City of Gainesville
2026 Open Enrollment

Open Enrollment is Monday, Oct. 13-Friday, Oct. 31, with benefits effective Thursday, Jan. 1, 2026

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Important reminders!

Open Enrollment for the 2026 Plan Year is available Oct. 13-31, 2025

Benefit elections, changes and any dependent documents must be submitted no later than Friday, Oct. 31, 2025

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 four hours from Fridays at 2 a.m. (EST) through Saturdays at 6 a.m.

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 Choice PPO and BlueDental CoPayment Update

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 or re-enroll in a Flexible Spending Account (FSA). **You must re-enroll in an FSA every plan year.**
- ☐ 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 rep for your rate,

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

- ☐ I currently cover a spouse/other eligible individual under my health benefits, and I want to continue their coverage in 2026.
- ☐ I do not want to make any changes and want to keep the exact same coverage in 2026.
- ☐ I do not want to continue or enroll in a Flexible Spending Account (FSA) for 2026.

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.

Open Enrollment 101

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

- If you were hired between Oct. 1-Dec. 31, 2025, 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 after Oct. 14, 2025, 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 2025 and your Open Enrollment benefits are effective as of Jan. 1, 2026.
- 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 change your current benefits (minus Flexible Spending Accounts), you do not need to enroll online via Workday.
- 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 2026.

When are my Open Enrollment elections effective?

- Benefits for 2026 are effective Jan. 1, 2026.
- 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 elections to determine if changes are needed. If changes are needed, enroll via Workday. If no changes are needed, there is no need to enroll via Workday and your benefits will remain the same, minus the FSAs.
- Verify current dependents are eligible to enroll in respective benefits (benefits for dependents terminate at age 26). If dependents need to be added or deleted, you must enroll for your 2026 benefits via Workday and make the changes.
- Check your beneficiary information on all relevant benefits to make sure it is up-to-date
  - Group Life (add or change beneficiary via Workday)
  - Pension (add or change beneficiary via Workday)
  - 457 and Roth IRA (add or change with MissionSquare and on Workday)
- Supplemental life (enroll online via Workday)
- 457 and IRA accounts: enroll online through Workday for 457 accounts; enroll online through Workday and MissionSquare for IRAs. Go to page 23 for more information.
- If you wish to start or keep a Flexible Spending Account (FSA), please enroll via Workday or you **will not have one for 2026**. Please remember that you must have completed probation by the end of Open Enrollment to enroll in an FSA.
- Ensure all personal information is up-to-date in Workday and if changes need to be made, please do so in Workday.
- **If you are on leave, FMLA, vacation, absent and/or otherwise not at work, and wish to have benefits, please enroll in your benefits via Workday or you will not have benefits for 2026.** Workday may be accessed from any computer, as well as the Workday mobile app. Please remember to submit all supporting documents by Oct. 31, 2025 to avoid invalid enrollments.

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 your 2026 benefit options.

Health Insurance
Florida Blue
- Blue Options

Dental Insurance
Florida Combined Life
- Choice
- CoPayment
- DHMO (Blue Dental Prepaid)

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 $3,300*
(Must have passed probation)
- Dependent Care-Max is $7,500*
(Must have passed probation)

** increased from 2025*

Legal Plan & Identity Theft
LegalShield
- Comprehensive Legal Plan
- Identity Theft

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 [GG Employees Only] (A certified domestic partnership affidavit must be completed and notarized at the Risk Management office no later than Oct. 31, 2025. Must show proof of 12-months 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 (as long as 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

- Never-married, dependent children of the employee or employee's spouse who are under 21 and living at home
- Children under age 18 for whom the employee or employee's spouse is the legal guardian
- Full-time, never-married students under 23 years old, if the student is a dependent of the employee or employee's spouse
- Any dependent child, regardless of age, who is incapable of sustaining employment because of mental or physical disability and who is chiefly dependent on the employee or employee's spouse for support

IDShield

- Dependents under the age of 18
- Dependents between the ages of 18-26 (living at home or a full-time student or have never been married are still able to receive credit restoration services)

Dependent Eligibility Documentation Requirements

Dependents	Documentation Required
For Spouse	Copy of marriage certificate and copy of Social Security card. If previously married, copy of death certificate or divorce decree.
For Removal of Spouse/Child	None at Open Enrollment. Court decree within 30 days of decree during the contract year.
For Natural Child(ren)	Child's birth certificate (showing the parent-child relationship to employee/retiree and/or spouse) and copy of Social Security card.
For Adopted Child(ren)	Placement papers signed by the courts, child's birth certificate and copy of Social Security card.
For 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 USA, child's birth certificate and copy of Social Security card.
For 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.
For 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.
For Guardianship	Court ordered guardianship, birth certificate and copy of Social Security card.
For 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 or during the next Open Enrollment. 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 2026.

If hired between Oct. 1 and Nov. 1, 2025, you will need to make your elections via Workday for benefits to take effect Nov. 1, 2025 or Dec. 1, 2025. If you do not enroll in 2026 benefits, you will not have coverage for 2026. If you do not want coverage for 2025, but want benefits during 2026, please complete the Open Enrollment process.

Vision

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

Bi-Weekly Premiums and Summary of Services

Biweekly premium	**$3.00 for the employee only**	**$8.13 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. BlueOptions 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.

2026 Bi-Weekly Premiums - Employee Pays

	Employee	Employee +Spouse	Employee +1 Child	Employee + 2 more (Family)
Full-time (40 hours)	$69.22	$317.43	$214.77	$400.29
Half-time (20 hours)	$218.31	$522.65	$369.84	$667.93
3/4 time (30 hours)	$143.77	$420.04	$292.31	$534.11

Bi-Weekly Premiums - City Pays

	Employee	Employee + Spouse	Employee + 1 Child	Employee + 2 more (Family)
Full-time (40 hours)	$313.10	$430.90	$326.65	$562.05
Half-time (20 hours)	$164.01	$225.73	$170.58	$294.41
3/4 time (30 hours)	$238.55	$328.34	$248.11	$428.23

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.

2026 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
Half-time (20 hours)	$184.26	$454.23	$321.24	$579.98
3/4 time (30 hours)	$109.95	$351.62	$243.58	$446.16

Bi-Weekly Premiums - City Pays

	Employee	Employee + Spouse	Employee + 1 Child	Employee + 2 more (Family)
Full-time (40 hours)	$312.14	$430.95	$322.15	$562.05
Half-time (20 hours)	$163.52	$225.22	$167.83	$294.41
3/4 time (30 hours)	$237.83	$328.34	$245.49	$428.23

Blue Options Health Plan Comparison

Deductibles	Option 03359 Family is 3 or more members		Option 05774 Per person, per calendar year	
Plan Feature	**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	
Service	**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

Therapy Services	Option 03359		Option 05774	
Service	**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
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	
Service	**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	
Service	**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

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

Outpatient and Emergency Services	Option 03359		Option 05774	
Plan Feature	**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	Option 03359		Option 05774	
Service	**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
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**
The following services are not available under Option 03359 (neither in-network nor out-of-network): • 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	The following services are not available under Option 05774 (neither in-network nor out-of-network): • 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 to its employees. You are encouraged to evaluate each of the three plans carefully in order to choose the plan that best suits your specific needs.

Biweekly rates	Employee	Employee +Spouse	Employee +1 Child	Employee +Children	Family
BlueDental DHMO	$6.51	$11.20	$11.20	$17.24	$17.24
BlueDental CoPayment	$8.49	$18.57	$22.77	$22.77	$33.79
BlueDental Choice PPO	$12.42	$23.59	$29.67	$29.67	$40.85

BlueDental Care Prepaid (DHMO)-F series

The least expensive of the three plans is the BlueDental Care Prepaid (DHMO). This plan offers limited benefits and a limited provider network.

This plan requires the member to select a general dentist from the BlueDental Prepaid provider list and see that provider for all dental care. Once a dentist is chosen, employees must call DHMO customer service (877-325-3979, opt. 1) to have them assign this dentist to you. If the enrollee uses a different provider than assigned, the plan provides no benefit. Members have the option of changing their primary dental provider once every 30 days, if desired.

The member is only responsible for the applicable copayment for covered services. The plan has no waiting periods for major services, and it does not cover orthodontics.

BlueDental Prepaid (DHMO)	In-Network	Out-of-Network
Calendar Year Deductible (CYD)	$0	No coverage
Preventative services	$0	No coverage
Basic services	See the fee schedule on pgs. 16-17	No coverage
Major services	See the fee schedule on pgs. 16-17	No coverage
Orthodontic services	25% discount for adults and children	No coverage
Waiting period	None	No coverage
Annual maximum	None	No coverage

BlueDental Choice PPO

The BlueDental Choice PPO plan offers a wide variety of benefits and the largest provider networks. Enrollees have the freedom to use any dental provider they choose. The plan pays a higher percentage when services are rendered by a participating provider. The member may experience balance billing for all amounts not paid by the plan when using a non-participating provider.

Participating dental providers are responsible for submitting all claim forms for services provided. The member is responsible for filing all claims for services received from a non-participating provider. The plan has no waiting periods for major services, and it does not cover orthodontics.

BlueDental Choice PPO	In-Network	Out-of-Network
Calendar Year Deductible (CYD)	$50	$50
Preventative services	$0	20% of allowance, plus balance billing
Basic services	20% of allowance	50% of allowance, plus balance billing
Major services	50% of allowance	60% of allowance, plus balance billing
Orthodontic services *for children age 19 years or younger only*	50% of first allowable $1,000, then 100% of the balance	No coverage
Waiting period	none	none
Annual maximum	$1,500	$1,500

BlueDental CoPayment

The BlueDental Choice Copayment plan offers a wide variety of benefits and a moderate provider network. Enrollees have the freedom to use any dental provider they choose. However, the plan rewards members for using a participating provider with a well-defined copayment fee schedule. Participating dental providers are responsible for submitting all claim forms for services provided.

Services received from a non-participating provider are paid at a percentage of allowed charges and the member is responsible for all amounts not paid by the plan. The member is responsible for filing all claims for services received at a non-participating provider.

The plan has no waiting periods for major services, and it does not cover orthodontics.

BlueDental CoPayment	In-Network	Out-of-Network
Calendar Year Deductible (CYD)	$50	$50
Preventative services	$10	30% of allowance, plus balance billing
Basic services	See the fee schedule on pg. 18	50% of allowance, plus balance billing
Major services	See the fee schedule on pg. 18	65% of allowance, plus balance billing
Orthodontic services *for children age 19 years or younger only*	Cost minus $1,000	No coverage
Waiting period	none	none
Annual maximum	$1,500	$1,500

BlueDental Care

Group Plan P220
Benefits Schedule

THIS IS A PREPAID LIMITED DENTAL PLAN ISSUED BY FLORIDA COMBINED LIFE INSURANCE COMPANY, INC. UNDER CHAPTER 636, FLORIDA STATUTES

These copayments are the maximum fees that will be charged by participating General Dentists for the specified covered services.

ADA Code	Procedure	Patient Pays $
Appointments		
9310	Consultation (diagnostic service provided by dentist other than practitioner providing treatment)	15
9430	Office Visit (normal hours)	5
9440	Office Visit (after regularly scheduled hours)	35
9999	Emergency visit during regularly scheduled hours, by report	20
9999	Broken appointments (without 24 hr notice, per 15 min) Maximum $40 per broken appointment. No charge will be made due to emergencies	10
Diagnostic		
120	Periodic oral evaluation	0
140/150/160	Limited/Comprehensive oral evaluation	0
145	Oral eval for patient under 3 yrs. old and counseling w/ primary caregiver	0
180	Comprehensive periodontal evaluation	10
210	X-Ray Intraoral - complete series Including bitewings	0
220	X-Ray Intraoral - periapical first film	0
230	X-Ray Intraoral - periapical- each additional file	0
270	X-Ray Bitewing – single film	0
272	X-Ray Bitewings – two films	0
273	Bitewings – three films	0
274	Bitewings – four films	0
330	Panoramic film	0
460	Pulp vitality tests	0
470	Diagnostic casts	0
Preventive Care		
1110/1120	Prophylaxis - adult/child - routine (once ev. 6 months)	0
1110/1120	Prophylaxis - adult/child - (additional)	20
1201	Topical application of fluoride (including prophylaxis) child (up to 16 years of age)	0
1203	Topical application of fluoride (not including prophylaxis) child (up to 16 years of age)	0
1330	Oral hygiene instruction	0
1351	Sealant – per tooth	10
1510	Space Maintainer – fixed – unilateral	45+Lab
1515	Space Maintainer – fixed – bilateral	45+Lab
1520	Space Maintainer removable – unilateral	85+Lab
1525	Space Maintainer removable – bilateral	85+Lab
1550	Recementation of space maintainer	10
Restorative		
2140	Amalgam – one surface, primary or permanent	0
2150	Amalgam – two surfaces, primary or permanent	0
2160	Amalgam – three surfaces, primary or permanent	0
2161	Amalgam – 4+ surfaces, primary or permanent	0
2940	Sedative filing	15
2999	Sedative base (under fillings), by report	0
Restoration		
2330	Resin – one surface, anterior	35
2331	Resin – two surfaces, anterior	40
2332	Resin – three surfaces, anterior	50
2391	Resin-based composite – one surface, posterior	60
2392	Resin-based composite – two surfaces, posterior	80
2393	Resin-based composite – 3 surfaces, posterior	100
2394	Resin-based composite – 4+ surfaces, posterior	120
2510	Inlay – metallic – one surface	95
2520	Inlay – metallic – two surfaces	105
2530	Inlay – metallic – three or more surfaces	130
Crown & Bridge		
2740	Crown – porcelain/ceramic substrate	280+ Lab
2750*	Crown – porcelain fused to high noble metal	280
2751	Crown – porcelain fused to predominantly base metal	280
2752*	Crown – porcelain fused to noble metal	280

ADA Code	Procedure	Patient Pays $
Crown & Bridge (cont)		
2790*	Crown – full cast high noble metal	280
2791	Crown – full cast predominantly base metal	280
2792*	Crown – full cast noble metal	280
2910	Recement inlay	15
2920	Recement crown	15
2930	Prefab stainless steel crown – primary tooth	75
2950	Core build-up, including any pins	45
2951	Pin retention – per tooth	15
2952	Cast post and core in addition to crown	90+Lab
2953	Each additional cast post – same tooth	90+Lab
2954	Prefabricated post and core in addition to crown	90
2962	Labial veneer (porcelain laminate) - laboratory	280+ Lab
Endodontics		
3220	Therapeutic pulpotomy	35
3221	Pulpal debridgement, primary and permanent teeth	100
3310	Root canal therapy – anterior (excluding final restoration)	100
3320	Root canal therapy – bicuspid (excluding final restoration)	200
3330	Root canal therapy – molar (excluding final restoration)	250
3410	Apicoectomy/periradicular surgery – anterior	125
Periodontics (Gum Treatment)		
4210	Gingivectomy/gingivoplasty – 4+ teeth per quad	125
4211	Gingivectomy/gingivoplasty – 1-3 teeth per quad	40
4341	Periodontal scaling and root planing - 4+ teeth per quad	50
4342	Periodontal scaling and root planing - 1-3 teeth per quad	50
4355	Full mouth debridgement to enable eval and diagnosis	45
4381	Localized delivery of antimicrobial agents (per tooth)	45
4910	Periodontal maintenance	50
Prosthodontics		
5110	Complete denture – maxillary	300+Lab
5120	Complete denture – mandibular	300+Lab
5130	Immediate denture – maxillary	300+Lab
5140	Immediate denture – mandibular	300+Lab
5211	Maxillary partial denture – resin base	300+Lab
5212	Mandibular partial denture – resin base	300+Lab
5213	Maxillary partial denture – cast metal framework, resin denture bases	300+Lab
5214	Mandibular partial denture – cast metal framework, resin denture bases	300+Lab
5410	Adjust complete denture – maxillary	15
5411	Adjust complete denture – mandibular	15
5421	Adjust partial denture – maxillary	15
5422	Adjust partial denture – mandibular	15
Repairs to Prosthetics		
5510	Repair broken complete denture base	15+Lab
5520	Replace missing or broken teeth - complete denture (each tooth)	15+Lab
5610	Repair resin denture base	15+Lab
5630	Repair or replace broken clasp	15+Lab
5640	Replace broken teeth – per tooth	15+Lab
5650	Add tooth to existing partial denture	30+Lab
5730	Reline complete maxillary denture (chairside)	50
5731	Reline complete mandibular denture	50
5740	Reline maxillary partial denture (chairside)	50
5741	Reline mandibular partial denture (chairside)	50
5750	Reline complete maxillary denture (laboratory)	35+Lab
5751	Reline complete mandibular denture (laboratory)	35+Lab
5760	Reline maxillary partial denture (laboratory)	35+Lab

(The information provided above is the Benefits Schedule for Certificate of Coverage 50480-1102 SR. It 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.)

ADA Code	Procedure	Patient Pays $
Repairs to Prosthetics (cont.)		
5761	Reline mandibular partial denture (laboratory)	35 + Lab
5850	Tissue conditioning – maxillary	30
5851	Tissue conditioning – mandibular	30
Prosthetics (Fixed)		
6210*	Pontic – cast high noble metal	280
6211	Pontic – cast predominantly base metal	280
6212*	Pontic – cast noble metal	280
6240*	Pontic – porcelain fused to high noble metal	280
6241	Pontic – porcelain fused to predominantly base Metal	280
6242*	Pontic – porcelain fused to noble metal	280
6750*	Crown – porcelain fused to high noble metal	280
6751	Crown – porcelain fused to predominantly base metal	280
6752*	Crown – porcelain fused to noble metal	280
6790*	Crown – full cast high noble metal	280
6791	Crown – full cast predominantly base metal	280
6792*	Crown – full cast noble metal	280
6930	Recement fixed partial denture (per unit)	10
Extractions/Oral and Maxillofacial Surgery		
7111	Coronal Remnants, deciduous tooth	0
7140	Extraction, erupted tooth or exposed root	0
7210	Surgical removal of erupted tooth	40
7220	Removal of impacted tooth – soft tissue	50
7230	Removal of impacted tooth – partially bony	70
7240	Removal of impacted tooth – completely	85
7250	Surgical removal of residual tooth roots	35
7310	Alveoloplasty in conjunction with extractions - per quadrant	35
7320	Alveoloplasty not in conjunction with extractions - per quadrant	70
7510	Incision and drainage of abscess – intraoral	25
Adjunctive General Services		
9215	Local anesthesia	0
9230	Analgesia (nitrous oxide – per 15 minutes)	15
9450	Case presentation, detailed and extensive treatment planning	0
9951	Occlusal adjustment – limited	25
9952	Occlusal adjustment – complete	150

*** THESE COPAYMENTS DO NOT INCLUDE THE ADDITIONAL COST OF PRECIOUS (HIGH NOBLE) AND SEMIPRECIOUS (NOBLE) METAL.**

THE ADDITIONAL COST OF PRECIOUS METAL SHALL NOT EXCEED $125 PER UNIT AND $75 PER UNIT FOR SEMIPRECIOUS METAL.

NOTE:

1. **NOT ALL PARTICIPATING DENTISTS PERFORM ALL LISTED PROCEDURES, INCLUDING AMALGAMS. PLEASE CONSULT YOUR DENTIST PRIOR TO TREATMENT FOR AVAILABILITY OF SERVICES.**

2. **WHEN CROWN AND/OR BRIDGEWORK EXCEEDS SIX UNITS IN THE SAME TREATMENT PLAN, THE PATIENT MAY BE CHARGED AN ADDITIONAL $50.00 PER UNIT.**

SPECIALISTS

Should you need a specialist, (i.e., Endodontist, Orthodontist, Oral Surgeon, Periodontist, Prosthodontist, Pediatric Dentist* *), you may be referred by your participating general dentist, or you may refer yourself to any participating specialist. Upon identification of yourself as an FCL member, you will receive a 25% reduction from usual and customary fees for covered service performed. Specialist services are available only in areas where the dental plan has a participating specialist.

* * Limited to treatment of children up to age 11.

Limitations and Exclusions

1. No service of any dentist other than a participating general dentist or participating specialist will be covered by FCL, except out-ofarea emergency care as provided in the certificate.

2. FCL does not provide coverage for the following services:
   a) Cost of hospitalization and pharmaceuticals, drugs or medications.
   b) Services which in the opinion of the participating general dentist or participating specialist are not needed to establish and/or maintain the member's good oral health.
   c) Any service that is not consistent with the normal and/or usual services provided by the participating general dentist or participating specialist or which in the opinion of the participating general dentist or participating specialist would endanger the health of the member.
   d) Any service or procedure which the participating general dentist or participating specialist is unable to perform because of the general health or physical limitations of the member.
   e) Any dental treatment started prior to the member's effective date for eligibility of benefits.
   f) Services for injuries and conditions which are covered and paid for under Workers' Compensation or employers' liability laws.
   g) Treatment for cysts, neoplasms and malignancies.
   h) General anesthesia.

Florida Combined Life

An Independent Licensee of the Blue Cross and Blue Shield Association

16485-1114R KTx

BlueDental Choice PPO

Benefit Summary

Group Name: CITY OF GAINESVILLE

Group Anniversary Date: 1/1

Florida Combined Life

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			
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			
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	Child(ren) to age 19			
BlueDental Coverage	50%		50%	
Waiting Periods	None			
Major Service Benefits	None			
None Orthodontia Benefits				
Maximum Benefits				
Plan Year (per person)	$1,500		$1,500	
Lifetime Orthodontia (per person)	$1,000		$1,000	
Dental Rollover	No			

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

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

BlueDental Choice Copayment

Benefit Summary

Florida Combined Life

An Independent Licensee of the Blue Cross and Blue Shield Association

Group Name: CITY OF GAINESVILLE
Group Anniversary Date: 1/1

Deductible	**In-Network**	**Out-of-Network**
No Deductible for Preventive Services (or ortho if selected)		
Per Person Per Calendar Year	$ 50	$ 50
Per Family Per Calendar 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(ren) to age 19
BlueDental Coverage	50%
Waiting Periods	
Major Service Benefits	None
Orthodontia Benefits	None
Maximum Benefits	
Plan Year (per person)	$1,500
Lifetime Orthodontia (per person)	$1,000
Dental Rollover	No

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

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

LegalShield®
Worry Less. Live More.

HAVE YOU EVER?

- ☐ Needed your will prepared or updated
- ☐ Been overcharged for a repair or paid an unfair bill
- ☐ Had trouble with a warranty or defective product
- ☐ Signed a contract
- ☐ Received a moving traffic violation
- ☐ Had concerns regarding child support
- ☐ Worried about being a victim of identity theft
- ☐ Been concerned about your child's identity
- ☐ Lost your wallet
- ☐ Worried about entering personal information online
- ☐ Feared the security of your medical information
- ☐ Been pursued by a collection agency

WHAT IS LEGALSHIELD?

LegalShield was founded in 1972, with the mission to make equal justice under law a reality for all North Americans. The 3.5 million individuals enrolled as LegalShield members throughout the United States and Canada can talk to a lawyer on any personal legal matter, no matter how trivial or traumatic, all without worrying about high hourly costs. LegalShield has provided identity theft protection since 2003 with Kroll Advisory Solutions, the world's leading company in ID Theft consulting and restoration. We have safeguarded over 1 million members, provided more than 200,000 identity consultations, and helped restore nearly 10,000 individual identities.

THE LEGALSHIELD® MEMBERSHIP INCLUDES:

- ✓ Legal advice - personal and business legal issues*
- ✓ Letters/ calls made on your behalf*
- ✓ Contracts & documents reviewed (up to 10 pages)*
- ✓ Lawyers prepare your Will, your Living Will and your Health Care Power of Attorney,
- ✓ Moving Traffic Violations (available 15 days after enrollment)
- ✓ IRS Audit Assistance
- ✓ Trial Defense (if names defendant/ respondent in a covered civil action suit)
- ✓ 25% Preferred Member Discount (Bankruptcy, Criminal Charges, DUI, Other Matters, etc.)
- ✓ 24/7 Emergency Access for covered situations
- ✓ Residential Mortgage Document assistance
- ✓ Assistance with Uncontested Separation, Divorce, Name Change, and Adoption

LegalShield legal plans cover the member; member's spouse/partner; never married dependent children under 21 living at home; dependent children under age 18 for whom the member is the legal guardian; never married, dependent children up to age 23 if a full-time college student; and physically or mentally disabled dependent children.

THE IDSHIELD℠ MEMBERSHIP INCLUDES:

Privacy Monitoring
Monitoring your name, SSN, date of birth, email address (up to 10), phone numbers (up to 10), driver license & passport numbers, and medical ID numbers (up to 10) provide you with comprehensive identity protection service that leaves nothing to chance.

Security Monitoring
SSN, credit cards (up to 10), and bank account (up to 10) monitoring, sex offender search, financial activity alerts and quarterly credit score tracking keep you secure from every angle. With the family plan, Minor Identity Protection is included and provides monitoring for up to 8 children under the age of 18.

Consultation
Your identity protection plan includes 24/7/365 live support for covered emergencies, unlimited counseling, identity alerts, data breach notifications and lost wallet protection.

Full Service Restoration
Complete identity recovery services by Kroll Licensed Private Investigators and our $5 million service guarantee ensure that if your identity is stolen, it will be restored to its pre-theft status.

Family IDShield plan covers the member; member's spouse/partner; never married, dependent children and full-time college students up to age 26. Dependents will receive unlimited consultation and complete restoration benefit. Monitoring is not available for dependents between age 18-26.

Payroll Deduction *(Biweekly)*	**Individual**	**Family**
LegalShield	$7.27	$7.27
IDShield	$3.90	$7.36
Combined	$11.17	$13.25

This is a general overview and is for illustrative purposes only. Plans and services vary from state to state. See a plan consultant for your state of residence for complete terms, coverage, amounts, conditions and exclusions.

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 your 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 age-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 live birth but 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. Please 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 (outside of new hire) or increasing a spouse's coverage amount
- Increasing a current policy (employee) by more than a $10,000 increment
- Increasing by $10,000 and you are enrolled in a policy over $150,000
- Increasing a current policy (child)
- 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 24-4 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 of 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 prior to 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 employees 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 Jan. 1, 2026. The annual maximum allowed for 2026 is $3,300.

In order to be eligible for reimbursement, services must be performed/received between Jan. 1, 2026 and March 15, 2027 and while you are an active participant in the account. All claims for reimbursement must be submitted to Voya no later than May 31, 2026. 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.

Some examples of common expenses you might have are:

- Calendar year deductibles
- Copayments and co-insurance
- Prescriptions
- Hearing aids
- Dental fees and services and/or orthodontic fees
- 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 cost of summer camp tuition if it is a day camp.
- 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.

Retirement Planning

City Defined Benefit Pension Plans

The City of Gainesville maintains two defined benefit pension plans for its employees. The Consolidated Police Officers' and Firefighters' Retirement Plan covers any full-time regular employee who is certified as a firefighter as a condition of employment or any full-time regular employee who is certified or required to be certified as a law enforcement officer for the City of Gainesville. All other regular employees of the City of Gainesville are covered under the Employees' Pension Plan.

Participation in either pension plan requires a mandatory contribution from both the employee and the City of Gainesville. The city takes responsibility for producing the needed level of investment returns to meet the current and future pension benefit obligation of its retirees. Currently employees covered by the Consolidated Police Officers' Plan contribute 7.5% and employees in the Consolidated Firefighters' Retirement Plan contribute 9% of earnings during participation in the plan. Those covered by the Employees' Pension Plan are required to contribute 5% of earnings during participation in the plan. Contributions cease when an employee enters the Deferred Retirement Option Program (DROP). Those hired after Oct. 1, 2012 are not eligible for DROP.

These plans are tax-qualified defined benefit plans. Because the plans are tax-qualified, you will not pay any income tax currently on the contributions you make to that plan. Instead, you will be taxed when you receive benefits under the plans, at which time you may be in a lower tax bracket than during your peak earning years. Because the plans are defined benefit plans, your ultimate benefit depends upon factors such as your compensation level, years of service, and the form in which your benefits are paid.

The plans are designed to provide a measure of economic security for retirement in addition to that provided by Social Security and your own 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.

Although both plans are very similar in how they work, each plan has different criteria to define eligibility, plan multipliers for benefit calculation, COLA eligibility and DROP eligibility.

Summary Plan Descriptions for all plans are located on the City of Gainesville website, under the Financial Services Department, at www.GainesvilleFL.gov 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 Saving (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 goes in tax-free, and the earnings on the account grow tax-free. The best part is, when you make a withdrawal for qualified medical, dental, vision or long-term care expenses, the reimbursements from the account are tax-free.

A qualified expense is any out-of-pocket expense related to your health plan such as a deductible, co-pays, non-cosmetic dental and vision services. Reimbursement can be made for the account holder and any eligible dependents. The money in the account can start being withdrawn when the employee retires (or leaves employment).

457 Deferred Compensation Plan

In addition to the city's pension plan, employees may also contribute to a 457 Deferred Compensation Plan to help build additional income for retirement. Employees can save tax-deferred money for retirement with the convenience of pretax payroll deductions. Contributions are taxed only upon withdrawal from your account and there is no penalty associated with the withdrawal of your 457 money after leaving employment. Withdrawal may not be made while you are still employed except under an extreme hardship condition as defined by the IRS. You control your investments and have several investment options available to you. Annual maximum regular contributions are presently $23,500.

If you are over the age of 50, you may contribute an additional $7,500 per year. There is also a catch-up provision available to those who are within four years of normal retirement. The SECURE 2.0 Act of 2022 allows individuals between 60-63-years-old to make additional contributions, equal to $11,250 or 150% of the catch-up amount (whichever is greater).

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

Starting January 2026, anyone contributing to a **457 catch-up plan** who earned more than $145,000 in the previous year, your catch-up contributions will be contributed as *after-tax* dollars.

Roth 457

Employees may continue to contribute to a Roth 457 for 2026. In addition to potentially tax-free distributions in retirement, the ability to make Roth contributions to your 457 plan has the following benefits:

- **Higher after-tax contribution limits than Roth IRAs:** 457 plans allow for greater after-tax savings.
- **Eligibility at all income levels:** Unlike Roth IRAs, everyone with earned income is eligible to make Roth contributions to a 457 plan.
- **Tax planning:** Having both pre-tax assets and Roth assets available in retirement can be a valuable benefit, allowing you to choose the source of funds most advantageous to your situation at the time of the distribution.

The maximum contribution and guidelines for the Roth 457 and the pre-tax 457 are the same. You may enroll in both accounts, but the total in contributions is still $23,500 or for the catch-up plans, $31,000.

Roth IRA*

Employees are also able to contribute to a Roth IRA through payroll deduction. Contributions in a Roth IRA are made after taxes; however, the growth is tax free and, if the account is held for five years and you are age 59 1/2, you will not pay taxes on the amount you withdraw from your account. At any time, the Roth IRA owner may withdraw up to the total contributions (in nominal dollars) without penalty. Withdrawal of the earnings prior to the above-mentioned rules will result in federal income tax plus a 10% penalty on the amount. You control your investments and have several investment options available to you. Regular contributions are currently $7,000. If you are at least 50 years old, you may contribute an additional $1,000. Contributions can only be made as a set dollar amount.

* **Enrolling in Roth IRA:** If you are enrolling in an IRA, please make sure you enroll on Mission Square's website (www.missionsq.org) first, and **then** enroll in Workday or your election cannot be honored.

Important note: Any contribution changes made on Mission Square's website also needs to be made in your Workday account. If you need 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 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 benefits will terminate at the end of the month of employment termination. 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 period may also be extended if other events (such as a death or divorce) occur during that 18-month period. Dependents who no longer qualify as dependents under the City of Gainesville Health Plan are eligible to apply for continuation of coverage. If you should die or become divorced, and if your spouse and dependents are covered by the City of Gainesville Health Plan at that time, they are entitled to continue health coverage for up to 36 months. If you have a newborn child, adopt a child or have a child placed in your home (for whom you have legal financial responsibility), while your COBRA continuation is in effect, you may add this child to your coverage.

When Coverage Ends

If you or covered members of your family become entitled to Medicare or are covered under another employer-sponsored health plan, which does not limit coverage due to preexisting conditions, the continuation coverage from the City of Gainesville Health Plan will cease. In addition, your coverage will cease if the City of Gainesville should terminate the Health Plan or you cease to pay premium. Once the period of coverage continuation has expired, anyone receiving continuation coverage will be eligible to convert to individual policies, as provided under the City of Gainesville 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
- MLK's Birthday
- Memorial Day
- Juneteenth
- July Fourth
- Labor Day
- Veterans Day
- Thanksgiving Day
- Day after Thanksgiving
- 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 the Alliance 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	
Continuous Service	**Accrual Rates**
0-5 years	6 hours and 10 minutes
5-10 years	7 hours and 42 minutes
10-15 years	8 hours and 37 minutes
15-20 years	9 hours and 14 minutes
20-25 years	10 hours and 28 minutes
25 years or more	10 hours and 47 minutes

FOP and PBA Police Department	
Continuous Service	**Accrual Rates**
1-5 years	80 hours
5-10 years	96 hours
10-15 years	120 hours
15-20 years	136 hours
20-25 years	168 hours
25 years or more	176 hours

*CWA employees only have access to a total of 24 hours PTO 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 42-hour employees**	**Accrual Rates 42 hour IAFFDC employees**
1-5 years	80 hours/year	3.70 hours/pay period
5-10 years	100 hours/year	4.32 hours/pay period
10-15 years	120 hours/year	5.23 hours/pay period
15-20 years	140 hours/year	5.85 hours/pay period
20-25 years	160 hours/year	7.08 hours/pay period
25 years or more	160 hours/year	7.40 hours/pay period

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.-5:30 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
- **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

Medical	
Florida Blue - BlueOptions PPO	1-800-664-5295 www.FloridaBlue.com
Dental	
Florida Combined Life BlueDental Care Prepaid - DHMO Plan BlueDental Co-payment and Choice PPO Plans	www.FloridaBlue.com 1-877-325-3979 1-888-223-4892
457 Deferred Compensation, Roth IRA, Retiree Health Savings	
Mission Square 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