



FY
20
27

Active BENEFIT GUIDE

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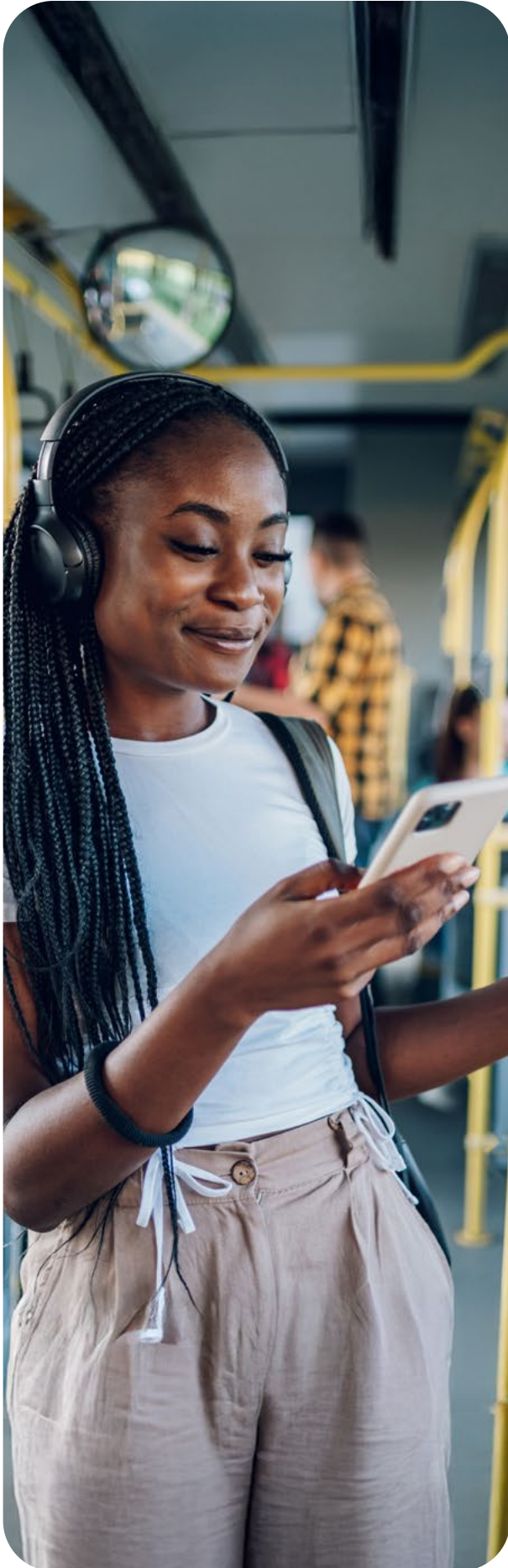
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Welcome Letter

The FY 2027 Benefits Open Enrollment period will run from Monday, May 4 to Friday, May 22, 2026. Any changes you make to your benefit elections during this period will take effect July 1, 2026.

Open Enrollment is your opportunity to review your current benefit elections to make sure they continue to meet the needs of you and your family.

Our thriving Work'n Well Rewards Program can support your wellness and put up to \$600 each year back into your pocket.

Take advantage of Open Enrollment to review your elections and learn about the many benefits the City has to offer.

James F. Parajon

City Manager

Alyssa Williamson

Chief Human Resources Officer



What's New for FY 2027?

UNITEDHEALTHCARE MEDICAL PLAN

- The CDHP plan deductible is increasing to \$1,700 for individuals and \$3,400 for those with dependents on the plan.
- For the Choice and Choice Plus plan, Emergency Room visits will now be subject to the plan's specific deductible.

KAISER PERMANENTE MEDICAL PLAN

- The CDHP plan deductible is increasing to \$1,700 for individuals and \$3,400 for those with dependents on the plan.

AETNA PPO DENTAL PLAN

- Children up to age 19 will be eligible for orthodontia coverage starting July 1, 2026. See [page 24](#) for more details.

NEW IRS LIMITS

- Health Care Flexible Spending Account contribution limit is increasing to \$3,400 and Dependent Care Flexible Spending Account limit is increasing to \$7,500 (\$3,750 if married and filing separately).
- Health Savings Account contribution limits are increasing to \$4,400 individual/\$8,750 family.

Benefits Overview

Your benefits are a partnership between you and the City of Alexandria. The City pays for most of the cost for coverage(s) for medical, employee life, and long-term disability insurance. Your portion of the costs for medical, dental, vision, Flexible Spending Accounts and Health Savings Accounts are deducted on a pretax basis, saving you money! Other benefits listed below are deducted on an after-tax basis.

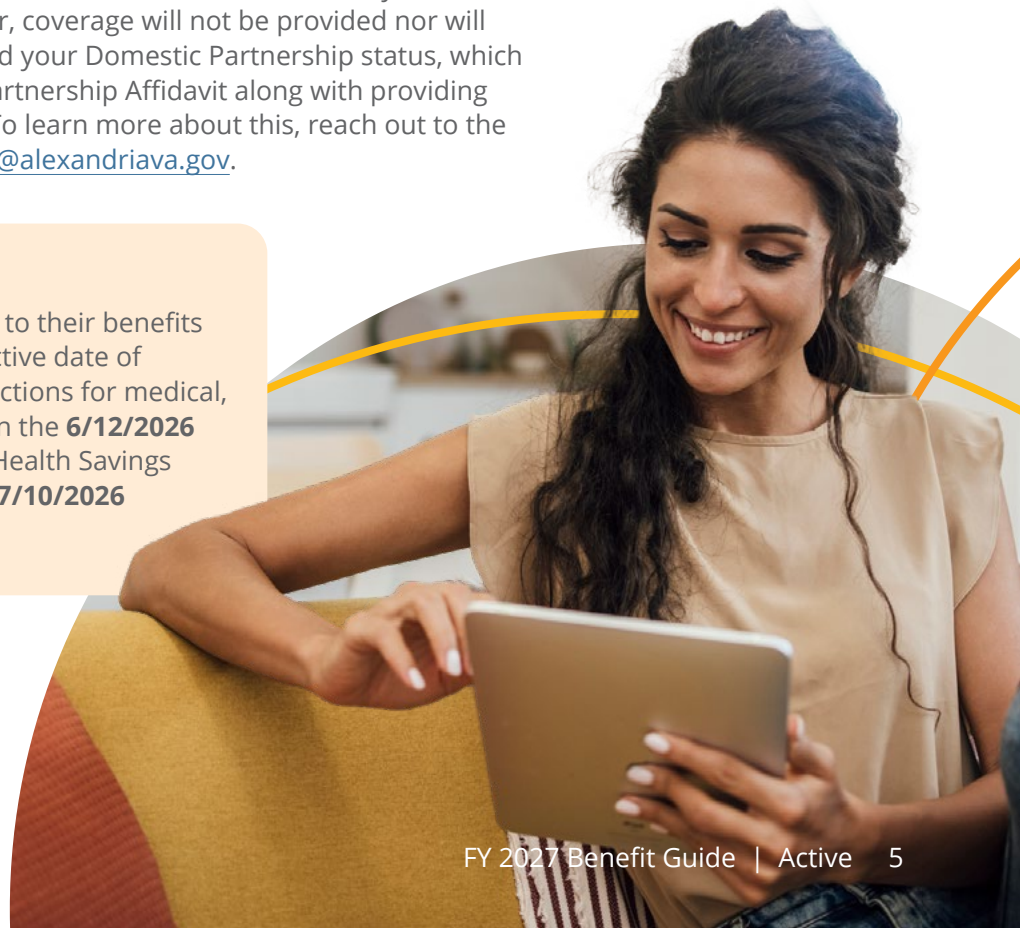
Medical, dental and vision premiums are deducted 24 times within a plan year. When there are 3 pay dates a month, only 2 deductions will occur. However, Flexible Spending and/or Health Savings Account contributions are taken 26 times within a plan year.

BENEFIT	TAX TREATMENT	WHO PAYS
Medical and Pharmacy	Pretax	The City & You
Dental	Pretax	You
Vision	Pretax	You
Health Savings Account	Pretax	The City & You
Flexible Spending Accounts	Pretax	You
Basic Life and AD&D Insurance	After-tax	The City
Supplemental Employee Life and AD&D Insurance	After-tax	You
Dependent Life Insurance	After-tax	You
City's Core Long-Term Disability (<i>Plan 1</i>)	After-tax	The City
Buy-Up Long-Term Disability (<i>Plan 2</i>)	After-tax	You

Domestic partner premiums for health benefits will be deducted from your paycheck on an after-tax basis. However, coverage will not be provided nor will premiums begin until you have validated your Domestic Partnership status, which requires you to complete a Domestic Partnership Affidavit along with providing additional supporting documentation. To learn more about this, reach out to the Benefits Team directly via DHR.benefits@alexandriava.gov.

NOTE:

Existing employees making changes to their benefits during Open Enrollment for an effective date of **7/1/2026** should expect to see deductions for medical, dental, vision, life insurance occur on the **6/12/2026** pay date. Flexible Spending and/or Health Savings Account contributions will begin on **7/10/2026** pay date.



Making Your Benefit Choices

HOW TO ENROLL

You may access your enrollment options and make your submissions through the [Employee Self Service \(ESS\)](#) portal. If you do not have your login credentials, please contact the ITS Department via [AlexIT portal](#). You can enroll 24 hours a day, 7 days a week, on any computer with internet access, except on Apple products (i.e., Mac computers, iPads, etc.). You can make changes during each year's annual enrollment period or if you experience an approved qualifying life event.

WHO'S ELIGIBLE?

Employees

Regular full- or part-time employees working at least 20 or more hours per week are eligible for benefit enrollment.

Dependents

- **Your spouse or domestic partner.** An affidavit and supporting documentation must be provided for your Domestic Partnership relationship prior to the coverage being extended.
- **Your biological and stepchildren.** Dependents also include those who are legally adopted (i.e., foster/adopted/grandchildren, etc.) and disabled children age 26 and over.

Parents are not eligible dependents for benefit enrollment. Enrolling ineligible dependents may result in disciplinary action and a requirement to repay the plan for claims.

Children can be covered until the end of the month when reaching age 26 regardless of financial dependency, residency, marital status (except for dependent life insurance eligibility), or student status. However, if your dependent child reaching age 26 is disabled, reach out to the Benefits Team to inquire about the process for benefits continuation.

Please note: You are responsible for reporting any dependent child(ren) who has reached age 26 by completing a life event. As a result of missed reporting, overpaid premiums will not be refunded.

WHAT HAPPENS IF YOU DON'T ENROLL?

Current Employees

If you do nothing, most benefits automatically continue for the Fiscal Year (FY) 2027 (provided that you have not accessed the system and begun to make changes to your benefits).

EXCEPTION: Flexible Spending Account and Health Savings Account elections do not automatically renew. You must make an election if you want these benefits in FY 2027.

New Hires

Health, dental, and vision insurance; Flexible Spending Accounts; and Health Savings Account elections become effective the first of the month following 30 days of employment. Enroll as soon as possible to avoid back deductions.

You are automatically enrolled in basic life insurance (at 1x your salary rounded up to the nearest \$1,000) and long-term disability insurance. You may also choose to elect supplemental life insurance for yourself, life insurance coverage for your dependents, and buy-up long-term disability coverage. Life and long-term disability coverage become effective on the 1st of the month following 90 days of employment.

Automatic enrollments only apply to the city-paid basic life and core long-term disability Insurance.

Council Members

Benefits provided to full-time employees are also available to Council Members. This includes the Employee Assistance Program (EAP) and the city-paid basic life insurance, which is equivalent to 1x salary rounded up to the nearest \$1,000.

Council Aides

Medical, dental, vision (at a full-time rate), EAP services, and FSAs/HSAs are available for Council Aides. Leave, life, or LTD coverage will not be provided.

Making Your Benefit Choices *(Continued)*

QUALIFYING LIFE EVENTS

After New Hire or Open Enrollment elections have been submitted, you will not be able to make changes to your benefits unless you experience a Qualifying Life Event (QLE). A QLE must be declared within 30 days of the event using the Employee Self Service portal and uploading the required supporting documentation.

If your QLE is marriage or birth of a child, dependent life insurance doesn't require Evidence of Insurability if you choose that coverage during this special enrollment period.

Examples of Qualifying Life Events (QLEs):

- Marriage or divorce
- Birth or adoption of a child
- Child reaching age 26
- Loss of other coverage
- Change in spouse's or domestic partner's benefits
- Death of a family member

If you have experienced a life event in FY26, be sure to carefully review your elections within ESS to confirm the changes made are those you want to carry over into FY27.

Benefits Open House Sessions

Fiscal Year 2027's Benefits Open Enrollment will run from May 4 - 22, 2026.

Open enrollment for Fiscal Year 2027 is generally the only opportunity you have during the year to change your benefits. Plan to attend a Benefits Open House Session and meet with UnitedHealthcare, Kaiser Permanente, and Aetna providers to discuss plan options, coverage and costs.

Join us at this year's Health Fair for health and wellness screenings, interactive cooking demonstrations, and informative exhibitors—all designed to help employees and retirees maintain a healthy lifestyle.

- For more information, visit AlexConnect at [AlexConnect.alexandriava.gov](https://alexconnect.alexandriava.gov).
- For reasonable disability accommodation, contact DHR.Benefits@alexandriava.gov or **703-746-3777**, Virginia Relay 711.

DATE	TIME	LOCATION
Tuesday, May 5	10:00 a.m. - 1:00 p.m.	Old Town 421 King Street, Ste 200
Wednesday, May 6	10:00 a.m. - 1:00 p.m.	DCHS Mark Center 4850 Mark Center Drive
Thursday, May 7	7:00 a.m. - 9:00 a.m.	T&ES 2900 Business Center Drive
Tuesday, May 12	10:00 a.m. - 1:00 p.m.	DHR 2331 Mill Rd, 3rd Fl
Wednesday, May 13	1:00 p.m. - 3:00 p.m.	Sheriff's Office 2003 Mill Road
Thursday, May 14 Health Fair	10:00 a.m. - 2:00 p.m.	First Baptist Church of Alexandria 2932 King Street, Alexandria, VA 22302
Tuesday, May 19	1:00 p.m. - 3:00 p.m.	Police Department 3600 Wheeler Avenue
Wednesday, May 20	10:00 a.m. - 1:00 p.m.	Fire Department 5255 Eisenhower Avenue

Medical and Pharmacy Plan Overview

The City of Alexandria offers six medical plans through UnitedHealthcare and Kaiser Permanente, all including prescription coverage. These plans provide affordable, flexible coverage for you and your family, with a choice of doctors, hospitals, and care providers. Compare key differences such as premiums, covered services, and out-of-pocket expenses to find the best fit for your needs.

HOW YOUR PLAN WORKS

Your deductible

- You'll pay out-of-pocket for most medical and pharmacy expenses until you reach your annual deductible. If enrolled in the Consumer Driven Health Plan (CDHP), you can use your Health Savings Account (HSA) to cover these expenses.

Your coverage

- After meeting your deductible, you and the plan share the cost of covered medical and pharmacy expenses, with the plan covering a percentage and you paying the remainder.

Your out-of-pocket maximum

- Once you reach your out-of-pocket maximum, the plan covers 100% of eligible medical and pharmacy expenses for the rest of the year. Your deductible and coinsurance count toward this limit.



GETTING MAXIMUM VALUE FROM YOUR MEDICAL PLAN

Regular Preventive Care

A Primary Care Physician (PCP) is your health partner, knowing your history and needs. Regular visits offer proven benefits, and scheduling an annual physical is a smart health investment. All our plans cover preventive care and cancer screenings at 100% (no deductible) with in-network providers. See your PCP for screenings and discuss the right tests based on your age, health, and history.

Routine exams, screenings, X-rays, and lab tests with a diagnosis are not considered preventive. The deductible, coinsurance, and copays will apply.

Be a Smart Health Care Consumer

- Understand your plan options and benefits.
- Ask questions about recommended tests and treatments.
- Adopt a healthy lifestyle and manage chronic conditions with help from your plan's resources.
- Reserve the ER for true emergencies—use your PCP, convenience clinics, or urgent care when possible.
- Use telehealth services when appropriate.

For more info, visit [AlexConnect](#).

Choosing Your Medical Plan

ALEX, YOUR BENEFITS COUNSELOR

Your Guide to Help You Decide

Start by visiting ALEX to compare plan costs. This easy-to-use tool asks a few questions about your family size and expected medical expenses, then estimates your total costs—premiums, out-of-pocket expenses, and tax savings.

ALEX helps guide your decision, but you must make your final elections through Employee Self Service (ESS).

Visit [AlexConnect](#) or scan the QR code to access ALEX to:

- ☑ Compare benefit options
- ☑ Choose the right plan for you
- ☑ Save with pretax accounts



Enroll from May 4 to May 22 for:

- Medical, dental, and vision plans
- Pretax accounts
- Life insurance
- Long-term disability
- Sick leave bank

CONSUMER DRIVEN HEALTH PLAN (CDHP)

Offered by UnitedHealthcare and Kaiser Permanente, CDHPs combine medical coverage with a Health Savings Account (HSA) to save on healthcare expenses with tax-free dollars.

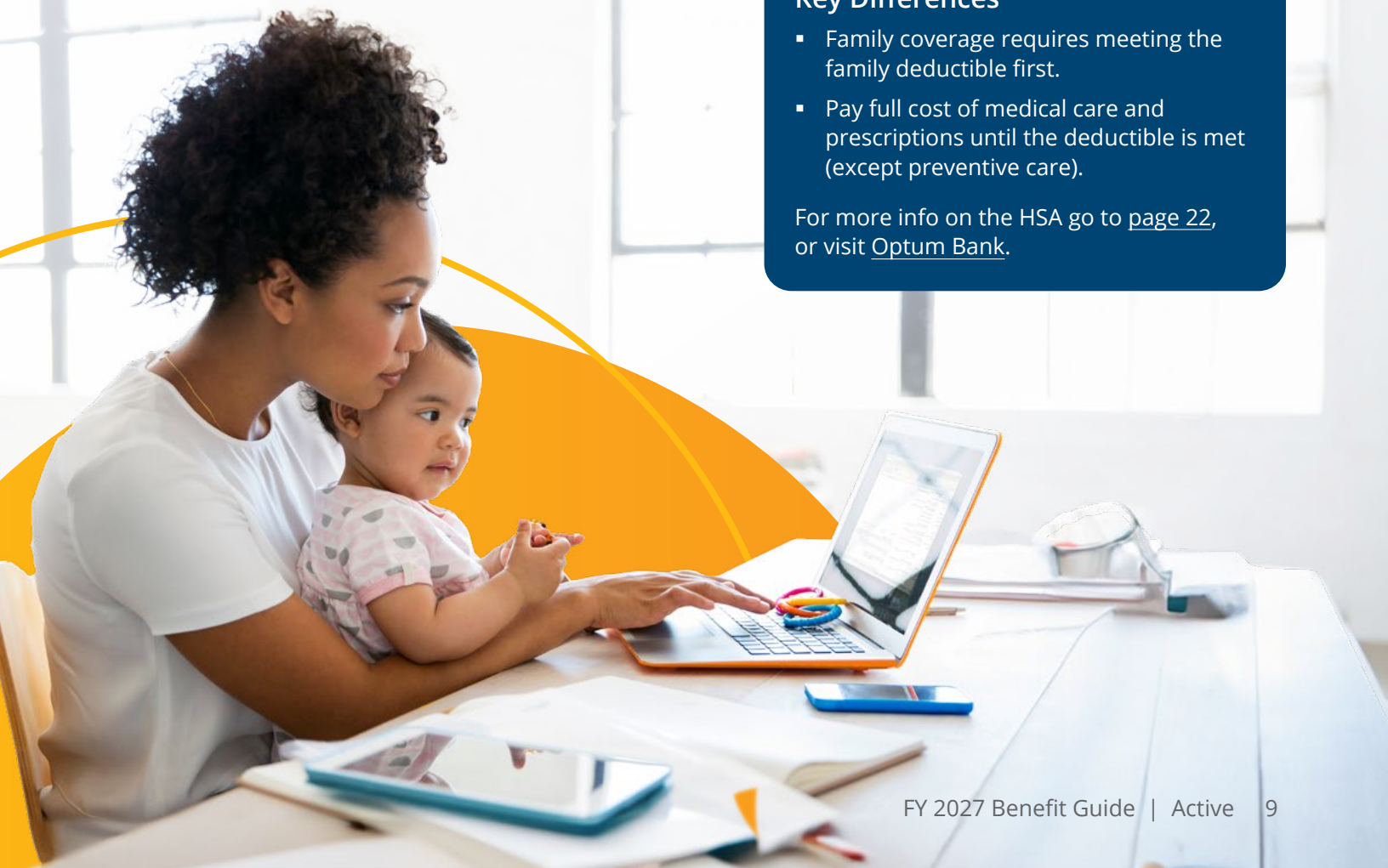
Advantages of This Plan

- Lower premiums.
- Triple tax savings: tax-free contributions, investment growth, and withdrawals for eligible expenses.
- City contribution: \$600 (single) / \$1,200 (family). You must elect an HSA each year in order to receive this contribution.
- Funds can be used as needed or saved for the future.
- Once your balance reaches \$2,000, you can invest through Optum Bank.

Key Differences

- Family coverage requires meeting the family deductible first.
- Pay full cost of medical care and prescriptions until the deductible is met (except preventive care).

For more info on the HSA go to [page 22](#), or visit [Optum Bank](#).



Medical and Pharmacy Coverage

UHC MEDICAL PLANS

Network: Choice Plus

	CDHP		CHOICE AND CHOICE PLUS	CHOICE PLUS
Medical Plan Provisions	In-Network	Out-of-Network	In-Network	Out-of-Network
The City's Contribution to HSA (Individual/Family)	\$600/\$1,200		None	None
Plan Year Deductible (Individual/Family)	\$1,700/\$3,400		\$400/\$800	\$800/\$1,600
Out-of-Pocket Maximum (Individual/Family)	\$6,450/\$12,900	\$12,900/\$25,800	\$3,175/\$6,350	\$3,175/\$9,525
Preventive Care	Covered at 100%	30%*	Covered at 100%	20%*
Primary Care Office Visits for Illness/Injury	10%*	30%*	\$15 Copay*	20%*
Specialist Visits/ Urgent Care Center	10%*	30%*	\$25 Copay*	20%*
Inpatient Hospitalization	10%*	30%*	\$500 Copay* (per admission)	20%*; \$500 Copay (per admission)
Emergency Room (waived if admitted)	10%*		\$150 Copay*	\$150 Copay*
X-ray, Lab, and Diagnostics	10%*	30%*	100%*	20%*
CT, PET, MRI, MRA, and Nuclear Medicine	10%*	30%*	\$100 Copay*	20%*
Outpatient Mental Health and Substance Abuse Services	10%*	30%*	\$15 Copay*	\$15 Copay after in-network deductible*
Transgender Benefits	Subject to applicable deductible and coinsurance		Subject to standard copays	Subject to applicable coinsurance
Pregnancy Services	10%*	30%*	0%*	20%*
Prenatal Visits	Covered at 100%	30%*	Covered at 100%	20%*
Pharmacy Provisions (Provided by UHC/Optum)				
Annual Deductible (Individual/Family)	Combined with Medical		None	None
Out-of-Pocket Maximum (Individual/Family)	Combined with Medical		\$1,000 / \$3,000	
Retail Pharmacy (up to a 30-day supply)				
Generic	10%*	Not applicable	\$15 Copay	Not applicable
Preferred Brand	20%*	Not applicable	\$30 Copay	Not applicable
Non-Preferred Brand	30%*	Not applicable	\$50 Copay	Not applicable
Retail or Mail Order (up to a 90-day supply)				
Generic	10%*	Not applicable	\$37.50 Copay	Not applicable
Preferred Brand	20%*	Not applicable	\$75 Copay	Not applicable
Non-Preferred Brand	30%*	Not applicable	\$125 Copay	Not applicable

*After Deductible

Medical and Pharmacy Coverage *(Continued)*

KAISER PERMANENTE MEDICAL PLANS

Network: Kaiser Permanente Facilities Only

Medical Plan Provisions	CDHP	DHMO	HMO**
	In-Network	In-Network	In-Network
The City's Contribution to HSA <i>(Individual/Family)</i>	\$600/\$1,200	None	None
Calendar Year Deductible <i>(Individual/Family)</i>	\$1,700/\$3,400	\$400/\$800	None
Out-of-Pocket Maximum <i>(Individual/Family)</i>	\$3,500/\$7,000	\$2,200/\$6,400	\$3,500/\$9,400
Preventive Care	Covered at 100%	Covered at 100%	Covered at 100%
Primary Care Office Visits for Illness/Injury	10%*	\$15 Copay	\$15 Copay
Specialist Visits/Urgent Care Center	10%*	\$25 Copay	\$25 Copay
Inpatient Hospitalization	10%*	\$500 Copay* (per admission)	\$500 copay (per admission)
Emergency Room <i>(waived if admitted)</i>	10%*	\$150 Copay	\$150 Copay
X-ray, Lab, and Diagnostics	10%*	Covered at 100%	Covered at 100%
CT, PET, MRI, MRA, and Nuclear Medicine	10%*	\$75 Copay*	\$75 Copay
Outpatient Surgery	10%*	\$50 Copay	\$50 Copay
Outpatient Mental Health and Substance Abuse Services <i>(Individual/Group)</i>	10%*/10%*	\$15 Copay/\$7 Copay	\$15 copay/\$7 Copay
Transgender Benefits	Subject to applicable deductible and coinsurance	Subject to standard copays	Subject to standard copays
Pregnancy Services	10%*	\$500 Copay* (per admission)	\$500 Copay (per admission)
Prenatal Visits	Covered at 100%	Covered at 100%	Covered at 100%
Pharmacy Provisions <i>(Provided by Kaiser Permanente)</i>			
Annual Deductible	Combined with Medical	None	None
Out-of-Pocket Maximum <i>(Individual/Family)</i>	Combined with Medical	Combined with Medical	Combined with Medical
Retail Pharmacy <i>(up to a 30-day supply)</i>			
Generic <i>(Medical Center/Pharmacy***)</i>	\$20 Copay*/\$30 Copay*	\$15 Copay/\$25 Copay	\$15 Copay/\$25 Copay
Preferred Brand <i>(Medical Center/Pharmacy***)</i>	\$30 Copay*/\$50 Copay*	\$30 Copay/\$40 Copay	\$30 Copay/\$40 Copay
Non-Preferred Brand <i>(Medical Center/Pharmacy***)</i>	\$45 Copay*/\$65 Copay*	\$50 Copay/\$55 Copay	\$50 Copay/\$55 Copay
Retail and Mail Order Pharmacy <i>(up to a 90-day supply)</i>			
Retail, 90-day supply	3x Copay	3x Copay	3x Copay
Mail Order, 90-day supply	2.5x KPMC Copay	2.5x KPMC Copay	2.5x KPMC Copay

*After Deductible

**This plan cannot be enrolled into unless you already have it.

*** Medical Center = Kaiser Permanente Medical Center; Pharmacy = Other Network Pharmacies

Medical and Pharmacy Coverage (Continued)

KAISER PERMANENTE DHMO DEDUCTIBLES

Below is a list of services that count toward the deductible, along with those that require only a copay or no cost-sharing.

DEDUCTIBLE APPLIES		NO DEDUCTIBLE	
▪ Inpatient Care ▪ Skilled Nursing Facilities ▪ Specialty Imaging (MRIs, CT, etc.) ▪ Home Health Care	▪ Hospice Services ▪ Durable Medical Equipment ▪ Orthotics	▪ Preventive Care (no copay) ▪ Primary Care Visit ▪ Specialist Visit ▪ Urgent Care ▪ Emergency Room	▪ X-rays, Labs, and Diagnostics (no copay) ▪ Pregnancy Services ▪ Prescription Drugs

FY 2027 PER PAYCHECK MEDICAL PREMIUMS (24 TIMES PER YEAR)

Coverage Level	UHC MEDICAL PLANS			KAISER PERMANENTE MEDICAL PLANS		
	CDHP	Choice	Choice Plus	CDHP	DHMO	HMO*
Full-Time Employees Earning Less Than \$70,000 Per year						
Employee	\$73.65	\$82.34	\$216.47	\$55.61	\$67.96	\$145.87
Employee + Spouse	\$152.23	\$170.11	\$472.64	\$107.91	\$139.29	\$299.02
Employee + Child(ren)	\$125.25	\$139.99	\$368.02	\$94.54	\$115.51	\$247.98
Family	\$209.93	\$234.59	\$651.83	\$166.86	\$188.89	\$405.51
Full-Time Employees Earning \$70,000 or More Per Year						
Employee	\$73.65	\$109.77	\$216.47	\$55.61	\$90.58	\$145.87
Employee + Spouse	\$152.23	\$226.83	\$472.64	\$107.91	\$185.69	\$299.02
Employee + Child(ren)	\$125.25	\$186.63	\$368.02	\$94.54	\$154.00	\$247.98
Family	\$209.93	\$312.80	\$651.83	\$166.86	\$251.83	\$405.51
PART-Time Employees						
Employee	\$245.52	\$274.46	\$327.81	\$185.40	\$226.47	\$254.12
Employee + Spouse	\$507.42	\$567.07	\$689.97	\$359.68	\$464.30	\$520.95
Employee + Child(ren)	\$417.50	\$466.58	\$557.28	\$315.18	\$385.02	\$432.01
Family	\$699.74	\$781.99	\$951.51	\$556.20	\$629.63	\$706.47

*There are no new enrollments in the Kaiser HMO Plan. If you elect to change from this plan, you will not be able to re-enroll in it.



UnitedHealthcare/Optum Rx FAQs

(Applies to participants on any of the UHC Medical Plans)

The City has partnered with UHC and Optum RX to provide top-tier pharmacy benefits while reducing out-of-pocket costs, ensuring safety, and quickly addressing any questions or issues.

How do I access my prescription coverage?

You will have one ID card for both medical and pharmacy coverage through UHC/Optum Rx. Present your ID card and prescription at any in-network pharmacy. The pharmacist will verify coverage and inform you of your copay or coinsurance.

Your Prescription Benefit Coverage (PBC) provides a snapshot of your plan's drug coverage, copays, benefits, and key services in easy-to-understand terms.

Where can I get my prescriptions filled in-person?

You can fill prescriptions at thousands of participating pharmacies nationwide. For the best value, use a network pharmacy. Visit your providers website at myuhc.com.

If you have a Specialty Medication that requires a prior authorization, Optum Rx is our specialty medication pharmacy, your practitioner may reach out to Optum Rx to authorize specialty medications.

What is a drug list or formulary?

A formulary (or drug list) is a list of FDA-approved brand-name and generic medications covered by your plan.

If your provider prescribes a medication not on the formulary, you'll pay the full cost. Talk to your provider about choosing an alternative on the formulary.

Call Member Services on the back of your ID card to check if a medication is covered. You can also refer to your Summary of Benefits for coverage details.

What is the difference between generic & brand medications? How does it affect my benefits?

Brand-name drugs are made by one manufacturer and may have patent protection. Generic drugs contain the same active ingredients but are available after the patent expires, often saving you money.

Are generic medications as safe and effective as brand-name drugs?

Yes, generic medications are FDA-regulated and must be therapeutically equivalent to brand-name drugs, with the same active ingredients, dosage, and strength.

UnitedHealthcare/Optum Rx FAQs *(Continued)*

How can I request a generic medication?

Your healthcare provider and pharmacist are the best sources of information about generic medications. Simply ask one of them if your prescription can be filled with an equivalent generic medication.

Can my prescription be switched to a drug with a lower copay?

You can view lower cost options from your myuhc.com portal. Once you find an alternative, discuss with your healthcare provider and they can send in a new prescription to the pharmacy.

What is a prior authorization?

A prior authorization is required for certain medications to ensure they're a good fit for you and your coverage. Your provider must submit documentation for review. Call Member Services for assistance in processing the authorization.

How do I order medications using home delivery?

Home delivery is a convenient option for members to get a 3 month supply on maintenance medications for chronic conditions. It ensures you never miss a dose and can be more cost-effective. Check your plan for details on copay differences between home delivery and retail pharmacies.

I am going to be out of town for an extended period, how do I get an extra supply of drugs to cover me for that time?

If you need extra medication while out of town, call Member Services on the back of your ID card to request a vacation override. Provide your travel dates, and UHC will update the system for pharmacy pickup.

Who do I contact with questions about my specific plan and/or medications?

Your UHC Member Services Team is available to answer any questions you may have. You can reach them Monday through Friday, from 7:00 a.m. to 8:00 p.m. ET by calling **833-760-7892**.



UnitedHealthcare Features

PREMIUM CARE PHYSICIAN PROGRAM

The UnitedHealth Premium Care Physician Program uses evidence-based standards to help you find quality, cost-efficient providers. Visit myuhc.com and select “Find a Doctor” to locate one.

Choose smart. Look for blue hearts.

- **Premium Care Physician:** Meets both quality and cost-efficiency criteria.
- **Quality Care Physician:** Meets quality criteria but not cost-efficiency, or not evaluated for cost-efficiency.
- **Does Not Meet Premium Quality Criteria:** Does not meet quality criteria.
- **Not Evaluated for Premium Care:** Specialty not evaluated, lacks sufficient claims data, or in evaluation process.

COST COMPARISONS

Compare prices before medical care to make smarter decisions. UnitedHealthcare’s website lists in-network providers and rates for common procedures, helping you find cost-effective options for tests and services.

2ND.MD

Second Opinion Medical Consultations

Access expert second opinions from board-certified doctors nationwide at no cost. Connect via phone or video for consultations to:

- Gain clarity on new or chronic diagnoses and treatment options.
- Discover breakthrough treatments and trials not known locally.
- Evaluate recommended surgeries and explore alternatives.

How it Works

- Activate your account at 2nd.md/alexandriavagov, download the app, or call **866-269-3534**.
- Speak with a nurse who will manage medical records and connect you with a specialist.
- Consult with a specialist about your diagnosis and treatment plan via video or phone, including evenings and weekends.

CENTERS OF EXCELLENCE

For serious or complex conditions, UnitedHealthcare’s nurse consultants can guide you to a Centers of Excellence provider, ensuring you receive expert care tailored to your needs.

VIRTUAL VISITS

Consult with a doctor anytime via mobile or computer using providers like Teladoc, American Well, and Doctor on Demand. Covered services include wellness visits, minor ailments, follow-ups, prescriptions, lab tests, and referrals for non-emergency conditions like the flu, colds, and rashes.

MENTAL HEALTH RESOURCES

Talkspace

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

- Message a licensed therapist, 24/7.
- Find a therapist using an online tool.
- Start therapy within hours of choosing your therapist.
- Choose real-time, face-to-face video visits by appointment, when needed.

Talkspace is convenient, safe, and secure. Register at talkspace.com/connect (first visit only) and choose a provider and message them anywhere, anytime. After you register, download the Talkspace app on your mobile phone.

Calm

Get on-demand help with stress, anxiety and depression with the Self-care app from Calm. It’s available at no extra cost and offers access to clinical techniques anytime to manage symptoms, track progress, and stay supported until you feel better.

Visit uhc.app/calmto get started today!

UnitedHealthcare's Well-being Programs

MAVEN MATERNITY

Maven provides personalized and engaging maternal health support through its digital platform, including:

- Support through the first three months postpartum
- Partner access and support
- Pregnancy, miscarriage and loss, postpartum and return-to-work support

Features and benefits of the program include:

- Dedicated care advocacy, referrals to in-person care and care plans for all maternal risk levels
- 24/7 access to virtual specialists across 30+ specialties, including, but not limited to, doulas, professionals, career coaches, and lactation consultants
- Engaging content and communities through live classes and thousands of articles and videos

SWORD HEALTH (Formerly Kaia Health)

With Sword Health, pain relief is possible at no extra cost to you. Download the Sword Health app on your smartphone or tablet for on-demand, personalized support to help relieve pain and live healthier.

Connecting with Sword Health gives you access to:

- Workouts tailored to you
- Strengthening exercises
- Bite-sized lessons
- On-demand pain relief care
- 1-on-1 health coaching

ONE-PASS SELECT

One Pass Select can help you reach your fitness goals and find a routine that's right for you, whether you work out at home or the gym. With plans as low as \$10 per month, you can choose a membership tier that fits your lifestyle.

You and your eligible family members (ages 18+) can get started with One Pass Select today. Learn more about One Pass Select at OnePassSelect.com.

REAL APPEAL WEIGHT MANAGEMENT PROGRAM

Try this virtual weight loss program that features one-on-one personal coaching, online group discussions, entertaining videos on ways to stay healthy, and nutrition guides to help you lose weight, feel good, and prevent weight-related health conditions.

Some features of the program are:

- A transformation coach who leads weekly online group sessions
- Online tools to help track your food, activity, and weight loss progress
- 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.)

PERSONAL HEALTH SUPPORT

Personal Health Support can provide you with access to specialized nurses and other resources that can help you better manage your healthcare needs and improve your quality of life.

The Personal Health Support nurse will:

- Provide you with one-on-one health care information, guidance, and support
- Help coordinate your care with physicians and healthcare professionals
- Support you in understanding and following your doctor's treatment plan

QUIT FOR LIFE - TOBACCO CESSATION

Work with a Quit for Life coach to make a plan and get ongoing support including three one-to-one coaching sessions, pre- and post-quit virtual group classes, and a free 8-week supply of nicotine replacement therapy (gum or patches).

Kaiser Permanente Features

EXPERIENCE THE KAISER PERMANENTE DIFFERENCE

Choosing Your Doctor	You can choose from over 1,800+ doctors in over 50+ specialties and change your doctor at any time. You and your doctor work together to decide the right care for you. See Kaiser's physician profiles and choose one that best fits your needs at kp.org/doctors .
Getting Care in Your Language	Kaiser Permanente provides multilingual doctors and staff and offers interpretation services by phone in 150+ languages.
Choosing How You Get Care	For minor concerns, simply request a phone appointment or email your doctor's office with routine questions.
Calling for Advice	Specially trained Kaiser Permanente nurses can offer medical advice by phone, 24/7.
Making an Appointment	You can schedule routine appointments from your computer or mobile device-anytime, anywhere.
Seeing Your Doctor	Your doctor and care team will have your medical history and prescriptions right at their fingertips through your electronic health record.
Managing Your Health and Your Family's	Register at kp.org or download the mobile app at kp.org/mobile to schedule appointments, get text reminders on appointments, pharmacy refills, view lab/ doctors' results and more.
Remembering What Your Doctor Said	You can view your past visit summaries and most lab test results online, whenever you want.
Telehealth that Fits Your Schedule	Register at kp.org to see real-time availability for many in-person and virtual care options such as video or phone.
Supporting Your Total Health	Join on-demand life classes and more to improve your physical health at kp.org/health-wellness .
Care While Traveling	Get urgent and emergency care anywhere in the world, and now, when you're outside of a Kaiser Permanente state, you can visit any Cigna PPO Network provider without paying upfront or filing a claim for reimbursement. For help while traveling or to get more information about your travel coverage, call 951-268-3900 .

MENTAL HEALTH RESOURCES

Therapy Without A Referral

You can make an appointment to see a therapist without a referral from your primary care doctor. If you ever want to change your provider, your care team will assist you in finding the best fit for your needs.

Mental Health Video Visit

Book a video visit online at kp.org with your mental health provider. Routine appointments take place during regular office hours.

Calm

The No. 1 app for meditation and sleep, designed to help lower stress, reduce anxiety, and more. Kaiser Permanente members can access all the great features of Calm at no cost, including:

- The Daily Calm, explore a fresh mindful theme each day
- More than 100 guided meditations
- Sleep Stories to soothe you into deeper and better sleep
- Video lessons on mindful movement and gentle stretching

Members can access the app at calm.com.

Kaiser Permanente's Well-being Programs

VIRTUAL VIDEO VISITS

See your primary care doctor or specialist via secure video visits, part of your coordinated care, for easy access to the care you need without an office visit.

For DHMO and HMO plans, there are no copays, coinsurance, or deductibles. For CDHP, virtual visit costs depend on the complexity and are assessed after you meet your deductible. The range of costs for an established member visit is typically \$97 to \$228.

HEALTHY LIFESTYLE PROGRAMS

Access online wellness programs offering tools and support to improve your health—whether it's losing weight, eating healthier, quitting smoking, reducing stress, or managing conditions like diabetes. Complete a 20-minute Total Health Assessment to get a personalized health report to share with your doctor.

WELLNESS COACHING

Get Wellness Coaching by phone at no cost. Work one-on-one with a coach to create a plan for achieving your health goals.

HEALTH CLASSES

Health classes and support groups are offered right at Kaiser Permanente facilities. Visit kp.org/classes to view classes related to fitness, nutrition, stress, tobacco cessation, disease awareness/prevention, and more.

HEALTHY MEAL OPTION

Healthy Meal Delivery: Groceries and Household essentials delivered directly to the member's door

DIABETES PREVENTION PROGRAM (DPP)

A lifestyle coach leads a one-year program to prevent Type 2 diabetes, offering group training on diet, exercise, and behavior changes for weight control.

TELETHERAPY myStrength COMPLETE

myStrength Complete is a flexible digital program offering tools, support, and licensed therapist access, 7 days a week.

To start, visit mystrength.com/start, click "Join Today," and enter the code **KaiserMSC**. Explore more at kp.org/mentalhealthservices.

HEADSPACE CARE

Get 24/7 emotional support coaching via text.

- Chat anytime, anywhere with a coach
- Discuss goals, challenges, and create an action plan

OPTUM ONE PASS SELECT AFFINITY

- **A Fitness Network:** 18,000+ gym locations and boutique studios with unlimited access to all locations within selected tier.
- **Digital Solutions:** 23,000+ on-demand and livestreaming fitness classes through web, app, and TV, plus AI workout builder tool

KAISER PERMANENTE IN ALEXANDRIA

Visit the Alexandria Kaiser Permanente Medical Office at 3000 Potomac Ave, offering primary and specialty care, including adult and pediatric services, women's health, optometry, and physical therapy. The center also provides pharmacy, radiology, and lab services. Take a [virtual tour](#) to explore the convenience of care.

Flexible Spending and Health Savings Accounts

The City of Alexandria offers tax-free accounts for eligible expenses. For a list of eligible expenses, visit [irs.gov](https://www.irs.gov).

HEALTH SAVINGS ACCOUNT (HSA)

Available to CDHP enrollees who are not covered by other health plans, Medicare, or claimed as a dependent. If you select an HSA but are not in a CDHP, it will be removed automatically.

HEALTH CARE FLEXIBLE SPENDING ACCOUNTS (FSAS)

Your options depend on your medical plan:

- Health Care FSA: For medical, pharmacy, dental, and vision expenses if not enrolled in a CDHP.
- Limited Purpose FSA: For dental and vision expenses only if enrolled in a CDHP.

DEPENDENT CARE FSA

Use for eligible childcare (through age 12) or elder care expenses. Cannot be used for tuition.

COMPARISON OF ACCOUNTS

	HSA	FSA
Does the City contribute? <i>Amount for Fiscal Year 2027</i>	✓ Individual: \$600/Family: \$1,200	✗
Can I contribute my own savings?	✓	✓
Is there an IRS maximum annual contribution?	✓ Individual: \$4,400/Family: \$8,750 Those 55 and older can contribute an additional \$1,000 annually.	✓ Health Care or Limited Purpose FSAs: \$3,400 Dependent Care FSA: \$7,500 Parking FSA: \$340 per month
Will my savings roll over each year?	✓ Unlimited	! Up to \$680 for Health Care and Limited Purpose FSAs; No roll over for Dependent Care FSA
Will I earn interest on my savings?	✓	✗
Are the savings tax-free? <i>In most states</i>	✓	✓
Do I keep the money if I leave the City?	✓	✗
Can I also have a Flexible Spending Account (FSA)?	! Limited Purpose and for dental and vision expenses Dependent Care FSAs only	N/A

Note: The Limited Purpose FSA is used for eligible dental and vision expenses ONLY.

Flexible Spending Accounts

An FSA lets you pay for eligible healthcare, dependent care, or parking expenses with pre-tax dollars, saving you 30 to 40% depending on your tax bracket. Contributions are deducted from your paycheck and managed by Chard Snyder. You can access funds via a Debit Card for eligible expenses.

If you enroll in the CDHP, you can only enroll in a Limited Purpose Health Care FSA for dental and vision.

The Dependent Care Account is for daycare or elder care, not health or tuition expenses.

	HEALTH CARE FSA	DEPENDENT CARE FSA (DCFSA)	PARKING ACCOUNT
Eligible Expenses	Most medical, dental and vision expenses not paid by your benefit plans.	Childcare or elder care expenses while you and your spouse work or attend school.	Parking expenses for work <i>Note: Monthly parking fees for Bankers Square, Mill Road, Courthouse, and Union Street parking garages are already paid with pre-tax dollars. Employees who park at these locations do not need a parking FSA to get pre-tax parking benefits.</i>
Examples of Eligible Expenses	- Medical, dental, and vision deductibles and copays - Prescription drug costs you pay at the pharmacy - Certain over-the-counter drugs and menstrual supplies	- Childcare or babysitting - Before and after-school programs - Nursery school or preschool - Summer day camp - Adult/senior daycare	- Parking at or near your site of employment. - Parking at a location where you commute to work by public transit, vanpool, or carpool.
Eligible Participants	Employee, spouse and eligible dependents	Children through age 12 and certain elderly or disabled dependents	Employee Only
Employee Contributions (Fiscal Year 2027)	Up to \$3,400 in Fiscal Year 2027	Up to \$7,500 in Fiscal Year 2027 (\$3,750 maximum if married and filing separate tax returns)	Up to \$340 a month in Calendar Year 2026
Use it or Lose It (Carryover Amount)	You can carry over up to \$680 into the following year. Amounts over \$680 will be forfeited.	No carryover at the end of Fiscal Year 2027.	Not applicable
Submitting Claims	- File claims for the full amount of your election as of the beginning of the year. - Use your debit card or request reimbursement with receipts for 90 days following the end of the Plan Year (by September 30).	- You may file claims up to the amount you have contributed to the account year-to-date. - You can file claims for reimbursement for 90 days following the end of the Plan Year (by September 30).	- You must contribute the amount from your paycheck to file a claim for the amount. - Use a debit card or request reimbursement with receipts.



Visit Chard Snyder's website at chard-snyder.com.

You may also reach their Customer Service Team by calling **800-982-7715** between the hours of 8 a.m. to 9 p.m. EST.

Or you may send an email via askpenny@chard-snyder.com.

Flexible Spending Accounts *(Continued)*

IMPORTANT INFORMATION ABOUT FSAS

FSA elections run from July 1 to June 30. For health care and dependent care FSAs, unused funds are forfeited under the “use it or lose it” rule. You must re-enroll each year; elections do not carry over. Contributions can only be changed with a qualifying life event. Each FSA plan is separate, and funds are non-transferable.

ANNUAL LIMITS

When determining annual amounts for FSA enrollments for Fiscal Year 2027, consider the following:

- Health Care FSA limits have increased to \$3,400. Unused Health Care FSA Funds in excess of \$680 will not carry over from Fiscal Year 2027 to Fiscal Year 2028.
- The DCFSA annual limit for Fiscal Year 2026 is \$7,500 for married, filing jointly and \$3,750 if married and filing separately.
- Parking FSA has a monthly limit of \$340 for Calendar Year 2027.

MANAGING YOUR ACCOUNTS

The City partners with Chard Snyder to administer the FSA accounts. Chard Snyder offers online tools to help you manage your FSA accounts, including a list of eligible expenses, an account activity dashboard, and the ability to pay a provider or reimburse yourself via check or direct deposit. Set up your account at chard-snyder.com.

For assistance, call their Customer Service at **800-982-7715** (available from 8 a.m. to 9 p.m. EST) or use the Voice Response System 24/7.

SAVE YOUR HEALTH CARE RECEIPTS

Always save your receipts, even when using your debit card. Chard Snyder may request them later. Upload receipts to your account for safekeeping.

DON'T LOSE IT!

Use your FSA dollars at FSASStore.com—everything is eligible without a prescription, thanks to the 2020 CARES Act.

Health Savings Account

A Health Savings Account (HSA) is a tax-free savings account linked to the UnitedHealthcare and Kaiser CDHP, allowing you to pay for current and future medical expenses for you and your dependents.

The City of Alexandria's Health Savings Account (HSA) services are managed by [Optum Bank](#).

If you enroll in either the UnitedHealthcare or Kaiser Permanente CDHP, you must set up an Optum Bank account to receive the City's contribution, as well as, additional contributions you wish to make via payroll deduction. You may open your account on [Optum's website](#). The last 6 digits of your Social Security number are needed for this process.

The maximum amount you can contribute to your account in Calendar Year 2026:

- Individual coverage: \$4,400 (\$3,800 employee contribution + \$600 City contribution).
- Family coverage: \$8,750 (\$7,550 employee contribution + \$1,200 City contribution).

The annual "catch-up" contribution amount for individuals age 55 or older will remain at \$1,000.

Eligibility details

- If you enroll in either the UnitedHealthcare or Kaiser Permanente CDHP, you can open a Health Savings Account with Optum Bank at optumbank.com and make contributions through payroll deductions.
- You cannot have an HSA if you are enrolled in any other health coverage or Medicare, or claimed as a dependent on someone else's tax return.
- If you have a Health Savings Account you may also have a health care Flexible Spending Account but only to pay dental and vision out-of-pocket expenses.



START IT

HSA contributions are tax-free, whether from you or the City. The City contributes \$600 for individual coverage and \$1,200 for family, provided that you elect a Health Savings Account each year. With lower CDHP premiums, you can save more for your HSA, reducing taxes and gaining more control over your healthcare expenses.

BUILD IT

Your HSA money is always yours, even if you change jobs, plans, or retire. In Calendar Year 2026, the total contributions can be up to \$4,400 for individual coverage (\$3,800 employee + \$600 City) or \$8,750 for family coverage (\$7,550 employee + \$1,200 City). If you're 55 or older, you can contribute an extra \$1,000 annually.

USE IT

Withdraw money tax-free anytime for qualified expenses at irs.gov. You can also save it for future healthcare costs.

GROW IT

Unused HSA funds roll over, earn interest, and grow tax-free. You control how to use or invest the money for eligible expenses.

Aetna's Dental Plans

It's important to have regular dental exams and cleanings so problems are detected before they become painful and expensive.

The City of Alexandria offers 2 dental options through Aetna: the Dental Maintenance Organization (DMO) Plan and the Preferred Provider Organization (PPO) Plan. Both plans provide coverage for most dental care and pay 100% of the cost of preventive care, such as routine checkups and cleanings.

DMO PLAN

To qualify, you must live in the service area and use a network primary care dentist, who must refer you to specialists.

Advantages:

- No deductible
- No annual maximum
- Lower premiums

PPO PLAN

See any dentist without a referral, but Aetna Network dentists offer savings with negotiated rates. Non-network care is subject to charge limits.

FIND A DENTAL PROVIDER

Aetna won't mail ID cards. Register at [aetna.com](https://www.aetna.com) to access your account, print ID cards, or find a dentist. For help, call **877-238-6200** (Mon-Fri, 8 a.m.-6 p.m.).



Aetna's Dental Plan Provisions

Dental Plan Provisions	DMO	PPO
	In-Network Only	Option to go Out-of-Network
Annual Deductible <i>(Amount you pay before the Plan kicks in)</i>	None	\$50 Individual/\$150 Family
Plan Year Maximum <i>(Amount the Plan will pay each year)</i>	No maximum	\$1,000 (per individual)
Diagnostic and Preventive Services** <i>(e.g., Exams, Cleanings, and Bitewing X-rays)</i>	Covered at 100%	Covered at 100% (no deductible)
Basic Care <i>(e.g., Fillings and Simple Extractions)</i>	Copay	25%*
Major Care <i>(e.g., Root Canals, Dentures, Crowns and Oral Surgery)</i>	Copay	50%*
Orthodontia	\$2,400 copay	For Children up to age 19 50% to \$1,500 Lifetime Maximum
Do you need to choose a Primary Care Dentist?	Yes	No
Do you need a referral from your Primary Care Dentist to see a Specialist?	Yes	No
Do you need to go to a dentist that participates in the Aetna network?	Yes	No (you can go in or out of network)

*After deductible

**Diagnostic and preventive benefits are available two times per year.

FY 2027 PER PAYCHECK DENTAL PREMIUMS (24 TIMES PER YEAR)

Coverage Level	DMO	PPO
Employee	\$8.00	\$20.13
Employee + Spouse	\$13.77	\$41.65
Employee + Child(ren)	\$11.60	\$35.08
Family	\$18.12	\$54.78

GET THE MOST FROM YOUR DENTAL PLAN

- Free annual check-up - Use free preventive care to keep your mouth and gums healthy all year long.
- Use your FSA or HSA funds - Help pay for eligible out-of-pocket dental expenses.

For more information, including rules, exclusions, limitations, and Dental Benefits Summaries, visit [AlexConnect](#).

Aetna's Vision Plan

The vision plan covers annual eye exams and helps pay for glasses or contacts. You can get one pair of glasses or one order of contacts per year. The City of Alexandria offers the option to elect the Aetna Vision Preferred Plan. You can choose any provider, but in-network providers cost less and handle claims for you.

FIND A VISION PROVIDER

Find in-network vision providers at aetnavision.com under "Find a Provider." Out-of-network care costs more, and claims must be submitted by you.

Choose from more than 55,000+ vision offices and retailers, including popular chains like:

- LensCrafters
- Target Optical
- Pearle Vision
- CVS Optical

FIND AN EYE DOCTOR OR VISION CARE RETAILER NEAR YOU

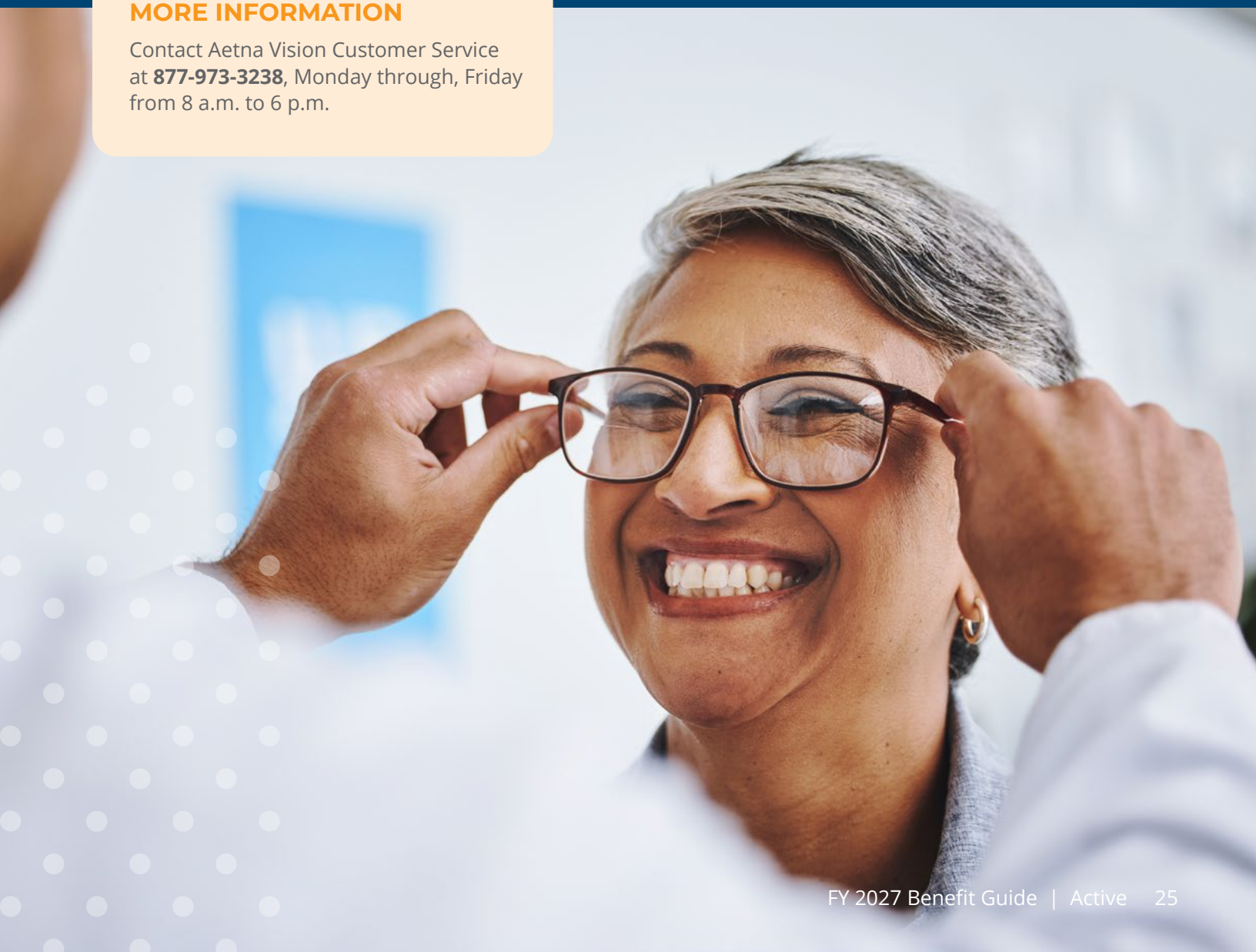
You can look up independent vision care providers and retailers that participate by visiting aetnavision.com and clicking on Find a Provider.

You can also use Online Vision Partners:

- glasses.com
- targetoptical.com
- lenscrafters.com
- ray-ban.com
- contactsdirect.com

MORE INFORMATION

Contact Aetna Vision Customer Service at **877-973-3238**, Monday through, Friday from 8 a.m. to 6 p.m.



Aetna's Vision Plan Provisions

Vision Plan Provisions	PPO	
	Aetna Vision Network	Out-of-Network
Eye Exams	You pay \$0	Plan reimburses \$30
Lenses Single vision Bifocali Trifocal	You pay \$15 for all standard lenses (with standard scratch coating included)	Plan reimburses \$25 Plan reimburses \$40 Plan reimburses \$55
Eyeglass Frames*	\$150 allowance, then 20% discount	Plan reimburses \$75
Contact Lenses	You pay \$40 for standard fitting; \$150 allowance, then 15% discount over allowance	Plan reimburses \$120
Discounts Additional pairs of glasses Non-covered Items (e.g., cleaning cloths and contact lens solution) U.S. Laser Network Retinal imaging	Up to 40% discount 20% discount Vision correction discount Up to \$39	No discount
Frequency Eye exams Lenses Eyeglass frames Contact lenses	Once every 12 months One pair of glasses once every 12 months One pair of glasses once every 12 months One order of contact lenses once every 12 months *You can receive 1 pair of eyeglasses OR 1 order of contact lenses every 12 months	

*Upgraded lens options, such as progressive bifocals, are available for an additional cost. Certain lens options, such as tints, anti-reflective, and UV coating, are covered for an additional fixed fee.

FY 2027 PER PAYCHECK VISION PREMIUMS (24 TIMES PER YEAR)

Coverage Level	PPO
Employee	\$4.27
Employee + Spouse	\$10.22
Employee + Child(ren)	\$7.24
Family	\$11.92

GET THE MOST FROM YOUR VISION PLAN

- Use your FSA or HSA to pay for your exam copay and eyeglasses or contacts.
- Kaiser Permanente Plans include a \$75 allowance on eyeglasses and a \$25 allowance on contact lenses at their optical centers.

For more information, including rules, exclusions and limitations and Vision Benefits Summary, visit [AlexConnect](#).

Life and AD&D Insurance

The City of Alexandria offers Basic Life and AD&D Insurance, Supplemental Life and AD&D Insurance and Dependent Life and AD&D Insurance.

BASIC LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D)

- This benefit is available to all employees at no cost. Coverage is automatic; you do not need to enroll.

SUPPLEMENTAL LIFE AND AD&D INSURANCE

- You can also purchase additional Life and AD&D coverage for yourself and your dependents at affordable group rates.
- You pay for this coverage through after-tax payroll deductions.
- You can elect any level of supplemental insurance at hire without any evidence of good health.
- You may ONLY increase your current coverage election during an Open Enrollment period. Elections will not begin until the employee sends DHR.Benefits@alexandriava.gov the approval notice from the Standard Insurance Company. You may increase current election by one level by completing a Medical History Statement and being approved by the Standard Insurance Company. This is an online process and can be completed by visiting myeoi.standard.com/instructions.

Sample Computation for Supplemental Life and AD&D Insurance (Employee with \$50,000 Annual Salary)

Option Selected	ANNUAL PAY MINUS 3 ZEROS	MULTIPLY BY OPTION RATE	PER PAYCHECK COST FOR \$50,000 COVERAGE
Option 1: 1x your pay	\$50,000 - 000 = 50	50 × 0.167	\$8.35
Option 2: 2x your pay	\$100,000 - 000 = 100	100 × 0.167	\$16.70

Please Note: Your Basic life/AD&D (employer paid) coverage plus your Supplemental Life/AD&D (employee paid) coverage cannot exceed a combined \$500,000 in coverage.

Your life insurance coverage will equate to your annual salary amount rounded to the next thousand.
Example: \$38,459 annual salary = \$39,000 Life Insurance amount.

NOTE: Supplemental Insurance rates are increasing.

Imputed Income Tax

As required by law, employees with Life Insurance amounts of more than \$50,000 will be taxed on the value of premiums for Basic Life Insurance coverage over \$50,000.

Benefits Effective Date

For new hires, life insurance benefits are effective on the first of the month following 90 days of employment. For example, if you are hired on May 15th, your coverage will not begin until September 1st.





Life and AD&D Insurance *(Continued)*

DEPENDENT LIFE INSURANCE

- You may elect Dependent Life insurance in the Employee Self Service portal.
- If you are electing coverage for yourself and a dependent for the first time after 30 days of your hire date, Evidence of Insurability will be required and can be submitted online prior to having the dependent coverage extended for your spouse.
- **Evidence of Insurability is not applicable to children.**

Coverage Level	COVERAGE	PER PAYCHECK COST (AFTER-TAX)
Dependent Life Insurance		
Option 1	\$5,000 for Spouse and \$2,000 for Child(ren)	\$0.73 per paycheck
Option 2	\$10,000 for Spouse and \$5,000 for Child(ren)	\$1.45 per paycheck
Option 3	\$25,000 for Spouse and \$10,000 for Child(ren)	\$3.63 per paycheck

Leave and Disability Benefits

The City of Alexandria provides disability benefits to help replace your income if you become unable to work due to pregnancy or non-work-related illness or injury. See [AlexConnect](#) for more information.

LONG-TERM DISABILITY (LTD)

You can choose between two LTD options, both serviced by The Standard. The Core Plan is fully paid by the City, while you pay for the Buy-Up option. You can only select one plan. To switch from Plan 1 to Plan 2 (except for new hires), you must provide proof of good health. No action is needed unless changing plans. The difference between the plans is the elimination period, which is the length of time you have to wait after a disabling illness or injury before you receive benefits.

LTD Provisions	CITY'S CORE LTD (PLAN 1)	BUY-UP LTD (PLAN 2)
Elimination Period	After 180 days	After 90 days
Coverage	Covers 60% of your pay, up to \$5,000 per month	Covers 60% of your pay, up to \$5,000 per month
Employee Cost	Provided to you at no cost	\$0.325 x your covered pay, per pay period

ANNUAL LEAVE

- Use this leave for vacation and personal leave.
- Regular, full-time employees earn up to 13 days after 1 year of service.
- You receive one additional day per year up to 25 days at 12 years of service.
- You accrue annual leave each pay period.
- The maximum annual rollover limit varies by civilian and sworn job classes.

PAID PARENTAL LEAVE (PPL)

- The City provides up to six weeks (or 240 hours) of PPL to eligible City employees who are parents of a newborn child or a child who is placed with the employee through adoption or foster care.
- The PPL is designed to allow employees paid time off to care for and bond with a child.
- You can use the 6 weeks continuously or intermittently with department approval within 12 weeks from the birth or placement of the child.
- Eligible regular part-time employees working at least 20 hours per week will receive PPL proportional to the percentage of their standard weekly work hours.

FAMILY MEDICAL LEAVE (FMLA)

- Provides unpaid job-protected leave for up to 12 weeks in a 12-month rolling period if you or your immediate family have a serious medical condition.

THE AMERICANS WITH DISABILITIES ACT (ADA)

- The Americans with Disabilities act prohibits employers from discriminating against employees with qualified disabilities and requires employers to provide reasonable accommodation for employees while working.

SICK LEAVE

- Use this leave for your illness or to care for immediate family.
- Full-time employees accrue up to 12 days per year.
- Accruals for regular part-time employees are pro-rated.
- You accrue sick leave each pay period.
- There is no maximum accrual limit.

SICK LEAVE BANK

- You can only enroll in the Sick Leave Bank at the time of hire or during Open Enrollment.
- This Bank provides up to an additional 160 hours (equivalent to four weeks) of sick leave that can be used if an extended medical absence occurs and all other leaves are exhausted. Part-time employees' Sick Leave Bank hours are issued on a pro-rated basis.
- To join the Bank, full-time employees must make a one-time donation of 8 hours of annual leave and regular part-time employees must donate 4 hours.

Transportation Benefits

The City of Alexandria has a nationally recognized and award-winning Transportation Benefits program to make commuting to work easier, healthier, and less expensive. Recognized as a **Best Workplace for Commuters** and as a **MWCOG Commuter Connections Employer Awards** awardee, our Transportation Benefits package supports employees that choose to walk, bike, carpool, take the bus, ride the train or commute by other forms of public transportation.

BENEFITS INCLUDE:

- **\$270 a month in SmartBenefits** to use on Metrorail, Metrobus, Fairfax Connector VRE, MARC, Amtrak, or qualified vanpools
- **FREE Capital Bikeshare membership**
- **\$5 a day in Work'n Well Rewards Cash** through the Parking Cashout Program when you travel to work by public transportation, biking, or walking

ELIGIBILITY

Eligibility for the City's transportation benefit requires employees to:

- Be permanent full-time or part-time employees of the City of Alexandria.
- Commute using transit or a qualified vanpool (e.g., Metrorail, Metrobus, Fairfax Connector, VRE, MARC, Amtrak).
- Relinquish any free or discounted employee parking, except for eligible parking at Union Station.

SmartBenefits

The City provides up to **\$270** a month through WMATA's SmartBenefits program to cover the cost of commuting and/or taking work related trips on eligible public transportation vehicles. The funds can be used on Metro, VRE, MTA, MARC, Metro Access, qualified vanpools, and other transportation agencies that participate in the SmartBenefits program. To be eligible for this benefit, employees must:

- Be a permanent full-time or part-time employee of the City of Alexandria
- Commute to and from work via a qualified public transit service or vanpool
- Not have discounted employee parking at a City garage or lot

Applications must be submitted no later than the 15th of the month before you would like your SmartBenefits funds to start. Funds are available on the 1st of the month. You must have a SmarTrip card

that is registered with WMATA prior to applying for this benefit. Visit smartrip.wmata.com/Account/Login to register your SmarTrip card and setup an account.

SmartBenefits are exclusively for the employee's work commute and work related travel. Benefits must not be shared, sold, or transferred to others. Benefits cannot be accumulated during vacation or leave and unused benefits at the end of the month are automatically returned to the City.

LIMITATIONS

- Employees can receive only one Transit or Parking Benefit at a time; dual enrollment is not allowed.
- DASH is FREE and is a great way to get around the City. No ID necessary.
- Transportation benefits are exclusively for the employee's work commute.
- Benefits must not be shared, sold, or transferred to others.
- Benefits cannot be accumulated during vacation or leave (e.g., school employees on summer break are ineligible).

APPLICATION DEADLINES

- Submit your completed application with your registered SmarTrip card number by the 15th to receive SmartBenefits by the 1st of the next month. Register your card at wmata.com/fares/Register-SmarTrip.cfm.
- To manage your benefit you must establish a SmartBenefits account at smartrip.wmata.com/Account/Login and allocate your monthly benefit to your qualified transportation provider under the "Upcoming Transit Allocation" tab. Changes must be made before the 20th of each month.
- You can also contact Commuter Direct at **703-228-7433** or CommuterDirect.com for assistance in processing allocations and receiving paper tickets for your transportation provider in the mail.
- Find the Transit Benefits application on AlexConnect and submit completed forms to the Benefits Team at DHR.Benefits@alexandriava.gov for processing.

Transportation Benefits *(Continued)*

DASH BUS

DASH Bus is FREE and is a great way to get around the City. No ID, ticket, fares required. Just hop on and go! Visit dashbus.com for schedules and routes.

PARKING

If public transportation doesn't work for your commute, consider these parking options when you drive to work:

- Parking Flexible Spending Account (FSA) to pay for parking pre-tax.
- Monthly parking fees are withheld from pay on a pre-tax basis for parking at:
 - Courthouse (111 S. Pitt St)
 - North Union St (220 N. Union St)
 - Mill Road (2331 Mill Road)
 - Tavern Square

Email DHR.Benefits@alexandriava.gov for more information about these parking options.

PARKING CASHOUT PROGRAM

Earn \$5 per day in Work'n Well Rewards Cash when you take public transportation, carpool, or use a non-driving commuting option, such as biking or walking, to get to work.

Sign up by selecting the Parking Cashout benefit on the Work n' Well app and complete the enrollment form. Once enrolled, log your commute daily to receive your \$5 benefit in Work 'n Well Cash, which can be redeemed in Personify Health store within the app.

Only logged commutes with a screenshot of your commute via your chosen trip planner (CommuterCash, Transit app, etc.) qualify. Past trips cannot be logged and redeemed for a cashout, only the commute of the day. A Work'n Well account is required to receive your cashout.

How to Cashout your Commute:

Sign up by selecting the Parking Cashout benefit on the Work'n Well app and complete the enrollment form.

Log your commute daily to earn \$5 in Work'n Well Rewards Cash (only same-day commutes are eligible). Only logged commutes with a screen shot of your commute via your chosen trip planner (CommuterCash, Transit app, etc) qualify.

CAPITAL BIKESHARE

The City provides a **FREE** Capital Bikeshare membership to all employees which can be used throughout the region at over 800 stations, including over 70 in Alexandria. Members can enjoy free rides of up to 45 minutes on classic bikes and reduced fees on electric bikes (e-bikes).

Visit capitalbikeshare.com to join and sign up for the annual membership using your City email address.

The discount code to receive free membership is **COABikes9472**.

ADDITIONAL TRANSPORTATION INFORMATION

[Commuter Connections](#) is a great resource to help your commute throughout the Metropolitan Washington D.C. region. Commuter Connections has several free programs that City employees are eligible for. Employees can take advantage of cash incentives, and get support for ride matches for carpool or vanpool in your area.

The **Guaranteed Ride Home Program** provides up to **6 free rides** in the event of an emergency for people carpooling or using public transportation. Sign up through Commuter Connections.

GO Alex is available to help you with transportation and commute questions. Contact us via email at GOAlex@alexandriava.gov.

LEARN MORE

- Free Capital Bikeshare Program: capitalbikeshare.com
- Information on Commuter Benefits can be found on [AlexConnect](#)
- GO Alex is available to help you with transportation questions. Contact us via email at GOAlex@alexandriava.gov

Work/Life Benefits

SPRING HEALTH

Employee Assistance Program

The City of Alexandria has partnered with Spring Health to offer comprehensive mental health benefits for you, your spouse, and covered dependents, enhancing mental and emotional well-being.

Spring Health offers free services for you and your family, including:

- In-app wellness exercises for meditation, better sleep, and more.
- Personalized assessments and progress tracking.
- Guidance from a personal Care Navigator.
- Therapy with same-week sessions; the first six are fully covered.
- Medication management with psychiatrists.
- Coaching for stress management and focus.
- Work-life resources for travel, elder/adult care, and pet care.
- Legal assistance for divorce, custody, real estate, and more.
- Financial advice on home buying, college planning, and debt management.

Ways to activate your Spring Health benefits:

- Online: Visit coa.springhealth.com.
- Phone: Call **240-558-5796**.
- Spring Health App: Download Spring Health Mobile from the App Store or Google Play.
- Work'n Well Rewards App: Go to the "Benefits" section. Click on "Spring Health", then "Start Now".
- For more information on this benefit and everything it has to offer, please visit **My Work'n Well** on [AlexConnect](#).

WORKING ADVANTAGE

Discount program

Working Advantage is your exclusive savings marketplace on all things travel, entertainment, shopping, wellness & more! We're here to support your personal and financial well-being.

Visiting [Working Advantage](#) to learn more.

TUITION REIMBURSEMENT

Department of Human Resources Learning & Development (DHR L&D)

The City of Alexandria is dedicated to empowering its employees by providing access to valuable training and development opportunities. The City's Learning & Development programs are designed to help employees enhance their skills, qualifications, and experience, ensuring they can effectively perform their roles and advance their careers.

The City offers a comprehensive Citywide classroom training program to support career development and organizational efficiency. Employees are encouraged to participate in these programs to achieve their professional goals.

DHR L&D provides in-classroom trainings and access to NEOGOV Learn, a Learning Management System that offers a library of courses fostering continuous development.

To further support professional growth, the DHR L&D provides the Funding for Employee Education & Professional Development Program. This program offers financial assistance for education programs that enhance job performance and career advancement. Full-time employees can receive up to \$3,200, while part-time employees are eligible for up to \$800 annually.

In a new initiative aimed at supporting upward mobility for frontline employees, the City is introducing an additional \$2,000 in educational assistance. This brings the total support to \$5,200 for qualifying employees. These programs cover the costs of accredited degree courses (bachelor's or associate's) and certifications required for promotions, helping employees overcome barriers to advancement and achieve their career aspirations.

MORE INFORMATION

Contact DHR L&D programs and initiatives
DHR.Learning@alexandriava.gov.

Work/Life Benefits *(Continued)*

SUMMER

Student Loan Management Platform

The City of Alexandria offers Summer to enhance financial well-being by helping employees and their families save on student loans.

Features:

- Identify and enroll in optimal repayment plans.
- Save over \$300 monthly on loan payments.
- Access guidance from student loan advisors.
- Explore savings options beyond refinancing.
- Enroll in CoA's Tuition Reimbursement Program.
- Summer provides clear savings comparisons, digitizes enrollment, and offers advisor support via app chat, email, or phone/video consultations.

Sign up at app.meetsummer.org/onboard/cityofalexandria using Access Code **COA** for a free account.

For questions, email partnersupport@meetsummer.org.

NOOM WEIGHT

Access through Personify Health

Healthy weight loss

Powered by psychology, Noom Weight uses evidence-based techniques to empower behavior change. It's a personalized, mind-first approach that combines technology and human support to create healthier daily habits that lead to long-lasting results.

- Techniques that teach people the why behind your habits and how to change them.
- Daily lessons tailored to each person's goals.
- One-on-one coaching and peer support to help improve outcomes.



NOOM DIABETES PREVENTION PROGRAM

Access through Personify Health

CDC-approved, psychology-based curriculum empowers members to uncover the why behind their habits and how to change them for good.

- **Engaging lessons** are personalized daily to support the development of lifelong skills focused on preventing the onset of type 2 diabetes.
- **Specialized DPP coaching** offers personalized, 1:1 support from DPP lifestyle coaches certified by CDC-affiliated Diabetes Training and Technical Assistance Center (DTTAC).
- **Intuitive health tracking tools** for blood glucose, weight, food, activity, and more enable members to proactively stay on top of your progress.



Work/Life Benefits *(Continued)*

WELLTHY

Support through life's most vital moments

Wellthy helps with every phase of life as your care partner –taking tasks off caregiver's plates, helping families access the right care at the right moment, and delivering an experience that is both fundamentally human and tech forward.

- **Personalized 1:1 support**– dedicated support from 200+ experts in every facet of care from social work to patient advocacy, nursing to home care and behavioral health
- **Easy-to-use navigation**– tools to help manage care, securely store important information, message the Care Team, and ensure the care circle is constantly in the loop
- **Connection, sharing, and learning**– expert-moderated, peer-to-peer forums where family caregivers can find connection, support, and exchange knowledge

Work'n Well Rewards

Unlock Your Wellness Potential: Earn up to \$600 a Year!

The City offers a voluntary incentive program to promote health, covering all participation costs. Track activity, sleep, nutrition, biometrics, and healthy habits to earn points. Reach Level 3 (12,000 points) in a quarter to receive a \$40 monthly incentive the next quarter. The cycle resets each quarter for new rewards opportunities.

Complete an annual preventive exam with a validated physician form to earn \$120 the following quarter.

Details are available on [PersonifyHealth](#). Your health data is protected by HIPAA and privacy laws, ensuring the City cannot access your individual results. Consult your doctor before starting any physical activity program.

How to Complete Your Benefit Enrollment Event Online

Access Your Online Enrollment

Complete your benefit enrollment online through the [Employee Self Service Portal](#).

Access the portal from any internet-enabled computer or a kiosk at your work location. The platform is not compatible with Apple products (e.g., Macs, iPads, etc.).

Before enrolling, spend a few minutes with ALEX at start.myalex.com/cityofalexandria. ALEX is an interactive benefits counselor that explains your options in simple, engaging language to help you choose the best benefits for your needs and budget. Visit [AlexConnect](#) to learn more.

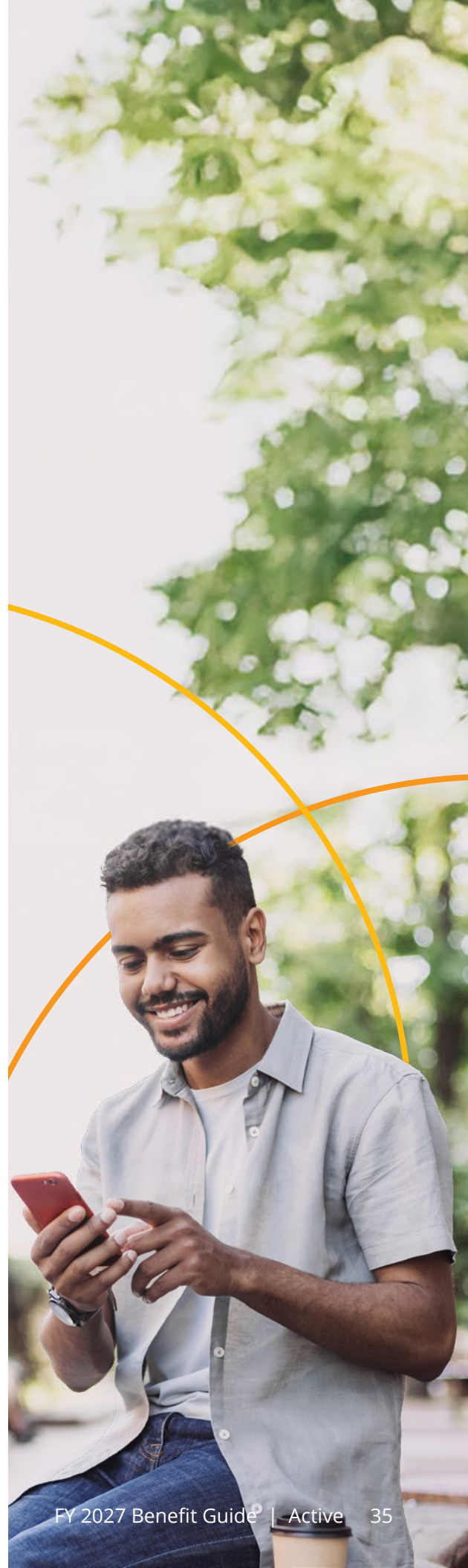
Starting Your Enrollment on AlexConnect

- Click “My Pay & Leave” on the top side of the screen.
- Click “My Pay & Leave” again in the middle of the screen.
- Log in using your network username and password on the Windows security screen, then click OK.
- Access Munis Employee Self-Serve (ESS) and click “Employee Self Service” on the left to reach the welcome page.
- Click “Benefits” on the left to open the Benefits page.
- Begin making your elections by selecting “No Changes,” “Make New Election,” or “Decline” for each plan.

Completing Your Online Enrollment

Your online Enrollment Summary will display:

- **Current:** Your existing benefits (if enrolled).
- **New Election:** Your current benefits, which carry over unless changed, except for Health Savings Accounts and Flexible Spending Accounts, which require annual re-enrollment.



Benefit Enrollment Event Online Tips & Reminders

ONLINE ENROLLMENT TIPS

- Make all elections on ESS except Supplemental Life Insurance, which requires a paper form available on [AlexConnect](#). Submit the completed form to DHR.Benefits@alexandriava.gov within 90 days of hire.
- Use the “Continue” button or click “Open Enrollment” on the left to navigate sections; avoid using the “Back” button.
- Close additional windows by clicking the “X” in the upper right to return to enrollment.
- Click “Continue” to save choices. **Your selections are only processed after clicking “Submit Choices” and receiving a confirmation. Incomplete enrollments will not be processed.**
- Disable pop-up blockers when adding dependents.
- If you encounter issues, clear your browser history, close, and log in again.
- Access your Enrollment Event online anytime outside work hours, but note the portal isn’t compatible with Apple products.

HOW TO ENROLL, DECLINE, OR CHANGE BENEFITS

- To enroll, decline, or change a benefit, select each option. For medical coverage, click “Make New Election” next to Medical to view options and costs. Access the guide and more info on [AlexConnect](#).
- Choose a medical plan by clicking the plus sign next to the vendor (Kaiser Permanente or UnitedHealthcare) and select the plan and coverage level. Scroll down to review or add dependents.
 - If all dependents are listed, click each one and select “Add Coverage” for those you want to cover. Update their information if needed.
 - If dependents are missing, follow instructions to update their info.
 - Do not add dependents who are no longer eligible (e.g., age 26).
 - Ensure your dependents’ information (date of birth and SSN) is correct.
- Click “Continue” to save choices and return to your Enrollment Summary for other benefit selections.

ADDING DEPENDENTS

- Click “Add New Dependent” at the bottom of each applicable benefit option.
- Enter a birth date and Social Security Number for each dependent.
- Double-check all information for accuracy.

After updating dependents, click “Continue” to return to the Enrollment Summary screen.

EVIDENCE OF GOOD HEALTH REQUIREMENT

- To buy-up one level of Supplemental Life or choose the 90-day LTD coverage option (if not elected at hire), evidence of good health is needed.
- Submit medical underwriting online for approval from The Standard.
- You may only increase your current coverage election during an Open Enrollment period. Elections will not begin until the employee sends DHR.Benefits@alexandriava.gov the approval notice from the Standard Insurance Company.
- If required, you’ll stay in your current option until approved. If denied, your coverage remains unchanged.

Benefit Enrollment Event Online Tips & Reminders *(Continued)*

SUBMITTING YOUR ENROLLMENT

- Once you have made your election for each benefit, click the “Continue” button on your Enrollment Summary page.
- **Your enrollment is not complete and will not be processed until you click the “Submit Choices” button.**
- You will receive a confirmation page indicating that your enrollment has been completed.
- You can print this Confirmation for your records.
- You can go back and make changes until the end of Open Enrollment on May 22.

LIFE INSURANCE CHANGES - THIS OPEN ENROLLMENT

If you want to change your life insurance election (elect 1x or 2x pay for Supplemental Employee Life Insurance), you must complete the online form for approval from The Standard. Dependent Life Insurance can be selected in Employee Self Service. Evidence of Insurability for spouse coverage is required to move up one level. Elections will not begin until the employee sends DHR.Benefits@alexandriava.gov the approval notice from the Standard Insurance Company.

CONFIRM THAT YOUR DEPENDENTS ARE ELIGIBLE

Review your benefits carefully to verify that only eligible dependents are enrolled. The City reserves the right to audit eligibility of dependents from time to time. You are subject to disciplinary action and can be held financially responsible for the cost of the benefits, including any claims paid for enrolled persons who are not eligible for dependent coverage.

FOR MORE INFORMATION

about your benefits, visit [AlexConnect](#).



Benefit Terms Overview

Benefit Plan Year: Coverage runs from 7/1 to 6/30 annually.

Calendar Year Deductible and Out-of-Pocket Maximums: Plan deductibles and out-of-pocket maximums reset January 1 (applies to Kaiser Permanente plans)

Coinsurance: The sharing of cost between you and the plan. For example, 80% coinsurance means the plan covers 80% of the allowed cost of service after a deductible is met. You will be responsible for the remaining 20% of the allowed cost assuming you remain in network. You could be subject to Balance Billing if you go out-of-network.

Consumer Health Driven Plan (CDHP): A type of health plan that gives you more control of your health care expenses. A CDHP most often pairs with a Health Savings Account (HSA) or some other taxadvantaged account.

Copay: A fixed amount (for example \$15) you pay for a covered health care service, usually when you receive the service. The amount can vary by the type of service.

Deductible: The amount you have to pay for covered services each year before your health plan begins to pay.

Elimination Period: For LTD claims, the time between injury/illness onset and benefit payments.

Flexible Spending Account (FSA): Use tax-free dollars for eligible healthcare, dependent care, and parking expenses. Funds must be used by the end of the plan year ("use it or lose it").

Generic Drugs: A drug that's equivalent to brandname drugs in use, dose, strength, quality and performance, but is not trademarked.

Health Savings Account (HSA): An HSA is a personal savings account for those enrolled in a Consumer Driven Health Plan (CDHP). You may use your HSA to pay for qualified medical expenses such as doctor's office visits, hospital care, prescription drugs, dental care and vision care. You can use the money in your HSA to pay for qualified medical, dental, and vision expenses now, or in the future, for yourself and your dependents, even if they are not covered by the CDHP.

In-network: A designated list of health care providers (doctors, dentists, etc.) with whom the insurance provider has negotiated special rates. Using in-network providers lowers the cost of services for you and the company.

Inpatient: Services provided to an individual during an overnight hospital stay.

Mail Order Pharmacy: Mail order pharmacies generally provide a 90-day supply of a prescription medication for a lesser copay amount. Plus, mail order pharmacies offer the convenience of shipping directly to your door.

Non-preferred Brand Drugs: A drug with a patent and trademark name that is "not preferred" because it's usually more expensive than other generic and brand preferred options.

Out-of-network: Providers that are not in the plan's network and who have not negotiated discounted rates. The cost of services provided by out-of-network providers is much higher for you and the City. Higher deductibles and coinsurance will apply.

Out-of-pocket Maximum: The maximum amount you and your family must pay for eligible expenses each plan year. Once your expenses reach the out-of-pocket maximum, the plan pays benefits at 100% of eligible expenses for the remainder of the year. Your annual deductible is included in your out-of-pocket maximum.

Outpatient: Services provided to an individual at a hospital facility without an overnight hospital stay.

Plan Year Deductible and Out-of-Pocket Maximum: Deductibles and Out-of-Pocket maximums reset every July 1 (applies to UHC plans).

Preferred Brand Drugs: A drug with a patent and trademark name that is considered "preferred" because it's safe and effective and usually less expensive than other brand-name options.

Primary Care Provider (PCP): A doctor (generally a family or internal medicine practitioner or pediatrician) who provides ongoing medical care. A primary care physician treats a wide variety of healthrelated conditions.

(Benefit Terms Overview Continued)

Reasonable & Customary Charges (R&C):

Prevailing market rates for services provided by health care professionals within a certain area for certain procedures. Reasonable and Customary rates may apply to out-of-network charges.

Specialist: A provider who has specialized training in a particular branch of medicine (e.g., a surgeon, cardiologist or neurologist).

BENEFIT ACRONYMS

- **ACA** - Affordable Care Act
- **AD&D** - Accidental Death & Dismemberment
- **CDHP** - Consumer Directed Health Plan
- **DMO** - Dental Maintenance Organization
- **FMLA** - Family Medical Leave Act
- **FSA** - Flexible Spending Account
- **HMO** - Health Maintenance Organization
- **HSA** - Health Savings Account
- **LTD** - Long-Term Disability
- **PBM** - Pharmacy Benefit Manager
- **PPL** - Paid Parental Leave

Contact Information

Coverage	CARRIER	PHONE	WEBSITE/EMAIL
Medical and Pharmacy	UnitedHealthcare (Group #: 714332)	866-844-4864	myuhc.com
Medical and Pharmacy	Kaiser Permanente (Group #: 4073)	855-249-5018	kp.org
Health Savings Account	Optum Bank		optumbank.com
Flexible Spending Accounts	Chard Snyder	800-982-7715	chard.snyder.com
Dental	Aetna (Group #: 737479)	877-238-6200	aetna.com
Vision	Aetna (Group #: 737479)	877-973-3238	aetnavision.com
Life and AD&D Insurance	The Standard	800-378-4170 ext. 0587	standard.com
Long-Term Disability	The Standard	800-378-4170 ext. 0587	standard.com
Employee Assistance Program (EAP)	Spring Health	240-558-5796	coa.springhealth.com
Human Resources	Benefits Team	703-746-3777	alexandriava.gov/HR DHR.Benefits@alexandriava.gov
ESS Portal Login Support	ITS Customer Support		IT.Customer@alexandriava.gov

CITY OF *Alexandria* VIRGINIA



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Insurance | Risk Management | Consulting

This document is an outline of the coverage provided under your employer's benefit plans based on information provided by your company. It does not include all the terms, coverage, exclusions, limitations, and conditions contained in the official Plan Document, applicable insurance policies and contracts (collectively, the "plan documents"). The plan documents themselves must be read for those details. The intent of this document is to provide you with general information about your employer's 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. To the extent that any of the information contained in this document is inconsistent with the plan documents, the provisions set forth in the plan documents will govern in all cases. If you wish to review the plan documents or you have questions regarding specific issues or plan provisions, you should contact your Human Resources/Benefits Department.