



**Gallagher**

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# Town of Chapel Hill

## Annual Enrollment Information Effective September 1, 2025

**Now is the time to consider your benefit elections. Below is information that will guide you through your benefits and payroll deductions.**

At the Town of Chapel Hill, we are confident that our people are the reason behind our success. We recognize your hard work and have put together a benefits package that will take care of you and your family's needs throughout the year.

**Please take a moment to carefully review the enrollment information. You will find changes and enhancements made by the Town for the upcoming plan year.**

### What You Need To Do

Medical / Dental / Vision	Complete a form only to enroll or make changes.
Flexible Spending Account	To enroll for 2025-26 plan year, you must complete a form.
Life Insurance Coverage	You can update your beneficiary information at any time by completing a beneficiary form.
Voluntary Life Voluntary Disability	If you wish to enroll in these benefits, please see HR. Proof of good health is required.
Accident Critical Illness	To enroll you must complete a form
Pet Insurance	Visit <a href="https://www.aspcapetinsurance.com/TOCH">https://www.aspcapetinsurance.com/TOCH</a> to enroll
Identity Theft	Visit <a href="https://www.nationalplanidshield.com">National Plan IDShield (legalshield.com)</a> to enroll.

**Please turn in all forms by July 18, 2025. If you have any questions, please contact Human Resources.**



## Medical Plan

### Blue Cross Blue Shield of NC (BCBSNC)

We are continuing our medical plan through BCBSNC. This plan gives you the choice to see “in-network” or “out-of-network” physicians. By choosing an “in-network” physician, your out-of-pocket expenses will be considerably less. The medical chart below is a high-level summary of your in-network medical benefits. You may also visit the BCBSNC website at [www.bluecrossnc.com](http://www.bluecrossnc.com) to see a listing of participating providers in your area.

Place of Service	In-Network
Preventive Care <sup>1</sup>	100%
Office Visit	PCP: \$20 Copay <sup>2</sup> Specialist: \$40 Copay Primary360 Virtual Visit: Covered 100%, no cost to you!
Prescription Drugs Essential Formulary	Retail: \$4 / \$15 / \$35 / \$50 / 25% to a \$100 max Mail: 3 x Copay
Emergency Room	\$300 Copay
Urgent Care	\$40 Copay
Inpatient & Outpatient Care	100% after deductible
Plan Year Deductible	\$250 / \$500
Out-of-Pocket Maximum	\$3,000 / \$6,000

<sup>1</sup>Preventive Care is covered at 100% with a preventive primary diagnosis code. The service must be a covered preventive care benefit under healthcare reform. During your annual physical if anything is discussed or performed outside of the healthcare reform approved screenings, your visit may not be covered at 100%. For a list of covered preventive benefits under healthcare reform please visit [www.bcbsnc.com/preventive](http://www.bcbsnc.com/preventive)

<sup>2</sup>PCP Copay is waived for the first 3 visits if PCP has been selected in Blue Connect. This applies to NC PCPs only.

### Program Enhancement! Virtual Visits Primary360

Primary360 is a virtual primary care solution offered in partnership with BCBSNC & Teladoc. Primary360 offers access to virtual care through a network of U.S. board-certified providers delivering a unified, whole-person health experience. Services offered include:

- Virtual Primary Care
- Acute Care
- Mental Health Teletherapy
- Dermatology
- Nutrition Counseling

You will have a primary care provider of your choice and a dedicated care team of nurses and medical assistants by your side.



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## **Vision Plan**

### **Blue 20/20**

For those enrolled in the medical plan, the Town of Chapel Hill will continue to provide a routine eye exam annually through BCBSNC Blue 20/20. In addition to the eye exam, Town of Chapel Hill will reimburse up to \$200 a year for prescription glasses and/or contacts. The deadline to file for reimbursement is 60 days from the end of the plan year (October 30<sup>th</sup>).

## **Program Enhancement! Dental Plan**

### **Blue Cross Blue Shield of NC (BCBSNC)**

We recognize the vital role dental insurance plays in safeguarding you and your family from oral health issues and related expenses. We are pleased to announce that our dental insurance coverage will be transitioning to BCBSNC.

In addition, the Town of Chapel Hill has enhanced our benefits to now include coverage for dental implants. This is a significant improvement to our dental plan offerings.

Moreover, starting September 1, 2025, the Town of Chapel Hill will begin contributing to the cost of dental coverage. They will cover 100% of the cost for employee-only dental coverage for employees working 30+ hours or more.

**ID Cards** – please note, if you choose to enroll in both Medical and Dental coverage, you will receive 1 combined medical and dental ID card from BCBSNC effective 9/1/2025.

## **Life & Voluntary Life Insurance Plans**

### **Hartford**

All full-time employees are provided with life insurance coverage. You also have the opportunity to purchase additional life insurance for yourself, your spouse and/or your dependents. Should you wish to enroll or increase your current amount of supplemental life insurance, please see Human Resources. If you didn't enroll when first eligible or wish to increase your amount, you will need to complete an evidence of insurability form.

## **Short Term & Long-Term Disability Plan**

### **Hartford**

We provide you with short- and long-term disability coverage through Hartford. Disability insurance will provide a percentage of your current earnings should you become unable to work due to a disability.



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## **Voluntary Short Term Disability Plan**

### **Symetra**

Should you wish to purchase additional short-term disability coverage, you may do so in partnership with Symetra. If you didn't enroll when first eligible or wish to increase your amount, you will need to complete an evidence of insurability form.

## **Flexible Spending Account**

### **Flores & Associates**

We are pleased to offer you the opportunity to participate in a Health Flexible Spending Account (FSA) and/or a Dependent Care Account, both administered by Flores & Associates. These accounts provide a valuable way to save on taxes for certain expenses.

You can elect to contribute pre-tax dollars up to \$5,000 to your Dependent Care Account and up to \$3,300 to your Health FSA. These contributions can help you and your family save on predictable out-of-pocket health-related expenses not covered by insurance, as well as daycare expenses.

For those participating in the Health FSA, you have the option to carry over up to \$660 of your Healthcare FSA balance remaining at the end of the plan year. This carryover amount does not count toward the \$3,300 plan year maximum. Please note that the carryover feature is not available for Dependent Care Accounts.

## **EAP**

### **ComPsych**

The EAP is an employer-sponsored assessment and referral service that gives you and your family confidential, individual assistance with a wide range of personal and work-related issues. Through your EAP you have access to up to 3 face-to-face sessions with a licensed therapist at no charge. Call 800-272-7255 or visit [www.guidanceresources.com](http://www.guidanceresources.com) WebID: COM589.

## **Worksite**

### **Guardian, LegalShield & ASPCA**

You have the opportunity to enroll in Accident & Critical Illness insurance through Guardian. These plans can provide valuable support in the event of unexpected health challenges.

Additionally, we offer Identity Theft protection through LegalShield and Pet Insurance through ASPCA, allowing you to safeguard your personal information and ensure the wellbeing of your pets.



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## Semi-Monthly Payroll Deductions 2025-2026 Plan Year

	Medical & Vision Full-Time & Part- Time 30 Hours	Medical & Vision Part-Time 20 Hours	Dental Full-Time & Part-Time 30 Hours	Dental Part-Time 20 Hours
Employee Only	\$0.00	\$217.49	\$0.00	\$9.47
Employee + Spouse	\$273.82	\$628.22	\$19.55	\$29.02
Employee + Child(ren)	\$188.35	\$500.01	\$21.65	\$31.12
Employee + Family	\$385.61	\$795.91	\$48.72	\$58.19

*Medical and Dental premiums are deducted from pay on a pre-tax basis. Changes to pre-tax benefits can only be made during the annual open enrollment period, or if you have a change in status during the plan year.*

Note: Any premiums paid by an employee for domestic partner coverage (domestic partner and domestic partner's children) will be deducted from the employee's check on an after-tax basis. This is based on the assumption that the domestic partner and covered children are not the employee's tax dependents. If any of those covered individuals is a tax dependent, the employee must notify HR and complete the necessary tax status certification form/domestic partner affidavit. In addition, the portion of the premium paid by the employer for levels of coverage beyond employee only coverage will be considered imputed income and will be reported on the employee's Form W-2 each calendar year.

*"This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all the terms, coverages, exclusions, limitations, and conditions of the actual contract language. The policies themselves must be read for those details. The intent of this document is to provide you with general information about your employee benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by legal counsel who specialize in this practice area."*