2027

OPEN ENROLLMENT

Employee Benefits Presentation

CITY OF BROOKLYN

Plan Year 2027









Open Enrollment: 11/9 – 11/20

Open Enrollment happens once per year and is the only time you can make changes to your plans or your dependents unless you have an important change in your family status, known as a Qualifying Event.

If you do experience a Qualifying Event during the year, be sure to notify HR within 30 days.

Choose wisely and don't miss the deadline!



Qualified
Life Event

A Qualified Life Event is an event that allows an employee to make appropriate changes to their pre-taxed benefit plan elections. Listed to the right are the Qualified Life Events.

When Can You Change Coverage?

Be sure to make your elections carefully as Section 125 regulations prohibit changes except during the annual Open Enrollment period and during certain special enrollment situations (Qualified Life Event) as described below.

Change in Marital Status

- Marriage
- Death of a spouse
- Divorce or annulment

Change in Dependent Status

- Birth, adoption, or placement for adoption or death of a dependent child
- Dependent no longer satisfies rule for eligibility as a dependent

Loss/Gain of Coverage

- Employee or spouse loses or gains other coverage
- Removal of legal custody of dependent

Change in Employment Status

- Commencement or termination of employment
- Commencement of, or return from, leave of absence, strike or lockout
- Change from part-time to full-time status, or vice versa

2027 Benefit Updates

Medical & Rx – The health insurance will remain with MMO

- *$250/$500 PPO Plan*
- *$1,000 PPO Plan*
- *$250/$500 CleCare Plan (MetroHealth Network Only)*
- *$3,500/$6,000 HDHP/HSA Plan (IRS Mandated Deductible Increase for HSA Plan Option)*

Vision & Hearing - will remain with MMO

Dental – remaining with Delta Dental with slight increase to the rates

Basic Life, Voluntary Life & LTD - remaining with MetLife.

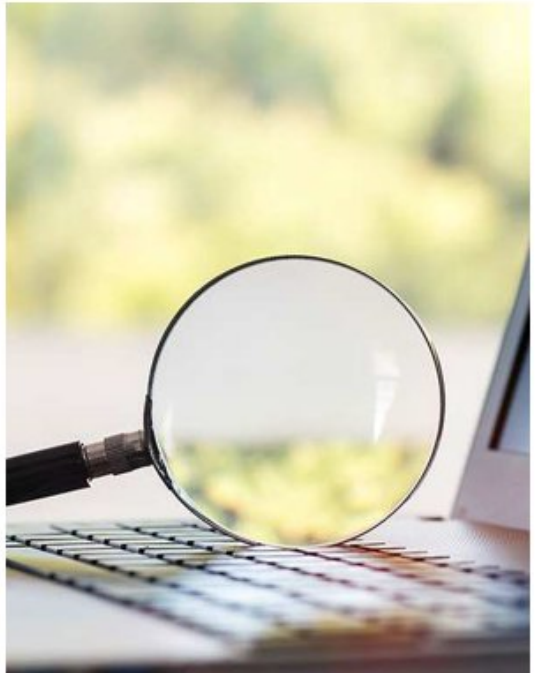
- Currently enrolled employees can increase their Voluntary Life coverage amounts by $10k up to the Guaranteed Issue amount of $150K

Flexible Spending Account (FSA) will remain with BASIC

Please refer to your Benefit Summaries for additional information on your benefits


EMPLOYEE
BENEFITS
2027

Basic Insurance Terminology



DEDUCTIBLE

Portion you pay for certain covered health services before the insurance company begins to share in the cost.

COPAY

Flat dollar amount you pay each time you receive certain covered health services.

CO-INSURANCE

Percentage of cost of health services you are responsible for after the deductible is met.

OUT-OF-POCKET MAXIMUM

The maximum you pay, in a calendar year, for co-insurance, deductible and copays combined.

2027 Medical Plans:

MEDICAL MUTUAL®

BENEFITS	$250 PPO Plan	$1,000 PPO Plan	CLECare HMO Plan	HSA PLAN
Deductible – Single Deductible - Family	$250 $500	$1,000 $2,000	$250 $500	$3,500 $6,000
Coinsurance	10% after Deductible	10% after Deductible	0% after Deductible	0% after Deductible
Out-of-Pocket Maximum – Single Out-of-Pocket Maximum - Family	$6,600 $13,200	$6,600 $13,200	$6,600 $13,200	$3,000 $6,000
Office Visit Primary Care Physician Specialist	 $20 Copay $20 Copay	 $20 Copay $20 Copay	 $20 Copay $20 Copay	0% after Deductible
Inpatient Hospital Services	10% after Deductible	10% after Deductible	0% after Deductible	0% after Deductible
Outpatient Surgical Services	10% after Deductible	10% after Deductible	0% after Deductible	0% after Deductible
Diagnostic Services	10% after Deductible	10% after Deductible	0% after Deductible	0% after Deductible
Emergency Room Services	10% Coinsurance	10% Coinsurance	0% after Deductible	0% after Deductible
Prescription Deductible Retail Rx (30-day) Mail Order Rx (90-day)	None 20% 20%	None 20% 20%	None $10*/$20*/$30* $10**/$20**/$40**	Integrated with Medical 0% after Deductible 0% after Deductible

*Lower Retail copays available via MetroHealth Pharmacies
**Mail Order available via MetroHealth Pharmacies only

The City of Brooklyn will contribute to the Health Savings Account of employees who enroll in the HSA Plan and meet the eligibility requirements for an HSA.

Deposits will be as follows:
Single = $1,000
Family = $2,000

This is an illustration of In-Network benefits, but please note that the PPO and HSA plans also provide coverage outside of the network, while the HMO plan covers In Network ONLY.
Please refer to the plan documents for details & final confirmation of coverage.

MEDICAL MUTUAL®

MMO $250 PPO Plan

Benefit	In-Network	Out-of-Network
Calendar Year Deductible: Single / Family	$250/$500	$500/$1,000
Coinsurance	10%	30%
Maximum Out of Pocket Limit: Single / Family	$6,600/$13,200	Unlimited
Office Visit: Primary Specialist	$20 Copay $20 Copay	30%
Preventive Care	Covered at 100%	30%
Hospital Expenses	10%	30%
Diagnostic Testing/Imaging	10%	30%
Emergency Room	10%	
Non-Emergency –Emergency Room	$50 Copay, then 10% (copay is waived if admitted)	$50 Copay, 30% (copay is waived if admitted)
Urgent Care	$20 Copay	30%

MEDICAL MUTUAL®

MMO $1000 PPO Plan

Benefit	In-Network	Out-of-Network
Calendar Year Deductible: Single / Family	$1,000/$2,000	$2,000/$4,000
Coinsurance	10%	30%
Maximum Out of Pocket Limit: Single / Family	$6,600/$13,200	Unlimited
Office Visit: Primary Specialist	$20 Copay $20 Copay	30%
Preventive Care	Covered at 100%	30%
Hospital Expenses	10%	30%
Diagnostic Testing/Imaging	10%	30%
Emergency Room	10%	
Non-Emergency –Emergency Room	$50 Copay, then 10% (copay is waived if admitted)	$50 Copay, 30% (copay is waived if admitted)
Urgent Care	$20 Copay	30%

MEDICAL MUTUAL®

MMO $250 CleCare HMO Plan

Benefit	In-Network	Non-Network
Calendar Year Deductible: Single / Family	$250/$500	N/A
Coinsurance	0%	N/A
Maximum Out of Pocket Limit: Single / Family	$6,600/$13,200	N/A
Office Visit: Primary Specialist Designated/Network	$20 Copay $20 Copay	N/A
Preventive Care	Covered at 100%	N/A
Hospital Expenses	10%	N/A
Emergency Room	100% after Deductible	
Urgent Care	$20 Copay	N/A

MEDICAL MUTUAL®

CleCare Prescription Plan

Benefit	Metrohealth Pharmacy	Retail Pharmacy
Pharmacy Copays: 30 Day Supply		
Generic Brand Form Brand Non-Form Specialty	$5 $10 $20 Applicable Drug Tier Applies	$10 $20 $30 Applicable Drug Tier Applies
Mail Order Pharmacy Copays: 90 Day Supply		
Generic Brand Form Brand Non-Form Specialty	$10 $20 $40 Applicable Drug Tier Applies	Not Covered Not Covered Not Covered Applicable Drug Tier Applies

MEDICAL MUTUAL®

MMO $3500 HSA Plan (IRS Mandated Deductible Increase)

Benefit	In-Network	Out-of-Network
Calendar Year Deductible: Single / Family	$3,500/$6,000	$5,000/$10,000
Coinsurance	0%	30%
Maximum Out of Pocket Limit: Single / Family	$3, 500/$6,000	$7,000/$14,000
Office Visit: Primary Specialist	0% after Deductible 0% after Deductible	30%
Preventive Care	**Covered at 100%**	**30%**
Hospital Expenses	0% after Deductible	30%
Diagnostic Testing/Imaging	0% after Deductible	30%
Emergency Room	0% after Deductible	
Urgent Care	0% after Deductible	30%
Prescriptions including Retail Pharmacy and Mail Order	0% after Deductible	

How does the Consumer-Driven Plan + HSA work?

Traditional Health Plan



- Larger monthly premium
- Lower deductible
- Copays for office visits, prescriptions & ER
- Preventive covered 100%

Consumer-Driven Health Plan + HSA





- Lower monthly premium
- Higher deductible
- Preventive covered 100%



- Money into savings account

Traditional Health Plan

Premium

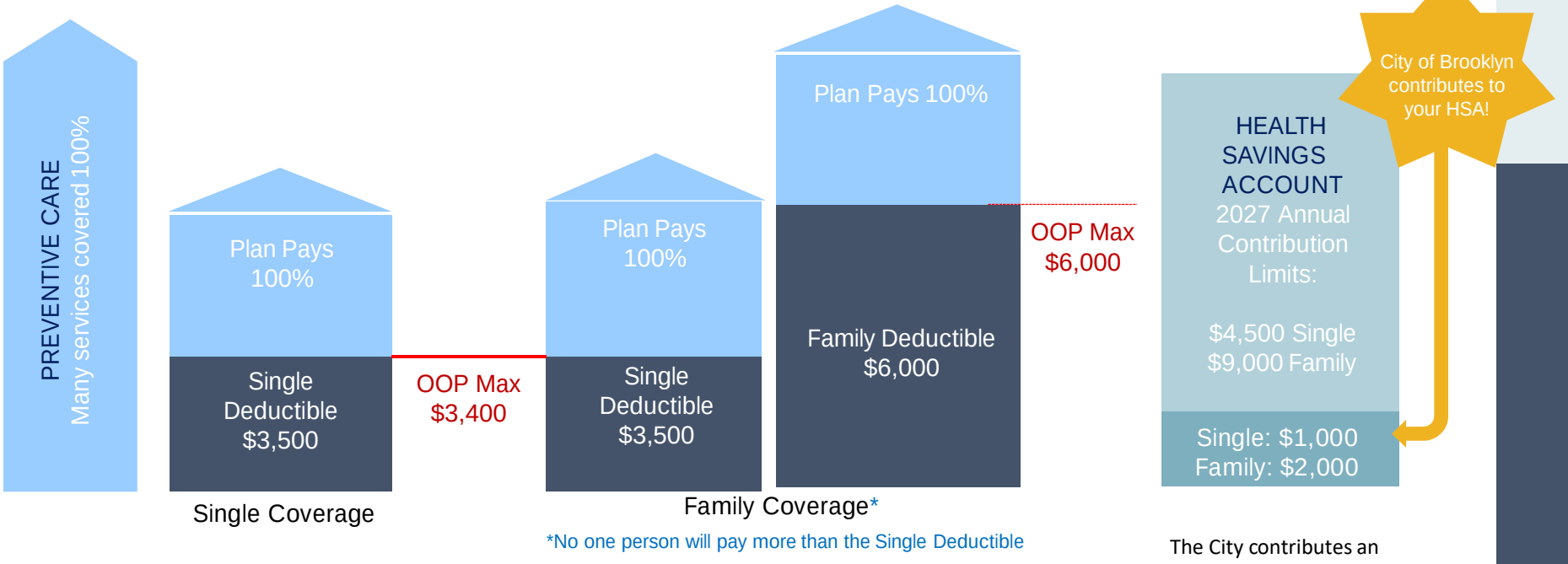
Consumer-Driven Health Plan + HSA

Premium | HSA



Consumer-Driven Health Plan

- Preventive Services are covered 100% once each calendar year
- All expenses – both Medical & Prescription Drugs – are subject to the Deductible
- In-Network claims will always be discounted based on the allowed amount – Members will pay based on Discounted amounts
- Once the Deductible is met, ALL MEDICAL SERVICES are covered 100%



The City contributes an additional $500 for Single or Family as long as the Employee contributes

Why choose an HSA?



NO Use it or Lose it provision

- Balance rolls over
- Contribute up to the annual maximum each year



Triple. Tax. Savings.

- Contribute pre-tax funds (reduces taxable income!)
- Grow tax-free earnings
- Enjoy tax-free withdrawals on qualified medical expenses



Employee Owns the Account

- You keep the money even if you change jobs or insurance
- Comprehensive & easy investment options
- Save for retirement



Your Risk Tolerance

- You feel your risk tolerance is high and you're relatively healthy
- Outside of your annual preventative care visits, you expect no doctor visits and have no routine Rx costs
- You can easily save up to the maximum HSA contribution limit
- You feel that you will reach your deductible quickly each year due to your health conditions and medical expenses, but you can afford those out of pocket costs up front



! Cannot contribute into an HSA if you are entitled to Medicare

Triple. Tax. Savings.



Contribute pre-tax funds

Grow tax-free earnings

Enjoy tax-free withdrawals

MAXIMIZE TAX SAVINGS

Contribute $1,000

30% tax savings

Save $300 in taxes!*

HSAs are never taxed at a federal income tax level when used appropriately for qualified medical expenses. Also, most states recognize HSA funds as tax deductible with very few exceptions. Please consult a tax advisor regarding your state's specific rules.

*Based on average state and federal income and payroll taxes. Actual savings will vary. The example used is for illustrative purposes only.

How the HSA Plan Works

HSA Payment Process

1

*Present ID card to **network** doctor.

*Do NOT pay for medical services at the time of service.

*You will pay for Rx at the pharmacy.

2

*Doctor sends the medical claim to the insurance carrier.

*The carrier **applies** the network discount and notifies doctor of amount you may owe.

3

*When you have claim activity, you will receive an Explanation of Benefits (EOB) from the carrier showing how the claim was processed & the amount that you owe.

4

*Doctor bills you for payment.

1. You can use your HSA to pay.

2. Or you can choose to pay another way (cash, credit card) and reimburse yourself from your HSA later.

*Always make sure the amount the provider says you owe matches the amount the EOB indicates owed before sending payment.

oswald

Qualified Medical Expenses

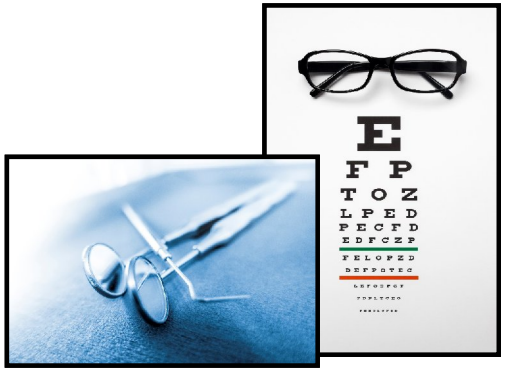
- Alcoholism Treatment
- Ambulance
- Anesthetists
- Arch Supports
- Artificial Limbs
- Blood Tests
- Braces
- Contact Lenses
- Chiropractic Visits
- Crutches
- Dental Treatments/X-Rays
- Dentures
- Dermatologist Visits



- Diagnostic Testing
- Drug Addiction Therapy
- Eyeglasses
- Hospital Bills
- Hearing Aides
- Insulin Treatments
- Lab Tests
- Operating Room Costs
- Oral Surgery
- Organ Transplant
- Orthopedic Shoes
- Oxygen & equipment
- Physician Services
- Physiotherapist Services
- Postnatal Treatments
- Prenatal Care
- Prescription Drugs
- Psychiatrist Services
- Psychologist Services



- Spinal Fluid Test
- Splints
- Sterilization
- Therapy Equipment
- Vaccines
- Vasectomy
- Vitamins (if prescribed)
- Wheelchairs
- X-Rays



This is just a partial list of the eligible HSA expenses. Please visit the IRS website & Publication 502 for a complete listing.

Don't leave money on the TABLE for the IRS



2027 HSA Contribution Limits

Annual Contribution Rules	**$4,500** for individuals **$9,000** for families
Additional Funding	Those 55 years of age or higher, but not entitled to Medicare benefits, can fund an additional $1,000/year "catch-up" contribution!
Amount of Funding	Contributions above the annual limit are subject to income taxes and a 20% penalty

In 2027, your Employer **will contribute $1,000 for Employee Only and $2,000 for Employee/Spouse, EE/Children and for Family Annually** into your HSA (if the employee contributes, the City will provide an additional $500. The Employer amounts will be divided out and added to Employee HSA accounts on a per pay basis. The annual limits are inclusive of the contribution from your Employer.

Preventive Care

- Preventive care is covered at 100% no matter which plan you choose!
  - Using In-Network Providers
- Regular preventive care helps reduce risk of disease
- Detect health problems early
- Protect you from higher costs down the road
- May potentially save your life
- **Premium Incentive for Passing 5 out of 5 Metabolic Measures!**



Direct Primary Care with Marathon Health



Who is Marathon Health?

Marathon Health is a leader in providing advanced primary care in the U.S. to 2.5 million eligible patients across a combined base of approximately 630 employer and union-sponsored clients. We deliver direct primary care, mental health, occupational health, musculoskeletal, and pharmacy services through a footprint of over 720 health centers in 41 states, in addition to 50 state access to virtual care services.

Marathon is transforming healthcare delivery through a patient-first approach, providing more convenient access to in-person and virtual care at little to no cost, leading to better health outcomes for patients and meaningful cost-of-care savings. Patients (members) at Marathon Health often see significant improvements in their overall health. Visit the Marathon Health website and read the stories of patients who have benefited from the care at Marathon Health centers at: https://marathon.health/patient-success-stories

Why is this benefit being offered?

Employees, employers, and insurance companies have seen significant healthcare cost increases each year; we're on a mission to fix the broken healthcare delivery model that causes them. By receiving your care from us, you gain an additional choice to address the cost and quality of the healthcare you receive. Your membership gives you high-quality, low- or no-cost primary care through your Marathon Health provider.

Marathon Health Services

Primary and preventive care

- Annual exams and preventive screenings
- Blood pressure screening
- Biometric screening
  (height, weight, blood glucose, and cholesterol)
- Condition management
  (diabetes, heart disease, COPD, and more)
- Mental health support
  (provider assessment for mental health concerns)
- Vaccines
  (Flu, HPV, TDAP, and more)

Immediate & sick care

- Bronchitis
- Common cold and cough
- Constipation
- Diarrhea
- Eye infections
- Headache
- Joint pain
- Nausea and vomiting
- Nosebleed
- Sinus infections
- Skin infections
- Strep throat

Family care

- Minor injuries
  (cuts, scrapes, and minor burns)
- Sick care
  (fever, flu, vomiting, pink eye, cough, and more)
- School and sports/camp physicals

Lab services

- Basic metabolic panel
- Blood draws and sample collection
- Cholesterol
- Hemoglobin A1c
- Pregnancy test
- Screening for diabetes
- Urinalysis
- *Additional lab tests can also be drawn and sent to an outside lab for processing*

Getting Started with Marathon Health

The Marathon Health patient portal and mobile app are powerful tools to help you conveniently manage your healthcare needs. This guide walks you through the process of creating your account and exploring all features.

STEP 1

Web-based patient portal

- Visit **my.marathon.health**
- Click "New? Register Now"
- Proceed to step 2

OR

Mobile app

Scan the QR code below or follow these steps to download from Apple App or Google Play store

- Search for "Marathon Health" in the search bar
- Locate the Marathon Health app and tap on it
- Press the "Download" or "Install" button to begin installing the app
- Once the app is successfully downloaded and installed, you'll find the icon on your home screen
- Proceed to step 2

STEP 2

Enter the following information to create your secure online account

- First and Last name
- Email address
- Social Security Number (Not required but will improve the account creation process.)
- Date of birth
- Home address and phone number
- Client name
- Once complete, you will receive a confirmation email to complete the registration and log in to schedule your first appointment

Marathon Health must verify with your employer/union that you are eligible for this benefit. Marathon Health is required by law to maintain the privacy and security of your protected health information under the Health Insurance Portability and Accountability Act. We will not share any personally identifiable information with your employer.

Do yourself a favor, shop around

Costs can vary drastically at different providers, especially for things like radiology & prescriptions.

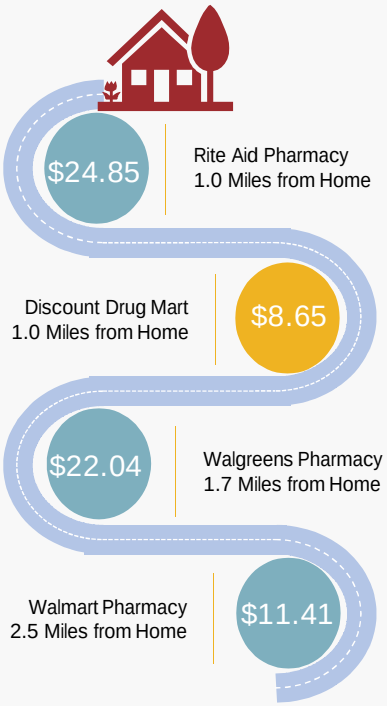
Example: MRI of the head



Total Savings = $1,900

Distance 20 miles

Example: Celecoxib (Generic Celebrex)



Total Annual Savings = $194/year

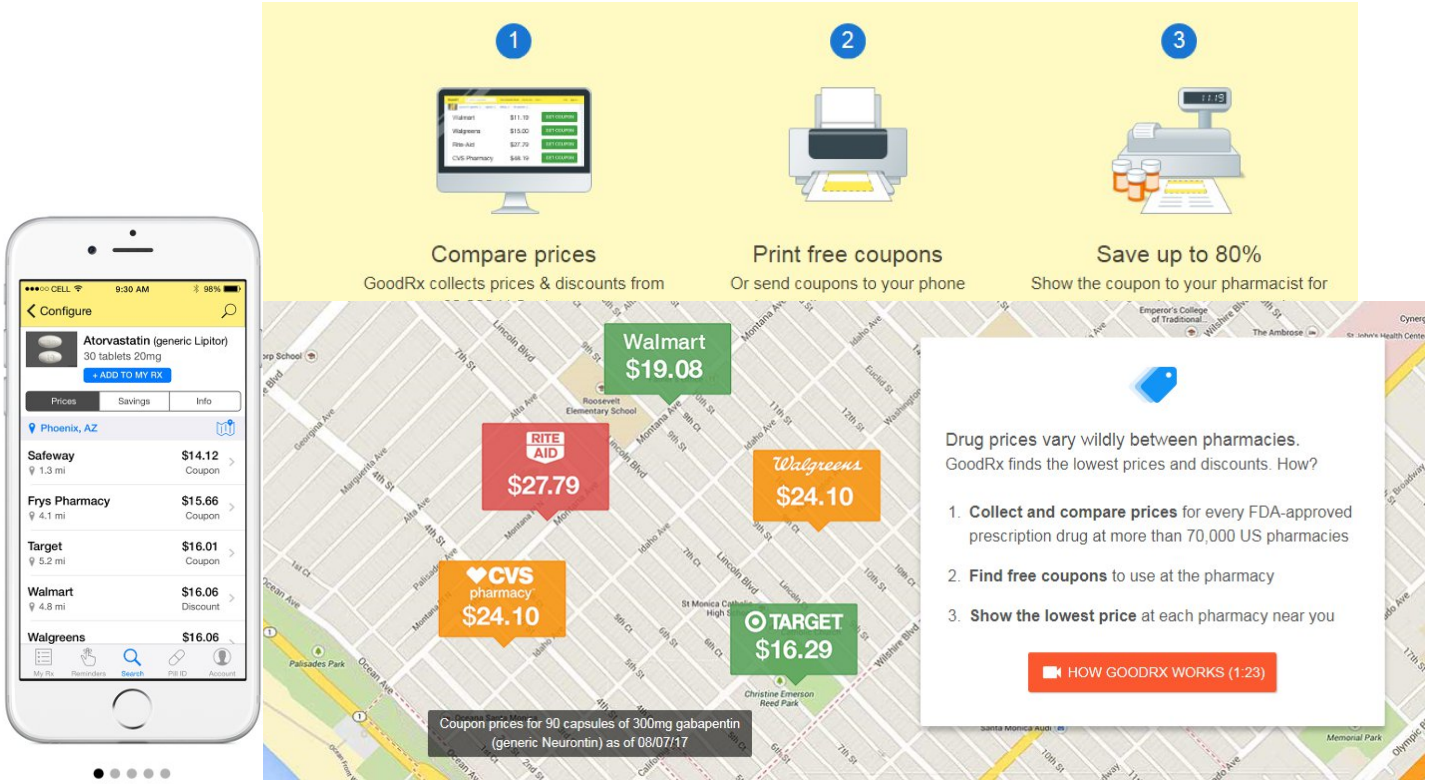
Distance 4 miles

GoodRx

How can GoodRx help me?

GoodRx gathers current prices and discounts to help you find the lowest cost pharmacy for your prescriptions. The average GoodRx customer saves $276 a year on their prescriptions.

GoodRx is 100% free. No personal information required



Tips to Save

1.) Use Free-Standing Laboratory Services

- Free-standing (independent) laboratory facilities are able to perform lab services such as drawing blood at a lower cost & pass along these savings to you. MMO utilizes **Quest Diagnostics & LabCorp** as a national vendor.

2.) Use Convenience Clinics for after-hours care

- Retail health clinics are open 7 days a week, as well as weeknights & do not require appointments. Board certified Nurse Practitioners & Physicians Assistants are available to treat a number of common conditions. These clinics are subject to an Office Visit Copay if on a PPO Plan or reduced cost if on an HSA Plan. Local examples are **CVS Minute Clinics, Walgreen's Take Care Health Clinics**, **Drug Mart Walk in Clinic & Cleveland Clinic Express Care Clinics** along with other independent providers.

3.) Utilize the Nurse Line for minor emergencies

- **MMO's Nurse Line** is staffed with licensed nurses 24/7. If you have a minor emergency & you need to speak with a medical professional to determine if you should visit the Emergency Room, contact the Nurse Line for advice. Just call the number on the back of your ID card.

4.) Participate in Retail Pharmacy Discount Programs

- Many retail chains are offering discount medication programs where you can receive generic medications at a lower cost. Some retailers are even offering some medications like Antibiotics, Preventive drugs & Diabetic medications for Free.

Medical Mutual Services

MEDICAL MUTUAL®

Network – SuperMed® PPO

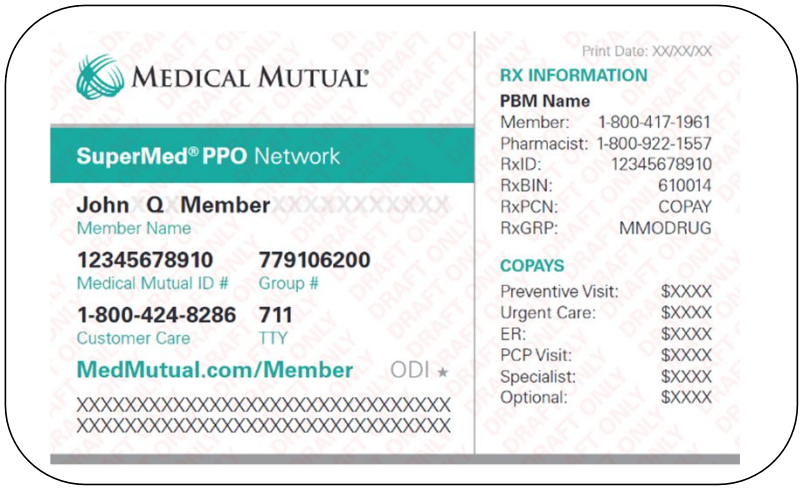
- Broad network with access to nearly every healthcare professional in Ohio and 99% of the hospitals.
  - **Ohio:** All 88 counties
  - **Kentucky:** Boone, Campbell, and Kenton Counties
- National network via a collaboration with Cigna®, a global healthcare company.
  - Access to the Cigna® PPO for members residing or travelling outside of the SuperMed service area.
- Member ID card indicates where to get care and how providers can submit claims for payment.
- No referrals required.

Cigna® is a trademark of Cigna Inc. and is protected throughout the world by trademark registrations and treaties.

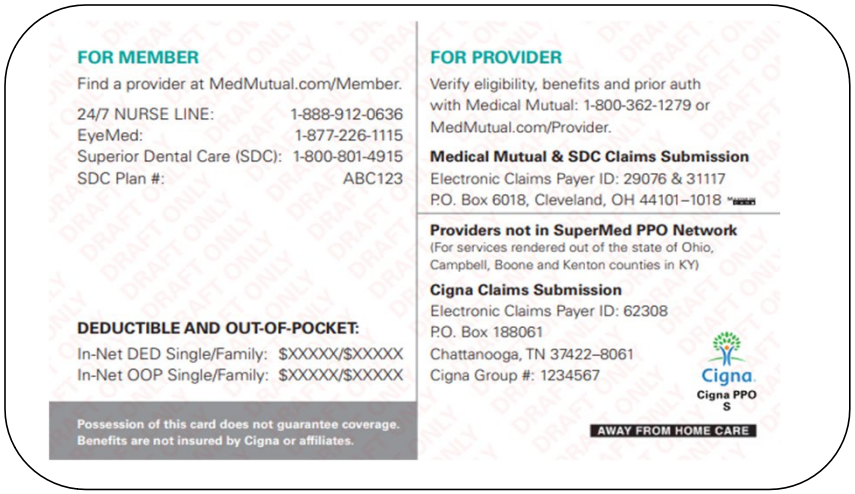
Member Sample ID Card (SMP Network)

- For members living **INSIDE** SuperMed® PPO service area

Front



Back



MEDICAL MUTUAL

Telehealth – On-Demand Visits

If you or a family member needs medical care after hours and you cannot reach your doctor, you can obtain the care you need without leaving your home with on-demand telehealth services:

- MinuteClinic Virtual Care
  - Available 24/7, including holidays to all members 18 months and older
    - Web: MinuteClinic/VirtualCare.com
    - App Search: CVS Pharmacy
  - Access to licensed providers virtually by web or app.
  - Use this service after hours or when your physician is not available.
  - Receive medical treatment for non-emergency conditions, such as the common cold, respiratory infections, and minor burns or lacerations.

minute clinic®

MinuteClinic Virtual Care™

Virtual care is here, so you can stay there.

Telehealth – Mental Healthcare Visits

SonderMind offers fast and convenient access to high-quality mental healthcare. Members can schedule virtual and in-person sessions, message their therapist, submit payments and view their progress over time.

- Therapy is available for individuals, couples and families of all ages, with more than 40 specialties and 6-treatment approaches to meet a variety of needs.
- Web: SonderMind.com

Total Health™

- Engagement opportunities based on members' health and preferen
  - Digital
  - Telephonic
  - Remote Monitoring

- Customized support for members with various chronic conditions including:
  - Asthma
  - Heart Failure
  - Coronary Artery Disease (CAD)
  - Chronic Obstructive Pulmonary Disease (COPD)
  - Diabetes
  - Hypertension
  - Musculoskeletal Pain
  - Pelvic Health Issues (individuals with vaginal anatomy, regardless of gender identity)





MEDICAL MUTUAL®

Total Health™

- Provided at no additional cost to you.
- No member cost sharing for diabetes testing supplies if you participate.
- Medical Mutual may reach out to members who could benefit from this program.
  - Methods to identify members:
    - Claims from provider visits
    - Case Management referral
    - Online Health Assessment through My Health Plan
    - Nurse Line referral
- You can refer yourself by calling 1-800-590-2583.

Total Health™

- The Lark A.I. Platform
  - Compassionate care for millions on an award-winning chronic condition management and prevention platform.



MEDICAL MUTUAL®

Total Health™

- Here's how to start your Digital Health Coaching

Texting

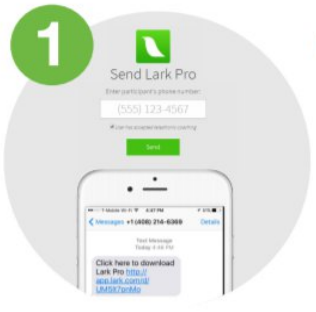
Text LARKMM to 484848 to enroll in your Lark program.

Visiting the website

Go to www.lark.com/medical-mutual to enroll in your Lark program.

Scanning the QR code

Open your phone's camera over the code to enroll in your Lark program.



Text link to download Lark



Lark sends devices



24/7 coaching with evidence-based care plans

Ready to get started?

Get started today and claim your devices at no additional cost to you.

Scan this QR code with your smartphone camera to get started.

Online visit enroll.lark.com/**MedMutual**

MEDICAL MUTUAL®

Musculoskeletal Digital Therapy & Virtual Physical Therapy: Sword Health

- Designed to help members with musculoskeletal conditions (back pain, neck & shoulder pain, pain from arthritis, etc.).
- Equipment is provided at no additional charge.
- Offers digital coaching and virtual physical therapy solutions to help members:
  - Avoid injuries
  - Avoid surgery
  - Reduce pain
  - Decrease reliance on medication
  - Increase satisfaction (Guided PT from home with real time feedback)



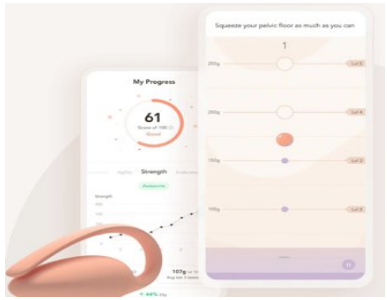
Pelvic Health Therapy: Bloom

- Bloom addresses women's pelvic health issues through physical therapy.
- Equipment is provided at no additional charge.
- The program treats:
  - Pelvic pain
  - Urinary incontinence
  - Post-partum
  - Menopause
  - Other pelvic floor issues

Bloom

1 in 4 Women suffer from pelvic health disorders. Traditional pelvic care is inaccessible and stigmatized.

Bloom is the next generation of Women's Pelvic health enabling a more convenient, higher quality and destigmatized pelvic care, at home.



MEDICAL MUTUAL

Maternity Management



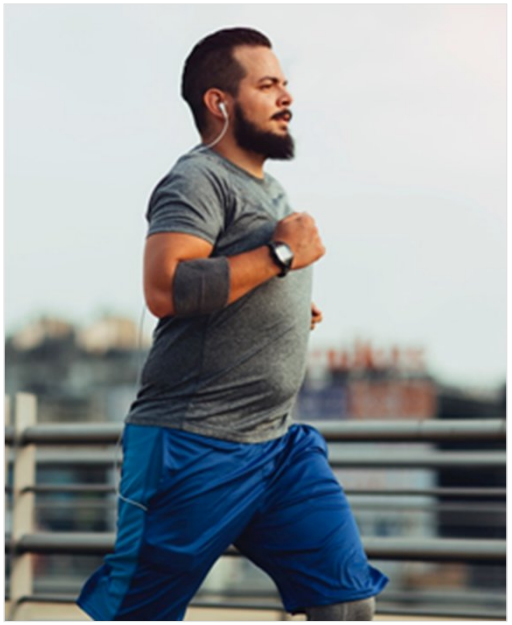
- Maternity support and digital coaching.
  - Customized content & education based on your preference
  - Digital trackers (e.g., mood, blood pressure, pain)
  - App prompts & reminders such as weekly pregnancy to-do list
  - Post-delivery support such as articles on caring for your newborn and children up to age 2
- Connect to Medical Mutual's Care Management team as needed with a simple click-to-call link.
- Rely on the 24/7 Nurse Line.
- Find a doctor for OB and pediatric care.
- Home-based OB services for high-risk pregnancies.

MedMutual SeniorAssist Program

- SeniorAssist is a concierge service designed to save you time, stress and money when helping a loved one with healthcare and lifestyle decisions.
- The program includes:
  - Understanding Healthcare and Medicare Basics
  - Financial Assistance Resources
  - Advocacy for Complex Health and Life Situations
  - Social Services Resources
  - 24-Hour Nurse Line
- Call 800-877-6003 to talk with an advocate today.



Medical Mutual Wellness Programs

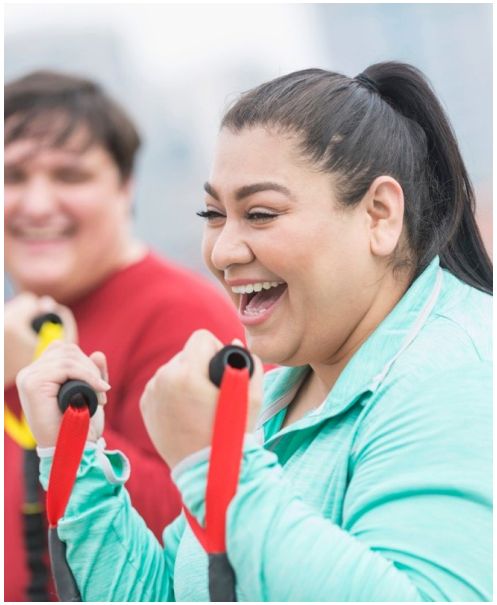


- Comprehensive suite of programs designed to help you maximize health, wellness and quality of life.
  - WW® Discount Program
  - QuitLine Tobacco Cessation
  - Fitness Discounts
  - Nurse Line
- Member portal to manage your health at your convenience.
  - Access through My Health Plan

**** WW Discount Program is the program formerly known as Weight Watchers. WW is a registered trademark of WW International, Inc.***

WW® Discount Program

- Members receive an upfront discount on monthly memberships.
- Discount is nearly 50% savings on the cost of a standard WW® program.
  - Discounts available for Digital, Digital + Studio and WW® for Diabetes.
- Program Eligibility and Enrollment
  - Must be a Medical Mutual member.
  - Contact Medical Mutual by email at ww@medmutual.com or by phone at 1-800-251-2583.
  - Provide the following information
    - First and last name
    - Date of Birth
    - Medical Mutual ID #
    - Address
    - Email address
    - Phone number
  - We respond within 3 business days to complete your enrollment



MEDICAL MUTUAL®

Fitness and Healthy Living Discounts

- Special Membership rates to popular fitness centers/organizations through our partnership with Husk Wellness.
  - Gym discounts
  - Nutrition education
  - Home and tech equipment discounts
  - On-demand fitness
  - Mental health coaching

- Discount Programs for healthy living products.
  - AmericanFitness.net
  - Safe Beginnings for child-proofing your home
  - YogaAccessories.com
  - Beltone Hearing Aids
  - Vitamix



MEDICAL MUTUAL

24/7 Nurse Line Access

- Access to a highly-trained and experienced nurse who will:
  - Listen to your concerns and provide an assessment of the situation.
  - Help determine if you need to visit your doctor, an urgent care clinic or the emergency room.
  - Talk through self-care for treating minor conditions at home.
  - Provide easy-to-understand explanations about medical tests and results.
  - Follow up later to see how you're feeling.

Talk to a nurse anytime – 24 hours a day!
Call 1-888-912-0636.



MEDICAL MUTUAL®

What is SmartShopper®?

- SmartShopper is a tool that helps you compare costs between high-quality locations and choose the best option for them - Ultimately paying less out-of-pocket and even earning a cash reward!.



Clarity, Delivered



At Your Fingertips

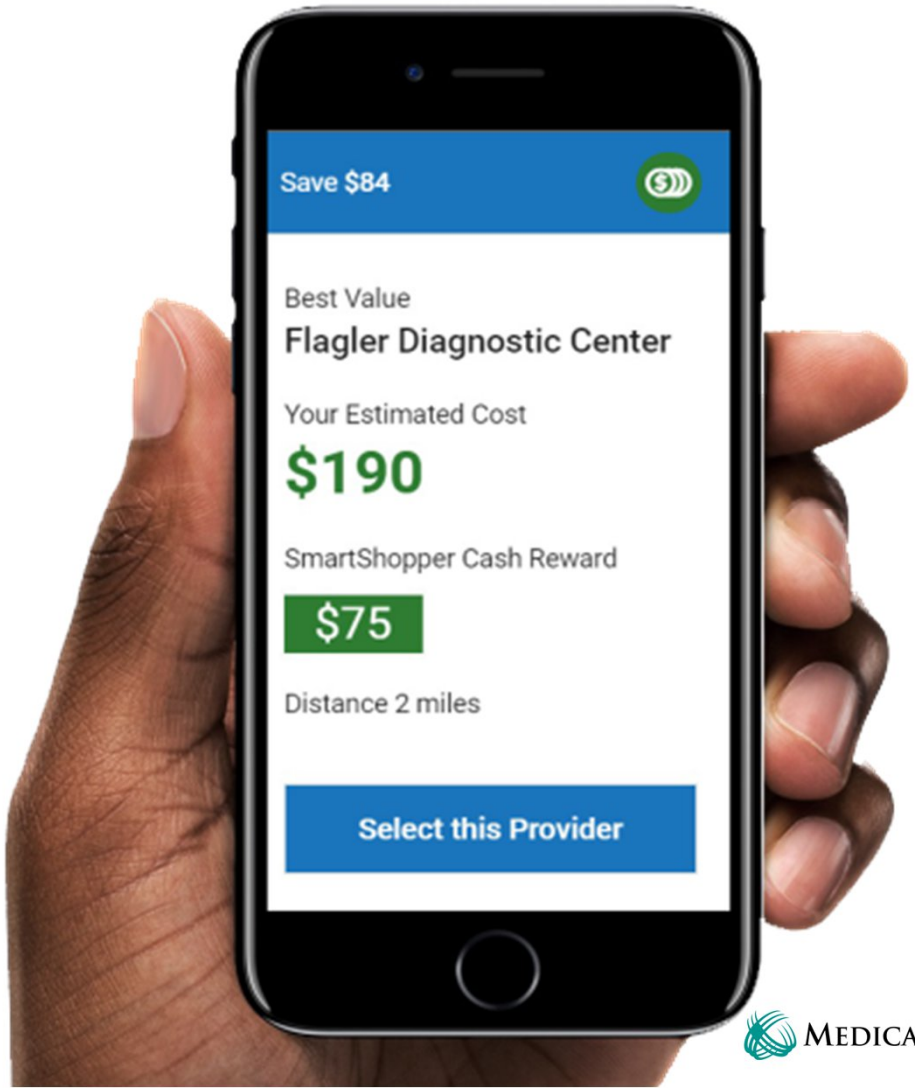


Support That Stands by You



Incentive List

- Up to 70 Procedures are eligible
- Rewards at 30% of the savings, up to $750
- Rewards are paid via check in approximately 6-8 weeks after your claim is processed



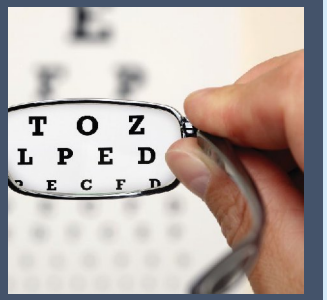
NOTE: Those that earn $600+ in incentives will also receive a 1099 from SmartShopper

MEDICAL MUTUAL®

VISION

BENEFITS	MMO Vision Plan	
	In-Network	Out-of-Network
Eye Exam	$40 Copay	
Lenses	$20 Copay	
Frames	$60 Copay	
Contacts – Medically Necessary	$175 Copay	
Contacts – Elective	$125 Copay	
Exam Frequency	Calendar Year	
Lens Frequency	Calendar Year	
Frame Frequency	Every Other Calendar Year	





- Premiums paid 100% by employee
- Coverage for exams & materials
- Medical Mutual Network includes over 50,000 providers nationwide
- www.medmutual.com

MEDICAL MUTUAL®

Delta Dental of Ohio

City of Brooklyn

Dental Benefits Overview



DELTA DENTAL®

Dental Benefits Overview

DENTAL PLAN	Delta Dental PPO plan pays	Delta Dental Premier plan pays	Nonparticipating plan pays
Diagnostic and preventive services—exams and cleanings	100%	100%	100%
Radiographs—x-rays	100%	100%	100%
Minor restorative—fillings and crown repair	80%	80%	80%
Endodontics—root canals	80%	80%	80%
Periodontics—treatment of gum disease	80%	80%	80%
Major restorative—crowns	60%	60%	60%
Prosthodontics—bridges, implants & dentures	60%	60%	60%
Orthodontic services—braces (ages 6-18)	60%	60%	60%
Orthodontic lifetime maximum (per person)	**$1,500**		
Annual deductible (per person / per family)	**$50 / $150**		
Annual maximum (per person)	**$2,000**		

NOTE: Please refer to your complete summary of dental benefits for your specific coverage and plan information

DELTA DENTAL

Dual PPO Network Model—Overview

Delta Dental PPO	Delta Dental Premier

- Delta Dental PPO™
  - The deepest discounted PPO network
- Delta Dental Premier®
  - A broad-access PPO network with significant discounts
- Access to the nation's largest dental network
  - We combine our two PPO networks to drive superior value
  - Deep discounts for all patients visiting a Delta Dental in-network provider
  - Claims are adjudicated in a manner to maximize savings

DELTA DENTAL

Stay in Network!

You may see any dentist you like. However, you will likely save the most money and receive the highest level of coverage when you visit a Delta Dental PPO dentist.

Example savings for a crown by network	Submitted charge	Maximum allowed fee	Percentage paid by Delta Dental	Amount Delta Dental pays	Amount dentist can balance bill	Total amount you pay	Total network savings
Delta Dental PPO	$950	$675	50%	$337.50	$0	$337.50	**$275** ✓
Delta Dental Premier	$950	$898	50%	$449	$0	$449	$52
Out-of-network	$950	$744	50%	$372	$206	$578	$0

DELTA DENTAL

Find a Dentist

- Online search tool—**www.deltadentaloh.com/findadentist**
  - Choose your network from the list—Your plan uses the Delta Dental PPO and Delta Dental Premier networks. To find a dentist in these networks, select "Delta Dental PPO Plus Premier" as your plan option when searching.
- Customer service—Call us toll free at **800-524-0149**, and the automated system will provide you with a list of participating dentists near you
- Member Portal —**www.memberportal.com**

Always ask your dentist if he or she is a participating dentist with your Delta Dental plan before receiving any dental services.

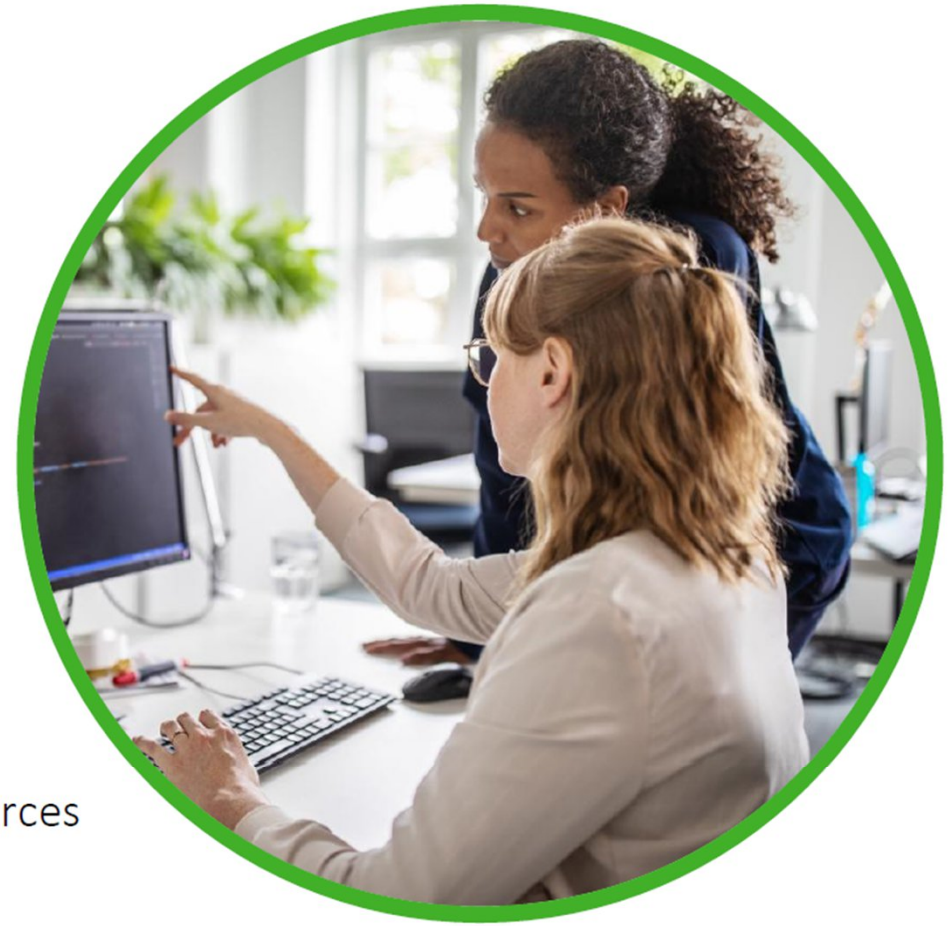
DELTA DENTAL

Member Tools

Delta Dental website:

www.deltadentaloh.com

- Oral health articles and videos
- Wellness materials
- Find a dentist search
- Refer your dentist online form
- Children's oral health materials and resources



DELTA DENTAL

Member Tools

Mobile smartphone app

- Download free for iOS and Android through App Store or Google Play
- Print/view EOBs
- Print personalized ID cards
- Annual maximum used to date
- Verify eligibility status
- Confirm address
- Discover valuable oral health information



Questions?

Call customer service, Monday through Friday, 8:30 a.m. to 8 p.m.

800-524-0149

Visit the Enrollment Resource Center to learn more:



www.deltadentaloh.com/oe-pos

DELTA DENTAL

Life Insurance



MetLife

What is Life Insurance

Life insurance helps to provide a more financially secure future

Key Features

- A wide range of coverage options to fit your needs
- Your beneficiary receives the death benefit income tax free
- Underwriting requirements waived for certain amounts



Life insurance: Why is it so important?

If you have a spouse or domestic partner, or if you have children, they may rely on you to help keep the household running. It's important to take steps to make sure your loved ones would be financially prepared without you to handle expenses like:

- Food
- Utilities
- Transportation
- Mortgage/rent payments
- Childcare or education fees
- Insurance premiums

Help your family be financially prepared for expenses such as:

- Childcare/education fee
- Transportation and more
- Mortgage or rent payments
- Utilities
- Insurance Premiums

MetLife

Life/AD&D Overview

Basic Life/AD&D coverage	Benefit – employer paid
Employee Life / AD&D coverage	**Flat $30,000**

Voluntary / Supplemental Life and AD&D coverage	Benefit – voluntary – employee paid
Employee Life / AD&D coverage	Increments of **$10,000** Up to a maximum of **$500,000** Guaranteed Issue**: $150,000** – no age reduction
Spouse Life	Increments of **$5,000** Up to the lesser of 50% of the employee amount or **$100,000** Guaranteed Issue: **$30,000** – no age reduction
Dependent Child Life	Under 15 days: **$100** 15 days – 6 months: **$1,000** 6 months – 26 years: options of **$1,000; $2,000; $4,000; $5,000; $10,000** Guaranteed Issue: **$10,000**, not to exceed Spouse Coverage

MetLife

Protecting Your Health with Affordable, High-Quality Hearing Care

What Oswald's TruHearing program includes

- Free annual hearing exam
- Dedicated hearing consultants to guide them through the process
- A 60 day, no-risk trial
- Three-year manufacturer warranty
- 80 free batteries per hearing aid
- One year of unlimited follow-up visits after fitting
- Fixed, transparent pricing with typical savings of 40%-60% vs. retail

TruHearing™

Hearing loss is more prevalent than diabetes or cancer and is closely tied to depression, cognitive decline and accidental injury. Yet hearing health is often overlooked.

We may not prevent hearing loss entirely, but we can remove barriers, improve access and make it easier for you to act sooner rather than later.



2027 Outcomes Based Wellness Program

- **New Vendor: IH21/Healthworks**
- New Program Start Date: October 1, 2026
- Program closes September 30, 2027
- By participating in the Preventive Exam and Biometric Screenings, you can save on your 2028 medical premium

- Employee communications will be provided
  - Wellness Program Overview
  - Monthly communications
    - Fliers/emails promoting portal activities and preventive care services

Introducing:
New IH21 Healthworks Wellness Program

2026/2027 Biometric Standard Measures

Program Start: 10/1/2026

Type	Biometric Factors	Standard Goals	Reasonable Alternative	Incentive
Biometric Outcomes Meet goal or reasonable alternative	**Blood Pressure**	≤ 129/79	Improve from last program's screening Or See Physician	Premium Discount
	Body mass Index (BMI)	≤ 27.5 Or waist ≤ 35 in (F) 40 in (M)	Improve from last program's screening Or See Physician	
	Fasting Glucose or Hemoglobin A1c	≤100 ≤ 5.6	Improve from last program's screening Or See Physician	
	LDL Cholesterol	≤ 129	Improve from last program's screening Or See Physician	
	Triglycerides	≤ 150	Improve from last program's screening Or See Physician	
Other Activities Available on Portal	▪ Health Videos ▪ Preventive Care Services		**Important Dates**	• Program Open: 10/1/2026 • Program Close: 9/30/2027
Financial Impact	**Premium Discount**			

2026/2027 IH21 Healthworks Wellness Program

Program Dates: 10/01/2026-09/30/2027

Program Details:

We've partnered with Integrated Health 21 to create a wellness program to help you feel motivated, earn an incentive, and improve your overall health.

Incentive:

Meet all 5 Biometric Health Goals to receive a $75/month Premium Discount.

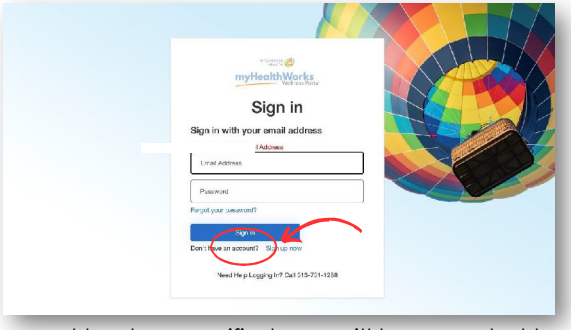
Participate in Three Easy Steps:

1. Make an appointment with your Primary Care Physician (PCP)
2. Log into the myHealthWorks wellness portal and download the PCP form to take with you to your appointment
3. Go to your appointment and return your completed form to HealthWorks for credit. If necessary, refer to the program guide for Reasonable Alternative instructions.

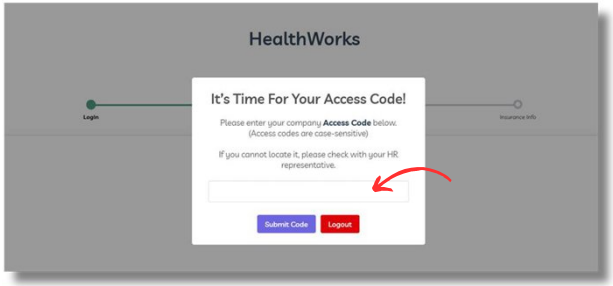
Once your results are received and recorded in your personal portal, you will get an email from us alerting you they are ready to be viewed!

Wellness Portal: How to Login

- Go to www.myhealthworksportal.com
- If you haven't already, click **'Sign up now'** & create an account
- *(Note: input your name as it appears on your insurance card)*
- A verification code will be sent to the email you provide



- After your account has been verified, you will be prompted to enter your company's **ACCESS CODE**: **RNXAP**

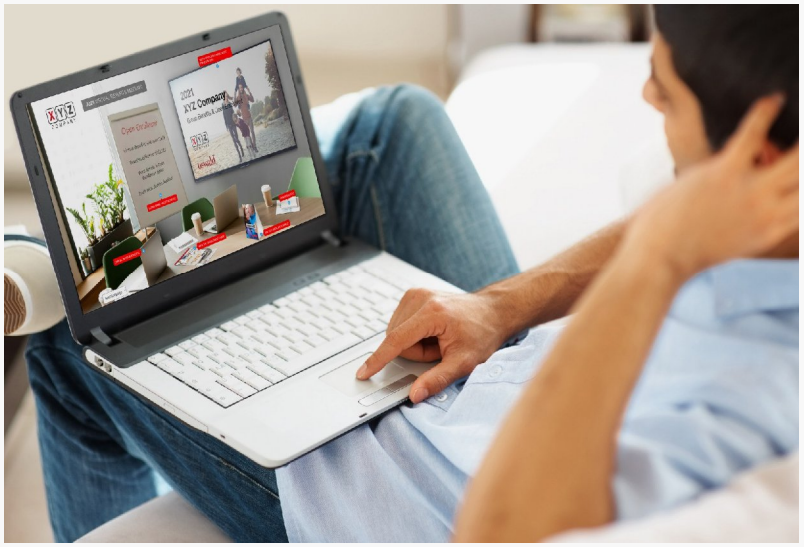


Questions?
Call: 513-751-1288
Email Help@integratedhealth21.com

INTEGRATED HEALTH 21

HealthWorks Central Division

What do I need to do now?



1. **For additional information on your benefits, visit the Benefits Website at www.mycityofbrooklynbenefits.com**
2. **Enrollments will be completed on the NEW Employee Navigator Benefits Administration System via the below link: https://www.employeenavigator.com/benefits/account/login**
3. **All Employees will receive an email to register with Employee Navigator to make their 2027 Benefit Elections.**
4. **Questions on your Benefits? Reach out to Jody Fisher at Oswald: 216-505-8196**
5. **Don't miss out – the Open Enrollment window closes on November 20th!**

Don’t Miss Out!

Open Enrollment Ends November 20th

