



CITY OF NEW ORLEANS

2025 EMPLOYEE BENEFITS BOOKLET

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HELPFUL TERMS FOR UNDERSTANDING BENEFITS

HEALTHCARE SUMMARY

The City of New Orleans offers a bundled Healthcare Plan that covers medical, prescription drugs, dental, and vision insurance for employees, retirees, spouses/domestic partners, and dependents. The plan offers in-network benefits, including office visits, preventative care, inpatient & outpatient services, mental health, and emergency services.

COINSURANCE

The employee share of the costs of a covered healthcare service calculated as a percentage.

COPAYMENT OR COPAY

A fixed amount of money the employee will pay for a covered doctor and/or dental visit or prescription.

COVERED SERVICES

The portion of a medical, vision, and dental expense that the plan has agreed to pay for or reimburse.

This includes:

- Doctor's office visits
- Prescription drugs (Pharmacy)
- Emergency Services
- Hearing aids
- Hospital care
- Lab services
- Pregnancy care services
- Outpatient care services
- Pediatric dental and vision services
- Rehabilitative services and devices
- Wellness services
- Mental health and substance use disorder services

DEDUCTIBLE

The amount the employee will need to pay before the plan will start to pay for covered services.

NETWORK

A group of health care providers and facilities that have a contract with United Healthcare.

Using the network may help lower the employee's costs because these providers and facilities have agreed to provide services at a discount. If the employee uses out-of-network providers, the costs may be higher.

OUT-OF-POCKET LIMIT

The most an employee could pay during a coverage period (usually one year) for their share of the costs of covered services. After an employee meets the limit, the plan will usually pay 100 percent of the allowed amount. The out-of-pocket limit includes all of the employee network payments.

PRESCRIPTIONS

Medications and drugs prescribed by the doctor. The employee may save money by choosing prescriptions from the lower tiers and signing up for home delivery. Talk to the pharmacist or doctor to learn ways that may help you save.

PREVENTIVE CARE

Routine health care, including screenings, checkups, and patient counseling to prevent or discover illness, disease or other health or dental problems.

DIGITAL ENGAGEMENT

Once an Employee has enrolled, benefits will be accessible after their designated waiting period. The QR will allow members to access plan details and additional support from UnitedHealthcare, Inc.

Register today



Scan the QR code or go to
myuhc.com and click **Register Now**

See next page for registration steps

BENEFITS ELIGIBILITY

Employees are eligible for benefits if they are either Full-Time or Part-Time working 30 hours per week (FTE .75) or more. Human Resources will briefly explain the benefits during the onboarding/hiring process. Newly hired eligible employees are subject to a waiting period before their healthcare coverage becomes effective.

Starting January 1, 2024, the waiting period for all eligible employees is 30 days.

An employee can enroll for benefits within 30 days of the date when he or she is hired or becomes newly eligible for benefits. Once an employee elects to enroll for benefits, the election remains in effect through the end of the plan year, unless the enrolled employee experiences a qualifying event.

An employee can cover their legal spouse/domestic partner and dependent children, including adopted children up to age 26 under the city's healthcare plan. Stepchildren may be covered regardless of the biological parent being on the healthcare plan and proof of marriage to the biological parent is required. Disabled adult children can remain on their parent's healthcare plan after age 26 if the appropriate documentation is provided to the Benefits Division prior to the dependent turning age 26.

Changes to the election may be made during the annual Open Enrollment period for benefits starting January 1 of the following year.

DEPENDENT ELIGIBILITY VERIFICATION

Employees electing coverage will be required to supply documentation to verify dependent eligibility. Failure to provide required information in a timely manner will result in forfeiture of coverage for the duration of the current plan year.

DECLINING COVERAGE

Employees who elect to not participate in the healthcare plan at the time of hire must decline coverage in the ADP system and turn in a completed Declination of Healthcare Coverage Form to their Human Resources Manager. This process must be performed for each year there is a decline in coverage. Once officially declined, employees must wait until the next Open Enrollment period to enroll for health coverage that will begin Jan 1st of the following year.

REQUIRED DOCUMENTS FOR DEPENDENTS

- Original Marriage License/Domestic Partnership Certificate
- Original Birth Certificate (English translation) or Birth Letter (Newborns Only)
- Original Social Security Card
- Adoption Placement/Court Orders
- Temporary Guardianship Written Document
- Legal Guardianship Documents
- For Dependent Children Over 26 Years of Age: Disabled Dependent Child Written Physician's Statement

BE PREPARED

Here are some tips to ensure that you make the best choices for yourself and your family.

- Read through this benefit guide with your spouse/domestic partner (if applicable) and write down any questions you may have.
- If you are adding dependents to your plan, you must provide originals of all required documentation within 30 days of hire to complete the enrollment.

QUALIFYING EVENTS

The employee can only change their benefit elections during the plan year if there is a major qualifying event in the family status due to:

- Marriage (*within 60 days of the event date*)
- Divorce (*within 60 days of the event date*)
- Birth/Adoption of a child (*within 60 days of birth*)
- Change in work status
- Termination/Commencement of employment
- Loss of a dependent (*within 30 days of the event date*)
- Medicaid eligibility (*within 30 days of the event date*)

Employees must notify their HR Manager of a Qualifying Event to change their benefit election. If they do not notify their HR Manager within the qualifying time period, they will not be eligible until the next Open Enrollment period.

WELLNESS COMPLIANCE

The City's Healthcare Plan focuses on employee wellness. To promote wellness, the healthcare plan provides premium discounts known as wellness credits, for those who complete the specified wellness activities described in the Wellness Credit Compliance section. Completion of all wellness activities are mandatory to receive the wellness credit and pay the reduced premium amount (compliant contribution) indicated on the rate sheet and should be completed by each adult plan member (an employee and his/her covered spouse or domestic partner). Wellness program participation is not required by covered children, including adult children up to age 26.

WELLNESS CREDIT COMPLIANCE REQUIREMENTS:

- Annual Wellness Exam
- UHC Rally Health Survey at www.myuhc.com

Both requirements must be completed to receive the Wellness credit for the following year. Failure to complete the wellness compliance requirements will result in premium surcharges of up to \$30 per month.

MEDICAL PREMIUM SURCHARGES

EMPLOYEE SURCHARGE

All employees enrolled in the City of New Orleans healthcare plan are required to complete the wellness compliance requirements each year by having an Annual Wellness Exam and completing the UHC Rally survey online at www.myuhc.com. Failure to complete both will result in a surcharge of \$15 per month for the employee, in addition to the employee's premium for the remainder of the year.

SPOUSAL/DOMESTIC PARTNER SURCHARGE

If the employee enrolls their spouse/domestic partner on their healthcare plan, the spouse/domestic partner will also be required to complete the wellness compliance requirements each year by having an Annual Wellness Visit and completing the UHC Rally Health Survey online at www.myuhc.com. If the employee's spouse/domestic partner fails to complete both wellness compliance requirements, then the employee will incur a surcharge of \$15 per month in addition to the employee's premium for the remainder of the year.

Should an employee be charged a surcharge but performed both Wellness Compliance mandates before the allotted time, they will need to supply proof of both wellness visit and Rally survey. To retrieve the Rally information and submit their request for reimbursement, employees should follow the steps below:

1. Log in myuhc.com
2. Click on My Account
3. Click on Rewards
4. Click on Program History - this screen will show when the Annual Physical Exam and Complete Rally Health Survey were performed.
5. Take a screenshot of the history and make sure the subscriber's name is in the screenshot. This will include the spouse/domestic partner, should the employee have one.
6. Send an email to **Benefits@nola.gov** with the screenshot(s) that show(s) when the Annual Physical Exam and Rally Health Survey was completed, along with a brief description and the stated request to be refunded.

Benefits Administration will work with ADP to ensure the deduction stops and any funds taken up to the point that occurs will be refunded.

LABCORP AND QUEST DIAGNOSTIC LABS

When obtaining services from a provider in non-emergency situations, please request that your doctor or hospital send the blood work to a LabCorp or Quest Diagnostic laboratory. The benefits of using an in-network lab provide lower processing costs.

CITY OF NEW ORLEANS
2025 CHOICE PLAN ACTIVE SUMMARY SHEET
PLEASE NOTE: There will be NO Medical Out-of-Network Coverage
Dental Coverage has a Buy-Up Option for 2025 Plan Year
Vision Coverage WILL NOT change for 2025 Plan Year

UHC MEDICAL PLAN			UHC Dental BASE PLAN			
Services	In Network	Out of Network	Services	In Network	Out of Network	
CALENDAR YEAR DEDUCTIBLE			CALENDAR YEAR DEDUCTIBLE			
Individual	\$750	Not Covered	Individual	\$0	\$50	
Family	\$2,250	Not Covered	Family	\$0	\$150	
OUT OF POCKET EXPENSES			ANNUAL ALLOWABLE AMOUNT			
Individual	\$4,500 (incl. deductible)	Not Covered	Individual	\$1,000 per person	\$1,000 per person	
Family	\$13,500	Not Covered	DIAGNOSTIC SERVICES			
Maximum Lifetime Benefit unlimited lifetime maximum			Periodic Oral Eval.	100%	100%	
OFFICE VISITS AND PREVENTATIVE CARE			Radiographs	100%	100%	
Office Visits	\$30 co-pay	Not Covered	Lab and Other Diagnostic Tests	100%	100%	
Wellness Visits	\$0 co-pay	Not Covered	PREVENTIVE SERVICES			
Specialist	\$45 co-pay	Not Covered	Prophylaxis (Preventive)	100%	100%	
OUTPATIENT SERVICES			FluorideTreatment (Preventive)	100%	100%	
Laboratory, X-Ray, and Diagnostics, Outpatient	0%	Not Covered	Sealants	100%	100%	
			Space Maintainers	100%	100%	
Laboratory and X-Ray – Major Diagnostics (CT Scan, PET Scan, MRI, Nuclear Medicine) Outpatient	20% after deductible	Not Covered	BASIC SERVICES			
			Restorations	80%	80%	
			General Services	80%	80%	
Outpatient Surgery	20% after deductible	Not Covered	Simple Extractions	80%	80%	
INPATIENT SERVICES			Oral Surgery (incl. surgical extractions)	80%	80%	
Hospital	20% after deductible	Not Covered	Periodontics	80%	80%	
Professional Services	20% after deductible	Not Covered	Endodontics	80%	80%	
EMERGENCY SERVICES			MAJOR SERVICES			
Emergency Room	\$350 co-pay	Covered(emergency services only)	Inlays/Onlays/Crowns	50%	50%	
			Dentures/Removable	50%	50%	
Urgent Care	\$50 co-pay	Not Covered	Fixed Partial/Bridges	50%	50%	
Ambulance	20% after deductible	Covered(emergency services only)	UHC Dental BUY-UP PLAN			
			ORTHODONTIC SERVICES – Up to Age 19 Only			
			Annual Deductible	\$0	\$50 / \$150	
			Orthodontia	50%	50%	
MENTAL HEALTH SERVICES			Lifetime Ortho Max	\$2,500	\$2,500	
In-Patient	20% after deductible	Not Covered	Dental Implants(any age)	50%	50%	
Limit per Calendar Year	No stay limitation	Not Covered	Implant Annual Max	\$1,000	\$1,000	
			UHC VISION PLAN			
Limit per Lifetime	No limitation	Not Covered	Services	In Network Per Calendar Year	Out of Network Reimbursement	
Outpatient Mental Health	\$30 per visit	Not Covered	Exam	\$10 co-pay	\$40	
Limit per Calendar Year	No visit limitation	Not Covered	Frame Benefit Private Provider	\$120-\$150 (Retail Price)	\$45	
PRESCRIPTION DRUGS	\$100 deductible	Not Covered	Frame Benefit	Retail Provider-\$130	\$45	
Generic (31 day supply)	\$10 co-pay	Not Covered	Contacts	\$105 Allowance	\$105	
Preferred (31 day supply)	\$35 co-pay	Not Covered	LENSES (Standard)			
Non-Preferred (31 day supply)	\$70 co-pay	Not Covered	Single Vision	No co-pay	\$40	
Mail Order Generic (90 day supply)	\$30 co-pay	Not Covered	Lined Bifocal	No co-pay	\$60	
Mail Order Preferred (90 day supply)	\$105 co-pay	Not Covered	Lined Trifocals	No co-pay	\$80	
Mail Order Non-Preferred (90 day supply)	\$210 co-pay	Not Covered	Laser Vision Correction	Discount Available Please call 1-888-563-4497		
Please note that the Benefit Summary above provides a brief description of coverage. It is not a policy, certificate of insurance or coverage document. For complete details on coverage, exclusions, limitations, and the terms under which coverage may continue, please contact your customer service representative or review the Summary Plan Description.						

HOW TO APPLY THE WELLNESS CREDIT TO YOUR WEEKLY / BI-WEEKLY PAYROLL (WELLNESS CREDITS DO NOT APPLY TO CHILDREN) BASE PLAN Healthcare Deductions Effective January 1, 2025 – December 31, 2025 (26 pay period calendar year)				
ACTIVE PARTICIPANTS	Weekly	Bi-Weekly	Monthly	ProjectedAmount Paid by the City
Employee Only (compliant)	\$30.16	\$60.31	\$130.67	\$478.83
Employee Only (non-compliant)	\$33.62	\$67.23	\$145.67	\$478.83
Employee & Child(ren) – (compliant)	\$81.97	\$163.95	\$355.21	\$770.08
Employee & Child(ren) – (non-compliant)	\$85.43	\$170.87	\$370.21	\$770.08
Employee & Spouse - EE/SP (compliant)	\$101.78	\$203.55	\$441.03	\$835.57
Employee & Spouse – (one non-compliant)	\$105.24	\$210.47	\$456.03	\$835.57
Employee & Spouse – EE/SP (two non-compliant)	\$108.70	\$217.40	\$471.03	\$835.57
Employee & Family – EE/SP (compliant)	\$120.47	\$240.94	\$522.03	\$1,242.64
Employee & Family – (one non-compliant)	\$123.93	\$247.86	\$537.03	\$1,242.64
Employee & Family – EE/SP (two non-compliant)	\$127.39	\$254.78	\$552.03	\$1,242.64

HOW TO APPLY THE WELLNESS CREDIT TO YOUR BI-WEEKLY PAYROLL (WELLNESS CREDITS DO NOT APPLY TO CHILDREN) BUY-UP PLAN Healthcare Deductions Effective January 1, 2025 – December 31, 2025 (26 pay period calendar year)				
ACTIVE PARTICIPANTS	Weekly	Bi-Weekly	Monthly	ProjectedAmount Paid by the City
Employee Only (compliant)	\$31.70	\$63.41	\$137.38	\$478.83
Employee Only (non-compliant)	\$35.17	\$70.33	\$152.38	\$478.83
Employee & Child(ren) – (compliant)	\$85.79	\$171.57	\$371.74	\$770.08
Employee & Child(ren) – (non-compliant)	\$89.25	\$178.49	\$386.74	\$770.08
Employee & Spouse - EE/SP (compliant)	\$105.13	\$210.26	\$455.56	\$835.57
Employee & Spouse – (one non-compliant)	\$108.59	\$217.18	\$470.56	\$835.57
Employee & Spouse – EE/SP (two non-compliant)	\$112.05	\$224.10	\$485.56	\$835.57
Employee & Family – EE/SP (compliant)	\$124.55	\$249.11	\$539.73	\$1,242.64
Employee & Family – (one non-compliant)	\$128.01	\$256.03	\$554.73	\$1,242.64
Employee & Family – EE/SP (two non-compliant)	\$131.48	\$262.95	\$569.73	\$1,242.64

DENTAL BENEFITS

Dental benefits that give you freedom and choice.

Preventive care.

If you see a network dentist, your plan will pay for all or most of your preventive dental care, including routine checkups, cleanings, and annual oral cancer screens for adults. You can get 2 cleanings in a 12-month period — one every 6 months. Some plans cover more cleanings for an additional copay.

Preventive visits are important because your dentist can catch problems early when they're easier to treat. Good oral health helps protect your teeth and gums and is also linked to your overall health.

How your teeth affect your health.

Gum disease is a painless disease that causes bacteria and toxins to enter your blood, which may also be connected to:

- Diabetes
- Heart disease
- Pregnancy complications
 - Increased bacteria levels in a pregnant woman's mouth can lead to tooth decay. Your plan covers extra visits for cleanings and gum treatments when you're pregnant, as recommended by your dentist. Ask your dentist to submit a claim to the address on your ID card. Be sure to include the name of your OB/GYN and your pregnancy due date.
- Respiratory conditions
- Rheumatoid arthritis

In-Network Dental Coverage \$1,000 per member



Healthcare Coverage Plus Plan "Buy Up"

ORTHODONTIA + IMPLANTS + DENTAL BASE PLAN

Employees now have an opportunity to add additional dental coverage using the Buy-Up option. The Buy-Up plan provides orthodontia coverage to dependents under the age of 19. Employee dependents dental coverage will increase by \$2,500 in-network to treat teeth abnormalities using braces or other aligning methods.

Employees can select the Buy-Up option during the Open Enrollment period.

Find a Dentist.

See any dentist and save by using our network. The plan has a national network of 100,000+ dentists.

* Find a network dentist at:
welcometouhc.com/dentalppo

VISION PLAN

with Spectera Eyecare Networks

Eye health is important to you and your family's overall health. Save on eye care with a Vision Plan. Plan includes:

Eye exam

The plan includes a comprehensive eye exam with a **\$10 co-pay**.

Frame allowance

When the employee uses a network provider, the employee has an allowance they can use to help buy any frames the eye doctor offers.

Contact lenses benefit

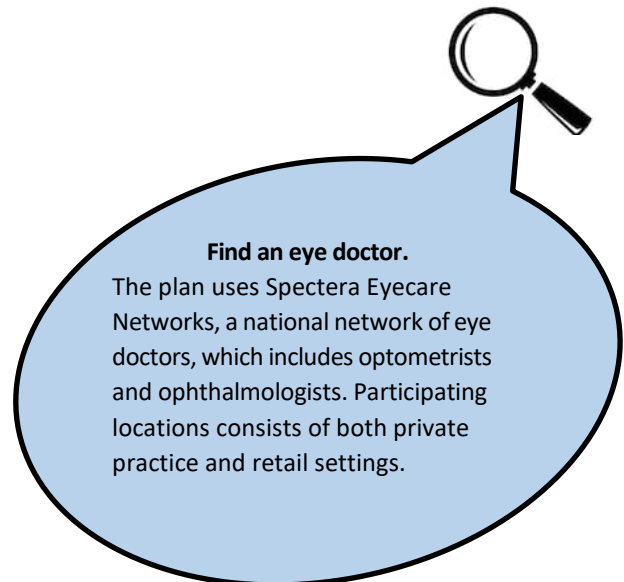
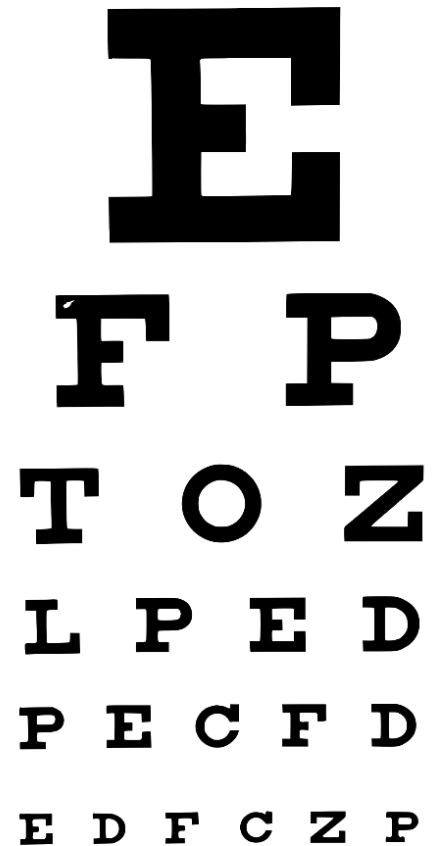
Get contact lenses with a fitting. Choose from popular brands, including some that may be fully covered.

Popular lens options

Popular lens options may be available to at a price-protected amount. Plus, standard scratch coating and polycarbonate lenses for dependent children are available at no additional cost.

Additional pairs of glasses

Get a discount of up to 20 percent on additional pairs of eyeglasses, including prescription sunglasses.



Find an eye doctor.

The plan uses Spectera Eyecare Networks, a national network of eye doctors, which includes optometrists and ophthalmologists. Participating locations consists of both private practice and retail settings.

COBRA Continuation Coverage

The Consolidated Omnibus Budget Reconciliation Act (COBRA) is a federal law that requires employers to offer continued health insurance coverage to employees and their dependents whose group health insurance has been terminated. If you are an employee of the City of New Orleans covered by the City's Healthcare plan, you have the right to choose healthcare continuation coverage if you lose your group coverage due to a reduction in your hours of employment, resignation, or termination for reasons other than gross misconduct on your part. You do not have to show that you are insurable to choose continuation coverage. You have sixty **(60)** days after the date you receive initial notice or the date in which your coverage would otherwise terminate, whichever is later, to elect continuation coverage. If an employee does not elect continuation coverage, the group health insurance benefits will terminate in accordance with the City of New Orleans Healthcare plan contract. Contact your Human Resources Manager for a COBRA Election Form or the Chief Administrative Office – Benefits Administration Division at **(504) 658-8615** for additional information.

COBRA CONTINUATION COVERAGE- EFFECTIVE JANUARY 1, 2025	
PARTICIPANTS - Base Plan	MONTHLY PREMIUMS
Employee Only	\$593.05
Employee & Spouse/Domestic Partner	\$1,245.43
Employee & Child(ren)	\$1,097.16
Employee & Family	\$1,719.87
Child(ren) Only	\$504.11
Spouse/Domestic Partner Only	\$624.21
Spouse/Domestic Partner & Child(ren) Only	\$652.37
RETIREE UNDER 65	MONTHLY PREMIUMS
Retiree & Spouse/Domestic Partner	\$1,680.50
Spouse/Domestic Partner Only	\$896.13
Child(ren) Only	\$620.88
Spouse/Domestic Partner & Child(ren) Only	\$1,484.06

PARTICIPANTS - BUY-UP Plan	MONTHLY PREMIUMS
Employee Only	\$604.91
Employee & Spouse/Domestic Partner	\$1,270.34
Employee & Child(ren)	\$1,119.10
Employee & Family	\$1,754.27
Child(ren) Only	\$514.19
Spouse/Domestic Partner Only	\$636.69
Spouse/Domestic Partner & Child(ren) Only	\$665.42
RETIREE UNDER 65	MONTHLY PREMIUMS
Retiree & Spouse/Domestic Partner	\$1,714.11
Spouse/Domestic Partner Only	\$914.05
Child(ren) Only	\$633.30
Spouse/Domestic Partner & Child(ren) Only	\$1,513.74

The election form along with your premium payment should be completed and returned to:
**Chief Administrative Office; Benefits Administration Division; 1300 Perdido Street; Suite 9E06;
 New Orleans, LA 70112.**

VIRTUAL VISITS



Estimated Out-of-Pocket Cost

\$10

**GET ACCESS TO CARE
24/7 WITH VIRTUAL VISIT**

Use a Virtual Visit for these common conditions:

- ✓ Allergies
- ✓ Flu
- ✓ Sore throats
- ✓ Bronchitis
- ✓ Headaches/migraines
- ✓ Stomachaches
- ✓ Eye infections
- ✓ Rashes
- ✓ Or quick assessment of severity

Not good for...

- ✗ Anything requiring hands on exam
- ✗ Anything requiring a test
- ✗ Cancer or other complex conditions
- ✗ Chronic conditions
- ✗ International visits
- ✗ Sprains / Broken bones or injuries requiring bandaging

Virtual Visit Providers:





Healthier habits Healthier lifestyle

Take small steps for lasting change with Real Appeal®, an online weight management support program.



Get healthier, at no additional cost to you

Real Appeal on Rally Coach™ is a proven weight management program designed to help you get healthier and stay healthier. It's available to you and eligible family members at no additional cost as part of your benefits.

Take small steps toward healthier habits

Set achievable nutrition, exercise and weight management goals that keep you motivated to create lasting change. Track your progress from your daily dashboard, too.

Support and community along the way

Feel supported with personalized messages, online group sessions led by coaches and a caring community of members.

Join today at enroll.realappeal.com or scan this code



Get a Success Kit delivered right to your door.

Make the most of tools and resources like weight and food scales, a portion plate and more. Your Success Kit is delivered after you attend your first live group session.

Real Appeal is a voluntary weight loss program that is offered to eligible members at no additional cost as part of their benefit plan. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them. Results, if any, may vary. Any items/tools that are provided may be taxable and participants should consult an appropriate tax professional to determine any tax obligations they may have from receiving items/tools under the program.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.

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United
Healthcare

Real
Appeal®

The path to quitting starts here



If you use tobacco and have thought about quitting, **Quit For Life® on Rally Coach™** may be able to help. Get tools and online resources designed to help you quit — and stay quit — at no additional cost.



Get coach support

Connect with a coach who will help create a personalized Quit Plan and guide you at every step



Access anytime, anywhere

Manage triggers with help from coach-led group sessions, trackers, text support, and more, all at your fingertips



View quit recommendations

Get real-life tips and plan your path to quit with recommended daily goals, articles and videos



Stay on track with **24/7** support

Quit For Life®

Get started

Go to [Myuhc.com](https://myuhc.com) > Health & Wellness > My Health & Wellness > Programs > Quit Smoking

This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through this program is for informational purposes only as part of your health plan. Wellness coaches, nurses and other program representatives cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Please discuss with your doctor how the information provided may be right for you. Your health information is kept confidential in accordance with the law. The program is not an insurance program and may be discontinued at any time.

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EMPLOYEE ASSISTANCE PROGRAM (EAP)

The Employee Assistance Program (EAP) is a voluntary work-based program that offers free and confidential assessments, short-term counseling, referrals for long-term counseling and follow-up services to employees who have personal and/or work-related challenges at www.liveandworkwell.com (Access Code: **NOLA**). Call us at **1-866-248-4096**, whether you're struggling with grief, starting a new job or just need to sort through your feelings.

Who's eligible to participate? The workforce!

All active employees, spouses/domestic partners, dependents (in household) enrolled into the city's healthcare plan. Telephone, online, and face-to-face support available 24/7. Confidential support at no cost to employees. Retirees and their spouses/domestic partners, retiree's widows and dependents are not eligible.

Consultations: No appointments are necessary for online/telephonic services, available 24/7 by phone **1-866-248-4096**. All services are confidential in accordance with federal and state laws. Personal records are never shared with your employer and anyone else without your permission.

Exceptions

- Except when required by law (court order)
- Suspicion of child or elder abuse is reported
- Threat of serious physical harm to any identified victim
- If there is a concern about a member harming himself or herself
- Gravely disabled member to the point of well-being being threatened
- Member gives written consent

Mediation Services include: Child Custody, Collections, Contractual Disputes, Real Estate, and Separation/Divorce.

Financial Services include: Bankruptcy, Budget Management, College Funding, Investment Planning, IRA's, Retirement Planning, Tax Consulting, and Wage Garnishment.

Real people. **Real life.** Real solutions. Your Employee Assistance Program

1-866-248-4096 or
log on to livewellworkwell.com
Access code: NOLA



**Suicide Prevention
Hotline**

1-800-273-8255

Rediscover your passion for health

With One Pass Select, we're on a mission to make fitness engaging for everyone. One Pass Select can help you reach your fitness goals, while finding new passions along the way. Find a routine that's right for you whether you work out at home or at the gym. Choose a membership tier that fits your lifestyle and provides everything you need for whole body health in one easy, affordable plan. You and your eligible family members (18+) can get started with One Pass Select today.



Find your it with One Pass Select



At the gym

Choose from our large nationwide network of gym brands and local fitness studios. Use any gym in the network and create a routine just for you.



At home

Work out at home with live or on-demand online fitness classes. Try our workout builder to get routines created just for you, no matter what your fitness level and interests are.



In the kitchen

Get groceries and household essentials delivered to your home. We make it easy to plan for everything you need to enjoy delicious, nutritious meals.

\$34/Mo

Classic

12,000+ gym locations

\$69/Mo

Standard

14,000+ gym and premium locations

\$109/Mo

Premium

16,000+ gym and premium locations

\$159/Mo

Elite

20,000+ gym and premium locations

An enrollment fee may apply

Or get started with a digital-only plan for \$10/Mo

All tiers Classic or above come with grocery and home essentials delivery at no extra cost.

Enroll today:

1. Scan QR code below or visit: <https://member.uhc.com/coverage/additional/>
2. Sign in or register
3. Select the One Pass Select tile



One Pass Select is a voluntary program featuring a subscription based nationwide gym network, digital fitness and grocery delivery service. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. Individuals should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for them. Purchasing discounted gym and fitness studio memberships, digital fitness or grocery delivery services may have tax implications. Employers and individuals should consult an appropriate tax professional to determine if they have any tax obligations with respect to the purchase of these discounted memberships or services under this program, as applicable. One Pass Select is a program offered by Optum. Subscription costs are payable to Optum.

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Stress less, sleep better and live more mindfully

Give your wellbeing a boost with Calm, the top-rated wellness app.



Calm can help you tackle stress, get a good night's sleep and feel more present in your life. It's one of the most popular apps worldwide — and it's available at no cost to you as part of your benefits. With the convenience of an app, you can use Calm whenever it fits your schedule to work on whatever's most important to you.



Relieve stress and anxiety

Explore practical tools, breathing exercises and quick courses designed to help you manage symptoms of stress and anxiety and help to settle them in the moment.



Sleep better

Relax and fall asleep more easily with soothing sleep stories read by celebrities, meditations, natural sounds and exclusive music selections.



Live more mindfully

Get daily mindfulness, wisdom and encouragement to quiet your mind, build healthy habits and nurture positivity with short, guided sessions and courses.

Ready to get started?

To register and download the app, scan the QR code for the Calm registration page and enter your company access code NOLA



Already have the Calm app?

1. Open the app
2. Go to: Profile > Settings > Link Organization Subscription
3. Enter organization code "Optum EWS"
4. In the "group code" field, enter your company access code NOLA

Available 24/7 | Confidential | No additional cost

Calm and Calm Health should not be used for urgent care needs. If you are experiencing a medical emergency, call 911 or go to the nearest emergency room. If you are experiencing a non-life-threatening mental health crisis, call or text 988. Calm and Calm Health are not intended to diagnose or treat depression, anxiety or any other mental or physical health condition. The use of Calm or Calm Health is not a substitute for care by a physician or other health care provider. Any questions that you may have regarding the diagnosis, care or treatment of a health condition should be directed to your physician or health care provider. Calm and Calm Health are mental wellness products. Participation is voluntary and subject to the Calm and Calm Health terms of use.

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Something on your mind? Message a dedicated therapist any time, anywhere



With Talkspace online therapy, you can regularly communicate with a therapist, safely and securely from your phone or desktop. Make progress. No office visit required.

IOS • ANDROID • DESKTOP
MESSAGING • VOICE • VIDEO • PHOTO

Here's how Talkspace can fit your life:

With Talkspace, you can message a licensed therapist, 24/7.

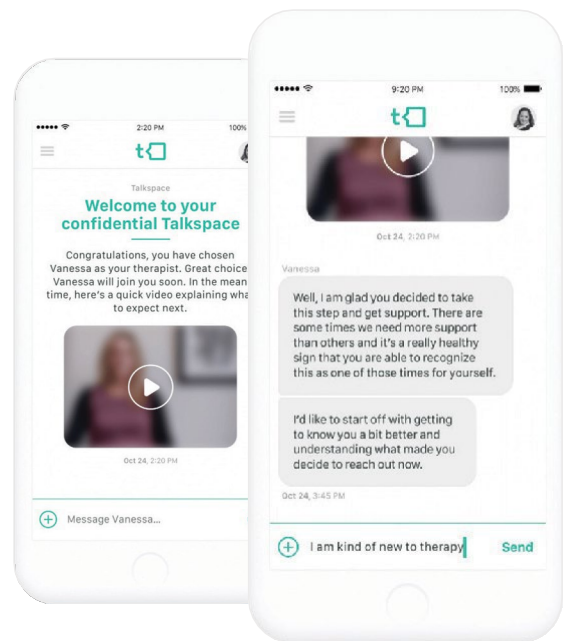
- Find a therapist with an online matching tool.
- Start therapy within hours of choosing your therapist.
- Message your therapist whenever — no appointments necessary.
- Get messages back throughout the day, five days a week.
- Choose real-time face-to-face video visits by appointment, when needed.
- You can also access Talkspace Psychiatry to schedule live video sessions with a psychiatrist trained in mental health care and prescription management for a tailored treatment plan.

Talkspace is convenient, safe and secure.

Simply register (first visit only) and choose a provider and message anywhere, anytime. talkspace.com/connect.

After you register, download the Talkspace app on your mobile phone. Talkspace is supported by Chrome, FireFox, Safari or Edge browsers on your desktop computer.

Talkspace is your space. To use in your time. It's covered under your plan's behavioral health benefits.**



*Data rates may apply.

**Copayment may apply and will be charged weekly via credit card. You may use Talkspace as often as desired per week once copayment for that week has been paid. iOS is a trademark or registered trademark of Cisco in the U.S. and other countries and is used under license. Android is a registered trademark of Google LLC.

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If you are experiencing thoughts of suicide or if this is urgent and an emergency, call 911 or 1-800-SUICIDE (784-2433) or 1-800-273-TALK (8255). UnitedHealthcare does not recommend or endorse any treatment, medication, suggested approach, specific or otherwise. The information provided herein is for educational purposes only. For advice about specific treatments or medications, please consult your physician and/or mental health care provider. Certain conditions and restrictions may apply. Also, certain treatments may not be covered in some benefit plans. Check your health plan regarding your coverage of services.

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United
Healthcare



Stressed? Anxious? With virtual therapy, getting help may now be easier than ever.



Reaching out may be hard—especially if you might not want anyone to know you’re hurting. From the privacy of home and the convenience of your mobile device* or computer, you can receive caring support from a licensed therapist.

Virtual therapy offers confidential counseling and includes:

Private video sessions

Get 1-on-1 support—in your home and at a time that’s convenient for you.

Help with coping — for children, teens and adults

Your licensed therapist may provide a diagnosis, treatment and medication if needed.

Similar standard of care as in-person visits

You can see the same therapist with each appointment and establish an ongoing relationship.

Virtual therapy is designed to help treat conditions like:

- ADD/ADHD
- Anxiety
- Mental health disorders
- Addiction
- Depression



A quicker way for the whole family to get care

A virtual visit for mental health care may be a great way for children and teens to get an appointment.

To find a provider and schedule a visit

Sign in or register on myuhc.com®. Then, go to **Find Care & Costs > Virtual Care > Behavioral Health Care > Get Started** and call the provider to set up an appointment. Or call the telephone number on your health plan ID card.

*Data rates may apply.

Costs and coverage may vary. Check your plan for details.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.

Administrative services provided by United HealthCare Services, Inc. or their affiliates, and UnitedHealthcare Service LLC in NY. Stop-loss insurance is underwritten by UnitedHealthcare Insurance Company or their affiliates, including UnitedHealthcare Life Insurance Company in NJ, and UnitedHealthcare Insurance Company of New York in NY.

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**United
Healthcare**

THE **level2**[®] HEALTH PLAN

Designed to help people with type 2 diabetes save money



CITY OF NEW ORLEANS

Level2 by UnitedHealthcare is the type 2 diabetes-specific health plan that includes comprehensive coverage for the whole family. Plus members can earn 100% coverage on common type 2 costs.

Q. Who is eligible for the Level2 Health Plan?

A. If you or your spouse has type 2 diabetes, you are eligible for the Level2 Health Plan. Plus, your entire family can be covered under the plan.

Q. Is my family covered by the Level2 Health Plan?

A. The Level2 Health Plan offers comprehensive coverage for the entire family, including 100% coverage and no deductible for:

- PCP visits to Premium Care physicians
- Outpatient diagnostic tests such as labs and X-rays

Q. What is included in the Level2 Health Plan?

A. The Level2 Health Plan provides comprehensive coverage for you and your family.

100% COVERAGE

ON DAY ONE

(means you could pay nothing for):



**Type 2 Medications
& Supplies**

**Primary Care Visits
to Premium Care
Physicians**

All Lab Work

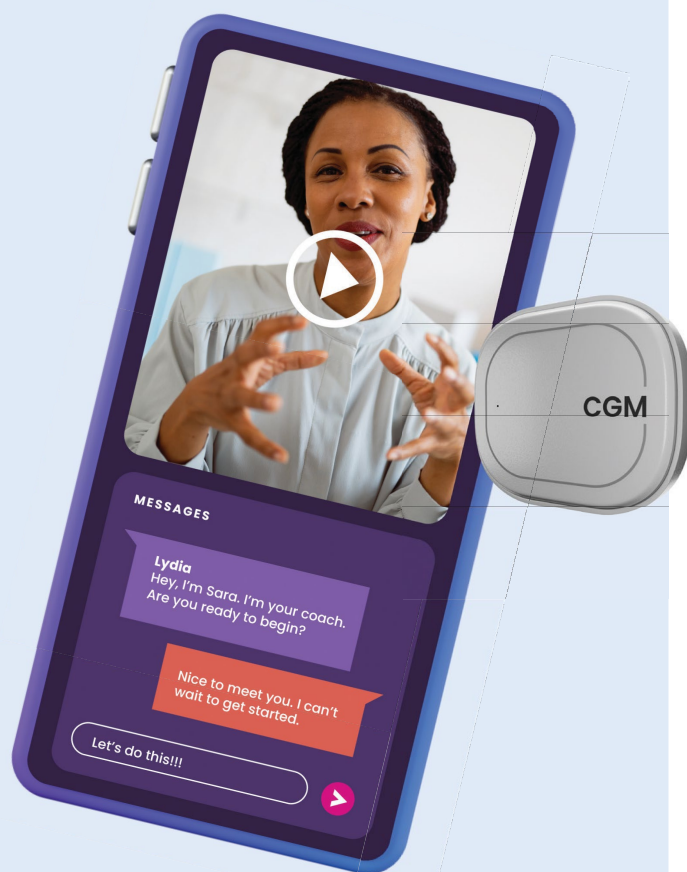
Q. What do I get when I enroll in the Level2 Health Plan?

A. Enrolling in the Level2 Health Plan also offers you the opportunity to participate in Level2 Specialty Care.

We start you off with a continuous glucose monitor (CGM) and access to the Level2 app, all backed with expert support from a Level2 care team:

- Physicians
- Nurse practitioners
- Registered dietitians
- Personal health coaches

Your Level2 care team can partner with your health provider to offer type 2 diabetes care.



Q. Can I keep my doctor on the Level2 Health Plan?

A. You can choose the physicians you want on the UnitedHealthcare Choice Plus network, which includes tens of thousands of physicians nationwide. Search for physicians with **"Find a provider" at myuhc.com**. Be sure to look for Premium Care physicians (marked with two blue hearts) so you can get 100% coverage for PCP visits. 💙💙

Q. Where can I get more details?

A. Our Level2 experts are happy to discuss how the Level2 Health Plan can save you money: Give us a call at

1-844-302-2821 (TTY 711)

7 a.m. to 8 p.m. CT, Monday – Friday
9 a.m. to 3 p.m. CT on Saturday.

Q. How do I get started with Level2?

A. Select the Level2 health plan during open enrollment.

Your participation in Level2 Specialty Care is not a guaranty that you will improve your type 2 diabetes, and Level2 does not guaranty any individual any specific results. Please discuss with your doctor whether Level2 is right for you. You have received this information because you may be eligible to participate in Level2 through your current health plan based on the information we have. Participation in Level2 Specialty Care and getting a continuous glucose monitor (CGM) are subject to certain health plan and clinical eligibility criteria. Level2 is available to eligible members of select UnitedHealthcare plans at no additional charge outside of payment of their plan premium. Qualified members are prescribed a CGM when they join Level2 Specialty Care. See program details at mylevel2.com.

Health coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. The company does not discriminate on the basis of race, color, national origin, sex, age or disability in health program activities. To contact your health plan administrator, please call the number on the back of your health plan member ID card.

FLEXIBLE SPENDING ACCOUNT (FSA)

The City of New Orleans provides its employees with an opportunity to participate in up to three different Flexible Spending Accounts (FSAs). FSAs allow employees to set aside a portion of their income, before taxes, to pay for qualified unreimbursed health care, dependent care and/or commuter expenses. Because that portion of the income is not taxed, you pay less in federal income, Social Security, and Medicare taxes. Health and Dependent Care FSAs are administered through United Healthcare. Commuter FSAs are administered through WageWorks.

Healthcare and Dependent Care FSA Enrollment must be elected every year during the Open Enrollment period (October 1st - October 31st) to be registered in the program for the following year.

Healthcare FSA (Unreimbursed Medical Expenses)

For 2025, an employee may contribute up to **\$3,200** to cover qualified deductibles, copays, prescriptions drugs and other out-of-pocket medical, dental, vision, and hearing expenses. The employee will have access to the full annual amount of the healthcare FSA on the first day of the plan year, prior to money being deducted from their paycheck.

Employees can access their FSA funds through the United Healthcare Spending Card or pay out-of-pocket and get reimbursed by submitting a Spending Account Claim Form.

Health Care FSA Eligible Expenses

- | | | |
|--|---|--|
| ✓ Acupuncture | ✓ Co-pays | ✓ Laser eye surgery |
| ✓ Ambulance | ✓ Deductibles | ✓ Physical therapy |
| ✓ Blood sugar test kits for diabetics | ✓ Hospital services | ✓ Prescriptions |
| ✓ Chiropractor | ✓ Insulin | ✓ Speech therapy |
| ✓ Dental treatments including X-rays, cleanings, fillings, braces and tooth removals | ✓ Doctor's office visits and Procedures | ✓ Over-the-counter drugs must be accompanied by a prescription |

Dependent Care FSA

For 2025, an employee may contribute up to \$5,000 annually per household if they are single or married filing joint tax return and \$2,500 if they are married filing separate tax returns (per IRS guidelines). The Dependent Care FSA may be used for eligible childcare (children under 13) and adult day care not capable of self-care while you are at work.

Eligible expenses include: Daycare, Summer Day Camps, Babysitting, Before and After School Care, Nursery School, Pre-Kindergarten Expenses, and Elder Care Expenses.

Commuter FSA

For 2025, Commuter FSA includes parking reimbursement and transit/van pool. An employee may contribute up to \$315 per month for parking, and up to \$315 per month for transit/van pool. These elections may be taken on a month-to-month basis.

Employees can enroll in the Commuter Expense Reimbursement Account (CERA) online at www.wageworks.com or by calling 1-877-WAGEWORKS.

For more information about these programs, please contact the Benefits Administration Division:

Telephone: 504-658-8615

Email: benefits@nola.gov

EDUCATION-RELATED PROGRAMS

START 529 Program or START K-12 Program

The **START 529 Program** is an Educational Savings Account and is recognized as a Qualified Tuition Program under section 529 of the Internal Revenue Code. It's a great opportunity to save for Qualified Higher Education Expenses at any accredited college, university, or proprietary schools (in-state or out-of-state). START 529 qualified expenses include: tuition, fees, supplies, books, equipment, room/board, expenses for special needs.

The **START K12 Program** is a "Qualified Tuition Plan" under Section 529 of the Internal Revenue Code. You can save for tuition expenses related to attendance at eligible Louisiana schools that provide kindergarten through twelfth grade instruction. START K12 funds remaining after your child graduates from high school can be rolled over into a START 529 Saving Plan. K12 qualified expenses include tuition.

Rivet School (formerly Trellis)

Rivet School (formerly called Trellis), partnered with the Southern New Hampshire University to offer accelerated college degrees for adults in New Orleans. It is a program that provides employees the opportunity to move up the corporate ladder throughout the various city departments and beyond through educational advancement! This program is specifically designed to make life a little easier for those employees seeking to continue their educational journey, but due to time constraints may have not had the time, finances, or support to pursue their goals. Trellis provides a pathway of flexibility, affordability, and support in earning a college degree where every employee will receive individualized support - Every Step of the Way! For more information about Trellis and its program, please go to:

- <https://www.trellisnola.org>

Western Governor's University (WGU)

WGU is a private, large non-profit institution offering bachelor's and master's degrees in business, information technology, K-12 teacher education, and health professions, including nursing. The competency-based programs measure learning rather than time, allowing students to progress through courses as soon as they can demonstrate mastery of the material.

WGU's online programs are mentor-supported and designed to fit into busy work and home schedules, assisting in the goal to upskill employees. Beyond its degree programs, WGU supports learners in a variety of ways through:

- College readiness programs and a path to college admission through WGU Academy.
- A revolutionary tuition model and access to scholarships and funding support that allow students to graduate with less debt below the national average.
- Mentors and faculty members who care for students, assist them persevere, address life challenges, and stay motivated.
- Post-graduation training, certifications, and support through alumni programs.

WGU aims to change the landscape of higher education by making it a more accessible, equitable, and outcome-based option for every learner, no matter where or how a student chooses to learn. WGU is committed to providing a 100% online competency and self-paced program with courses aligned with workforce needs.

For more information about these programs, please contact the Employee Relations Division:

Telephone: 504-658-7770

Email: employeerelationsdivision@nola.gov

Insurance (Life, Disability, Cancer, etc.)

AFLAC

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Aflac Worldwide Headquarters
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Columbus, GA 31999
www.aflac.com

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Olivette Lewis
3520 Gen. de Gaulle; Ste. 4092
New Orleans, LA 70114

Office: (504) 267-7772

Cell: (504) 905-4165

Fax: (504) 267-7841

thelewisgroup@yahoo.com

olivetteb_lewis@us.aflac.com

American Heritage Insurance/Allstate

Home Office

Allstate Workplace Division
1776 American Heritage Life Dr.
Jacksonville, FL 32224
(800) 348-4489
www.ahlcorp.com

Local Agents

Benoit and Associates
3645 Williams Blvd; Ste.101
Kenner, LA 70065
Office: (800) 443-5694
Fax: (504) 443-6004

Local Agents

Warren Benoit, President
Kelly Boswell
Office: (504) 443-5422
Fax: (504) 443-6004
kelly@benoitandassociates.com
www.benoitandassociates.com

Colonial Life and Supplemental Insurances

Home Office

Colonial Life
1200 Colonial Life Blvd.
Columbia, SC 29210
(800) 325-4368
www.coloniallife.com

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justin.manale@coloniallifesales.com

Melinda Jones
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Corey Wainwright
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Local Agents

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Alicia Near
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nearinsneeds@gmail.com

Hayden Aley
Cell: (619) 770-9577
hayden.aley@coloniallifesales.com

Dent-All

www.louisianadentalplan.com

Liberty National/Globe Life Insurance Company

Home Office

Globe Life
Liberty National Division
3700 S Stonebridge Dr.
McKinney, TX 75070
(800) 333-0637
https://home.globelifeinsurance.com/
libertynational

Local Agents

Larry McDaniel
3421 N. Causeway Blvd; Ste. 804
Metairie, LA 70002
Office: (504) 371-5936
Cell: (337) 224-5766
Email: lmcdaniel@libnat.com

Phillip Wegmann, Senior Agent
3421 N. Causeway Blvd; Ste. 804
Metairie, LA 70002
Office: (504) 756-3576
wegmannphillip@yahoo.com

Local Agents

Johnny Barlow
3421 N. Causeway Blvd; Ste. 804
Metairie, LA 70002
(504) 669-0825
jnbarlow@yahoo.com

Insurance (Life, Disability, Cancer, etc.)

Manhattan Life

Home Office

Manhattan Life
P.O. Box 926169
Houston, TX 77092

Customer Care & Claims

Office: (855) 448-6982
Fax: (502) 405-7107

Local Agent

Ricky Memleb
24071 Spanish Oak Ave.
Ponchatoula, LA 70454
Office: (504) 473-8154
Fax: (985) 340-8103
rickymemleb@gmail.com

New York Life Insurance Company

Home Office

New York Life Insurance Company
51 Madison Ave.
New York, NY 10010
(800) 710-7945
(800) 695-1314
www.newyorklife.com

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anear@ft.newyorklife.com

Local Agent

Violet Ertel
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Cell: (504) 258-4466
vertel@ft.newyorklife.com

Transamerica

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Transamerica Worksite Marketing
P.O. Box 8063
Little Rock, AR 72203-8063
Customer Service:
(800) 322-0426
Claims: (800) 251-7254
Claims Fax: (866) 945-8706
www.transamericaemployeebenefits.com

To request terminations,
reinstatements, inquire about issues
with or concerning your bill and any
general billing questions:

Email
TEBbillingservices@transamerica.com
Or call
(866) 411-4159, Option 3

For Claims information and/or
status updates or General
Customer Service inquiries,
surrenders, policy level inquiries:

Email
TEBCSProducers@transamerica.com
Or call
(800) 400-3042, Option 3

Legal Services

Legal Shield

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Ada, OK 74821-0145

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thelewisgroup@yahoo.com
olivetteb_lewis@us.aflac.com

457 Deferred Compensation Plans

Equitable Advisors (formerly AXA Equitable)

Home Office

Equitable
P.O. Box 4956
Syracuse, NY 13221-4956
Customer Service:
(800) 628-6673
Fax: (816) 701-4969
www.equitable.com

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Fax: (504) 586-8248
johnny.george@equitable.com

MidAmerica Customer Service

(800) 430-7999

Nationwide Retirement Solutions

Home Office

Nationwide Retirement Solutions
P.O. Box 182797
Columbus, OH 43218-2797
Office: (877) 677-3678
Fax: (877) 677-4329
Internal Retirement Specialists
(888) 401-5272
www.nrsforu.com

Local Agent

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milled30@nationwide.com

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Luling, LA 70070
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palmic1@nationwide.com

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Office: (800) 448-2542
Fax: (877) 202-0187
www.corebridgefinancial.com/rs

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Corebridge Financial
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Office: (225) 201-1009

Local Agent

Scot DuBuisson
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Cell: (985) 788-7875
Fax: (844) 515-3117
scot.dubuisson@corebridgefinancial.com

FREQUENTLY ASKED QUESTIONS

➤ **What is the timeframe to submit all required documents for new dependents, including spouses?**

All **original** documents must be provided to your Human Resources Manager within 60 days of life, adoption, or marriage.

➤ **Will I be able to continue with the healthcare coverage at age 65?**

If you are an active full-time employee aged 65 or older, you can continue with your healthcare coverage. Once you retire and are 65 years of age or older, you will no longer be able to continue with the city's healthcare plan.

➤ **What happens when I retire?**

At the time of retirement, you will decide if you would like to keep your healthcare coverage or not. As a retiree, you must complete an Enrollment form accepting or declining to have healthcare coverage with the City of New Orleans at the retiree premium rate.

➤ **How often should I update my Beneficiary(ies)?**

Review and verify your Beneficiary(ies) annually to keep them current. (i.e., New Marriage, Divorce, Death of a Beneficiary).

➤ **Will I be able to continue to cover my spouse if we are divorced?**

No. Once divorced, your former spouse is only eligible for COBRA coverage—up to 36 months of coverage.

➤ **I am the primary caregiver for my parent. Can I cover my parent on my healthcare coverage?**

No. The City of New Orleans only provides healthcare coverage for its employees, an employee's spouse/domestic partner, and an employee's child(ren).

➤ **Will I be able to keep my life insurance coverage if I decide to end my employment with the City of New Orleans?**

Yes. This policy is portable upon retirement or when an employee leaves City employment. Evidence of insurability is not required to convert your coverage. You may be eligible to convert any amount up to the benefit level you had under the City's group plan.

➤ **What happens when I am Leave Without Pay (LWOP)?**

An employee on LWOP is responsible for paying their healthcare premiums if they do not receive a paycheck. If an employee's coverage is cancelled for non-payment, they will not be eligible to re-enroll in the City's healthcare plan until the next Open Enrollment period. If an employee is LWOP, they should contact the Benefits Administration Division to make payment arrangements.

CONTACT INFORMATION

CAO Benefits Administration Division 504-658-8615
(Fax) 504-658-8648

- benefits@nola.gov (division email)
- www.nola.gov/health-plan (internet)
- www.employee.nola.gov (intranet)

(FSA) Flexible Spending Accounts (Medical, Dependent Care, Commuter Benefits)

- UHC FSA Customer Service 1-866-649-4870 (Medical and Dependent Care)
- UHC FSA Card Customer Service 1-866-755-2648 (Request new cards, information, and/or assistance regarding FSA cards)
- WageWorks/HealthEquity 1-877-924-3967 (Commuter Benefits)

CAO Employee Relations Division 504-658-7770
(Fax) 504-658-8648

- employeerelationsdivision@nola.gov (division email)
- <https://employee.nola.gov/work/relations-division> (intranet)

City Retirement Pension Board 504-658-1850
Fire Retirement Pension Board 504-366-8102
Police Retirement Pension Board 504-658-5727
Louisiana Sheriffs' Pension and Relief Fund (OPSO) 225-219-0500

Employee Assistance Program 1-866-248-4096

- www.liveandworkwell.com

UnitedHealthcare **Medical** Customer Service 1-866-649-4870

- Policy/Group # 0702187
- www.myuhc.com

UnitedHealthcare **Dental** Customer Service 1-800-816-3596

- Policy/Group # 0587164
- www.myuhc.com

UnitedHealthcare RALLY Support Center 1-844-344-7325

Real Appeal

- Enroll now at enroll.realappeal.com
- Website Support at www.support.realappeal.com
- Email: help@realappeal.com