



**2026**  
EMPLOYEE  
BENEFITS GUIDE



**OUC**   

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*The Reliable One*®



## Welcome

Welcome to the Orlando Utilities Commission (OUC). At OUC, we highly value the well-being of our employees and their families. We believe that a thriving workforce is built on a foundation of health, financial security, and support for not only our employees but for your families.

Our commitment to provide comprehensive programs ensures you have access to the resources needed for physical, emotional, financial wellness and personal fulfillment. Please explore our exceptional benefits package designed to enrich the lives of our employees, empowering you to reach your full potential both inside and outside of work. Discover the difference OUC can make for you and your family.

To enroll or make changes to your benefit elections, please go to E1 Employee Self Service at <https://e1.ouc.local/jde/E1Menu.maf>. Get updates throughout the year from the OUC Benefits Team online at [ouc360.com/employees](https://ouc360.com/employees).

This guide is provided as a resource for current OUC employees. OUC reserves the right to modify, add, or remove benefits at any time, with or without prior notice.

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# Contacts & Resources

Find more details about the benefits offered to you by contacting your insurance carrier or logging into OUC360 at [ouc360.com/employees](http://ouc360.com/employees).

If you have questions or need assistance with enrolling, you may contact the **OUC Human Resources/Benefits Team** by emailing [benefits@ouc.com](mailto:benefits@ouc.com) or calling 407-434-2284 ext. 42284.

The Benefits Team is located at 100 W. Anderson Street, Orlando, FL 32801. Our fax number is 407-434-5003.

## Insurance Carrier Websites and Apps

Registering on the carrier websites and downloading the apps gives you instant access to valuable resources. Find the carrier apps on Google Play™ or the App Store® to access your benefits information which can include:

- Specific plan details
- ID cards
- In-network provider search
- Your claims history
- Other tools and resources

Benefit	Contact	Phone	Website/Email
Medical, Pharmacy, and Dental	Aetna	866-253-0659	<a href="http://aetna.com">aetna.com</a>
Specialty Pharmacy	Aetna	800-237-2767	<a href="http://cvsspecialty.com">cvsspecialty.com</a>
Virtual Care	Teladoc	855-835-2362	<a href="http://teladoc.com/aetna">teladoc.com/aetna</a>
HRA and FSA	Inspira	844-729-3539	<a href="http://inspirafinancial.com">inspirafinancial.com</a>
Vision	Aetna	866-253-0659	<a href="http://aetnavision.com">aetnavision.com</a>
Aetna Advocate—Claims and Coverage	Aetna	561-724-1399	<a href="mailto:oucaetnarep@aetna.com">oucaetnarep@aetna.com</a>
Life and AD&D	Reliance	800-644-1103	N/A
Disability and FMLA	Matrix	877-202-0055	<a href="http://matrixabsence.com">matrixabsence.com</a>
Voluntary Insurance	Allstate	800-521-3535	<a href="http://allstateatwork.com/mybenefits">allstateatwork.com/mybenefits</a>
Employee Assistance Program (EAP)	Aetna	800-272-7252	<a href="http://resourcesforliving.com">resourcesforliving.com</a> Login and password: OUC/OUC
Wellness Program	OUC WELLbeing	N/A	<a href="http://oucwellbeing.com">oucwellbeing.com</a> <a href="mailto:wellbeing@ouc.com">wellbeing@ouc.com</a>
Retirement and Investments	Fidelity	800-343-0860	<a href="http://fidelity.com/atwork">fidelity.com/atwork</a>
Voya (closed to new entrants)	Gabor Financial Services	407-252-3151	<a href="mailto:acheesman@gaborfs.com">acheesman@gaborfs.com</a> <a href="#">Voya Account Login</a>
Employee Self-Service (ESS)	N/A	N/A	<a href="https://e1.ouc.local/jde/E1Menu.maf">https://e1.ouc.local/jde/E1Menu.maf</a>
OUC Employee Site	N/A	N/A	<a href="http://OUC360.com/employees">OUC360.com/employees</a>
OUC IT Support	N/A	407-434-5500	<a href="mailto:itsupport@ouc.com">itsupport@ouc.com</a>

# Eligibility & Enrollment

All regular full-time and part-time employees are eligible for health benefits. During open enrollment if you make a change to add or cancel a dependent you will need to provide the corresponding documentation, such as birth certificate, marriage license, and Social Security card by no later than October 31, 2025.

Eligible Dependents	
<b>Your legal spouse</b>	<ul style="list-style-type: none"> <li>The employee’s legally married spouse.</li> <li>Common law marriage partners are not recognized by the state of Florida and are not eligible.</li> <li>Separated spouses are eligible as there is no defined “legal separation” in the state of Florida.</li> </ul>
<b>Your child(ren) up to age 26</b>	<ul style="list-style-type: none"> <li>Biological or stepchild(ren)</li> <li>Legally adopted child(ren) or child(ren) who have been placed for adoption.</li> <li>Other children for whom the employee is the legal guardian or has legal responsibility for providing medical coverage as defined by a court order.</li> </ul>
<b>Your child with a disability</b>	<ul style="list-style-type: none"> <li>Age 26 and older, unmarried and unable to attain self-sustaining employment by reason of mental or physical disability which arose while the child was covered as an under-26 dependent under this plan, or while covered as an under-26 dependent under a prior plan with no break in coverage.</li> </ul>
<b>Grandchild(ren)</b>	<ul style="list-style-type: none"> <li>Child(ren) of covered dependent child(ren) can be covered through the end of the month the grandchild(ren) turns 18 months of age if the parent is covered under the plan.</li> </ul>
<b>Overage dependent (Independent Plan)</b>	<p><u>All of the following criteria must be met:</u></p> <ul style="list-style-type: none"> <li>Biological child, legally adopted child, or stepchild</li> <li>Between ages 26 to 30</li> <li>Unmarried</li> <li>No dependent of their own.</li> <li>Does not have insurance coverage under any other individual/group health plan.</li> <li>Not entitled to benefits under Medicare or Medicaid.</li> <li>Resides in the state of Florida or is a full-time or part-time student.</li> </ul>

## Qualifying Life Event

Benefit elections and their related payroll deductions can only be changed during the annual Open Enrollment period unless you, your spouse, or your dependent child(ren) experience an IRS-defined qualifying life event. You must make benefit changes within 31 days of a qualifying life event. Examples of a qualifying life event include, but are not limited to:

- Marriage or divorce
- Birth or adoption of a child
- Change in child’s dependent status
- Death of a spouse, child or other qualified dependent
- Change in spouse’s benefits or employment status
- Commencement or termination of adoption proceedings
- Loss of coverage under another plan or expiration of COBRA coverage

To report a qualifying life event, contact the Human Resources/Benefits Team at [benefits@ouc.com](mailto:benefits@ouc.com). Supporting documentation (birth certificate, marriage license, Social Security card, etc.) must be provided regarding the life event no later than 31 days from the qualifying life event. Coverage begins as soon as administratively possible after all documents are reviewed and approved.

# Medical & Prescription Benefits



## Medical Benefits

You have two medical plan options to choose from through Aetna: the Core Plan and the Health Reimbursement Arrangement (HRA) Plan. To explore doctors and providers in your network, visit [aetna.com](https://www.aetna.com).

If you are enrolled in the HRA medical plan, OUC contributes money into your HRA account for you to use towards healthcare expenses. Employee contributions in the HRA are not allowed.

See pages 13-15 for more information on HRA accounts and FSA tax-advantaged savings accounts that can help you save on healthcare expenses.

## Prescription Drugs

When you enroll in a medical plan, you are automatically enrolled in prescription drug coverage. If you regularly take routine medications, you can receive a 90-day supply of the medications at any pharmacy, including retail locations. Opting for a 90-day supply of your routine medications can also come with a cost savings on associated prescription copays. See page 7 for more details.

Check with your pharmacy to determine if any discounts or rebates are available. Discuss lower-cost alternatives with your physician and check the insurance company's website for a complete drug list at [aetna.com](https://www.aetna.com). Covered drug formulary lists change throughout the year.

## Preventive Care

All medical plans cover preventive care services at 100%, meaning no copays or deductibles will apply when an in-network provider delivers the covered services. Preventive exams can detect if you are at risk for a chronic disease that may be preventable. Talk to your healthcare provider to determine which screenings are recommended for you and when you need them.

The preventive services described below are for in-network providers only. Claims must be submitted to Aetna as preventive care by the provider, otherwise care may be subject to deductible and/or coinsurance. Out of network providers may charge more, and may cost you more out-of-pocket.

- Routine adult physical exams/immunizations (age and frequency schedules apply)
- Well child exams/immunizations (age and frequency schedules apply)
- Routine gynecological care exams
- Routine mammograms (one baseline mammogram for females age 35-39; one annual mammogram for females age 40 & over)
- Routine digital rectal exams/prostate specific antigen test
- Colorectal cancer screening (for all members age 45 and over. Frequency schedule applies)

# Terms to Know

**Deductible:** The amount you pay out of pocket during the plan year (January—December) before the insurance company pays a percentage of the provider charges.

**Coinsurance:** The amount of payment split between you and the insurance company. Example: The insurance company pays 80%, and you pay 20% of the charges after you meet the annual deductible.

**Copayments:** Copayments (copays) are fixed dollar amounts paid for healthcare services. They do not count toward the annual deductible. They do count toward the annual out-of-pocket maximum.

**Out-of-Pocket Maximum:** The maximum amount you are responsible for paying out of pocket in any calendar year before the insurance company pays the entire eligible amount for the remaining calendar year.

**Network Providers:** Doctors, hospitals, and other healthcare providers with an agreement/contract with insurance companies agreeing to charge a discounted amount for services rendered.

**Pre-Authorization:** Certain procedures or hospitalizations may require that the provider receive authorization. The provider is typically the one to go through this process with the insurance company and obtain pre-authorization.

**Explanation of Benefits (EOB):** The EOB is mailed to you after the insurance company receives and processes a claim. The EOB describes how the claim was processed and outlines what portion of the charges have been applied to the deductible, what amount the employee is responsible for, and explains if there was a denial or error in processing the claim.

**Appeal:** If your health insurance company doesn't pay for a specific healthcare provider or service, you have the right to appeal the decision and have it reviewed by an independent third party.

**Guarantee Issue:** The maximum amount of voluntary life insurance you can choose when making your initial election that does not require the answering of medical questions.

**Evidence of Insurability (EOI):** The form containing medical questions you must answer if you decide to elect voluntary life insurance after you have previously declined coverage and wish to increase your current coverage later. The form may also be required if you add disability coverage after previously declined.



# Medical Plan Comparison

	Core Plan	HRA Plan
Services	In-Network Only	In-Network Only
<b>OUC Funded HRA Account</b>		
Employee Only	N/A	\$1,260
Employee + One		\$1,500
Employee + Family		\$2,760
<b>Calendar Year Deductible</b>		
Individual / Family	\$1,000 / \$2,000	\$2,500 / \$5,000
<b>Out-of-Pocket Maximum</b>		
Individual / Family	\$4,000 / \$8,000	\$4,000 / \$8,000
<b>Preventive Care Visits</b> (Includes: annual physicals, well-woman exams, immunizations, routine eye exams, etc.)	100% covered	100% covered
<b>Teladoc Virtual Visit</b>		
General Medical Services	100% covered	100% covered
Specialist	\$45 copay	\$50 copay
Mental Health	\$45 copay	\$50 copay
<b>Primary Care Visit</b>	\$25 copay	\$30 copay
<b>Specialist Visit</b>	\$45 copay	\$50 copay
<b>Convenience Care (Take Care/Minute Clinic)</b>	\$25 copay	\$30 copay
<b>Urgent Care Center</b>	\$45 copay	\$50 copay
<b>Labs and X-Rays</b>	100% covered	100% covered
<b>Advanced Imaging (MRI, CT Scan)</b>	<i>Prior Authorization Required</i>	<i>Prior Authorization Required</i>
Hospital	20% after deductible	20% after deductible
Non-Hospital (Freestanding) Facility	\$150 copay	\$200 copay
<b>Guidewell</b>	\$100 copay	\$150 copay
<b>Emergency Room</b>	20% after deductible	20% after deductible
<b>Inpatient Hospital</b>	20% after deductible	20% after deductible
<b>Outpatient Hospital</b>		
Hospital Facility	20% after deductible	20% after deductible
Non-Hospital (Freestanding) Facility	\$150 copay	\$200 copay
<b>Retail Prescription (30 days)</b>		
• Generic	\$0 copay	\$0 copay
• Brand Name	\$50 copay	\$50 copay
• Non-Formulary Brand Name	\$75 copay	\$75 copay
<b>Mail Order/In-Store Prescription (90 days)</b>		
• Generic	\$0 copay	\$0 copay
• Brand Name	\$100 copay	\$100 copay
• Non-Formulary Brand Name	\$150 copay	\$150 copay
<b>Specialty Prescriptions</b>	20% deductible waived; maximum coinsurance \$200	20% deductible waived; maximum coinsurance \$200

Member copays do not apply to the deductible, but are applied to the out-of-pocket maximum. Refer to the plan documents on OUCweb under Forms & Documents or on Aetna's member portal for the full plan description. This chart is intended only to highlight the benefits available and should not be relied upon to fully determine your coverage.

# Know Before You Go

When you aren't feeling well and need to be seen by a medical professional, a variety of options are available to you through OUC's Aetna medical plan. Some healthcare facilities have a higher copay cost associated with them, so it may save you money to review your options before you go. Aetna's website ([aetna.com](https://www.aetna.com)) provides cost of care estimates for in-network providers and facilities. Aetna's 24-Hour Nurse Line may also be helpful: (800) 556-1555.

Care Level	Description	Cost
Telemedicine (Teladoc)	Mild illnesses and rashes not requiring in-person care such as allergies, cough, fever, headaches and sinus problems.	No copay for sick visits
Convenience Care	Minor illnesses such as allergies, cough, fever, headaches, sinus problems, injuries, preventive care requiring in-person care and vaccines.	\$25/\$30 copay
Urgent Care	Moderate and non-life threatening illnesses and injuries such as minor cuts, sprains, broken bones, back and joint pain.	\$45/\$50 copay
Emergency Room	Serious and life-threatening illnesses and injuries such as trouble breathing, heart attack and stroke, serious accidents and severe bleeding.	20% after deductible





## Employee Assistance Program

We all go through ups and downs and sometimes, having a little extra support can make a big difference. That's why there's an Employee Assistance Program (EAP) available to you and your family, through Aetna's Resources for Living. This program is completely free and confidential, and it's here to help you 24/7, every day of the year. It's available to everyone in your household, including children living away from home (up to age 26).

Whether you're dealing with everyday stress or something more serious, the EAP can help with things like:

- **Emotional Well-Being Support:** Access up to six counseling sessions per issue each year. In-the-moment emotional well-being support is also available 24 hours a day.
- **Daily Life Assistance:** Receive personalized guidance for resources to help you manage your and your family's day-to-day needs. Resources are available for topics such as childcare, elder care, education, college financial aid, and pet care.
- **Legal Services:** Access a free 30-minute consultation with a participating attorney for each new legal topic related to general questions, family legal questions, preparation of documents, wills, elder law, and estate planning.
- **Financial Services:** Take advantage of a free 30-minute phone consultation with a financial advisor for each new financial topic related to budgeting, retirement or financial planning, mortgages and financing.
- **Other Services:** Access additional resources, including chat therapy, mental health self-care, identity theft assistance, and more.

### Resources for Living<sup>®</sup>

To access confidential EAP services,  
call **800-272-7252** (TTY: 711)

or visit [resourcesforliving.com](https://resourcesforliving.com)

Enter Username: **OUC** | Password: **OUC**

# Medical Plan Resources



## Aetna Website

Your Aetna member website helps you understand your benefits so you can make the most of your plan. At home, at the doctor, or in line at your local pharmacy. Wherever you are, you can rest assured knowing that trusted benefits information is here when you need it.

You can:

- Find in-network doctors, walk-in clinics and urgent care centers near you
- Learn what your healthcare costs and how much your plan covers
- Search medicine and side effects, find a pharmacy, refill your prescription, and estimate drug costs
- Take a health survey, try health coaching, start a wellness program, and get treatment options

Visit [aetna.com](https://www.aetna.com) and click the Member log-in button to sign in, or create a new member account.



## Aetna Health App

The Aetna Health mobile app can help you navigate your benefits, connect to quality care, and manage your costs. Use the Aetna Health app for:

- **ID cards:** Pull up your ID card whenever you need it
- **Benefit details:** Get coverage specifics for your plan
- **Deductibles:** Track spending and progress to meet your deductible
- **Claims:** Check and pay claims for your whole family
- **Providers:** Find network providers near you by location or specialty

- **Cost estimates:** Compare costs for doctor visits and procedures
- **Health reminders:** Get personalized tips to improve your health

The Aetna Health app is more personalized than ever to help you see what's covered, view claims, find quality care and more. The Aetna Health app is now available in Spanish. Download the Aetna Health app from the Apple app store or Google Play store.



## Aetna Nurse Line

Sometimes you need a quick answer to a health question. Maybe your concern can't wait until you see your doctor. You can talk to our registered nurses day or night on the Aetna 24/7 Nurse Line. Call the Aetna Nurse Line to get help with recommending whether to visit a doctor or urgent care center, understanding your symptoms, managing chronic conditions, and more. Call the Aetna Nurse Line at **800-556-1555**.



## Virtual Visits

See and talk to a doctor from a mobile device or computer without an appointment, 24/7 through Teladoc. Most visits take 10-15 minutes, and virtual visits are a part of your health benefits. Telemedicine doctors can diagnose and treat many non-emergency medical conditions and provide services such as writing a prescription if needed.

Common conditions treated with virtual care include allergies, cough, fever, headaches, sinus problems, skin rashes, pink eye, bladder infections, and more. To get started, visit [teladoc.com/aetna](https://www.teladoc.com/aetna) or download the app.

# Wellness Program



We are excited to offer a wellness program that’s all about supporting your overall health and wellbeing. Whether you’re looking to build new healthy habits or keep up the great ones you already have, there’s something here for you. Have questions or want to learn more? Reach out anytime at [wellbeing@ouc.com](mailto:wellbeing@ouc.com). We’re here to help you thrive!

The WELLbeing Program is a voluntary wellness program available to all employees, spouses, and dependents (ages 18 - 26) on the OUC medical plan. Eligible members who choose to participate in the WELLbeing program throughout the calendar year will have the opportunity to earn up to \$400 and eight wellness hours at the highest level.

## Who are Eligible Members

- All OUC employees regardless of enrollment in OUC medical plans
- OUC retirees, spouses, and dependents (ages 18-26) enrolled in an OUC medical plan

## Registration and Tracking Your Watts

- Scan the QR code at the bottom of this page, go to [oucwellbeing.com](http://oucwellbeing.com), or download the app on your GooglePlay or Apple Store. Connection code: OUC
- Register or login using your credentials
- To track your Wellness Watts, click on the “Rewards” tab
- Make sure to self-report activities and periodically check rewards
- Watt opportunities will be communicated throughout the platform, Commission-wide communications, and on OUC360

## Wellness Program – Reasonable Alternative Standard

The program is administered according to federal rules permitting employer-sponsored wellness programs seeking to improve population health and prevent disease. This includes the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, among others. Rewards for participating in a wellness program are available to all employees. If you think you may be unable to meet a standard for a reward under this wellness program, you may qualify for an opportunity to earn the same reward through different means. Email [wellbeing@ouc.com](mailto:wellbeing@ouc.com) to find a solution that will work for you.





### Calendar Requirements

- Achieve health-related goals anytime from January 1 through December 31 to qualify for rewards
- Incentive payouts begin the following plan year, starting at a minimum of 100 Wellness Watts



# Flexible Spending Accounts (FSA)



Flexible Spending Accounts (FSAs), offered through Inspira Financial, are a great way to save on out-of-pocket costs for things like medical, dental, vision, and dependent care. You can set aside pre-tax dollars to cover these expenses, helping your money go further. With a Health Care FSA, your full annual amount is available to use starting January 1, even before you've made any contributions. For Dependent Care FSAs, funds become available as you contribute throughout the year. **Note: If you are enrolled in the HRA medical plan with a Health Reimbursement Arrangement (HRA), you must use the FSA dollars first before you can access your HRA dollars.**

## How It Works

You determine the amount you wish to have deducted from each paycheck, and the funds are deposited into your account(s). You must re-enroll each year to continue funding your Health Care FSA and/or your Dependent Care FSA account(s). Mixing funds between accounts is not allowed.

**Health Care FSA:** Your Health Care FSA funds can only be used for eligible healthcare expenses. Any unused healthcare funds over \$660 at the end of the year will be forfeited.

**Dependent Care FSA:** Dependent Care FSA funds are strictly for eligible dependent care expenses such as child care and elder care. Unused Dependent Care funds are not eligible for carryover into the following year.

## Contribution Limits

The Internal Revenue Service (IRS) sets the annual contribution levels for FSAs. You are responsible for monitoring the amounts deposited into your accounts do not exceed the maximum annual limits.

For 2026, the FSA contribution limits are as follows:

- **Health Care FSA:** \$3,400
- **Dependent Care FSA:** \$7,500 per household (\$3,750 if married, filing separately)

## Eligible Expenses

Use your Health Care FSA funds to pay for out-of-pocket medical, dental, hearing, and vision expenses such as copays, prescriptions, supplies, appliances, and some OTC items. Visit [irs.gov/forms-pubs/about-publication-502](https://irs.gov/forms-pubs/about-publication-502) to see a complete list of IRS-qualified healthcare expenses. Cosmetic procedures are not covered under the Health Care FSA plan.

Use Dependent Care FSA funds to pay for qualified daycare expenses for children aged 12 and younger, and a spouse or an adult-dependent incapable of self-care. Eligible expenses include daycare, preschool, summer day camp, elder care, and in-home aids. Visit [irs.gov/publications/p503](https://irs.gov/publications/p503) to see a complete list of IRS-qualified dependent care expenses.



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# Health Reimbursement Arrangement (HRA)

Money is added to your HRA fund to help you manage healthcare costs. This contribution helps lower your deductible by covering eligible expenses, making it easier to get the care you need without the full out-of-pocket burden.

## HRA Funds

HRA funds are provided per member who is enrolled in the Health Reimbursement medical plan in January. Those amounts are:

- **Employee Only:** \$1,260
- **Employee + One:** \$1,500
- **Employee + Family:** \$2,760

Once you exhaust your HRA fund amount, you must cover the remainder of the deductible before Aetna pays for eligible medical expenses. Preventive coverage is paid 100% by Aetna, so there are not out-of-pocket expenses for members to receive their wellness exams.

However, eligible medical expenses by network providers will still receive a substantial discount (up to 60%) by Aetna even if you have not yet met your deductible.



# Spending Accounts

Description	Flexible Spending Account (FSA)	Dependent Care Flexible Spending Account (DCFSA)	Health Reimbursement Arrangement (HRA)
<b>Eligibility</b>	Does not require coverage under OUC medical plan	Does not require coverage under OUC medical plan	Requires coverage under OUC's HRA medical plan
<b>Eligible Expenses</b>	Copays for medical, prescriptions, dental, vision, co-insurance, deductibles, and durable medical equipment	Dependent care services	Copays for medical, prescriptions, dental, vision, co-insurance, deductibles, and durable medical equipment
<b>Maximum Employee Contribution</b>	\$3,400	\$7,500	N/A
<b>Employer Contribution</b>	N/A	N/A	Employee only: \$1,260 Employee + 1: \$1,500 Employee + Family: \$2,760
<b>Fund Availability</b>	January 1	Upon deposit	January 1
<b>Rollover Maximum</b>	\$660	N/A	Unused funds rollover
<b>Accessibility</b>	<ul style="list-style-type: none"> <li>• Debit card</li> <li>• Submit claim for reimbursement</li> </ul>	<ul style="list-style-type: none"> <li>• Debit card</li> <li>• Submit claim for reimbursement</li> </ul>	<ul style="list-style-type: none"> <li>• Debit card</li> <li>• Submit claim for reimbursement</li> </ul>
<b>Forfeitures</b>	Balance in excess of \$660 is forfeited after December 31	Balance forfeited after December 31	Unused funds forfeited if employee does not retire from OUC. Must use FSA funds first, then HRA

# Dental Benefits



Dental coverage is offered through Aetna, and you’re automatically enrolled in the Aetna PPO dental plan when you sign up for either the Core or HRA medical plan. This plan gives you the flexibility to use both in-network and out-of-network providers, so you can choose what works best for you. If you choose to see an out-of-network dentist, you may be responsible for paying the difference between what the provider charges and what the plan covers, this is called *balance billing*. To find an in-network provider, go to [aetna.com](https://www.aetna.com). For more information, visit the OUC360 Employee resource site at [OUC360.com/employees](https://www.ouc360.com/employees).

Services	PPO Dental Plan	
	In-Network	Out-of-Network
<b>Annual Deductible</b>	\$50 individual / \$100 family	\$50 individual / \$100 family
<b>Annual Maximum Benefit</b>	\$2,000	\$2,000
<b>Preventive Care</b> (two visits per plan year) Oral exams, cleanings, routine x-rays, fluoride	100% covered	100% covered
<b>Basic Services</b> Sealants, fillings, oral surgery, root canals, repairs to dentures, bridges, and crowns	90% after deductible	80% after deductible
<b>Major Services</b> Periodontics, dentures, implants, bridges, crowns, inlays, onlays	60% after deductible	50% after deductible
<b>Orthodontic Services</b>	60%, up to \$2,500 lifetime maximum	60%, up to \$2,500 lifetime maximum

This is meant to be a brief summary only. For full plan details refer to the SPD.



## Visit Your Dentist Regularly

Regular dental visits do more than keep your smile bright, they also help protect your overall health. Poor oral hygiene has been linked to serious conditions like heart disease, diabetes, and even cancer. Make the most of your preventive dental benefits, including routine exams and cleanings, all at no cost to you. It’s a simple way to stay ahead of health issues and feel your best.

# Vision Benefits



Vision coverage (glasses and/or contacts) is offered through Aetna.

The Aetna network includes chains such as Pearle Vision, LensCrafters, JCPenney Optical, and Target Optical, along with many other neighborhood eye doctors and optical shops.

If you are enrolled in an OUC Aetna medical plan, a vision exam is covered by your medical plan as preventive care and covered at 100%. To find in-network providers visit [aetnavision.com](https://aetnavision.com) and enter your search criteria. For more information, visit the OUC360 Employee resource site at [OUC360.com/employees](https://OUC360.com/employees).



	Vision Plan
Services	In-Network
<b>Standard Lenses</b>	
<ul style="list-style-type: none"> <li>• Single vision</li> <li>• Bifocal</li> <li>• Trifocal</li> <li>• Lenticular</li> </ul>	\$25 copay
<b>Standard Progressive Vision Lenses</b>	\$90 copay
<b>Any Frames, including Frames for Prescription Sunglasses</b>	\$145 allowance plus 20% off balance
<b>Medically Necessary Contact Lenses in Lieu of Glasses</b>	Covered in full
<b>Elective Contact Lenses in Lieu of Glasses</b>	\$145 allowance plus 20% off balance
<b>Frequency of Services—Lenses</b>	Once every 12 months
<b>Frequency of Services—Frames</b>	Once every 24 months

This is meant to be a brief summary only. For full plan details refer to the SPD.

## Eye Exams are Good for Your Overall Health

Annual eye exams help detect vision problems like glaucoma, cataracts, and macular degeneration, and can even reveal signs of other health conditions, such as diabetes, high blood pressure, and high cholesterol. Early detection can lead to timely treatment and better overall health.



## Benefit Costs

### Medical, Pharmacy and Dental Benefits

Core Plan Weekly Premiums	Employee Contribution	OUC Contribution	Total Premium
Employee Only	\$35.00	\$218.56	\$253.56
Employee + One Dependent	\$84.00	\$414.56	\$498.56
Employee + Family	\$164.00	\$566.57	\$730.57

HRA Plan Weekly Premiums	Employee Contribution	OUC Contribution	Total Premium
Employee Only	\$21.50	\$202.00	\$223.50
Employee + One Dependent	\$55.50	\$383.08	\$438.58
Employee + Family	\$105.50	\$537.15	\$642.65

### Vision Benefits

Weekly Premiums	Employee Contribution
Employee Only	\$1.06
Employee + One Dependent	\$2.02
Employee + Family	\$2.96

# Basic and Supplemental Life Insurance

Basic life coverage is provided to all OUC employees regularly working at least 20 hours per week at no cost to the employee. The coverage amount provided is two times the employee’s salary, up to a maximum of \$700,000.

## Supplemental Life Insurance

You have the option to purchase supplemental life insurance coverage through Reliance Standard. You may purchase spousal life insurance and/or child(ren) life insurance after electing coverage for yourself. See the table below for the weekly cost of coverage.

Age	Rate (per \$10,000 of Life Insurance)
Under age 30	\$0.18
30 - 34	\$0.26
35 - 39	\$0.37
40 - 44	\$0.53
45 - 49	\$0.95
50 - 54	\$1.45
55 - 59	\$2.17
60 - 64	\$2.95
65 - 69	\$4.43
70 and over	\$6.72

Employee coverage reduces after age 75, reducing to 60% of the elected coverage amount. Coverage for spouses terminates at age 75.

## Guarantee Issue (GI) Requirements

**Newly hired employees** may elect up to the guaranteed issue without evidence of insurability (EOI) during their initial enrollment period. Amounts above \$100,000 will be subject to EOI and approval. **Employees currently enrolled** may elect up to \$50,000 for themselves, and \$10,000 for spousal coverage without EOI during the annual Open Enrollment period.

Coverage Type	Guarantee Issue Amount	Coverage Range
Employee	\$100,000 (new hires); \$50,000 (currently enrolled employees)	Increments of \$10,000, up to \$500,000
Spouse	\$50,000 (new hires); \$10,000 (currently enrolled employees)	Increments of \$10,000, up to \$500,000
Child	N/A	\$5,000 or \$10,000 (6 months to 26 years old); \$2,000 (14 days to 6 months)

# Disability and FMLA

Whether you are disabled and unable to work due to an accident or illness, OUC offers Short and Long-Term Disability benefits options through Matrix. Disability is insurance for your paycheck should you become disabled due to an off-the-job injury or illness. This coverage will provide a percentage of your salary once you satisfy the waiting period. Refer to the Plan Summaries on OUCweb for details.

## Short-Term Disability

OUC offers Short-Term Disability (STD) self-funded policy and pays the full cost of coverage. The benefit would pay 60% of basic weekly earnings to a maximum of \$2,885 per week up to 52 weeks or until you no longer meet the definition of disability, whichever occurs first. Benefits are reduced by Social Security and/or Workers' Compensation, as well as pension benefits the disabled employee is eligible to receive. No paid leave (sick leave, vacation, floating holidays, etc.) will be paid while the employee is receiving disability benefits.

## Long-Term Disability

OUC offers Long-Term Disability (LTD) insurance policy and pays the full cost of coverage. The benefit would pay 60% of your monthly pre-disability earnings to a maximum of \$12,500 per month until you no longer meet the definition of disability or reach the Social Security Normal Retirement Age (SSNRA). Benefits are reduced by Social Security and/or Workers' Compensation, as well as pension benefits the disabled employee is eligible to receive. No paid leave will be paid while the employee is receiving disability benefits.

## What Happens to Health Insurance Coverage While on Long-Term Disability?

Eligibility for OUC health insurance premium contributions will continue for a maximum of 24 months while on LTD. After 24 months, the employee's status will be changed from Inactive (disability) to Separated Employee status, and the employee's file will be administratively closed with OUC. The employee will be eligible for COBRA and may also be eligible for life insurance policy conversion or waiver of premium. For questions on short- and long-term disability benefits, please email [benefits@ouc.com](mailto:benefits@ouc.com).

## Family and Medical Leave

The Family and Medical Leave Act (FMLA) is a federal law that allows eligible employees to take job-protected, unpaid leave for up to twelve (12) work weeks in a twelve (12) month period. FMLA requires that group health benefits be maintained during the leave. Employees may use vacation, sick, and floating holiday hours to cover their pay while out on approved FMLA leave.

Qualifying reasons for employees to take FMLA leave can include:

- For the serious health conditions of the employee, a spouse, parents or child(ren)
- For the birth, adoption or foster care placement of a child
- To care for a covered service member with serious injury or illness
- Because of any qualifying exigency arising out of a covered family military member on or being called to active duty

# Voluntary Insurance



OUC offers employees the option to purchase voluntary insurance provided through Allstate. In addition, you have the option to cover your spouse and child(ren) after electing coverage for yourself. The premiums for elected benefits are deducted from your paycheck. Visit our OUC360 Employee resource site at [ouc360.com/employees](http://ouc360.com/employees) to view the Allstate brochures and weekly rates. You may enroll/add/drop/cancel by contacting Allstate at 877-579-3635. Reminder: OUC's supplemental insurance plans (Allstate) will be paid on a post-tax basis. Employees may cancel/drop dependent coverage during the year.

## Voluntary Hospital Indemnity

A hospital admission can result in significant financial hardship. You may have a large deductible to meet in addition to other hospital-related charges for surgery, anesthesia, radiology, and more. A Hospital Indemnity policy provides a lump sum cash benefit paid directly to you to help offset those expenses not covered by your major medical insurance. Reimbursement increases with the number of days you are hospitalized. There are two plans available, based on premium cost and benefit amounts. Refer to the [Allstate Group Hospital brochure](#) for more information about pre-existing condition limitations, covered services, limitations, exclusions, and weekly rates.

## Voluntary Accident

•Where most medical plans only pay a portion of the bills, Accident insurance can help pick up where other insurance leaves off. This policy provides a cash benefit to cover expenses if you or a covered dependent experience an eligible event. See the [Allstate Group Accident brochure](#) for additional information.

Weekly Rates	Low	High
Employee	\$3.35	\$4.78
Employee + Child(ren)	\$5.68	\$8.27
Employee + Spouse	\$6.21	\$9.06
Employee + Family	\$8.53	\$12.55

## Voluntary Critical Illness

Critical Illness insurance pays a lump sum cash benefit when you or a covered family member is diagnosed with a serious illness, such as a heart attack, stroke, major organ failure, or cancer. You may use this benefit in any way you choose to pay for expenses that are not medical but have occurred due to the diagnosis, such as lost wages, family care, rehabilitation, or transportation. There are two lump-sum options of \$10,000 or \$20,000 to choose from. Benefits are paid to you regardless of any additional coverage you may have. See the [Allstate Critical Illness brochure](#) for additional information and weekly rates.

# Retirement Plans

As a reminder, we offer the retirement plans listed below to you. It's a good practice to annually review your retirement elections, investment choices, speak with an investment advisor, and update your beneficiary designations.

The OUC Hybrid Retirement Program consists of:

1. The OUC Defined Contribution Pension Plan (Defined Contribution Plan 401(a))
2. The OUC Cash Balance Pension Plan (Cash Balance Plan)
3. The OUC Medical Subsidy Benefit provided through a Health Reimbursement Arrangement (HRA)

We also offer the 457(b) Deferred Compensation Plan as an additional tax-advantaged investment option.

These three components of the Hybrid Retirement Program help provide employees an income replacement which may be needed at their retirement. The OUC Cash Balance Plan and the OUC Medical Subsidy are fully funded by OUC. The program also includes employees who converted from the OUC Defined Benefit Pension Plan to the Defined Contribution Plan effective January 1, 1998.



## 1. OUC Defined Contribution Pension Plan (DC Plan 401(a))

Through automatic payroll deduction, employees make a 4% base pay contribution to the plan on a pre-tax basis. This is called the employee mandatory contribution, and it will be withheld from each payroll and contributed to the plan on your behalf. An additional 12% of compensation may be voluntarily contributed. Employees can make up to 2% of this optional 12% contribution on a pre-tax basis. This plan is managed by Fidelity Investments.

When you sign up for pre-tax voluntary contributions, you cannot reduce, increase or stop the pre-tax contributions during your employment with OUC. This pre-tax election is irrevocable. You will have 24 months from your date of hire to make the pre-tax election. If you fail to make any election prior to the end of your 24-month period, you will have lost your opportunity to make the pre-tax voluntary contributions.

OUC will make a pre-tax contribution to your account equal to 4% of your base compensation. You are 100% vested in your OUC's matching contributions and any earnings after one year of continuous service. At seven years of service, OUC will match up to an additional 2% voluntary contribution.

## 2. OUC Cash Balance Plan

Annual contributions will be determined based on an employee's eligible compensation and the "pay-credit" scale below. The pay-credit scale is determined based on an employee's age and years of service. A service credit is earned for every plan year in which the employee earns a minimum of 1,000 hours of eligible regular pay. A service

# Retirement Plans (Continued)

credit is earned for FMLA, military leave or approved paid leave. To receive credit for an approved leave of absence, the plan participant must return to work on the first business day or before the last scheduled day of the approved leave. A service credit can be earned for an approved leave of absence of up to 12 months. Approved leaves exceeding 12 months will not be eligible for additional service credits. Service credit beyond 12 months may be approved for military service.

Contributions will be made by OUC based on the table below. In all circumstances, an employee will receive the pay-credit component based on their age. Earned service credits will be determined based on eligible hours within a fiscal year.

## Pay-Credit Scale

Age Plus Service	Pay Credit (% of Pay)	Age Plus Service	Pay Credit (% of Pay)
0-24	8%	55-64	12%
25-34	9%	65-74	13%
35-44	10%	75-84	14%
45-54	11%	85+	15%

The OUC Cash Balance Plan will earn annual interest credits based on an interest rate set annually with a floor of 4% and a maximum of 6%. Interest credits will be awarded annually following completion of the plan year based on the accumulated value of the “account,” including earnings from the current fiscal year.

The contributions and interest credits will be made by OUC on an annual basis, after the close of the plan year on September 30. Contributions for participants retiring or terminating employment during the plan year shall be prorated for their final year of service. Cash Balance contributions are completed in Employee Self-Service at the end of the plan year and the updated amount can be viewed in Fidelity by January. Eligible employees may review their Cash Balance amounts in Employee Self-Service anytime. Employees are vested in the OUC Cash Balance Plan with five years of continuous service.

### 3. OUC Medical Subsidy Benefit

We have established a Medical Subsidy Benefit for employees as a component of the OUC Hybrid Retirement Program. Employees are vested in the subsidy with five years of continuous service. The accumulated value of the contributions and interest credits will be placed in an Health Reimbursement Arrangement (HRA) for the use of the vested past employee and their dependents. The Retiree and vested past employee will be eligible to receive reimbursement of eligible medical expenses, including premiums. Reimbursements will not be subject to income taxes except as required by law.



## Retirement Plans (Continued)

Eligible employees will receive a contribution for each fiscal year during the employee's service tenure in which the employee earned at least 1,000 hours of base pay. Contributions may be indexed for inflation. The Hybrid Retiree Medical Subsidy will earn annual interest credits based on an interest rate set annually with a floor of 4% and a maximum 6%. The contribution will be deposited into a notional account following the conclusion of the fiscal year.



### Deferred Compensation Plan (457(b))

Through our partnership with Fidelity, we offer a deferred compensation plan (457b) to you. Under this plan, you can make pre-tax contributions and/or post-tax Roth contributions to a 457(b) account. The annual limits are determined by the Internal Revenue Service (IRS) and may be adjusted annually due to inflation. The plan also allows for a catch-up provision for employees age 50 and above. The catch-up limit is determined by the IRS and may be adjusted annually due to inflation. This plan is managed by Fidelity Investments. OUC's partnership with Fidelity gives employees a personalized and guided experience, including a comprehensive view of their finances, to help them identify priorities and take meaningful actions for financial well-being.

Scan the QR code to download the Fidelity mobile app.



# Additional Benefits

## Educational Assistance Program

OUC recognizes the value of education and the commitment of time and money made by employees in obtaining degrees and certifications towards career advancement. Through the Educational Assistance Program, OUC provides reimbursement (up to \$6,250 annually) of educational expenses to regular full-time employees after the completion of one year of service. Contributions above \$5,250 will be subject to taxes consistent with the taxable rate. Taxes are based on your individual income taxes and may be up to 25%.

Employees are eligible to receive educational assistance for one bachelor's degree program and one master's degree program. Requests for a second bachelor's or second master's degree will be subject to approval by the Chief Employee Experience Officer only if it is deemed in the best interest of OUC operations.

## Hybrid Work Arrangement

A flexible work model is available, supporting a blend of in-office and remote work, subject to position type and related job functions. Eligible employees must sign a remote work agreement, which can be found on OUCareer. Speak with your manager directly.

## OUCares

The OUCares Workplace Giving Campaign, which launches every September and typically lasts six weeks, allows employees to easily donate to charitable organizations through weekly payroll deductions for the year or a one-time payroll deduction. Contributions are tax-deductible and can be made to any nonprofit organization within the United States. Although participation is encouraged,

it is not a condition or requirement of OUC employment. No matter the amount you give, your contribution and the collective generosity of your coworkers can make a meaningful impact throughout the Central Florida community. Contact Community Engagement at [communityengagement@ouc.com](mailto:communityengagement@ouc.com) for more information.

## OUC Fitness Centers

Free access to on-site fitness centers at all locations. Employees must sign Health & Wellness Facility Waiver in OUCareer at <https://ouc.csod.com/>

## Parking

OUC provides employee parking at no charge at all locations.

## Proud Volunteer Program

Through the OUC Proud Volunteer Program, employees can connect with local volunteer opportunities and report the hours they spend volunteering to track the impact of service to the community. Employees can also earn a cash payment from OUC to the organizations to which they donate a minimum of 25 hours of volunteer service, as long as they are a 501 (c) 3, 4, or 6 organization

Every year OUC hosts four quarterly volunteer projects for employees, family and friends to participate in. A notice of the quarterly volunteer event(s) is placed in companywide communications to solicit participation. Although volunteerism is encouraged, it is not a condition or requirement of OUC employment. For additional information about volunteer opportunities in our community, please visit the [Community Engagement](#) space within OUC360.

# Additional Benefits

## Recreational Facilities

OUC owns and operates three recreation facilities available to employees and their families: the Pines at Windermere, the intake fishing area at the Indian River Power Plant, and the Apollo Campground facility near the Indian River Power Plant.

## Recognition of Service

Awards are provided in recognition of faithful service of employees beginning with the fifth anniversary. Awards are continued every five years thereafter.

## Safety Prescription Eyewear

OUC pays a portion of the cost for ANSI-rated safety eyewear for safety-sensitive job classifications.

## Blue Light / Computer Glasses

OUC pays a portion the cost of one pair of BluTech glasses each calendar year for non-safety-sensitive job classifications.

## Safety Shoes Program

OUC pays a portion of the cost for ANSI-rated safety shoes for safety-sensitive job classifications.

## Transportation Subsidies

OUC provides a subsidy for Orlando's LYNX bus system and the SunRail commuter rail system.

## Discounts

OUC employees can access a variety of discounts from various local and national businesses including (visit OUCweb for the full list):

### Tickets At Work

Entertainment, including theme parks and travel.

### Aloft Hotel

A corporate rate is available for employees at this hotel in downtown Orlando located next to OUC's headquarters in Reliable Plaza.

### Orlando Science Center

Receive a discount on the full price of admission valid for up to four guests.

### Airport Parking

Receive discounted airport parking at the Orlando International Airport.



# Time Off

Whether you need a break to recharge, manage a personal health condition, recover from an injury or care for a loved one, OUC offers benefits to help you take time off when you need it.

## Vacation

Vacation with pay is provided to regular full-time employees and regular part-time employees who work at least 20 hours per week. The vacation benefit is effective on the employee’s date of hire and is dependent on their position and length of employment. Vacation is earned in eight-hour increments.

- Manager, director, and executive leadership level employees are provided 120 hours (15 eight-hour days) if hired between January and June and 80 hours (10 eight-hour days) if hired between July and December.
- Employees in supervisor or below positions are provided 80 hours (10 eight-hour days) if hired between January and June and 56 hours (seven eight-hour days) if hired between July and December.

In January of each year thereafter, employees will be provided with the number of vacation hours based on their position and years of service until they reach the threshold levels indicated in the table below unless otherwise negotiated.

Managers, Directors and Executives	
Years of Service	Annual Vacation Days / Hours
0-9	15 (120)
10-14	18 (144)
15-20	21 (168)
21 or more	25 (200)

Supervisors and Individual Contributors	
Years of Service	Annual Vacation Days / Hours
0-4	10 (80)
5-9	15 (120)
10-14	18 (144)
15-20	21 (168)
21 or more	25 (200)

## Vacation Carry-Over and Retirement Savings Option

Employees, excluding those hired after June 30, in their first year of employment, are eligible to carry over a maximum amount of vacation leave from one calendar year to the next if, (a) they have taken a minimum of 40 hours of vacation, and (b) they have a minimum balance of 40 hours of vacation at the date of the vacation carry over and retirement savings option election.

Vacation and retirement saving options for eligible employees are designed to enhance financial wellness and retirement planning. They are as follows:

- Carry over 80 hours of vacation time to the following year
- Elect a rollover of up to 40 hours to their deferred compensation plan (457(b) account) as either a current or next calendar year election.

# Time Off

## Sick Time

Beginning on the date of hire, full-time OUC employees earn forty (40) hours of paid sick leave and an additional forty (40) hours on the first employment anniversary date. Thereafter, 80 hours of paid sick leave are earned on each subsequent employment anniversary date. Sick leave for regular part-time employees is based on one-half the regular full-time rate. Unused sick leave hours may be carried over from one year to another and accumulated for later use.

## Holidays

OUC provides eight and one-half paid holidays and three paid floating holidays annually. The following days are designated as observed holidays:

- New Year's Day
- Martin Luther King, Jr. Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Eve - ½ Day
- Christmas Day
- Three floating holidays (floating holiday hours expire at the end of plan year (Jan.-Dec.)

## Eligibility

Holiday pay is provided to regular full-time employees and regular part-time employees who work at least 20 hours per week. Regular part-time employees are paid for 50% (four hours) of what full-time employees receive with each holiday. Contingent workers, including interns, contractors and temporary employees, are not eligible for paid holidays.

## Paid Parental Leave

Eligible employees may use up to eight continuous weeks (320 total hours equivalent, in eight-hour daily increments) of Paid Parental Leave (PPL) after providing certification to OUC Human Resources/ Benefits Team and Matrix based on a "qualifying event." A qualifying event shall be defined as:

- Birth of a child.
- Adoption: the creation of a parent-child relationship by judicial order between two parties.
- Guardianship: having been granted temporary or permanent legal authority and duty to care for another person because of the other person's infancy, incapacity or disability based upon court order.
- Surrogacy: becoming a parent of an infant through assisted reproductive technology on behalf of the intended parents.

Employees must be approved for FMLA in order to begin using the PPL. This paid time off is distinct from, and in addition to, any paid leave that the employee may also have available through their accrued vacation and/or sick leave banks. This paid benefit runs concurrently with unpaid job-protected leave entitlements for which the employee may be eligible under the federal Family and Medical Leave Act (FMLA).

# Important Notices

A printed copy of the full versions of the below notices along with the plan summaries can be obtained from Human Resources/Benefits or by logging in to OUC360.

## **HIPAA PRIVACY AND SECURITY – NOTICE OF PRIVACY PRACTICES**

Summary: HHS regulations require that participants be provided with a detailed explanation of their privacy rights, the plan’s legal duties with respect to protected health information, the plan’s uses and disclosures of protected health information, and how to obtain a copy of the Notice of Privacy Practices.

## **HIPAA PORTABILITY – NOTICE OF SPECIAL ENROLLMENT RIGHTS**

Summary: This notice describes a group health plan’s special enrollment rules including the right to special enroll within 30 days of the loss of other coverage or of marriage, birth of a child, adoption, or placement of a child for adoption, or within 60 days of a determination of eligibility for a premium assistance subsidy under Medicaid or CHIP.

## **COBRA – FIRST NOTICE OF COBRA RIGHTS**

Summary: This notice advises covered employees, covered spouses, and covered dependents of the right to purchase a temporary extension of group health coverage when coverage is lost due to a qualifying event.

## **PRESCRIPTION DRUG COVERAGE AND MEDICARE**

Summary: Entities that offer prescription drug coverage on a group basis to active and retired employees and to Medicare Part D eligible individuals – must provide, or arrange to provide, a notice of creditable or non-creditable prescription drug coverage to Medicare Part D eligible individuals who are covered by, or who apply for, prescription drug coverage under the entity’s plan. This creditable

coverage notice alerts the individuals as to whether or not their prescription drug coverage is at least as good as the Medicare Part D coverage.

## **MEDICAL PRE-TAX PREMIUMS PLAN**

Summary: Enrollment in a pre-tax premium plan authorizes premiums for group health plan benefits to be payroll deducted on a pre-tax basis.

## **CHILDREN’S HEALTH INSURANCE PROGRAM REAUTHORIZATION ACT NOTICE (CHIPRA)**

Summary: This annual notice notifies employees of potential state opportunities for premium assistance to help pay for employer- sponsored health coverage.

## **WOMEN’S HEALTH AND CANCER RIGHTS ACT NOTICE (WHCRA)**

Summary: Participants and beneficiaries of group health plans who are receiving mastectomy-related benefits can choose to have breast reconstruction following a mastectomy.

## **HEALTH CARE REFORM NOTICE: NOTICE OF EXCHANGE/ MARKETPLACE**

Summary: Employer must provide all employees with an Exchange Notice that includes a description of services provided by the Exchange. The notice must explain the premium tax credit available if a qualified health plan is purchased through the Exchange. The employee must also be informed that they may lose the employer contribution to any benefit plans offered by the employer if a health plan through the Exchange is elected.

# Important Notices

## **WELLNESS PROGRAM DISCLOSURE**

If it is unreasonably difficult due to a medical condition for you to achieve the standard for reward or if it is medically inadvisable for you to attempt to achieve the standard for reward under your employer's wellness program, please email [wellbeing@ouc.com](mailto:wellbeing@ouc.com) to develop another way for you to qualify for the wellness program reward.

## **YOUR RIGHTS AGAINST SURPRISE MEDICAL BILLS**

When you get emergency care or are treated by an out-of-network provider at an in-network hospital or ambulatory surgical center, you are protected from balance billing. In these cases, you shouldn't be charged more than your plan's copayments, coinsurance and/or deductible.

# Vendor Mobile Apps: Key Benefits



## Aetna Mobile App Features:

- Access to ID cards
- Locate in-network providers, clinics, and urgent care centers near you
- View claims and EOBs



## Teladoc Mobile App Features:

- 24/7 access to care, set up appointments ASAP, or schedule for a later time / date
- Track previous appointments and prescriptions
- Mental health and dermatology appointments also available through the app



## Inspira Mobile App Features:

- Check account balance, deposits and payments
- Verify card purchases
- Request reimbursement for eligible expenses



## Fidelity NetBenefits Mobile App Features:

- View workplace retirement savings account balances, investments, contributions, etc.
- Access educational articles, videos, and more



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**Orlando Utilities Commission**

Human Resources/Benefits

100 West Anderson Street

Orlando, FL 32801

[ouc360.com/employees](http://ouc360.com/employees)

407-434-2284 | [benefits@ouc.com](mailto:benefits@ouc.com) | 407-434-5003 fax

The information in this Benefits Summary is presented for illustrative purposes and is based on information provided by your employer. The text contained in this Summary was taken from various summary plan descriptions and benefits information. While every effort was taken to report your benefits accurately, discrepancies or errors are always possible. In case of a discrepancy between the Benefits Summary and the actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about this Summary, contact Human Resources. OUC reserves the right to modify, add, or remove benefits at any time, with or without prior notice.