benefits benefits GUIDE 2018



Contacts

Medical	800-352-2583	ID Card		
Florida Blue / Blue Options Network Group #13902	www.floridablue.com Member Login > Tools > Find a Doctor and More	Yes		
BlueCard Program National and Worldwide Coverage	800-810-BLUE (2583) http://provider.bcbs.com			
Care Consultants Know Before You Go	888-476-2227 / <u>www.floridablue.com</u> Member Login > Tools > Compare Medical Costs or Compare Drug Prices	No (same as medical ID)		
CareCentrix Durable Medical Equipment	877-561-9910			
Prescription	800-352-2583			
Florida Blue / Prime Therapeutics Blue Options Network Group #13902, Bin # 012833, PCN - FLBC Retail 90 Pharmacies	Mail-Order: 888-849-7845 Caremark Specialty: 866-278-5108 www.myprime.com www.floridablue.com	No (same as medical ID)		
	Member Login > Tools > Find a Doctor and More > Check "Extended Supply Network" box under Other Search Options			
Specialty Pharmacy	800-869-0479			
Dental	800-233-4013			
Humana / PPO Network / Group #677885	www.humana.com / Top Menu > Find a Dentist	Yes (Printable online)		
Vision	866-537-0229			
Humana / VCP Network / Group #677885	www.humanavisioncare.com / VCP Tools > Provider Locator	Yes (Printable online)		
FSAs and HRA	888-868-3539			
AmeriFlex	www.myameriflex.com	Yes		
Life and AD&D	800-247-6875			
Sun Life / Group #211866	www.sunlife.com/us Online EOI: https://www.sunlife-usa.net/eoi/	No		
Value-Added Services (at no additional cost)	Travel Assistance: 800-872-1414 Reference #: 01-AA-SUL-100101ID Theft Protection: 877-409-9597			
Short & Long Term Disability	800-247-8675			
Sun Life / Group #64435	www.sunlife.com/us Online EOI: https://www.sunlife-usa.net/eoi/	No		
Employee Assistance Program	800-624-5544			
New Directions Behavioral Health	www.ndbh.com, Company Passcode: SJCFL	No		
Wellness Program	904-209-0635			
BCC Human Resources	http://ec.sjcfl.us/home/Wellness			
Retirement	866-446-9377			
Florida Retirement System (FRS) Deferred Compensation 457(b) Lincoln Financial Group	www.myFRS.com 800-234-3500 www.LFG.com			
Human Resources				
Board of County Commissioners Tax Collector Clerk of Courts Supervisor of Elections Property Appraiser	904-209-0635 (Benefits option 5) 904-209-2286 904-819-3605 904-823-2238 904-827-5528			
Benefit Administration	904-461-1800			
The Bailey Group	Rachael Friedman: <u>rfriedman@mbaileygroup.com</u> Debbie Weiner: <u>dweiner@mbaileygroup.com</u>			
St. Johns County Web Resources	Employee Benefits: sjcbenefits.mbaileygroup.com			

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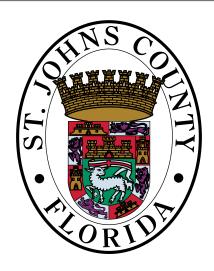
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Know the options for you and your family



Take control of your health, income protection, and self



This Benefits Guide provides an overview of the comprehensive benefits offered to employees of St. Johns County Board of County Commissioners. Included in this guide are summary explanations of benefits and costs, as well as contact information for each provider.

We encourage you to review each section and discuss your benefits with your family members. Be sure to pay close attention to dependent eligibility and required documentation, monthly premiums, co-pays, co-insurance and deductibles.

We are committed to bringing you the best possible benefits and hope this Benefits Guide will give you an overview of your benefits as an employee of St. Johns County and help prepare you for the enrollment process.

Note: We intend for this benefits guide to help you choose benefits offered by St. Johns County Board of County Commissioners. This benefits guide is not representative of all plan provisions or rules. Please refer to each plan document for a full explanation of benefits, which are available on Plan Source. Plan documents and rules prevail if there are any discrepancies with this benefits guide.

What's New for 2018?

Medical Plan Updates

- Increased monthly premium rates for Blue Options PPO Plan.
- New \$35 copay for primary and urgent care visits on Blue Options HDHP. Blue Options PPO primary and urgent care copay increasing to \$35.
- St. Johns County-funded Health Reimbursement Accounts (HRA) for employees enrolled in the Blue Options HDHP changed from a flat \$600 to tiered amounts:
 - o \$600 Employee Only
 - o \$1,000 Employee + Spouse
 - o \$1,000 Employee + Children
 - o \$1,500 Employee + Family

Spousal Surcharge

Beginning January 1, 2018, spouses of St. Johns County employees, covered under one of the St. Johns County medical plans, who work and are eligible for employer- sponsored medical insurance through their employer, will be charged \$100 a month toward the cost of medical insurance. This is in addition to the monthly medical premiums listed on the Monthly Rates page.

Adding an Eligible Family Member?

Documentation is required to add eligible family members to the St. Johns County Health Plan. If documentation is not provided, coverage for the added dependent(s) will be denied.

Documentation can now be uploaded directly in Plan Source during your enrollment (i.e. for new hires, life events, open enrollment). For more information on documentation view the <u>Eligibility for Coverage</u> page.

Contact and Beneficiary Information

Keep your mailing address and email current in Plan Source to ensure you receive timely important insurance information and tax documents such as W2's. Open Enrollment is a great time to <u>update</u> your beneficiaries.

New to Plan Source is an employee questionnaire for you to complete. You tell us how you prefer to receive information and updates - via text, email, or postal mail. This will help us provide information in the method you prefer.

Humana Vision Care Plan Updates

Our Humana Vision Care plan is now called <u>Humana Vision Refresh</u>. This new platform has a stronger wellness focus, and will include an additional diabetic eye exam, care and testing. All employees covered under the Vision Plan will receive a new vision ID card for 2018.

Another major change is that vision services have been updated to the Plan Year schedule. This means you do not have to wait 12 months in between eye exams or to order contacts.

Covering Spouses or Other Dependents

If you are eligible for coverage, you can also enroll your spouse and/or eligible dependent children for medical, prescription, dental, vision, and spouse and/or child life insurance. You must provide documentation proving that your dependents meet eligibility requirements.

Eligible dependents	Required documentation
Spouse: The Employee's spouse under a legally valid existing marriage.	Marriage Certificate AND current document establishing current relationship status (i.e. tax return, joint bill, insurance policy). Document MUST be dated within the last six (6) months.
Child(ren): The Employee's natural, newborn, adopted, Foster, or step child(ren) (or a child for whom the Employee has been court-appointed as legal guardian or legal custodian). Can be covered on the plan up to the end of the month in which they turn 26, or in the case of a foster child, is no longer eligible under the Foster Child Program.	Birth Certificate naming the employee as the child's parent OR appropriate court order/adoption decree naming the employee or employee's spouse as the child's legal guardian.
Stepchild(ren): The biological offspring or adopted child of an employee's eligible spouse. Can be covered on the plan up to the end of the month in which they turn 26.	Birth Certificate naming spouse as the child's parent AND above documentation required for a spouse.
Grandchild(ren): The newborn child of a Covered Dependent child. Coverage for such newborn child will automatically terminate 18 months after the birth of the newborn child.	Birth Certificate naming employee's dependent child as the parent
Handicapped Children: Children of any age who become totally and permanently disabled before age 26.	Proof of the disability will be a statement from the dependent's physician certifying that the dependent was incapacitated or disabled prior to the limiting age, is incapable of self sustaining employment by reason of mental or physical disability, and is fully dependent upon the contract holder for support.

You must submit required documentation for your eligible dependents within 30 days of enrolling. If documentation is not provided, coverage for the dependent(s) will be denied.

NOTICE: As prohibited by the rules of the program, the following acts will be treated as fraud or misrepresentation of material fact:

- falsifying dependent information or documentation
- · certifying ineligible persons as eligible
- enrolling ineligible persons in coverage
- falsifying the occurrence of life events or life event documentation
- failing to remove dependents from coverage within 30 days of when they lose eligibility

Such acts will require you to reimburse the plan for any claims incurred.

Legal and disciplinary action may be taken.

Enrolling for Benefits

Plan Source is the employee self-service, online portal for employees to enroll in all benefit plans. Once logged in, you will be able to see benefits offered to you and compare cost.

Current Employees: Mandatory Annual Open Enrollment is October 1 through October 31. Coverage elected during Annual Open Enrollment becomes effective on January 1.

New Hires: All new employees eligible for benefits will have 60 days from date of hire to complete the enrollment process.

Log on to https://benefits.plansource.com. Username is your first initial of your first name, first six letters of your last name, and last four of social. (Ex. jsmith0410). At the start of Open Enrollment, password will be reset to your date of birth in the YYYYMMDD format. For existing employees, select "Enroll - Annual"; new hires, select "Enroll - New Hire."

Step 1: Review the information and update your personal data.

The * indicates a required field. Remember to press "Continue" at the bottom of the page to proceed through the enrollment and only use the gray Plan Source "Back" button. Do NOT use the back button on your internet browser or your changes will be lost.

Step 2: If you need to add a dependent to your coverage, choose "Add Dependent" on the Update Dependent screen. You should verify/add all dependents, even if you are not enrolling them. If your desired election does not appear, or your dependent is not showing, you must go back to this section and add them.

Step 3: Continue through each screen including benefit offering, choosing your desired election under the appropriate plan, or declining the benefit entirely. If you elect coverage with dependents, check the box next to each dependent you would like to enroll.

Step 4: Upload the required documents if you added any dependents to your coverage.

Step 5: Once you have completed each benefit election, the Confirmation page will appear. Review for accuracy and choose "Confirm" at the bottom of the page. Your benefit election will <u>not</u> be complete until you hit the "Confirm" button.

Life Events:

You may add, drop, or change coverage or dependent coverage outside of Open Enrollment ONLY if you experience a qualifying life event.

Qualifying life events include: marriage, divorce, birth, adoption, or a gain/loss of coverage by your spouse or other dependent. It is required that you submit your qualifying life event through Plan Source and all supporting documents to your HR department within 30 calendar days of any change in status.

Log on to Plan Source, select "Make a Change to My Benefits." You will then be asked for the type of life event and the date of the event. The date of the event should be the date your coverage is to change. You must upload all documents in order for your event to be approved.

PLEASE NOTE: It may take up to 2 weeks for life events to be processed.

Choosing Your Medical Plan

800-352-2583 • www.floridablue.com

Health insurance is a way to pay for health care and protects you from paying the full costs of medical services when you become injured or sick. You choose a plan and pay a certain rate, or premium, each month. Both plan options, administered by Florida Blue, cover preventive care such as doctor visits and screenings, as well as hospital visits, ER trips, and even prescription drugs.



Do I have to use certain medical providers?

You can see any medical provider you choose, but **cost savings are highest** when you use a participating provider in Florida Blue's network. Both medical plan options use Florida Blue's Blue Options network.

Will I receive new Florida Blue medical ID cards?

You will only receive new ID cards if you are a new enrollee.

What is the benefit of the Health Reimbursement Account that comes with enrollment in the Blue Options HDHP?

The high deductible health plan (HDHP) offers lower premiums and higher deductibles than the Blue Options PPO plan. Enrolling in the HDHP automatically enrolls you in a Health Reimbursement Account (HRA), a reimbursement plan funded by St. Johns County. The HRA contribution will be pro-rated on a monthly basis for employees whose benefits become effective after January 1.

If you are enrolled in the Blue Options HDHP as of January 1, St. Johns County contributes to your HRA account based on health coverage tiers:

- \$600 Employee Only
- \$1,000 Employee + Spouse
- \$1,000 Employee + Children
- \$1,500 Employee + Family

What are some of the key plan terms I should know before electing a plan?

Calendar Year Deductible (CYD): The amount you pay before the health plan begins to pay for covered services. For example, if your deductible is \$1,500, the plan won't pay anything until you meet your deductible for covered health care services that are subject to the deductible.

Coinsurance: After you've met the CYD, coinsurance is the cost sharing between you and the plan. For example, with an in-network service, the plan pays 80% and you pay 20% (depending on your plan).

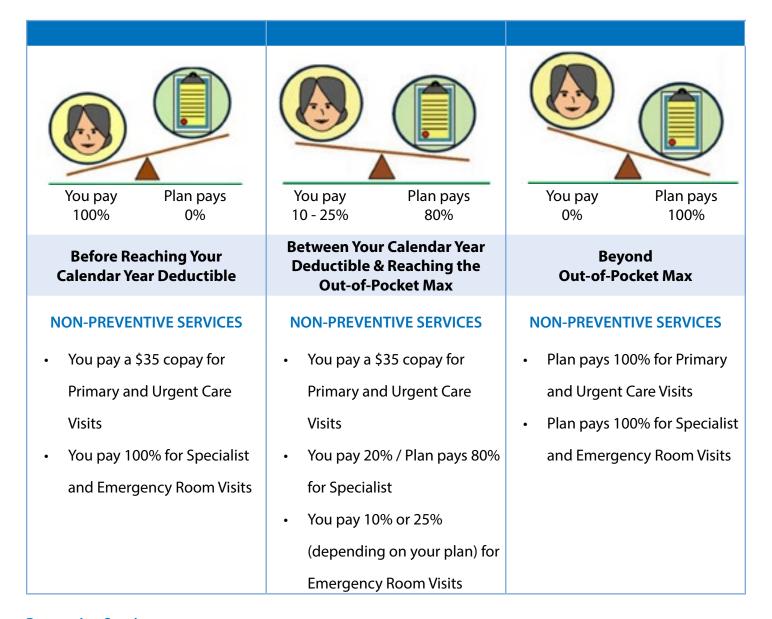
Out of Pocket Maximum: The most you will pay for covered expenses within a calendar year. The maximum never includes your premium or services the plan does not cover.

Copay: A fixed amount you owe at the time of a health care service. Copay amounts do not apply to CYD and you do not need to meet CYD first.

Premium: The amount deducted from your paycheck for your health plan coverage, along with the amount St. Johns County pays each month.

Understanding Your Medical Plan

When you have eligible in-network medical expenses:



Preventive Services:

Routine Wellness visits are covered by the plan 100%.

Prescription Costs:

You pay the copay which depends on the drug type and the plan pays the remaining cost.

Out-of-network medical expenses:

When you use out-of-network providers the percent you pay of the allowed amount for covered health care services will usually cost you more than if you had used an in-network provider.

2018 Monthly rates include:

Medical, Prescription, Dental and Vision

Blue Options PPO 03559

	Standard Monthly Rate	With PHA Credit 1 If EITHER Employee or Spouse Complete the PHA With PHA Credit 2 If BOTH Employee and Spouse complete the PHA		St. Johns County Contribution
Employee Only	\$100.00	\$ 50.00	N/A	\$937.50
Employee + Spouse	\$337.50	\$287.50 \$237.50		\$937.50
Employee + Child(ren)	\$262.50	\$212.50	\$212.50 N/A	
Employee + Family	\$495.00	\$445.00	\$395.00	\$937.50

Blue Options HDHP 05360

	Standard Monthly Rate	With PHA Credit 1 If EITHER Employee or Spouse Complete the PHA	With PHA Credit 2 If BOTH Employee and Spouse complete the PHA	St. Johns County Contribution	
Employee Only	\$ 50.00	\$ 0.00	N/A	\$937.50	
Employee + Spouse	\$200.00	\$150.00	\$100.00	\$937.50	
Employee + Child(ren)	\$150.00	\$100.00 N/A		\$937.50	
Employee + Family	\$280.00	\$230.00	\$180.00	\$937.50	

Blue Options HDHP / Health Reimbursement Account (HRA)

	St. Johns County Contribution
Employee Only	\$ 600.00
Employee + Spouse	\$1,000.00
Employee + Child(ren)	\$1,000.00
Employee + Family	\$1,500.00

Spousal Surcharge:

Spouses of St. Johns County employees who work and are eligible for employer-sponsored medical insurance through their employer will be required to pay \$100 monthly toward the cost of medical in addition to the rates listed above.

Personal Health Assessment Credit:

PHA credits for 2018 were earned through participation in the PHA program from October 1, 2016 through September 30, 2017. New hires and non-participating employees will not be eligible for the 2018 PHA credit. For more information regarding this program refer to the Personal Health Assessment guide, available through your HR department.

Medical Plan Comparison	Blue Options PPO			Blue (Blue Options HDHP					
Calendar Year Plan Benefits	ln-		Οι	ıt-of-	ln-		Οι	ıt-of-		
Calellual feat Flati Delletts	Netwo	rk	Net	twork	Networ	rk	Ne	twork		
Calendar Year Deductible (CYD) Per Individual/Family Aggregate	\$500/\$1,5	500	\$500/\$1,500		\$1,500/\$3,000		\$3,00	0/\$6,000		
Total Out-of-Pocket Maximum (Includes CYD, coinsurance, medical and										
prescription copays) Per Individual/Family Aggregate	\$3,000/\$9,	000	\$3.00	0/\$9,000	\$4,500/\$9,	000 5	59.000	0/\$18,000		
Coinsurance (Member Pays)	20%			10%	20%			40%		
Adult and Child Wellness Services (Preventive Care)	Covered 10	00%	4	·0%¹	Covered 10	00%	4	ł0%¹		
Mammograms / Routine Colonoscopy (Preventive Care)	Covered 10	00%	Cover	ed 100%	Covered 10	00%	Cover	red 100%		
Office Visits Primary Care Physician (PCP) Specialist	\$ 35 copa 20% after (,	40% after CYD 40% after CYD		\$35 copa 20% after (/		after CYD after CYD		
Convenient Care Centers	\$ 35 copa	ay 4	40% a	fter CYD	\$35 copa	ay '	40% a	after CYD		
Urgent Care Visits	\$ 35 cop	ay	\$ 35	сорау	\$35 copa	ау	\$35	сорау		
Emergency Room (facility charge)	10% after 0	CYD	10% a	fter CYD	20% after 0	CYD :	20% a	after CYD		
Ambulance Services	20% after (CYD :	20% a	fter CYD	20% after 0	CYD :	20% a	after CYD		
Inpatient Hospital (facility charge) Level 1/Level 2	\$600 copa		40% a	ifter CYD	20% after C 25% after C			0 PAD + after CYD		
Outpatient Hospital (facility charge) Level 1/Level 2	\$ 150 cop \$ 250 cop		40% after CYD				20% after C 25% after C		40% ā	after CYD
Ambulatory Surgical Center (facility charge)	\$ 100 cop	ay 4	40% after CYD		20% after 0	CYD 4	40% a	after CYD		
Provider Services at Hospital and ER	20% after (CYD :	20% after CYD		20% after CYD		20% a	after CYD		
Provider Services at Ambulatory Surgical Center	20% after 0	CYD 4	40% after CYD		20% after 0	CYD 4	40% a	after CYD		
Radiologists, Anesthesiologists, and Pathologists at Ambulatory Surgical Center	20% after (CYD :	20% a	ifter CYD	20% after (CYD :	20% ā	after CYD		
Outpatient Diagnostic Services Labs/Blood Work (Quest Diagnostics only) X-Rays and Advanced Imaging Services (MRI, CT, PET, etc.)	\$ 0 \$ 100 cop		40% after CYD 40% after CYD						after CYD after CYD	
Durable Medical Equipment, Prosthetics, and Orthotics (DME)	20% after (CYD 4	40% a	fter CYD	er CYD 20% after CYD		40% a	after CYD		
Benefit Maximums Per Calendar Year										
Autism Spectrum Disorder Services (\$200,000 lifetime maximum)		\$36,0	000		\$36,000					
Home Health Care Visits		20			20					
Inpatient Rehabilitation Days		30			30					
Mental Health Services - Inpatient Days / Outpatient Visits		20/3	30			20/3	80			
Outpatient Therapies and Spinal Manipulations Visits (combined)		35			35					
Skilled Nursing Facility Days		60				60				
Substance Dependency Care and Treatment (Combined days and/or visits)	10	days/	days/visits		10 days/visits					
Health Reimbursement Account (HRA) Funded by St. Johns County (Annual contribution; prorated for new hires)	\$1,000 Employe \$1,500 - Emplo		ee + S e + C ee +	pouse hildren Family						
Monthly Rates (Includes Medical, Rx, Dental, and Vision)	Standard	PHA	\1	PHA 2	Standard	PHA	\1	PHA 2		
Employee Only	\$100.00	\$ 50.	.00	N/A	\$50.00	\$ 0	.00	N/A		
Employee + Spouse	\$337.50	\$287.		\$237.50	\$200.00	\$150		\$100.00		
Employee + Child(ren)	\$262.50	\$212.		N/A	\$150.00	\$100		N/A		
Employee + Family	\$495.00	\$445.		\$395.00	\$280.00	\$230		\$180.00		
St. Johns County Contribution	\$937.50		\$937.	50						

Prescription Plan

Mail-Order: 888-849-7845 • www.myprime.com

All employees who enroll in one of the St. Johns County Medical Plans will be automatically enrolled in the Prescription Plan through Florida Blue's Prime Therapeutics. This plan has three tiers: Generic, Preferred Brand Name and Non-Preferred Brand Name. The tier that your medication is in determines your portion of the drug cost. Prescription coverage is included in your medical plan premium.

Prescription Drug Benefits	Retail (30-day supply)	Retail 90/Mail-Order (90-day supply
Generic	\$ 10 copay	\$ 20 copay
Preferred Brand	\$ 50 copay	\$ 100 copay
Non-Preferred Brand	\$ 75 copay	\$ 150 copay
Specialty	20% coinsurance up to \$500, then normal copays apply	20% coinsurance up to \$500, then normal copays apply

Are all prescription drugs covered?

No, a complete list of drugs not covered is available on the Florida Blue website.

Do I have to use certain pharmacies?

You can use any pharmacy you choose, but **cost savings are highest** when you use a participating pharmacy in Florida Blue's network.

Can I only fill my prescriptions for 30 days at a time?

In addition to using an in-network retail pharmacy to receive a 30-day prescription, you also have the option of getting a 90-day supply at a participating retail 90 or mail-order pharmacy for your maintenance medications prescribed by your doctor through Prime Therapeutics.





Prescription Specialty Program

Mail-Order: 888-849-7845 • www.myprime.com

Specialty medications treat rare or complex conditions including, but not limited to, Hepatitis C, Multiple Sclerosis, Psoriasis, Oncology and Rheumatoid Arthritis, and often require special handling, storage and administration. Specialty medications must be filled by a specialty pharmacy, a provider of complex medications for complex health conditions. CVS Caremark Specialty Pharmacy is your provider for the St. Johns County Self-Funded Medical Plan.



Getting Started: After your medication is prescribed, you will need to obtain Pre-Authorization from your doctor. It is important to remember that whenever the doctor changes the dose or strength of the medication, it is treated as a new prescription, which will need to go through the entire process as a new specialty medication.

Step 1: Filling your Prescription: You or your doctor must clarify with the Pharmacist that your order is being placed through **Specialty Connect,** which is a separate system the pharmacists access. The Copay method of payment can be made via phone or through CVS Caremark Specialty Pharmacy.

Step 2: Delivery Options: You can choose between in-store pickup at your local CVS pharmacy, or UPS delivery of your medication to your home or doctor's office.

Personalized Care: You will receive dedicated clinical support by phone from a team of specialty pharmacy experts trained in your therapeutic area. Available 24 hours a day, 365 days a year. Call toll free at 1-800-869-0479.

Convenient Online Prescription Management: Register for a secure, online specialty prescription profile and make managing your medication even easier with these online tools at www.cvscaremarkspecialtyrx.com.



Dental Plan



800-233-4013 • www.humana.com

Dental health is the gateway to your overall well-being and is one of the most sought after health benefits. Dental disease is largely preventable through effective preventive care to keep your teeth and gums healthy, as well as help reduce future costly procedures. All employees who enroll in one of the St. Johns County Medical Plans will be automatically enrolled in the Dental Plan through Humana Dental.



Do I have to use certain dental providers?

You can see any dentist you choose, but **cost savings are highest** when you use a provider in Humana's network. You can find in-network providers by calling Humana or visiting their website.

Is there a maximum age for orthodontia coverage?

Orthodontia coverage is available to any covered plan participant, regardless of their age. There is no waiting period for othodontia services.

Calendar Year Plan Benefits	Examples of Service	In- and Out- of-Network
Calendar Year Deductible (CYD) Per Individual Family Aggregate	Applies to basic and major services	\$50 \$100
Preventive Services	Routine exams, cleanings, bitewing x-rays; fluoride treatment and space maintainers for children	100%
Basic Services (Plan covers)	Fillings, extractions, endodontics, periodontics, oral surgery, and general anesthesia	80%
Major Services (Plan covers)	Crowns, dentures, bridges, and implants	50%
Regular Benefit Maximum (RBM) Per Individual	RBM covers the cost of preventive, basic, and major services	\$1,000
Wisdom Teeth Extraction Maximum Per Individual	Wisdom teeth extractions	\$1,000
Orthodontic Benefit Per Individual (\$1,000 lifetime maximum)	Exams, x-rays, extraction and applicances for orthodontic services	100%

Note: If you choose to receive your dental care from an out-of-network dentist, covered expenses listed above are payable by Humana on a maximum allowable fee (MAF) basis. You will be responsible for any charges over the MAF schedule.

Vision Plan



866-537-0229 • www.humanavisioncare.com

Vision exams can identify the signs of many serious health conditions and annual check-ups are critical to your overall health. All employees who enroll in one of the St. Johns County Medical Plans will be automatically enrolled in the Vision Refresh Plan through Humana. The Vision Refresh Plan provides comprehensive routine vision coverage and does not include medical or surgical treatment of the eyes.



Do I have to use certain vision providers?

You can see any vision provider you choose, but **cost savings are highest** when you use a participating provider in Humana's network.

What is a Benefit Allowance?

A benefit allowance gives you a certain dollar amount toward contacts and glasses (lenses and frames). As long as you choose materials that are within that dollar amount, or allowance, they are covered at 100%. If you choose a frame exceeding your plan allowance, you'll be responsible for paying the overage in addition to any applicable copays at the time of your visit.

Can I get contacts and glasses in the same calendar year?

You can only get contacts OR glasses in the same calendar year, not both.

Do I have to file a claim to use this benefit?

If you stay in-network, your provider will file the claim. If you go out-of-network, you will need to download a Humana Vision Claim Form to be reimbursed.

Frequency (based on calendar year)			
Routine Vision Exam Once per year			
Lenses or Contact Lenses Once per year			
Eye Glass Frames Once every other year			

Benefit	In- Network	Out-of- Network
Routine Eye Exam	\$10 Copay	Up to \$30
Prescription Lenses Single Lenses Lined Bifocal Lenses Lined Trifocal Lenses Lenticular Lenses	\$15 Copay \$15 Copay \$15 Copay \$15 Copay	Up to \$25 Up to \$40 Up to \$60 Up to \$100
Eye Glass Frames Frames Max Benefit/Allowance Discount over Allowance	Allowance ¹ \$130 Retail 20%	Reimbursement \$65 Retail N/A
Contact Lenses Standard Fit and Follow-up Conventional/Disposable Contacts Medically Necessary Contacts	Up to \$40¹ \$130 Allowance Paid in Full	Not Covered Up to \$104 Up to \$200
Diabetic Eye Care Exam Retinal imaging Scanning laser	\$0 \$0 \$0	Up to \$77 Up to \$50 Up to \$33
Laser Correction Discount	15% off retail prices	N/A
Provider Network (Vision Care Plan)	Optometrist and Retail	N/A

¹Revised 1/26/2018 to match plan documents

Reimbursement Accounts

888-868-3539 • <u>www.myameriflex.com</u>



St. Johns County offers three (3) Reimbursement Spending Accounts available on one convenient debit card, administered by AmeriFlex.

Health Reimbursement Account (HRA) funded by St. Johns County

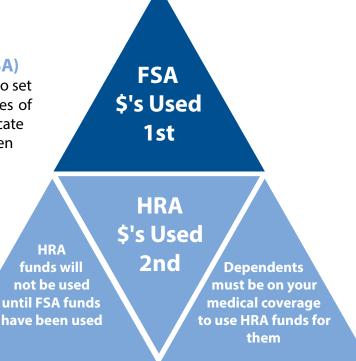
An HRA is a great way to pay for covered medical, prescription, dental and vision expenses through the plan year. If you elect the High Deductible Health Plan (HDHP) you will receive a Health Reimbursement Account (HRA) for you to use to pay for health care expenses. The account is completely funded by St. Johns County.

Health Reimbursement Account (HRA) Tiers		
Employee Only - Employee + Spouse - \$1,000		
Employee + Children - \$1,000	Employee + Family - \$1,500	

Health Care Flexible Spending Account (FSA)

An FSA, which must be elected annually, allows you to set money aside into an account to pay for certain types of out-of-pocket medical expenses. The money you allocate is pre-tax. Federal, State, and FICA taxes are **not** taken out on the amount you contribute.

You can use a Health Reimbursement and Medical FSA for: Copays / Calendar Year Deductible (CYD) / Dental and Vision expenses / Prescription drugs. For a complete list of eligible expenses visit www.myameriflex.



Dependent Care Reimbursement Account (DCA)

A DCA, which must be elected annually, reimburses you for eligible expenses, such as daycare, that you pay for the care of a qualified dependent. A DCA can be used to pay for the daily care of an eligible child or adult dependent, but not for health care expenses.

You can use a DCA for: Daycare for children under the age of 13 / Before and after school programs / Babysitting in your home by someone who is not your dependent / Care for a dependent adult (eldercare) / Nanny, nursery school, or pre-school expenses / Summer day camp. For a complete list of eligible expenses visit www.myameriflex.com

Reimbursement Spending Accounts Comparison

888-868-3539 • <u>www.myameriflex.com</u>

	Health Reimbursement Account (HRA)	Flexible Spending Account (FSA)	Dependent Care Account (DCA)
How it Works	For Employees enrolled in the Blue Options HDHP, the County deposits money into your account to help pay for eligible medical, dental, vision, and prescription drug expenses	You deposit pretax money into your account through payroll deductions to help pay for eligible medical, dental, vision, and prescription drug expenses	You deposit pretax money into your account through payroll deductions. You get reimbursed for the care of an eligible child or adult dependent, but not for health care expenses
Who is Eligible to Use Funds	Employees enrolled in the HDHP and ONLY their dependents enrolled on the health plan	Benefits-eligible employees and any eligible dependents, per IRS guidelines	Benefits-eligible employees and any of their dependents
Employer Contribution	Yes \$600 – Employee Only \$1,000 – Employee + Spouse \$1,000 – Employee + Children \$1,500 – Employee + Family	None	None
Employee Contribution	None	\$75 Minimum \$ 2,600 Annual Maximum If your spouse also works for St. Johns County, you may both contribute to the FSA, up to the \$2,600 annual limit.	\$2,500 for a married person, filing separately \$5,000 for a single person OR for a married couple, filing jointly
When is Money Available	The total amount of your account is available January 1, or date of eligibility for new hires or individuals who have a qualifying life event	The total amount of your annual election is available January 1, or date of eligibility for new hires or individuals who have a qualifying life event	Money is added to your account after each payroll deduction. You may use only the amount you have in your account at that time
Deadline to Use Funds	December 31	December 31	December 31
Can Unused Funds Roll Over to Next Year	No	\$75 Minimum \$500 Maximum Funds less than \$75 or in excess of \$500 will be forfeited	No

Basic Life and Accidental Death & Dismemberment

Group# 211866 • 800-247-6875 • www.sunlife.com/us

St. Johns County provides all benefits eligible employees with Basic Life and Accidental Death and Dismemberment (AD&D) Insurance at no cost to the employee. Employees receive a generous benefit, as shown in the chart below. Basic Life and AD&D coverage is provided through Sun Life Financial.



Basic Life Insurance	Coverage
All Eligible Employees	\$50,000
Elected Officials and Senior Management	\$75,000
Eligible Spouse if dependent on health policy	\$5,000
Eligible Child(ren) if dependent on health policy	\$2,000

What is an accelerated death benefit?

If you should become terminally ill with 12 months or less to live, you can apply to receive up to 75% of your current life insurance amount as a one-time lump sum. Any amount received will then reduce the amount of death benefit paid out.

Can I take my County provided life insurance with me when I leave employment?

Yes. If you are under age 70 when your employment ends, you may elect to convert your term life insurance to whole life insurance or simply take your term life insurance policy with you. You must contact Sun Life Financial within 31 days of your last day at work in order to be eligible for either of these options.

Will my life insurance reduce?

Your amount of basic and voluntary life insurance will reduce to 65% when you reach age 65, 50% when you reach age 70, and 35% when you reach age 75.

Naming & Changing Your Beneficiaries

It is important to designate who you want to receive your basic or voluntary life insurance money. You can name or change your beneficiaries at any time by logging onto <u>Plan Source</u>.

Long Term Disability

Group# 64435 • 800-247-6875 • <u>www.sunlife.com/us</u>

St. Johns County provides long term disability (LTD) to all benefits eligible employees. LTD is designed to replace part of your income in the event of disabling injuries or sickness, whether it occurs on or off the job. LTD plan benefits generally begin after an elimination period and will assist you in maintaining your normal lifestyle.

How much does the plan pay if I become disabled?

The plan replaces 60% of your monthly earnings, up to \$5,000 per month. You must meet the plan's definition of "disabled" to qualify for benefits and certain rules apply.

What is an Elimination Period?

An elimination period is the period of time between an injury or illness and when the benefit payments begin.

If I become disabled, how long will I receive benefits?

Benefits begin after 180 days of disability and generally continue until your disability ends or you reach your normal retirement age under Social Security whichever comes first. If you're age 60 or older when your covered disability begins your benefits duration may differ.

Emergency Travel Assistance

800-872-1414 • www.assistamerica.com • Reference # 01-AA-SUL-100101

All full-time benefit eligible employees have FREE access to Assist America programs through Sun Life. Assist America responds quickly and efficiently when members experience travel health emergencies more than 100 miles (150 km) from home. Some of the benefits available are:

- Medical Consultation and Evaluation
- Prescription Assistance
- Lost Luggage or Document Assistance •
- Pre-Trip Information
- Emergency Message Transmission
- Emergency Cash Coordination
- Emergency Medical Evacuation
- Legal and Interpreter Referrals
- Care of Minor Children



assist america'

Identity Theft Protection

877-409-9597 • <u>www.assistamerica.com/identity-protection</u>

Assist America protects employees from the often devastating consequences of identity theft with Identity Protection, a program that helps prevent theft of an employee's personal data and restores its integrity if it is used fraudulently.

What is one way employees can prepare themselves before an incident involving a lost or stolen credit or debit card occurs?

Employees are able to protect themselves by pro-actively registering and storing their credit cards, bank cards and important documents in one safe centralized location. If any of the registered items becomes lost or stolen, retrieving the information is fast and simple.

What is another way Assist America's Identity Protection helps employees prepare themselves if their credit or debit card information is lost or stolen?

Employees should also register for Internet Fraud Monitoring. By using their Assist America reference number, 01-AA-SUL-100101, employees can gain access to a secure Card Patrol link which will require employees to assign a login name, password and access code 18327. Once logged in, the employee may register up to 10 bank or credit cards.

Employee Assistance Program (EAP)

800-624-5544 • www.ndbh.com • Passcode: SJCFL

You want to do your best on the job, but when you have something on your mind, it can affect your work as well as your home life. The way you feel affects the way you work, so we want you to have someone to turn to when you need help. The Employee Assistance Program (EAP) is a benefit of employment with St. Johns County, designed to help employees and their families deal with difficult life issues. Counselors are available 24 hours, 7 days a week. The goal of the EAP is to help you restore balance. New Directions Behavioral Health can help you achieve your goals through the right information and short term counseling.

How does the EAP work?

The EAP provides you with counseling as well as referrals to legal, financial, child and elder care resources, which give you even more resources to keep work and life balanced.

What issues can the EAP help me with?

- Stress at home or on the job
- Questions about health lifestyle
- Attorney referrals for legal needs
- Financial needs such as budgeting
- Parenting concerns
- Aging and retirement
- Drugs and alcohol
- Depression and anxiety
- Conflicts and communication
- Help with problem solving
- Support during difficult life events

What services does the EAP include?

- 24/7 resource center
- Assessment of individual problems
- Referrals to behavioral health and community resources
- Telephone and video consultation
- Short-term counseling
- · Training for supervisors and employees
- Substance abuse assistance
- Crisis management
- Work/life programs
- Online tools/sessions
- Legal and financial services

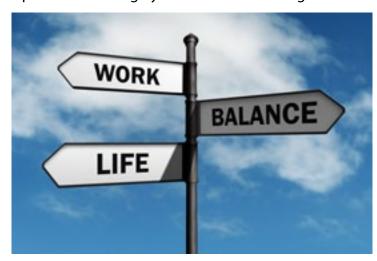


Will anyone know that I have used the EAP?

No one will know you are using the EAP unless you tell them. HIPAA regulations for confidentiality are strictly followed. You must sign a Release of Information before your counselor is allowed to communicate any information, except by those situations required by law where there is a danger to self or others.

How are EAP services covered?

Up to 4 visits per member are covered by your employer's plan. Any additional visits may be processed through your insurance coverage.



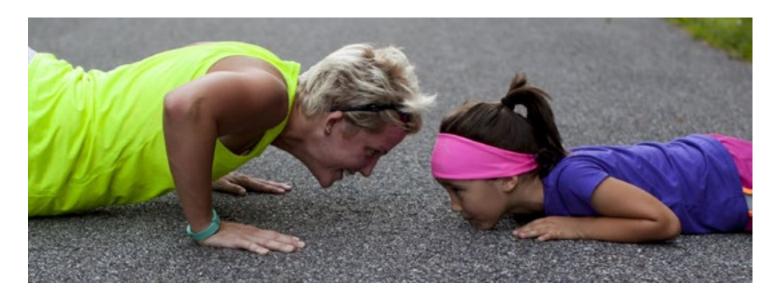
Wellness Program

The Wellness Program is an employer / employee health partnership. The <u>County Wellness Program</u> provides educational programs and resources to assist employees in recognizing and addressing potential health risks. It also provides employees opportunities to improve their overall health and well being.

All employees who are in active work status and are eligible for benefits are eligible to participate, along with eligible spouses and dependent children.

As part of the Wellness Program, the County will make available to employees educational materials designed to bring the latest and most innovative sources of information for making good healthy choices.





PHA Program

In conjunction with the Wellness Program, St. Johns County offers a voluntary <u>Personal Health Assessment</u>, or PHA program. This voluntary program is to help employees and their spouses lead and maintain a healthy lifestyle, through medical screenings, biometric testing and health coaching at Wellness Events. You can participate by attending the wellness screening events, or through your doctor's office. For more information, please see the separate <u>PHA Guide</u> available through your HR department.

- You may receive a \$50 monthly health insurance premium credit in 2018 if you complete your Personal Health Assessment (PHA) between October 1, 2016 and September 30, 2017.
- If you cover your spouse under the County Medical Plan, you can receive an additional \$50 monthly health insurance premium credit if your spouse also completes their PHA before the deadline.
- Your credit will begin with your first pay in January 2018, and continue through December 2018.

Note: PHA credits for 2018 were earned through participation in the PHA program from October 1, 2016 through September 30, 2017. New hires and non-participating employees will not be eligible for the 2018 PHA credit. For more information regarding this program refer to the Personal Health Assessment guide, available through your HR department.

Care Management and Wellness Tools

Florida Blue offers many disease management and care management options for all enrolled plan members. For more information regarding the programs listed below, or to access the Health and Wellness Center, log on to www.floridablue.com. Register if you have not already done so, then select the Health and Wellness tab and choose from one of the menu options.



Flu Shots	•Members with Florida Blue's pharmacy coverage can obtain a flu shot at no cost to the member from any in- network pharmacy which administers the Flu vaccine	
Care Consultants	 Get assistance in comparing your choices for medical services and prescriptions. 	888-476-2227
Care Management Programs	•Programs for diabetes, congestive heart failure, chronic obstructive pulmonary disease, asthma and cardiac conditions.	

DME and Home Health Providers

CareCentrix, Florida Blue's DME supplier, has an established network of providers, accessible throughout Florida, which many Florida Blue providers are already part of.

Services

Durable Medical Equipment (DME) is any medical equipment used in the home to aid in a better quality of living. Examples of DME include a nebulizer, CPAP machine and supplies, wheelchair, a boot, or diabetic supplies.

Home Health Agencies provide professional home health services, such as wound care, medication teaching, pain management, disease education and management, speech therapy, physical therapy or occupational therapy. Home care is often an integral component of the post-hospitalization recovery process, especially during the initial weeks after discharge when the patient still requires some level of regular physical assistance.

How to Find a Participating Provider

To find participating, in-network providers for DME and Home Health Care services, go to <u>www.floridablue.com</u> and click on Find a Doctor.

Under Step 1, choose Support Service and select either Durable/Home Medical Equipment or Home Health Agency.

Under Step 2, select your plan name.

Under Step 3, fill in the criteria for your location.

Click the Search button and see your results.

For more information, or for assistance in finding a provider, please call CareCentrix at (877) 561-9910. Or, call Florida Blue at (800) 352-2583.





Find doctors, get ID cards, check benefits and claims, compare medical costs and set notification preferences. You can also make a payment, access member discounts and so much moreall on the go with the Florida Blue app.



Reaching your EAP just got easier!
Request an EAP counseling session or ask questions, call 24/7 help line, get tips and read articles to improve health and well-being, and view frequently asked questions about the EAP benefit.



Stay on track with your financial goals using Lincoln Financial Group's app. Get easy access to forms, check balances and explore helpful videos, calculators and other financial resources. For more info visit www.LincolnFinancial.com.



Access your health information on the go with the MyHumana© App including: coverage & benefits, ID cards, claims, and provider finder. With our mobile app, you have the ability to manage your healthcare needs anywhere, anytime.



The MyAmeriflex App lets you access and manage your account anywhere you go, 24/7. Check your balances, file and check the status of a claim, and mark your card lost or stolen.



The Assist America App lets you access: one-touch call to 24/7 Emergency Operations Center, travel alerts, pre-trip information, such as visa requirements, immunization regulations, and more.

Planning for Retirement



FRS Financial Planners: 866-446-9377 • www.myfrs.com

St. Johns County is an FRS participating employer. Employees may choose one of two retirement plan options, the Florida Retirement System's Pension Plan, or the Florida Retirement System's Investment Plan. Both plans include employer and mandatory employee contributions.

Florida Pension Plan (FPP)

The FPP is known as a Defined Benefit plan - which is an employer-sponsored retirement plan under which members are promised a lifetime benefit at retirement if they meet certain age and/or service requirements. The benefit amount is based on the member's earnings, length of service, and service accrual value. Promised benefits are pre-funded by contributions made by the employer, employee, or both, plus investment earnings. All promised benefits to current and future retirees and other eligible beneficiaries are guaranteed under the plan.

Members who participate in the FPP are eligible to join the Deferred Retirement Option Program or DROP - which is an elective program available for eligible members of the FRS Pension Plan, TRS, and SCOERS who are eligible for normal retirement. Under this program, a member effectively retires and continues covered employment for up to five years. While in DROP, the member's monthly retirement benefits accumulate, earning interest and annual cost-of-living adjustments. When the DROP period concludes, the participant terminates covered employment and begins receiving a predetermined monthly retirement benefit, as well as the accrued DROP benefit.

Florida Investment Plan (FIP)

The FIP is knows as a Defined Contribution Plan - which is an employer-sponsored retirement plan under which contributions are made by the employer, employee, or both, to individual member accounts to generate funds for future distribution to the member. The benefit amount is the sum that accumulates in the member's account, based on contributions made, plus investment earnings, less fees and expenses. Members may have to meet certain age and/or service requirements to receive account accumulations. It is the responsibility of the member (employee) to ensure, through investment, that sufficient moneys are raised to provide adequate income in retirement.



The above information is a brief summary of the retirement options available to FRS-covered employees and is not intended to include every program detail. Complete details can be found in Chapter 121, Florida Statutes, and the rules of the State Board of Administration of Florida in Title 19, Florida Administrative Code. In case of a conflict between the information in this publication and the statutes and rules, the provisions of the statutes and rules will control.

Deferred Compensation 457(b)

800-234-3500 • www.lincolnfinancial.com/retirement



In addition to the FRS retirement program, St. Johns County offers a Deferred Compensation Plan, provided through Lincoln Financial Group.

Deferred Compensation - 457(b) Plan

A 457(b) plan is a non-qualified tax-deferred compensation plan designed to help you invest regularly for your retirement. It is offered to you through your employer and is available only to state or local employees and certain employees of many tax-exempt organizations. The 457(b) plan is designed as a long-term retirement plan. With a 457(b) plan, employees set aside money for retirement on a pre-tax basis through a salary deferral agreement with their employer. The money contributed is directed into an investment company offered by St. Johns County. The 457(b) contributions can be invested among a selection of investment options, the invested contributions can grow tax deferred until withdrawal at retirement or termination of employment. Federal tax law limits the amount of contributions that can be contributed annually to all 457(b) plans on your behalf, including salary deferrals.



First time users can <u>get registered</u> and access forms online at Lincoln Financial. Existing users can visit <u>Lincoln Financial</u> to view balances, make account changes, name a beneficiary, and take advantage of online planning tools and calculators.

Voluntary Life Insurance

Group# 211866 • 800-247-6875 • www.sunlife.com/us

Voluntary Life insurance is available to employees as well as dependents on an optional basis and is provided through Sun Life Financial. Employees must elect Voluntary Life Insurance for themselves in order to elect either Spouse and/or Child Voluntary Life. Additional life insurance costs are available on Plan Source.

If I elect an amount that requires evidence of insurability (EOI), how do I provide it?

If EOI is required, you will be directed to go to the Sun Life website and complete the EOI questions online. You will then be notified by mail from Sun Life whether you are approved for coverage. Premiums subject to EOI will not be deducted from your pay until you have been approved.

My spouse also works for St. Johns County. Can we both buy coverage?

Yes. You may both purchase supplemental employee coverage. However, an employee can only be insured as an employee or a dependent, but not both.



How long can my child be covered?

You can cover your child up to age 19, or up to the end of the calendar month in which they turn 26 if they are unmarried.

Voluntary Life Insurance	Amount	
Employee	Up to \$500,000 (\$10,000 increments)	
Spouse	Up to \$150,000 (\$5,000 increments)	
Dependent Child	Up to \$10,000 (\$2,000 increments)	

Please note that optional life insurance premiums are deducted from your payroll on a post-tax basis.

Short Term Disability

Group# 64435 • 800-247-6875 • www.sunlife.com/us

St. Johns County offers all benefit eligible employees two short term disability options through Sun Life Financial. Short term disability allows you to continue to receive pay at a fixed weekly amount for a temporary amount of time if you cannot work due to a non-work related disabling injury or illness.

Option 1: 15/24

15 consecutive days absent / up to 24 weeks of coverage

How much coverage can I elect?

Both benefit options replace 60% of your weekly pay, up to \$1,000 per week for a determined length of time based on your benefit period selection.

Do I have to provide evidence of insurability (EOI)?

Not if you elect short term disability when you are a new employee and first eligible. If you choose to elect it later an EOI will be required before your coverage is effective.

Option 2: 30/22

30 consecutive days absent / up to 22 weeks of coverage

Can I use sick leave or vacation time while receiving short term disability benefits?

You may use accrued sick leave or vacation time while receiving short term disability benefits but the combination of the two cannot exceed 100% of predisability earnings.

Please note that short term disability premiums are deducted from your payroll on a post-tax basis.

Voluntary Critical Illness by Allstate



800-348-4489 • www.allstatebenefits.com/mybenefits

The supplemental benefit options highlighted below are offered through Allstate for employees to enroll on a post-tax basis, and are also portable. These voluntary benefits help employees with copays, deductibles and lost wages when sick. Allstate pays you a cash benefit when you need it most, regardless of what your medical insurance covers. The cost of this plan will be shown as a pay period deduction when you enroll online through the online enrollment system. *Rates are based on age, benefit amount, and tobacco use.*

Benefit Details				
Benefit Amount	\$10,000 or \$20,000			
Recurrence Benefit	100% if treatment free for 12 months			
Vascular Conditions	100% - Heart Attack 100% - Stroke 25% - Coronary Artery Bypass Surgery			
Organ Conditions	100% - Major Organ Transplant 100% - End Stage Renal Failure			
Cancer	100% - Invasive Cancer - 100% 25% - Carcinoma in Situ¹ - 25%			

¹A cancer wherein the tumor cells still lie within the tissue of origin without having invaded neighboring tissue.

What is a pre-existing condition?

A pre-existing condition is one for which you received treatment, a diagnosis, service or prescription drugs during the 12 months before your coverage began. If you become sick in your first year of coverage as a result of this condition, no benefits will be payable for that illness.

What is the Recurrence Benefit?

You will receive a benefit payment upon your initial diagnosis/treatment. If you are treatment free for 12 months and have a condition within the same category as your initial diagnosis recur, you would receive a second benefit payment. At that time, the benefits for that category would be exhausted.

Please note that critical illness premiums are deducted from your payroll on a post-tax basis.

Legal Assistance by Legal Shield



800-654-7757 · www.legalshield.com/info/standardplan

Unexpected legal questions arise every day and if you elect this voluntary benefit, you'll have access to top-quality legal advice 24/7, for covered situations. LegalShield gives you the ability to talk to an attorney on any matter without worrying about high hourly costs.

How much does coverage cost?

Only \$15.95 a month. Please note that legal assistance premiums are deducted from your payroll on a post-tax basis.

What family members are covered under my plan?

Your Spouse, dependent children under 18, never-married dependent children under 21 and living at home, or to 23 if full-time students, and any dependent child, regardless of age, who is incapable of sustaining employment because of mental or physical disability and who is chiefly dependent on you or your spouse for support.

What situations can Legal Shield assist with?

Legal Advice, letters and phone calls on your behalf, legal document review, standard will preparation, motor vehicle services, IRS audit legal services, and trial defense hours.

Contacts

Medical	800-352-2583	ID Card	
Florida Blue / Blue Options Network Group #13902	www.floridablue.com Member Login > Tools > Find a Doctor and More	Yes	
BlueCard Program	800-810-BLUE (2583)		
National and Worldwide Coverage	http://provider.bcbs.com		
Care Consultants	888-476-2227 / www.floridablue.com	No	
Know Before You Go	Member Login > Tools > Compare Medical Costs or Compare Drug Prices	(same as medical ID)	
CareCentrix Durable Medical Equipment	877-561-9910		
Prescription	800-352-2583		
Florida Blue / Prime Therapeutics Blue Options Network Group #13902, Bin # 012833, PCN - FLBC	Mail-Order: 888-849-7845 Caremark Specialty: 866-278-5108 www.myprime.com	No	
Retail 90 Pharmacies	www.floridablue.com Member Login > Tools > Find a Doctor and More > Check "Extended Supply Network" box under Other Search Options	(same as medical ID)	
Specialty Pharmacy	800-869-0479		
Dental	800-233-4013		
Humana / PPO Network / Group #677885	www.humana.com / Top Menu > Find a Dentist	Yes (Printable online)	
Vision	866-537-0229		
Humana / VCP Network / Group #677885	www.humanavisioncare.com / VCP Tools > Provider Locator	Yes (Printable online)	
FSAs and HRA	888-868-3539		
AmeriFlex	www.myameriflex.com	Yes	
Life and AD&D	800-247-6875		
Sun Life / Group #211866	www.sunlife.com/us Online EOI: https://www.sunlife-usa.net/eoi/	No	
Value-Added Services (at no additional cost)	Travel Assistance: 800-872-1414 Reference #: 01-AA-SUL-100101ID Theft Protection: 877-409-9597		
Short & Long Term Disability	800-247-8675		
Sun Life / Group #64435	www.sunlife.com/us Online EOI: https://www.sunlife-usa.net/eoi/	No	
Employee Assistance Program	800-624-5544		
New Directions Behavioral Health	www.ndbh.com, Company Passcode: SJCFL	No	
Wellness Program	904-209-0635		
BCC Human Resources	http://ec.sjcfl.us/home/Wellness		
Retirement	866-446-9377		
Florida Retirement System (FRS) Deferred Compensation 457(b) Lincoln Financial Group	www.myFRS.com 800-234-3500 www.LFG.com		
Human Resources			
Board of County Commissioners Tax Collector Clerk of Courts Supervisor of Elections Property Appraiser	904-209-0635 (Benefits option 5) 904-209-2286 904-819-3605 904-823-2238 904-827-5528		
Benefit Administration	904-461-1800		
The Bailey Group	Rachael Friedman: <u>rfriedman@mbaileygroup.com</u> Debbie Weiner: <u>dweiner@mbaileygroup.com</u>		
St. Johns County Web Resources	Employee Benefits: sjcbenefits.mbaileygroup.com		