

| Benefit | | Contact Information | | | |
|-----------------------------------|--|--|--|-------------------------------|--|
| Florida Retirement System (FRS) | County contributes into FRS for all - 10% for full-time and part-tim - 24.45% for Special Risk Emplo - 27.29% for Senior Manageme - 49.18% for Elected officials | Human Resources: 850-689-5870 Division of Retirement 1-866-446-9377 | | | |
| Leave | Annual Leave, Sick Leave and 10 Page 100 Page 10 | Human Resources: 850-689-5870 | | | |
| Deferred Compensation | Deferred Compensation Savings is Valic Ph | Human Resources: 850-689-5870 | | | |
| Deferred Compensation | Nationwide Ch | nris Whitlock | 850-512-0085 | | |
| Credit Union | Full-time employees offered free r Credit Union. Employee may partic | Human Resources: 850-689-5870 | | | |
| | | | | Human Resources: 850-689-5870 | |
| Employee Assistance Program (EAP) | Full-time employees may use the Ecounseling sessions will be provide | Pattison Professional Counseling & Mediation Center | | | |
| | dependent. | 850-682-1234 (Crestview) 850-863-2873 (Fort Walton Beach) | | | |
| Educational Reimbursement Program | Reimbursement of tuition and boo (Department Head approval requi | Human Resources: 850-689-5870 | | | |
| Additional Insurance Companies | May purchase insurance through a AFLAC AFLAC Allstate American General Colonial Liberty National Midland National | any of the following compani Leo Tisa Mark Tooke Virginia Lind Angela Byers Margie Black Jason Perry David Campbell | es by payroll Deduction: 850-678-2458 850-864-8837 850-862-5511 850-474-0023 205-695-3880 850-516-2573 850-865-2463 | Risk Management 850-689-5977 | |

Okaloosa County – Risk Management 1 of 2 As of: 12/20/2019

| Benefit | Provider | BCC and Employee Cost | | | Benefit Summary | Contact Information |
|----------------------------------|---|--|---|---|--|--|
| Health Insurance | Blue Cross / Blue Shield of Florida | Plan (\$1500 annual Employee Family Plan Employee Employee Family Plan Employee Employee Employee Employee | contribution) \$916.59/month \$482.44/month \$1045.59/ month \$180.27/ month \$826.02/ month \$1045.59/month \$376.44 /month \$1,125.40/month | HSA Base Paid by BCC Paid by Employee 5781 Base Buy Up Paid by BCC Paid by Employee Paid by Employee 5770 Buy up Paid by BCC Paid by Employee Paid by Employee Paid by Employee | Hospitalization Physician services Discount Programs | Risk Management 850-689-5977 BCBS(Claims/Benefits) PPO 1-800-322-2808 |
| Tricare Supplement | Assoc. & Society Ins. Corp. ASI | Single Employee + One Family | \$67.50/month \$132.50/month \$178.50/month | Paid by Employee Paid by Employee Paid by Employee | Retired military employees or their dependents are eligible. Retiree must waive out of BCBS. | Risk Management 850-689-5977 ASI 1-800-638-2610 |
| Life Insurance | OCHS | \$25,000 Basic Life/AD&D Optional Life Employee/Spouse Optional Employee AD&D Child life | \$2.00 / month Age Banded .02/\$100 \$0.10/\$1,000 | Paid by Employee Paid by Employee Paid by Employee Paid by Employee | The BCC provides \$25,000 of basic life and accidental death and dismemberment (AD&D) insurance for regular full time employees. | Risk Management 850-689-5977 OCHS 1-800-392-7295 |
| Long Term Disability (LTD) | OCHS | Basic LTD Coverage Optional 10% buy-up | \$3.80 \$6.99/month | Paid by BCC Paid By Employee | BCC provides LTD insurance for all full-time employees. After 6 month waiting period employee receives 50% of their salary up to five years. Employees may choose to purchase an additional 10% of coverage. | Risk Management 850-689-5977 <u>OCHS</u> 1-800-392-7295 |
| Dental Insurance | Solstice | Single Coverage: Family Coverage: | \$26.41 /month \$50.21/ month | Paid by BCC Paid by Employee | Free Cleanings 4 times yearly \$50/150 Deductible \$1,250 yearly max/ per person Increasing calendar year maximum feature | Risk Management 850-689-5977 Solstice 1-877-724-9982 |
| Section 125 Plan | Lockard & Williams | Debit Card Administration | \$1.00/month \$4.50/ month | Paid by BCC Paid by BCC | Allows employees to pre-tax certain insurance costs; unreimbursed medical; and dependent care expenses. Myflexonline.com | Risk Mgt. <u>Kenny Anderson</u> 850-516-7043 |
| Vision Insurance | EyeMed | Employee Only Employee + Spouse Employee + Childrer Family | \$12.93 Paid n \$10.43 Paid | I by Employee I by Employee I by Employee I by Employee | \$40 exam yearly \$30 standard lenses yearly \$120 toward frames every 24 months \$120 toward contacts Lasik and Progressive Lens discounts | EyeMed 1-866-289-0614 |