Major			
Crowns – Porcelain fused to noble metal (2752)	Major			
Complete Dentures (5110, 5120)	Major			
Pontic – Porcelain fused to noble metal (6242)	Major			
Partial Dentures (5213, 5214)	Major			
Surgical placement of implant body – endosteal implant (6010)	Major			
Implant supported porcelain fused to metal crown (titanium, high noble metal) (6066)	Major			
Orthodontia Services BlueDental Coverage	Child to age 19 only 50% / 50%			
Maximum Benefits Plan Year (per person) Lifetime Orthodontia (per person)	\$1500 / \$1500 \$1000 / \$1000			
The amount of benefits payable is limited to the in-network maximums. In-network maximums apply toward the out-of-network maximums and out-of-network maximums apply to the in-network maximums.				
Dental Rollover	Opt Out			

The information provided above is a summary of benefits. It is intended to highlight key points of the Dental Plan and is provided to the employee as an aid in deciding whether to enroll in the Plan. This summary should in no way be construed as part of the contract. Possession of this summary in no way implies coverage nor does it guarantee benefits under the plan.

Some limitations may apply.

*Percentage of allowable charge.

**Percentage allowable charge, plus balance of charges, if any.

Note: Non-Participating Dentists may charge fees in excess of our Fee Schedule and may bill you for the difference.

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22240-0826

BlueDental Choice Copayment

Benefit Summary



Group Name: CITY OF GAINESVILLE

Group Effective Date: 1/1

Deductible		In-Network	Out-of-Network	
No Deductible for Preventive Services (or ortho if selected)				
Per Person Per Plan Year		\$50	\$50	
Per Family Per Plan Year		\$150	\$150	
Amounts used to satisfy the in-network deductible also satisfy the out-of-network deductible and amounts used to satisfy the out-of-network deductible also satisfy the in-network deductible.				
		Copayment You Pay	Coinsurance	
			We Pay*	You Pay**
Periodic Oral Evaluation (0120)	Preventive	\$0	70%	30%
Comprehensive Oral Evaluation (0150)	Preventive	\$0	70%	30%
Bitewing X-rays, two films (0272)	Preventive	\$0	70%	30%
Cleanings - Adult/Child (1110, 1120)	Preventive	\$10	70%	30%
Fluoride Treatment - Child (1206, 1208)	Preventive	\$0	70%	30%
Office Visits (9430)	Preventive	\$0	70%	30%
Space Maintainers – fixed – unilateral (1510)	Basic	\$47	50%	50%
X-rays - Intraoral/Complete Series (0210)	Basic	\$17	50%	50%
Sealant – per tooth (1351)	Basic	\$6	50%	50%
Amalgam Restorations (Silver Fillings) (2140)	Basic	\$15	50%	50%
Resin-Based Restorations - Anterior (2330)	Basic	\$20	50%	50%
Extractions - Routine and Surgical (7140)	Basic	\$17	50%	50%
Root Canal Molar (3330)	Major	\$305	35%	65%
Periodontal Scaling & Root Planing-per quad (4341)	Major	\$61	35%	65%
Osseous Surgery – four or more contiguous teeth (4260)	Major	\$322	35%	65%
Crowns - Porcelain fused to noble metal (2752)	Major	\$302	35%	65%
Complete Dentures (5110, 5120)	Major	\$382	35%	65%
Pontic - Porcelain fused to noble metal (6242)	Major	\$302	35%	65%
Partial Dentures (5213, 5214)	Major	\$420	35%	65%
Surgical placement of implant body – endosteal implant (6010)	Major	\$512	35%	65%
Implant supported porcelain fused to metal crown (titanium, high noble metal) (6066)	Major	\$282	35%	65%
Orthodontia Services	Child to age 19 only			
BlueDental Coverage	50%			
Maximum Benefits				
Plan Year (per person)	\$1500			
Lifetime Orthodontia (per person)	\$1000			
Dental Rollover	Opt Out			

The information provided above is a summary of benefits. It is intended to highlight key points of the Dental Plan and is provided to the employee as an aid in deciding whether to enroll in the Plan. This summary should in no way be construed as part of the contract. Possession of this summary in no way implies coverage nor does it guarantee benefits under the plan.

Some limitations may apply.

*Percentage of allowable charge.

**Percentage of allowable charge, plus balance of charges, if any.

Note: Non-Participating Dentists may charge fees in excess of our Fee Schedule and may bill you for the difference.

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Choice Plus is the new dental option for 2027

The previous BlueDental DHMO / prepaid option is no longer offered. Choice Plus adds a higher annual maximum and stronger out-of-network benefit percentages while retaining child orthodontia coverage.

What to remember when comparing plans

- All three benefit summaries show a \$50 individual / \$150 family plan-year deductible, with no deductible for preventive services (or orthodontia if selected).
- All three plans include child orthodontia through age 19 and a \$1,000 lifetime orthodontia maximum.
- Choice Plus has a \$1,750 plan-year maximum per person; Choice and Copayment have a \$1,500 maximum.
- Using an out-of-network dentist can result in additional member costs. Review the out-of-network payment notes in the benefit summary before choosing a provider.
- The city has noted that there is no longer a 12-month waiting period for major or orthodontic services.

See the applicable Florida Combined Life benefit summary and plan documents for complete terms, limitations and exclusions.

LegalShield & IDShield

LegalShield provides access to a designated provider law firm for personal legal matters, while IDShield provides identity monitoring, privacy tools and full-service restoration support. Employees may enroll in either benefit or combine both plans.

Bi-weekly Rates

LegalShield Individual / Family	\$10.36
IDShield Individual / Family	\$3.90 / \$7.15
LegalShield + IDShield Individual / Family	\$13.80 / \$16.59

Reduced-rate pricing applies when enrolled in both plans. No premiums for active military personnel.

Who may be covered:

LegalShield

- You
- Your spouse/Partner
- Dependent children up to the age of 26

Receive attorney advice and consultation only:

- Any dependent children over 26 who live in your primary residence

Receive attorney advice, consultation, and document review for covered personal legal matters and can receive the services available to them through the Elder Care Services of this Plan. Services include preparation of a Will and a Physicians/Medical Directive:

- Parents, including step-parents, of the participant and participant's spouse/domestic partner
- Grandparents (in-laws and step-grandparents)

IDShield

- You
- Your spouse/partner
- Up to 10 Children under the age of 18 (SSN monitoring)

Consultation and restoration services for up to eight adults and children:

- Parents/In-Law/Stepparents
- Grandparents/In-Law/Step-grandparents
- Dependent Children 18-26
- Children aged 26+ who live at home
- Dependent children of any age who are physically disabled or mentally incapacitated

Plan Features

LegalShield Services

Always someone in your corner.
Legal help for today's needs and tomorrow's plans.

Estate Planning

- Wills and Codicils
- Living Wills / Physician's Directives
- Durable Powers of Attorney
- Trusts (including special needs)
- Executor appointment & probate
- Beneficiary rights

Family & Relationships

- Adoption and paternity
- Child custody
- Divorce (up to 30 hours contested)
- Domestic violence protection
- Pre-nuptial/post-nuptial agreements
- Support orders
- Elder care matters
- Senior Care Advisor

Home & Daily Living

- Sale or purchase of home
- Boundary or title disputes
- Eviction and tenant problems
- Foreclosure
- Security deposit recovery
- Zoning applications

Auto, Finance & More

- Moving violations
- Consumer bankruptcy
- Collection letters
- Tax audit and collection
- E-Notary/E-Signature

IDShield Services

Everything working behind the scenes to
help keep you and your family protected.

Financial Fraud Monitoring

- Financial account monitoring
- Continuous credit monitoring
- Monthly credit score tracker
- Quarterly credit report
- Credit simulator and score factors
- Credit counseling and education
- Payday loan monitoring

Identity Theft Monitoring

- Dark web monitoring
- Auto and home title monitoring
- Public and court records monitoring
- Address change monitoring
- Telecom and utility monitoring
- Child and elder SSN monitoring
- Social media monitoring

Privacy & Device Protection

- AI scam protection
- VPN
- Anti-malware protection
- Password manager
- Mobile security
- Online parental controls
- Email defender

Restoration & Support

- Full-service restoration by LPIs
- Up to \$5M identity fraud protection
- 24/7 emergency assistance
- Lost/stolen wallet support
- Identity restoration tracker
- Child cyberbullying support
- Live member support

For more information, visit: www.shieldbenefits.com/gainesville Don't wait until it happens to you.

More information: www.shieldbenefits.com/gainesville

Additional Benefits Offered

Short-Term Disability Insurance

Short-term disability insurance is designed to provide partial income replacement if you are out of work due to an illness or injury. Short-term disability coverage does not provide income replacement for a work-related injury. There are benefit limitations for disability due to pregnancy and childbirth. This coverage is only available to the employee, not dependents. The bi-weekly premium will vary based on level of benefit, age, and length of elimination period.

Employees must contact the AFLAC representative, Soteria Mallard, at 352-317-3835 for their premium quote and to complete an application. The AFLAC representative will send your completed application to Risk Management.

****Employees need to contact the AFLAC representative whenever they have a pay change to ensure their short-term disability pays out based on the current salary and not the former one.**

Supplemental Life

Supplemental term life insurance is offered to City of Gainesville employees through Sun Life Financial. The policy allows employees to purchase life insurance at group rates with the convenience of payroll deduction. Rates are banded. Therefore, premiums will vary from person to person based on an individual's age and the amount of coverage requested. Premiums are based on the coverage amount and age as of Jan. 1 of the policy year.

If you and your spouse both work for the city, you cannot cover one another as dependents, and only one of you may insure any dependent children. There is an optional Accidental Death and Dismemberment (AD&D) rider equal to the amount of life insurance. This option is for the employee only.

This policy is portable and can be taken with you when you leave employment with the City of Gainesville. Term insurance has no cash value accumulated. Rates are for a fixed term and increase as you get older.

As a new hire, spouses and certified/registered domestic partners are eligible for Guarantee Issue Amounts of half the coverage of the employee or \$50,000, whichever is less. Coverage for children is available in amounts of \$1,000, \$5,000 or \$10,000. Your unmarried children from birth to less than age 19, or less than age 25 if a full-time student, may be covered. After 30 days of employment, any elections for the city's supplemental life plans will require new hires to answer health questions for enrollment.

Q. When should I complete an Evidence of Insurability (EOI) application for my supplemental life insurance policy?

- A. Complete an EOI application for your policy by answering health questions, provided you are:
- Enrolling in an employee policy as a late entrant (anytime outside of days 1-30 of new hire) total of 60 days for election.
 - Enrolling in an employee policy for the first time and the requested coverage amount is more than \$150,000 (as a new hire).
 - Enrolling during Open Enrollment and requesting more than \$20,000 as a late entrant.
 - Enrolling a spouse for the first time or increasing a spouse's coverage amount (outside of new hire).
 - Increasing your current employee policy by more than \$10,000 increments.
 - Increasing by \$10,000 and you are enrolled in a policy over \$150,000.
 - Increasing a current policy (child or spouse).
 - Enrolling children for the first time.

Q. Where can I find the Evidence of Insurability application?

A. After you enroll in Workday, you will receive an email from Sun Life advising you to answer any health questions. Please complete the questionnaire as soon as possible. If you do not receive an email from Sun Life within 24-48 hours, please contact Risk Management.

Q. What will happen if I do not complete an EOI as required?

A. Your supplement life plan will be removed from your benefit elections or reduced to a lower coverage amount. Spouses will not be covered at all.

**** Note:** If you and your spouse are both city employees, you cannot elect Voluntary Life for spousal coverage; nor can both of you cover the same dependents. You may have separate policies and cover different dependents, and you may select your spouse as a beneficiary.

Family and Medical Leave Act (FMLA)

Please contact Employee Health Services if you qualify for FMLA. They will help you get started with this process.

Eligible employees may take a maximum of 12 weeks of family and medical leave each calendar year. Certification must be obtained from a health care provider and approved by Employee Health Services. This leave may be paid (if applicable leave is available) or unpaid. The FMLA Leave Year is defined as the 12-month period measured forward from Jan. 1 each year. FMLA will be granted for:

- The birth of a child and care for a child within 12 months following the birth.**
- The placement of a child with the employee. Leave must be taken within 12 months following placement.
- To care for the spouse, child, or parent of the employee who has a “serious health condition.”
- If the employee is unable to perform his or her own job because of the employee’s own serious health condition.
- An eligible employee who is the spouse, son, daughter, parent or next of kin of a covered service member, as defined by the FMLA, who is recovering from a serious illness or injury sustained in the line of duty on active duty is entitled to up to 26 weeks of leave in a single 12-month period to care for the service member. This military caregiver leave is available during “a single 12-month period” during which an employee is entitled to a combined total of 26 weeks of all types of FMLA leave.
- An employee who exceeds the 12-week FMLA period and is placed in a “leave without pay” status will become ineligible for benefits. Subsequently, the employee’s benefits will be terminated. When the employee returns to work, the benefits will be reinstated, and the employee will be responsible for any missed deductions. Should the employee choose not to return to work, then the balance will be deducted from the last paycheck or the pension refund of a non-vested employee. If vested and the employee terminates employment, any outstanding premiums owed will be billed to the employee and will be assigned to an external collections agency, if not paid.

****To add a newborn to the benefits, copies of the birth certificate and Social Security card must be sent to Risk Management. Sending the birth certificate to Employee Health Services does not enroll newborns in insurance coverage.**



Flexible Spending Accounts

The City of Gainesville offers two flexible spending accounts (FSA) for its employees: a medical reimbursement account and a dependent care reimbursement account. These accounts allow employees to set money aside to pay for health care or dependent care expenses on a pre-tax basis. Any reimbursement from the account is also tax-free. Important note: These contributions are deducted from your earnings before calculation of federal taxes. The employee determines the annual amount they wish to contribute. The annual contribution amount is divided by 26, the number of paychecks per year, and deducted from the employee's pre-tax earnings over the course of the year. Flexible spending accounts are “use it or lose it” accounts. Any amounts not used by the end of the plan year are forfeited. A mandatory bi-weekly administration fee of \$1.75 must be paid in addition to your bi-weekly medical and dependent care reimbursement account deduction.

Medical Reimbursement Account

A medical reimbursement account can be used to offset eligible medical, dental, or vision expenses incurred by you, your spouse or eligible dependent children. Expense eligibility is determined by the Internal Revenue Service. Examples of eligible expenses are deductibles, co-payments, and co-insurance payments. The employee has access to 100% of the elected contribution amount as of Jan. 1, 2027. The annual maximum contribution allowed is \$3,400 for 2027.

To be eligible for reimbursement, services must be performed/received between Jan. 1, 2027, and March 15, 2028, and while you are an active participant in the account. All claims for reimbursement must be submitted to Voya no later than May 31, 2028. All participants will receive a debit card for health-related expenses. Should you want more than one card, please contact Voya (additional fees apply). New cards are issued once your current one expires; check the expiration date on the front of your card and keep your address updated with Voya.

Some examples of common expenses you might have are:

- Calendar year deductibles
- Prescriptions
- Dental fees and services and/or orthodontic fees
- Copayments and co-insurance
- Hearing aids
- Eye exams, glasses, contacts and/or Lasik

Dependent Care Reimbursement Account

The Dependent Care Reimbursement Account gives the employee an opportunity to set aside pre-tax dollars to pay for qualifying dependent daycare expenses. Presently, the maximum one can contribute to this account this year is \$7,500 or \$3,750 if married and filing separately. A Dependent Care Reimbursement Account may be right for you if:

- You incur daycare expenses so you can work or look for work.
- You are married, and you incur daycare expenses so you can work full-time, and your spouse can work or go to school full-time.
- You incur daycare expenses so you can work full-time and your spouse, legal dependent, or elderly parent is incapable of self-care.

Expenses eligible for reimbursement include the cost of care for dependents who meet the IRS definition of a dependent as follows:

- Charges for care of dependents under the age of 13, who reside in your household.
- Charges for the care of dependent adults or children who are mentally or physically incapable of self-care, and spend at least eight hours a day in your household. You must provide proper documentation of such conditions.
- The Dependent Care Reimbursement Account is a “dollar in, dollar out” type of account where an employee can only be reimbursed the amount currently contributed. All claims for reimbursement from a 2026 account must be received by Voya no later than May 31, 2027.



City Defined Benefit Pension Plans

The City of Gainesville (the city) maintains two defined benefit pension plans: The Consolidated Police Officers' and Firefighters' Retirement Plan. The Consolidated Plan has separate provisions for Police Officers and Firefighters. It covers any full-time regular employees who are certified or required to be certified as law enforcement officers or firefighters. All other regular city employees participate in the Employees' Pension Plan.

Both plans require mandatory contributions from employees and the city. The city takes responsibility for producing the needed level of investment returns to meet the current and future pension benefit obligation of its retirees. Employee contributions under the Consolidated Plan are currently 7.5% for Police Officers and 9% for Firefighters. Employees' Pension Plan members contribute 5% of earnings. Contributions cease when an employee enters the Deferred Retirement Option Program (DROP). Employees' Pension Plan members hired after Oct. 1, 2012, are not eligible for DROP.

As defined benefit plans (tax-qualified), retirement benefits are based on factors such as compensation, years of service, and the form of benefit payment. Contributions are not currently subject to federal income tax; benefits are generally taxed when received, at which time you may be in a lower tax bracket than during your peak earning years.

The plans are designed to provide a measure of economic security for retirement in addition to Social Security and personal savings. You are encouraged to establish and maintain your own retirement savings program and not to rely solely on Social Security and employer-provided retirement benefits.

While the plans operate similarly, eligibility requirements, benefit multipliers, cost-of-living adjustments (COLAs), and DROP eligibility differ between the plans.

Summary Plan Descriptions for all plans are located on the City of Gainesville website, under the Financial Services Department, at [Pensions & Investments](#) or on the Risk Management part of the Community Builder Hub. These Summary Plan Documents (SPD) are updated every two years.

Supplemental Retirement Planning

Retiree Health Savings (RHS)

The City of Gainesville provides a Retiree Health Savings (RHS) plan which serves as a tool to help employees save money for post-employment medical expenses. The following are the mandatory amounts contributed to an RHS account on a bi-weekly basis:

- ATU and MAP employees: 0.5%
- CWA covered employees: 1.5%
- Police Lieutenants: 5%
- Fire District Chiefs: 4%

The money deposited into the account is tax-free, and any earnings on the account grow tax-free. The best part is that withdrawals used for qualified medical, dental, vision, or long-term care expenses are also tax-free.

Qualified expenses may include eligible out-of-pocket healthcare costs, such as deductibles, copayments, and non-cosmetic dental and vision expenses. **After** retirement or separation from employment, employees may use their RHS account to reimburse eligible expenses incurred by themselves and their eligible dependents. Enrollment in a city health plan or other city benefits is not required to receive reimbursement.

457 Deferred Compensation Plan

In addition to the city's pension plan, employees may also participate in a 457 Deferred Compensation Plan to help build additional income for retirement. The plan allows employees to save for retirement through convenient, pretax payroll deductions. Contributions and earnings are tax-deferred until funds are withdrawn from the account.

Unlike many retirement plans, there is no penalty for withdrawing 457 funds after leaving employment. While you are still employed, withdrawals generally are not permitted except under extreme hardship conditions as defined by the IRS.

Employees have control over their investments and may choose from several investment options. The current annual maximum for regular contributions is **\$24,500**.

Employees aged 50 and older may contribute an additional **\$8,000** per year through the age-based catch-up provision. An additional catch-up provision is also available to employees who are within four years of their normal retirement age.

Under the SECURE 2.0 Act of 2022, employees ages 60–63 may be eligible to make an increased catch-up contribution of **\$11,250** or 150% of the standard catch-up contribution limit, whichever is greater.

Note: Contribution limits for the upcoming year are typically published in mid-October. Contributions may be made as either a set dollar amount or a percentage of earnings.

Beginning January 2026, employees who participate in the 457 catch-up provision and whose prior-year wages exceed \$150,000 are required to make catch-up contributions as Roth (after-tax) contributions.

Roth 457

Employees may also contribute to a Roth 457 plan. Roth contributions are made with after-tax dollars, and qualified distributions in retirement may be tax-free. The ability to make Roth contributions to your 457 plan offers several benefits:

- **Higher after-tax contribution limits than Roth IRAs:** 457 plans allow for greater after-tax savings.
- **No income limitations:** Unlike Roth IRAs, Roth 457 contributions are not subject to income limits.
- **Greater tax-planning flexibility:** Having both pre-tax and Roth assets available in retirement can provide greater flexibility, allowing you to choose which account to draw from based on your financial circumstances at the time of distribution.

The contribution limits and guidelines for the Roth 457 and pre-tax 457 are the same. Employees may contribute to both accounts; however, **the combined contributions to both accounts cannot exceed the annual limit of \$24,500, or \$32,500 for employees eligible for the catch-up contribution.**

Roth IRA*

Employees may contribute to a Roth IRA through payroll deduction made with after-tax dollars. Investment earnings can grow tax-free, and qualified withdrawals are tax-free when the account has been open for at least five years, and you are age 59½ or older. Original contributions may be withdrawn at any time without taxes or penalties. However, withdrawals of earnings that do not meet the qualified distribution requirements may be subject to federal income tax and a 10% penalty. Employees control their investments and may choose from several investment options. The current annual contribution limit is **\$7,500**, with an additional **\$1,100** catch-up contribution for employees aged 50 and older. Contributions must be made as a set dollar amount.

*** Enrolling in Roth IRA:** To enroll, you must first enroll through Mission Square's website (www.missionsq.org) and make the corresponding election in Workday. Your election cannot be processed unless you complete both steps in this order. **Important note:** Any contribution changes made through Mission Square's website must also be updated in Workday. For assistance with the Workday portion, please contact Risk Management.

What are my options if I leave the City?

COBRA Continuation Coverage

Under COBRA—the Consolidated Omnibus Budget Reconciliation Act of 1985, Title X—terminated employees and their eligible dependents may continue group health plan coverage. We urge you to read this description of the “continuation coverage” option carefully, and to make sure you read and understand the rights and responsibilities in connection with this continuation of coverage.

The Benefits

If you are currently covered under the City of Gainesville Health Plan, your coverage will terminate at the end of the month in which you separate employment. However, you will be entitled to continue your and your family’s health plan coverage for up to **18 months** from the date of coverage termination (voluntary or involuntary termination).

The 18-month continuation period may be extended if certain qualifying events, such as death or divorce, occur during that period. Dependents who no longer qualify for coverage under the City of Gainesville Health Plan may also be eligible for COBRA continuation coverage.

If you die or become divorced while covered under the City of Gainesville Health Plan, your covered spouse and dependents may be eligible to continue coverage for up to **36 months**. If you have a newborn, adopt a child, or have a child placed in your home for whom you have legal financial responsibility while your COBRA coverage is in effect, you may add the child to your COBRA coverage.

When Coverage Ends

If you or any covered member of your family become entitled to Medicare or become covered under another employer-sponsored health plan that does not limit coverage due to preexisting conditions, continuation coverage under the City of Gainesville Health Plan will cease.

Your continuation coverage will also cease if the City of Gainesville terminates the Health Plan or if you fail to pay the required premium.

Once the period of continuation coverage has expired, individuals receiving continuation coverage will be eligible to convert to individual policies, as provided under the City of Gainesville Health Plan.

Termination of Benefits - Accounts will be reconciled

Terminating employees will have their benefits calculated based upon the monthly (not bi-weekly) cost of the benefit to reconcile accounts owed to the city.

Monies Owed Collections

When a non-vested employee terminates, pension contributions will be refunded minus any monies owed to the city. If the employee is vested, the remaining premiums owed will be collected from the final paycheck. If there is not enough money to cover the cost of the premiums, the employee will be billed. If payment is not tendered, the account will be assigned to a collection agency.

Work & Life

The City of Gainesville strives to offer its employees a comprehensive benefits package. The benefits include paid holidays, a variety of leave time, tuition reimbursement, access to health, dental and vision insurance, deferred compensation, supplemental retirement accounts and much more.

Paid Holidays

All regular (non-safety) employees receive the following paid holidays:

- New Year's Day
- Memorial Day
- July Fourth
- Veterans Day
- Day after Thanksgiving
- MLK Day
- Juneteenth
- Labor Day
- Thanksgiving Day
- Christmas Day

CWA and MAP employees receive one additional holiday, to be determined by city administration. Employees covered by collective bargaining agreements should refer to their unit contract for additional holiday information.

Jury Duty

Any employee who is required to perform jury service during his or her normal working hours in a county, state or federal court will be paid their regular rate of pay for the period of such service.

Bereavement Leave

In the event of a death in an employee's immediate family (as defined in HR Policy Number L-2 or appropriate collective bargaining agreement), they may be granted bereavement leave with pay for up to a maximum of three working days and shall have access to PCLB hours for up to an additional two working days.

Banking

City employees may become members of Self-Help Credit Union of Gainesville. SunTrust Bank offers free personal checking to city employees with payroll direct deposit, as well as other bonuses and discounts.

Training Classes

Gainesville Corporate University (GCU) strives to create a learning environment designed to meet the developmental needs of all employees. GCU provides learning opportunities designed to address everything from technical knowledge to professional and leadership development. Classes are available to employees at no cost.

Military Leave

Reserve or Guard Annual Training

The city shall grant a military leave of absence with pay to any employee called to temporary active or inactive duty for:

- Annual training with the National Guard
- A reserve unit of the United States military
- Attending evening or weekend military training which conflicts with their work schedule
- Time off shall be granted for the purpose of attending military training for the period not to exceed 240 working hours in any one calendar year

Reserve or Guard Active Military Service (not annual training)

- The city shall grant military leave of absence to any employee called to active military service (not annual training) with the National Guard or military reserve unit of the United States.
- For the purpose of active military service, the first 30 calendar days of any such leave of absence shall be with full pay from the city.

Personal Leave

An employee may be granted personal leave for a period of time not to exceed a total of one year, for the following reasons:

- Family health-related problems not defined within the FMLA policy, or beyond the time limits of the FMLA
- Military leave not covered under the Military Leave Policy (HR Policy L8)
- Education
- Extenuating personal reasons
- If an employee is in leave without pay status (LWOP) and is not on FMLA, benefits will terminate at the end of the month the leave is exhausted. If an employee is in LWOP status for more than 90 days, an adjustment will be made to the employee's credited service time.

Leave Accruals

The City of Gainesville offers its employees paid vacation and sick time or PTO (paid time off) depending upon the specific collective bargaining agreement.

ATU, CWA* and MAPs Employees		FOP and PBA Police Department	
Continuous Service	Accrual Rates	Continuous Service	Accrual Rates
0-5 years	6 hours and 10 minutes	1-5 years	80 hours
5-10 years	7 hours and 42 minutes	5-10 years	96 hours
10-15 years	8 hours and 37 minutes	10-15 years	120 hours
15-20 years	9 hours and 14 minutes	15-20 years	136 hours
20-25 years	10 hours and 28 minutes	20-25 years	168 hours
25 years or more	10 hours and 47 minutes	25 years or more	176 hours

*CWA employees only have access to a total of 24 PTO hours during the initial six-month probationary period. The remaining balance is credited to the employee upon successful completion of probation.

IAFF Fire Department			
Continuous Service	Accrual Rates 40-hour employees	Accrual Rates IAFFDC Employees	Accrual Rates IAFF Shift Employees
1-5 years	80 hours/year	3.70 hours/pay period	120 hours/year
5-10 years	100 hours/year	4.32 hours/pay period	144 hours/year
10-15 years	120 hours/year	5.23 hours/pay period	168 hours/year
15-20 years	140 hours/year	5.85 hours/pay period	192 hours/year
20-25 years	160 hours/year	7.08 hours/pay period	240 hours/year
25 years or more	160 hours/year	7.40 hours/pay period	240 hours/year

Employee Assistance Program (EAP)

The City of Gainesville offers three free counseling visits annually to all city employees and their families. These visits are confidential and sustain job security. Should you wish to participate in these services, a supervisor may refer you, or you may contact the provider directly. The city partners with Clinical Psychology Associates for North Central Florida for this service. They may be reached at 352-336-2888.

Employee Health Services

Take advantage of the services offered by Employee Health Services - they're your partner in staying healthy, active, and saving money!

Employee Health Services
222 E. University Ave.
Ground level of the Old Library Building
Phone: 352-334-5037
Fax: 352-334-3185

Hours of Operation
Mon.-Thurs.: 7 a.m.-5:00 p.m.
Fri.: 7 a.m.-5 p.m.
Closed on holidays

The city's Nurse Practitioner is available Monday through Thursday, by appointment only.

Employee Health Services is not your primary health care provider. Services are designed to complement your health plan and reduce out-of-pocket expenses.

Clinical Services

- **Urgent Care:** sore throat, ear infections, flu symptoms, dizziness, rashes, urinary tract infections, COVID/flu test, strep test, etc.
- **Laboratory testing:** Free for employees and retirees on the city's health plan (CBC, A1C, Lipid Panel, CMP, and PSA Blood test for males 50 and older).
- **Injections** and vaccines
 - > Free Tetanus
 - > Hepatitis A and B (eligibility required)
 - > Free annual flu, pneumonia, and COVID-19 vaccines (pending availability, small fee for non-members)
- **Physical Exams:** Five-year physical at age 35+, then every five years
- **Blood pressure and blood sugar checks:** Free

Clinical services are for employees and retirees only. Spouse may participate in specified athletic training and wellness services.

Athletic Training and Ergonomics

- Injury assessment, rehabilitation and management
- Brace and crutch fitting
- Reconditioning and fitness assessments
- Ergonomic evaluations and training
- Back injury prevention

Wellness and Prevention

ProClub Incentive Program

- Earn points (February–October) for healthy lifestyle activities
- \$350 rebate for employees (+\$250 for spouses) on insurance premiums if requirements are met
- Rebates are issued in December
- Registration is required annually
- You must be enrolled in the city’s health plan

** Please note: Employees must be off probation to participate in ProClub.

Wellness Services

- Free Wellness Center memberships
- Personalized exercise program design
- Fitness testing and body composition evaluations
- Group exercise and health education classes
- Basic nutrition guidance and wellness coaching

Contact Information

If you have any questions about any of your benefits, please contact representatives at the telephone numbers listed below:

City of Gainesville

Risk Management Department: 352-334-5045

Employee Health Services: 352-334-5037

Human Recourses: 352-334-5077

Payroll: 352-334-5057

Medical	
Florida Blue - BlueOptions PPO	1-800-664-5295 www.FloridaBlue.com
Dental	
Florida Combined Life BlueDental Co-payment and Choice PPO Plans	www.FloridaBlue.com 1-888-223-4892
457 Deferred Compensation, Roth IRA, Retiree Health Savings	
Mission Square Webpage Victoria Harrison	1-800-669-7400 www.missionsq.org 202-759-7059
Short-Term Disability	
AFLAC (representative Soteria Mallard)	352-317-3835
Term Life Insurance	
Sun Life Financial	1-800-733-7879
Vision Care Plan	
Humana VCP	1-800-865-3676
Flexible Spending Accounts	
Voya	1-888-401-3539 www.voya.com
Employee Assistance Program (EAP)	
Clinical Psychology Association of North Florida	352-336-2888
LegalShield	
Member Services LegalShield DSK Law	1-800-654-7757 407-422-2454