

# Annual Enrollment is Oct. 27 – Nov. 7, 5pm

See page 4 for information about what happens if you don't enroll.

Who do I contact if I have benefits questions?

**HR Connect:** 

Phone: 919-856-6090

Monday – Friday 8:30 am – 5:15 pm ET

Email: hrconnect@wake.gov

**Online:** <u>Living Great @ Wake</u> or Virtual Benefits Fair

#### Disclaimer

This document is intended to highlight or summarize certain provisions of Wake County's benefits plans. It is not a Summary Plan Description (SPD) or an official plan document. Your rights and obligations under the plans are set forth in the plan documents. All statements in this summary are subject to the terms of the official plan documents. In the case of an ambiguity or conflict between a provision in this summary and a provision in the plan documents, the terms of the plan documents control.

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# **Virtual Benefits Fair**

Wake County continues to help support our employees and their families – including bringing our annual benefits fair to you in an engaging and informative way. We invite you to learn about your benefits, explore your resources, and participate in the Virtual Benefits Fair.

**Visit the Virtual Benefits Fair, open 24/7 beginning Oct. 15,** to be ready for Annual Enrollment, Oct. 27 – Nov. 7.

To visit the fair, go to <u>www.virtualfairhub.com/wakecounty</u> and enter:

Username: wakecounty Password: WCbenefits

We encourage you to visit the fair with your spouse and/or dependents, too. Together you can make choices best suited for yourneeds.

# 2026 Annual Enrollment is here

# It's time to take action

Your health and wellness are vital to the success of Wake County, and our benefit plans provide an important foundation of stability to you and your family. As part of our commitment to you, we will continue to make a significant investment to ensure your benefits are competitive and affordable. Wake County pays a large percentage of your health and dental costs. Your share will vary based on the options you select. Here's how we stack up.

- Wake County subsidizes a large portion of the cost of your health coverage. Depending on your choices, this can save you money on healthcare costs each year. This savings includes both what you contribute from your paycheck and what you pay when you receive health care services.
- You are encouraged to take ownership of your health through the Wellness Incentive Program. By participating in the program, you can earn a discount on your health benefit premium.

Please take the time to read through this guide carefully to understand your options. Annual Enrollment is your once-a-year opportunity to choose the benefits that are best for you and your family. Take charge of your wellbeing and use the tools, resources, and support available to ensure you're making informed decisions and getting the most out of your benefits.

# How to get the most from your 2026 Benefits Guide

This Benefits Guide provides an overview of your 2026 benefit options. Annual Enrollment begins October 27, 2025, and ends November 7, 2025, at 5:00 p.m. ET. The elections you make during this time will be effective beginning January 1, 2026. If you don't make elections during Annual Enrollment, you may not receive the coverage you want for 2026. If you have a spouse or dependent children, they may not be enrolled in plans you want. See page 4 for more information.

We encourage you to take time to review the following pages to understand your benefit options. If you have questions, remember you can visit the <u>Virtual Benefits Fair</u> or contact HR Connect for help. You need to enroll, make changes, or waive coverage by 5:00 p.m. ET, on November 7, 2025.



# What's changing for 2026?

Benefit	What's changing for 2026
- Belletit	
Medical	<ul> <li>No change to deductibles, copays, coinsurance, or out-of-pocket max.</li> <li>Health Plan Rates: See page 7 for the 2026 health plan rates.</li> </ul>
Pharmacy	No change to copays or coinsurance. However, please note that the formulary drug list can change at any time during the year. Cigna will notify you if there is a change in how the medication you are prescribed is covered.
Dental	<ul> <li>No change to deductibles, copays, coinsurance, or annual benefit max.</li> <li>Dental Plan Rates: See page 9 for 2026 dental rates.</li> </ul>
Health Savings Account	<ul> <li>Annual Contribution Limit* is increasing to:         <ul> <li>\$4,400 for employee only</li> <li>\$8,750 for employee + dependent(s)</li> <li>Employees age 55+ can contribute an additional \$1,000</li> </ul> </li> <li>* Limit includes the County contribution: \$750 for employee only and \$1,250 for employee + dependent(s), prorated for mid-year enrollments.</li> </ul>
Health Flexible Spending, Limited Purpose Flexible Spending	<ul> <li>Annual Contribution and Rollover Limits: The annual contribution is increasing to \$3,300. The minimum is \$120 per year. Up to \$660 in unused 2025 funds roll over to the 2026 plan year. The minimum rollover is \$25.</li> </ul>
Accident Insurance, Specified Disease, Hospital Indemnity,	<ul> <li>New Vendor: Unum New Name: Critical Illness is now called Specified Disease</li> <li>New Plan Design: Spouse coverage equals 100% of employee coverage.</li> <li>Rates for Specified Disease: See page 22 for new rates.</li> </ul>
Life and AD&D Insurance	<ul> <li>New Vendor: Unum</li> <li>New Plan: Child AD&amp;D coverage is available in \$2,500 increments, up to \$10,000.</li> <li>New Rates for Additional Employee Life: See page 20 for new rates for employee supplemental life. Rates for spouse supplemental life remain unchanged. Note: If you reached a new age bracket in 2025, your cost for supplemental life insurance will increase to the next age bracket rate in 2026.</li> <li>Medical History: Waived for new supplemental life enrollees, up to the guaranteed issue amount, during 2026 open enrollment only.</li> </ul>
Short-Term Disability	<ul> <li>New Vendor: Unum</li> <li>New Plan Design: Weekly benefit is 60% of weekly wage, up to \$4,000, with a choice of a 15-day or 30-day waiting period.</li> <li>New Rates: See page 19 for new rates. Note: If you reached a new age bracket in 2025, your cost for short-term disability will increase to the next age bracket rate in 2026.</li> </ul>
Pet Insurance	<ul> <li>New Vendor: Nationwide</li> <li>New Plan Design: Customizable coverage. See page 23 for options.</li> </ul>
Legal & ID Theft Protection	<ul> <li>Enhanced Benefit: Additional legal services and identity monitoring offered.         Identity fraud protection plan increased \$5 million. New limited coverage for adult children and dependent parents.     </li> <li>Reduced Rates: See page 23 for the 2026 new rates.</li> </ul>
Dependent Care FSA, Vision	❖ No changes
401(k), 457(b)	Catch-Up Contributions: Must be After-Tax Roth for employees aged 50+ who earned more than \$145,000 (indexed for inflation) in wages in prior calendar year.

# What happens if I don't enroll?

If you don't make elections during Annual Enrollment, you may not receive the coverage you want for 2026, and if you have an eligible spouse and/or children, they may not be enrolled in the coverage you want.

Benefit	2026 Annual Enrollment Default Coverage
	If you are enrolling a spouse and/or children on any benefit plan for the first time, you must certify their eligibility. See <a href="page 4">page 4</a> for what documents must be submitted to certify eligibility.
Spouse and Children Coverage	If eligibility is not certified during Annual Enrollment, your spouse and/or children will not be covered in 2026.
	COBRA is not available if coverage ends for your spouse and/or children because you fail to certify their eligibility.
	You must actively select a health plan to have coverage in 2026.
Medical/Pharmacy	If you cover eligible family members, you must actively re-enroll them in a health plan for them to have coverage in 2026.
Dental	You keep the same selections you have today.
Vision	You keep the same selections you have today.
	You will not be set up to make HSA contributions in 2026.
Health Savings Account	If eligible to make HSA contributions, you can request a mid-year change later.
Health Flexible Spending Account or Limited Purpose Flexible Spending Account	You will not have an account in 2026 unless you have a balance in your 2025 Flexible Spending Account that rolls over to 2026.
Child / Elder Day Care (Dependent Care) Flexible Spending Account	You will not have an account in 2026.
Accident Insurance, Specified Disease, Hospital Indemnity	You keep the same selections you have today.
Life and AD&D Insurance	You keep the same selections you have today.
Short-Term Disability	You keep the same selections you have today.
Legal and Identity Protection	You keep the same selections you have today.
Pet Insurance	You keep the same selections you have today.



# **Important Enrollment Information**

### **Enrollment eligibility**

In addition to yourself, you can enroll your eligible dependents:

- Your legal spouse;
- Your children up to age 26;
- Your children over age 26 who are certified as disabled.

If you are enrolling your spouse and/or children in benefits for the first time, you must provide the following documentation to certify their eligibility.



#### For your spouse

A copy of your spouse's Social Security card\* **AND** one of the following:

- Copy of marriage certificate; OR
- Copy of the first page of your previous year tax return showing "Married Filed Jointly" or "Married Filing Separately."

#### For your children

A copy of your child(ren)'s Social Security card\*, AND

- Biological Children Copy of birth certificate.
- Adoption / Guardianship Copy of court documents placing child with you.
- Step-Children Copy of your legal marriage certificate and child's birth certificate.
- Court Ordered Dependents Court order establishing responsibility to provide dependent health insurance coverage.

\*If your dependent has lost their Social Security card, you must submit a copy of their Social Security application to receive a replacement card. When they receive the replacement card, you must provide a copy.

\*If your dependent is not a U.S. Citizen, acceptable documentation includes:

- I-94 Arrival/Departure Record or admission stamp in the unexpired foreign passport.
- I-766 Employment Authorization Document, EAD, work permit.
- Form I-551 (Lawful Permanent Resident Card, Machine Readable Immigrant Visa) and unexpired foreign passport.
- Receipt from Social Security Administration office showing that a SSN application has been completed. When they receive the card, they must provide a copy.

See page 24 for your Enrollment Checklist

# Making changes to your benefits

After Annual Enrollment ends, you can only make changes to your benefits elections within 30 days of experiencing a qualifying life event, such as:

- Marriage
- Divorce, legal separation, or annulment
- Birth or adoption of a child
- Gain or loss of coverage by you, your spouse, or your dependent.

Documentation of the qualifying life event must be provided.

# **Opting out of coverage**

You may opt out of coverage by actively waiving coverage during Annual Enrollment.

# Your medical coverage options

Here is an overview of your medical coverage options. Click on the Summary of Benefits & Coverage (SBC) link for each plan to see additional coverage details. If there is a discrepancy between this summary and the plan document, the plan document will prevail. Refer to the Summary Plan Document for the health plan's terms, conditions, and exclusions.

	STANDA	RD PLAN	PREMIU	M PLAN	CONSUMER D	RIVEN PLAN	
CIGNO	A traditional copa premiums, but highe		A traditional copay plan with higher premiums, but lower out-of-pocket costs		A plan that is eligible for a Health Savings Account (HSA)		
SUMMARY OF BENEFITS & COVERAGE (SBC)	Standard	Plan SBC	<u>Premium</u>	Plan SBC	Consumer Dri	Consumer Driven Plan SBC	
MEDICAL SERVICES	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	
Deductible (per calendar year)	\$2,000 per person \$4,000 per family	\$4,000 per person \$8,000 per family	\$1,250 per person \$2,500 per family	\$2,000 per person \$4,000 per family	\$2,000 per person \$4,000 per family <sup>1</sup>	\$4,000 per person \$8,000 per family <sup>1</sup>	
HSA Eligible <sup>2</sup>	N	-		lo	Ye		
Healthcare FSA Eligible <sup>2</sup>	Ye			es	N		
Limited Purpose FSA Eligible <sup>2</sup>		0		lo	Ye		
Out-of-Pocket Maximum (Includes deductible)	\$6,500 per person \$13,000 per family	\$10,000 per person \$20,000 per family	\$5,500 per person \$11,000 per family	\$8,000 per person \$16,000 per family	\$5,000 per person \$10,000 per family	\$10,000 per person \$20,000 per family	
Primary Care - Office Visit	\$35 Copay	50% <sup>AD</sup>	\$25 Copay	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Specialist - Office Visit	\$60 Copay	50% <sup>AD</sup>	\$50 Copay	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
MDLive Telehealth Visit	FREE	Not Covered	FREE	Not Covered	80% <sup>AD</sup>	Not Covered	
Employee Health Center	FREE	Not Covered	FREE	Not Covered	FREE for Preventive, Coaching, Condition Management / \$20 for Primary Care	Not Covered	
Nutritional Counseling	FREE	50% <sup>AD</sup>	FREE	60% <sup>AD</sup>	100% <sup>AD</sup>	60% <sup>AD</sup>	
Preventive Care	FREE	50% <sup>AD</sup>	FREE	60% <sup>AD</sup>	FREE	60% <sup>AD</sup>	
Laboratory Services	FREE	70% <sup>AD</sup>	FREE	70% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Radiology (X-ray, MRI, MRA, CAT & PET scans)	70% <sup>AD</sup>	50% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Outpatient Rehab by Primary Care/Physical Therapist	\$35 Copay	50% <sup>AD</sup>	\$25 Copay	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Outpatient Rehab by Specialist	\$60 Copay	50% <sup>AD</sup>	\$50 Copay	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Chiropractic Care - 24 days	\$60 Copay	50% <sup>AD</sup>	\$50 Copay	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Urgent Care	\$50 C	Copay	\$50 Copay		80% <sup>AD</sup>	60% <sup>AD</sup>	
Ambulance		6 AD	80	)% <sup>AD</sup>	80%	6 AD	
Emergency Room		\$400 Copay (waived if admitted), \$400 copay (waived if ad then 70% AD then 80% AD			80%	ά AD	
Inpatient/Outpatient Hospital	70% <sup>AD</sup>	50% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Outpatient Mammogram	FREE	50% <sup>AD</sup>	FREE	60% <sup>AD</sup>	FREE	60% <sup>AD</sup>	
Skilled Nursing Facility	70% <sup>AD</sup>	50% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Home Health Care	70% <sup>AD</sup>	50% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Durable Medical Supplies	70% <sup>AD</sup>	50% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Maternity Hospital & Professional Services	70% <sup>AD</sup>	50% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Transplants - Hospital & Professional Services	100% @ Lifesource, otherwise 70% AD	Not Covered	100% @ Lifesource, otherwise 80% AD	Not Covered	100% AD @ Lifesource, otherwise 80% AD	Not Covered	
Office Visit Mental Health/Substance Abuse	\$35 Copay	50% <sup>AD</sup>	\$25 Copay	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Inpatient/Outpatient Mental Health/Substance Abuse	70% <sup>AD</sup>	50% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	80% <sup>AD</sup>	60% <sup>AD</sup>	
Bariatric Surgery	70% <sup>AD</sup>	Not Covered	80% <sup>AD</sup>	Not Covered	80% <sup>AD</sup>	Not Covered	
Vision Exam (one per year)	FREE	Reimbursed up to \$45	FREE	Reimbursed up to \$45	FREE	Reimbursed up to \$45	

Notes: AD After Deductible (deductible must be paid first before the plan will provide coverage as indicated)

<sup>&</sup>lt;sup>1</sup> Consumer Driven Plan family deductible must be met by one or more family members before the plan will provide coverage as indicated.

<sup>&</sup>lt;sup>2</sup> See pages 14-17 for more information about the HSA and FSA

# Your prescription drug benefits

Your prescription drug benefits include coverage for certain preventive, generic, and brand-name medications. The Consumer Driven Plan has different prescription drug coverage than the Standard and Premium plans. On the Standard and Premium plans, prescription coinsurance is applied to the deductible and annual out-of-pocket maximum. On the Consumer Driven plan, all prescription costs are applied to the deductible and annual out-of-pocket maximum.

cigno	Standard and	Consumer Driven Plan	
Tier	30-Day Supply Retail	90-Day Supply Retail/Mail Order	30-Day & 90-Day Supply Retail/Mail Order
Preventive	\$0	\$0	\$0, deductible waived
Generic	\$10	\$20	
Preferred	35%, up to \$200	35%, up to \$400	
Non-Preferred	50%, up to \$350	50%, up to \$600	Deductible, then Coinsurance
Specialty	60%, up to \$450	60%, up to \$450 (mail order only, 30-day supply limit)	uien comsulance

# **Preferred Drug List**

Cigna's Value Formulary is the preferred drug list and is subject to change. Cigna regularly reviews and updates the preferred drug list.

To see if your medications are on the preferred drug list, call the Cigna Pre-Enrollment Line at 1-888-806-5042 or log in to <a href="mailto:myCigna">myCigna</a>.

# **Specialty Pharmacy**

Cigna's preferred specialty pharmacy is Accredo. Visit <u>Cigna.com/specialty</u> or call Cigna at 1-877-826-7657 to learn more.



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### What about long-term prescriptions?

If you take long-term medications, save money by filling a 90-day prescription through the Cigna 90 network or have your medication delivered to your home through Express Scripts mail order.

Find a Cigna 90 pharmacy at Cigna.com/Rx90network

To setup your mail order, contact Express Scripts at 1-800-835-3784 or <u>Cigna.com/home-delivery-pharmacy</u>

If you don't use one of these options for your long-term medications, you will pay more.

# **Tips to Save Money on Prescription Drugs**

- Fill at a participating pharmacy
- Use generic drugs
- Fill a 90-day supply for less with mail order or at a Cigna 90 network pharmacy
- Ask your doctor about a comparable, alternative drug on a lower tier
- Shop around for the lowest price. Not all pharmacies charge the same!

# Your health plan rates (semi-monthly)

CONSUMER DRIVEN PLAN							
FTE	Hours/Week	EE Only	EE + Spouse	EE + Child	EE + Family		
1.0	40	\$12.50	\$176.50	\$76.00	\$255.00		
0.9475	37.9038	\$35.38	\$216.91	\$113.93	\$313.22		
0.9375	37.5	\$39.79	\$224.70	\$121.24	\$324.44		
0.9	36	\$56.16	\$253.62	\$148.38	\$366.10		
0.85	34	\$77.99	\$292.18	\$184.57	\$421.64		
0.833	33.32	\$85.41	\$305.29	\$196.88	\$440.53		
0.825	33	\$88.90	\$311.46	\$202.67	\$449.42		
0.8	32	\$99.82	\$330.74	\$220.76	\$477.19		
0.75	30	\$121.65	\$369.29	\$256.96	\$532.74		
0.7	28	\$143.48	\$407.85	\$293.15	\$588.29		
0.675	27	\$154.39	\$427.13	\$311.24	\$616.06		
0.65	26	\$165.30	\$446.41	\$329.34	\$643.84		
0.6317	25.2692	\$173.28	\$460.50	\$342.56	\$664.13		
0.625	25	\$176.22	\$465.69	\$347.43	\$671.61		
0.6	24	\$187.13	\$484.97	\$365.53	\$699.38		
0.55	22	\$208.96	\$523.53	\$401.72	\$754.93		
0.5	20	\$230.79	\$562.09	\$437.91	\$810.48		

Don't pay more!

Complete these programs by October 31st each year

**Tobacco-Free** 

**Know Your Numbers** 

**Motivate Me** 

Learn more about program surcharges and the wellness incentive on page 13

		,	,	+	,			
STANDARD PLAN								
FTE	Hours/Week	EE Only	EE + Spouse	EE + Child	EE + Family			
1.0	40	\$16.50	\$191.00	\$82.50	\$273.50			
0.9475	37.9038	\$39.40	\$231.13	\$120.49	\$331.44			
0.9375	37.5	\$43.81	\$238.86	\$127.81	\$342.60			
0.9	36	\$60.19	\$267.58	\$155.00	\$384.06			
0.85	34	\$82.03	\$305.86	\$191.25	\$439.33			
0.833	33.32	\$89.46	\$318.88	\$203.57	\$458.13			
0.825	33	\$92.96	\$325.01	\$209.37	\$466.97			
0.8	32	\$103.88	\$344.15	\$227.50	\$494.61			
0.75	30	\$125.72	\$382.44	\$263.75	\$549.89			
0.7	28	\$147.57	\$420.73	\$300.00	\$605.17			
0.675	27	\$158.49	\$439.87	\$318.12	\$632.80			
0.65	26	\$169.41	\$459.02	\$336.25	\$660.44			
0.6317	25.2692	\$177.39	\$473.01	\$349.49	\$680.64			
0.625	25	\$180.33	\$478.16	\$354.37	\$688.08			
0.6	24	\$191.26	\$497.30	\$372.50	\$715.72			
0.55	22	\$213.10	\$535.59	\$408.75	\$771.00			
0.5	20	\$234.95	\$573.88	\$445.00	\$826.28			

PREM	IUM PLAN				
FTE	Hours/Week	EE Only	EE + Spouse	EE + Child	EE + Family
1.0	40	\$51.50	\$282.50	\$145.00	\$394.50
0.9475	37.9038	\$73.79	\$320.43	\$181.91	\$449.83
0.9375	37.5	\$78.08	\$327.73	\$189.01	\$460.49
0.9	36	\$94.03	\$354.87	\$215.42	\$500.08
0.85	34	\$115.30	\$391.06	\$250.63	\$552.87
0.833	33.32	\$122.53	\$403.36	\$262.61	\$570.82
0.825	33	\$125.93	\$409.15	\$268.24	\$579.27
0.8	32	\$136.57	\$427.24	\$285.85	\$605.67
0.75	30	\$157.83	\$463.43	\$321.06	\$658.46
0.7	28	\$179.10	\$499.61	\$356.27	\$711.25
0.675	27	\$189.73	\$517.71	\$373.87	\$737.64
0.65	26	\$200.36	\$535.80	\$391.48	\$764.04
0.6317	25.2692	\$208.13	\$549.02	\$404.35	\$783.33
0.625	25	\$211.00	\$553.89	\$409.09	\$790.44
0.6	24	\$221.63	\$571.99	\$426.69	\$816.83
0.55	22	\$242.90	\$608.17	\$461.90	\$869.62
0.5	20	\$264.16	\$644.36	\$497.12	\$922.42



# Your dental plan options

You have two dental plan options to choose from. Both plans allow you to receive care from any dentist you choose. However, you are likely to experience the greatest out-of-pocket savings when you choose a dentist that participates in one of the Delta Dental networks – Delta Dental PPO or Delta Dental Premier.

To find a participating dentist, visit <u>DeltaDentalNC.com</u>

Did you know you may be eligible for more than two cleanings per year? Learn more on Living Great @ Wake.





DENTAL PLAN SUMMARY	<b>BASIC PLAN</b>	PLUS PLAN
Deductible		
The amount you must pay each year for covered dental services before the insurance plan will begin to pay.	\$50 / Individual	\$50 / Individual \$150 / Family
Plan Year Maximum Benefit		
The most the insurance plan will pay for covered dental services each plan year per covered individual.	\$1,000	\$1,500
Preventive and Diagnostic Services		
<ul> <li>Exams, x-rays, cleanings, fluoride, sealants, emergency palliative care (temporary pain relief)</li> </ul>	100%, no deductible	100%, no deductible
Basic Services		
✓ Surgical removal of teeth	80%	80%
<ul> <li>Non-surgical removal of teeth, diagnostic x-rays, fillings, crowns, root canals, gum disease treatment, oral surgery</li> </ul>	50%	80%
Major Services		
✓ Crowns, bridges, dentures	50%	50%
✓ Implants	Not covered	50%
Orthodontia		
✓ Orthodontic Treatment (braces)	50%	50%
√ Orthodontic Lifetime Benefit Maximum	\$1,000	\$1,250
✓ Orthodontia Eligibility	Children	and Adults

Did You Know?

Dental insurance is an important benefit for you and your family. In addition to maintaining your smile, dentists examine your mouth, head, and neck for symptoms that may point to more serious health issues, such as cancer.

# Your dental plan rates (semi-monthly)

	BASIC PLAN						
FTE	Hrs/Wk	EE Only	EE + Spouse	EE + Child	EE + Family		
1.0	40	\$5.50	\$11.00	\$15.00	\$24.00		
0.9475	37.9038	\$6.05	\$12.14	\$16.29	\$25.95		
0.9375	37.5	\$6.16	\$12.36	\$16.53	\$26.32		
0.9	36	\$6.56	\$13.17	\$17.45	\$27.71		
0.85	34	\$7.08	\$14.26	\$18.68	\$29.57		
0.833	33.32	\$7.26	\$14.63	\$19.10	\$30.20		
0.825	33	\$7.35	\$14.80	\$19.29	\$30.50		
0.8	32	\$7.61	\$15.35	\$19.91	\$31.43		
0.75	30	\$8.14	\$16.43	\$21.13	\$33.29		
0.7	28	\$8.67	\$17.52	\$22.36	\$35.14		
0.675	27	\$8.93	\$18.06	\$22.97	\$36.07		
0.65	26	\$9.19	\$18.61	\$23.59	\$37.00		
0.6317	25.2692	\$9.39	\$19.00	\$24.03	\$37.68		
0.625	25	\$9.46	\$19.15	\$24.20	\$37.93		
0.6	24	\$9.72	\$19.69	\$24.81	\$38.86		
0.55	22	\$10.25	\$20.78	\$26.04	\$40.72		
0.5	20	\$10.78	\$21.87	\$27.27	\$42.57		

LUS PLAN					
FTE	Hours/Week	EE Only	EE + Spouse	EE + Child	EE + Family
1.0	40	\$9.00	\$17.50	\$20.50	\$33.00
0.9475	37.9038	\$9.51	\$18.59	\$21.84	\$35.04
0.9375	37.5	\$9.61	\$18.80	\$22.10	\$35.44
0.9	36	\$9.98	\$19.58	\$23.05	\$36.90
0.85	34	\$10.47	\$20.61	\$24.33	\$38.85
0.833	33.32	\$10.64	\$20.97	\$24.77	\$39.51
0.825	33	\$10.72	\$21.13	\$24.97	\$39.82
0.8	32	\$10.96	\$21.65	\$25.61	\$40.80
0.75	30	\$11.45	\$22.69	\$26.89	\$42.75
0.7	28	\$11.94	\$23.73	\$28.16	\$44.69
0.675	27	\$12.19	\$24.24	\$28.80	\$45.67
0.65	26	\$12.43	\$24.76	\$29.44	\$46.64
0.6317	25.2692	\$12.61	\$25.14	\$29.91	\$47.36
0.625	25	\$12.68	\$25.28	\$30.08	\$47.62
0.6	24	\$12.92	\$25.80	\$30.72	\$48.59
0.55	22	\$13.41	\$26.84	\$32.00	\$50.54
0.5	20	\$13.90	\$27.88	\$33.27	\$52.49

# **Your Vision Plan Options**

You have two vision plan options to choose from through EyeMed. Here are your vision plan in-network and out-of-network vision benefits. Your costs are lower when you stay in-network since coverage is higher when you use a participating provider.

To find a participating provider, visit <a href="EyeMed.com">EyeMed.com</a>.





VISION PLAN SUMMARY	STANDARD	PREMIUM	REIMBURSEMENT
	In-Network	In-Network	Out-of-Network
Eye Exam			
	\$15 copay	No copay	Up to \$50
Frames - FREE frames when yo	u buy glasses at Target Optical or Lens	Crafters! Use the Freedom Pass c	oupon on LG@W.
	No copay	No copay	
	\$130 allowance + 20% off on	\$160 allowance + 20% off	Up to \$70
	balance over \$130	on balance over \$160	
Lenses (Standard Plastic)		-	
✓ Single Vision	\$25 copay	\$15 copay	Up to \$50
√ Bifocal	\$25 copay	\$15 copay	Up to \$75
√ Trifocal	\$25 copay	\$15 copay	Up to \$100
✓ Standard Progressive	\$75 copay	\$65 copay	Up to \$75
✓ Premium Progressive	\$95 - \$120 copay	\$85 - \$110 copay	Up to \$75
Contacts			
√ Conventional	No copay \$130 allowance 15% off balance over \$130	No copay; \$160 allowance 15% off balance over \$160	Standard – Up to \$10 Premium – Up to \$112
√ Disposable	No copay \$130 allowance plus balance over \$130	No copay \$160 allowance plus balance over \$160	Standard – Up to \$10 Premium – Up to \$112
✓ Medically Necessary	No co-pay	No co-pay	Up to \$210

# **Know Before You Go**

Know how much your glasses will cost by using the cost estimator available on your EyeMed account at

www.eyemed.com

	STANDARD	PREMIUM			
Rate Per Paycheck	You Pay*	You Pay*			
Employee Only	\$3.50	\$4.63			
Employee + Spouse	\$6.50	\$9.78			
Employee + Child(ren)	\$7.00	\$10.29			
Employee + Family	\$8.00	\$11.83			
* Employees pay the full cost of vision insurance.					

# **Health Resources**

Living Great @ Wake is our holistic health and well-being program. The program focuses on improving the health and well-being of our employees and their families through education, tools, and programs that support overall health and well-being - resulting in higher productivity, engagement and morale, and lower health care costs.

# **Employee Health Center (EHC)**

Wake County has two on-site Employee Health centers, operated by Premise Health, that provide low or no cost medical services to employees, spouses, and adult children age 18 to 26 covered by our health insurance plan.

#### **Medical Services\***

The Employee Health Centers provide medical services, including:

- Primary Care
- Urgent Care
- Wound, Rash, Insect Bite Care
- Strains and Sprains Care
- Urinary or Respiratory Care
- Preventive Services
- Wellness Exams
- Immunizations
- Lab Services

### **Condition Care Management\***

One-on-one condition care management provides the support and care needed for various conditions, including:

- Diabetes
- Hypertension
- Hyperlipidemia
- COPD

- Coronary Heart Failure
- Asthma
- Osteoarthritis
- And more

### **Diabetes Management Program\***

Premise Health's diabetes management program provides:

- 24/7 glucose monitoring and no-cost testing supplies
- In-person and virtual appointments with a diabetes expert
- Ongoing education and support

### **Behavioral Health Programs\***

The Employee Health Center offers one-on-one appointments with a Behavioral Health Specialist.

# **Health Coaching**

One-on-one wellness coaching can help you achieve your health goals, such as weight management, nutrition, work/life balance, stress management, physical activity, or tobacco cessation.

#### Cost

**Standard & Premium Health Plans:** All services are *FREE* **Consumer Driven Health Plan:** 

Preventive Services, Condition Care, Wellness Coaching – *FREE* Primary Care, Sick & Urgent Care Services - \$20

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# Why Use the EHC?

It's Fast and Convenient

Low / No Cost Appointments

You don't have to use sick leave

Earn incentive points to lower your health insurance premium

Your health information is kept confidential

#### **APPOINTMENTS**

919-856-5600

MyPremiseHealth.com

#### **Wake County Office Building**

337 S. Salisbury St., Suite G110 Raleigh, NC

#### **Swinburne Building**

220 Swinburne St., Suite 1098 Raleigh, NC

#### **Virtual Appointments**

Your home, office, or on the go! Phone, Video Chat, Messaging

#### **HOURS**

Monday-Thursday 7:30 am – 4:30 pm Friday 7:30 am – 2:00 pm Closed daily 12:00-12:30

\*Due to medical licensure requirements, you must be in North Carolina to receive this service. If you are out-of-state, you may access nationwide virtual care at myPremiseHealth.com.

### myS.E.L.F.network

Sometimes you get overwhelmed by personal or work problems and need a support system. Whether help is needed with family counseling, finding summer camps or adult daycare, or shopping for a qualified local electrician, the myS.E.L.F.network is available 24/7 for you and your family members.

You can contact myS.E.L.F.network for a broad range of work/life issues, including stress, depression and anxiety, marital and family problems, job pressures, substance use disorder, plus legal and financial issues.

Services are completely confidential. You can receive up to five counseling sessions, per issue, per year at no cost to you. You can meet over the phone, face-to-face, through video or online chat.

Employees and immediate household family members (including college-aged children) can use the myS.E.L.F.network for **FREE!** 

Contact myS.E.L.F.network at:

1-800-633-3353 or MyGroup.com

(Username: myselfnetwork; Password: guest).

#### **Telehealth**

Skip the long lines in the waiting room. When you need routine treatment or non-urgent care, you can connect with a doctor by phone or video anytime, anywhere via your mobile phone or computer. You can register for Telehealth through your **myCigna.com** account or directly with **MDLiveforCigna.com**.

Premium Health Plan – FREE Standard Health Plan – FREE

Consumer Driven Plan: deductible/coinsurance

# Take care of your mental health

Navigating through a pandemic, social unrest and economic hardship has caused an increase in stress, anxiety, and depression. The more you know about mental health, the better prepared you are to manage your own emotional wellbeing. Take care of yourself by taking advantage of the free services offered through the myS.E.L.F.network, Employee Health Center, and your mental health benefits included in your health plan.

# Behavioral health and substance use disorder support

Your medical coverage offers behavioral health benefits to you and your covered family members who need care and support for a behavioral health or substance use disorder. Both inpatient and outpatient services are covered, and virtual behavioral health apps are available.

For more information on coverage, visit myCigna.com

# **Cigna Nurse Line**

Not sure if Telehealth is the right choice for your medical condition? Talk to a nurse to help decide the right care plan. Call the Cigna Nurse Line at 1-800-244-6224 – It's **FREE!** 



# **Wellness Incentive Program**

The Living Great @ Wake Wellness Incentive Program encourages you to take ownership of your health and wellbeing – and saves you money. By completing a few simple activities in 2026, you can be rewarded and pay the lowest possible premium for your medical benefits.

**To avoid premium surcharges in 2027**, you (and your spouse, if covered by the medical plan) must complete the Tobacco-Free and Know Your Numbers programs between November 1, 2025, and October 31, 2026.

#### **Tobacco-Free Program**

- Certify you are tobacco-free for the past 12 months, or
- Complete a tobacco cessation program at the Employee Health Center

**Note**: The definition of tobacco includes vaping products.

#### **Know Your Numbers**

- Complete a health risk assessment, and
- Complete a biometric screening

**Note**: Biometric screenings are provided free of charge at the Employee Health Center or can be performed by your primary care provider.

The surcharge is \$40 per month per program and applies separately to the employee and spouse, if covered by the medical plan.

**To earn the wellness premium credit in 2027**, you (and your spouse, if covered by the medical plan) must complete the Tobacco-Free and Know Your Numbers programs and complete the Motivate Me program between November 1, 2025, and October 31, 2026.

#### **Motivate Me**

- Achieve healthy biometrics
- Complete preventive care
- Engage in health coaching
- Participate in activities through trackable devices

To view all eligible activities, log on to your myCigna account at myCigna.com.



At Wake County, we believe that living a happy and healthy life is about making wise choices that impact your total health and well-being. We provide articles, tools, and resources on the four pillars of Well-Being - physical, emotional, financial, and social health - as well as a variety of virtual events, educational sessions, and wellness challenges. Visit <u>Living Great</u> @ Wake for a calendar of wellness events, tools, resources, and more!

#### FOUR PILLARS OF WELL-BEING **Nutritional Counseling** • Work-Life Balance Seminars **Financial Education Effective Communication Seminars Weight Management** Resiliency Workshops Meetings with 401(k) **Team Building** Representative **Fitness Classes** myS.E.L.F.network **Retirement Workshops Skill Building Wellness Incentive Program** · On-Site Behavioral Health Online Community Platform **Specialist**

# **Tax Advantaged Accounts**

No matter which medical plan you choose, Wake County offers tax-advantaged accounts to help you save money — a Health Savings Account (HSA) for health care and Flexible Spending Accounts (FSAs) for health care and one for child/elder care. Explore the features of each so you can decide which accounts are best for you.

Your 2025 HSA and FSA elections do not automatically continue for 2026. If you want to participate in an FSA in 2026 or if you want to contribute to your HSA beginning in January, you must take action and enroll during Annual Enrollment.

#### **Account Benefits**

A Health Savings Account (HSA) lets you save on a pre-tax basis – which means you don't pay taxes on this money – and use your account to pay for eligible health care costs now, and in the future.

You own your account. The HSA is just like any other savings account. It accrues interest and the funds are eligible for investment, and all funds within your HSA are tax-free when used for eligible health care costs.

Internal Revenue Service (IRS) regulations state that high-deductible health plans are the only type of plan that can be paired with an HSA. The Consumer Driven Plan is a high-deductible health plan, as defined by the IRS.

View an expanded list of eligible expenses at www.Cigna.com/expenses.

# **Enjoy triple tax savings**

You save three ways with an HSA:

- Tax-free contributions to your account
- Tax-free earnings on interest and investments
- Tax-free withdrawals for eligible health care expenses

**Flexible Spending Accounts (FSAs)** are like the HSA in that they let you save on a pre-tax basis (you don't pay taxes on this money).

You can use your account to pay for eligible out-of-pocket expenses. When you enroll, you decide how much to save for the year, up to the IRS limit. The differences from an HSA are:

- You cannot change your FSA electionduring the year unless you experience a qualified life event.
- You forfeit money over \$660 left in your account at the end of the plan year plus the minimum balance eligible for rollover is \$25.

Wake County offers a Health Care FSA, Limited Purpose FSA, and Dependent Care (Child/Elder Care) FSA.

See page 17 for more information on these accounts.

You must be enrolled in the Standard or Premium medical plan or have elected to waive coverage.

View an expanded list of eligible expenses at **FSAstore.com/fsa-eligibility-list** 

### **Double tax savings**

Save two ways with an FSA:

- Tax-free contributions to your account.
- Tax-free withdrawals for eligible health care or child/elder care expenses.

#### More about the HSA

If you're enrolled in the Consumer Driven Plan, you can open a Health Savings Account (HSA) through Cigna, provided you satisfy the other IRS eligibility requirements.

You contribute on a pre-tax basis to your HSA. When you have eligible health care expenses, you can use money from your account to pay for them tax-free. You own the funds in your HSA, so any unused funds are yours to keep at the end of the year to pay for eligible health care expenses now or in the future — even after you retire or leave Wake County. There is no "use it or lose it" rule, and the HSA is a valuable tool for saving for health care expenses later in life.

Note: If you have a balance in your FSA on the last day of the plan year (December 31), you are disqualified from setting up and contributing to an HSA.

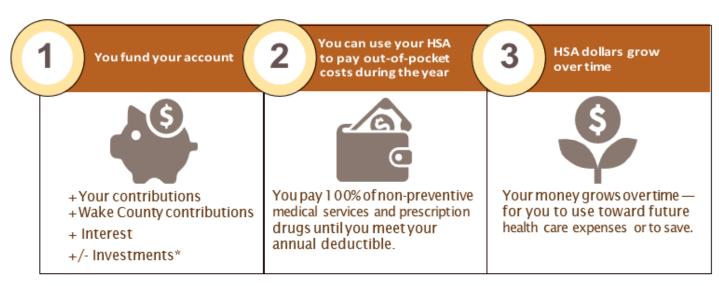
### Make the most of your HSA

The HSA offers you tax advantages and an opportunity to save for future health care expenses for you and your eligible dependents.

Consider increasing your contribution to make the most of your HSA.

You can change your contribution amount anytime during the year.

#### How the Consumer Driven Plan with HSA works



<sup>\*</sup>Investments you choose to make in your HSA are not FDIC insured, not bank-issued or guaranteed, and are subject to investment risks, including fluctuations in value and the possible loss of the principal amount invested.

# Am I eligible for an HSA?

To be eligible, you:

- Must be enrolled in the Consumer Driven Plan with HSA.
- Must not be covered by another health plan.
- Must not be enrolled in Medicare.
- Must not be a dependent on someone else's tax return.

Unless you meet all these requirements, you are not eligible to contribute to an HSA.

#### How much can I contribute?

Read the chart below to see how much you can contribute to your HSA in 2026.

Coverage	How much you can contribute in 2026*
Individual You enrolled just yourself in medical coverage	\$4,400
Family You enrolled 2 or more individuals in medical coverage	\$8,750
Catch-up contribution  If you are age 55 by December 31, 2026, you can make an additional catch-up contribution	\$1,000

<sup>\*</sup>Contribution limits are subject to change annually by the IRS. The limit includes the County's contribution. There is a \$5 minimum employee contribution per paycheck.

#### **How much does Wake County contribute?**

Based on your enrollment tier, Wake County's contribution amount is pro-rated for mid-year enrollments:

- Up to \$750 for Employee Only
- Up to \$1,250 for Employee plus one or more

### What are eligible HSA expenses?

Your HSA can be used for eligible health care expenses, including:

- Medical plan deductibles and coinsurance
- Acupuncture
- Chiropractic care
- Dental visits
- Mental health care

- Prescription drugs
- Vision and hearing expenses
- Substance us disorder treatment

View an expanded list of eligible expenses at **Cigna.com/expenses** 

# How do I pay for eligible expenses?

Your funds are easily accessible by using your HSA debit card. Plus, you can use a variety of online tools at **myCigna.com** to make managing your account even easier.

# Choose a beneficiary!

You work hard for what you have — including what you put into your HSA. Take a minute to ensure you have a beneficiary selected, which can be your spouse, children, relatives, friends, or organizations, such as a trust or charity. If you don't choose a beneficiary, HSA funds will default to your surviving spouse or to your estate. Sign in to your myCigna.com account to make your selection today!

#### More about FSAs

Flexible Spending Accounts (FSAs) allow you to contribute pre-tax money each pay period to the Health Care FSA and/or the Child/Elder Care FSA. The Child/Elder Care FSA is available to reimburse for the day care costs of an eligible dependent (e.g., qualifying child under age 13 or another tax dependent who is unable to care for him/herself).

	Health Care FSA	Limited Purpose Health Care FSA	Child / Elder Day Care FSA
Eligibility	Enrolled in the Standard or Premium medical plans, waive medical coverage.	Enrolled in the Consumer Driven medical plan.	You must have qualifying dependents to participate.
Tax savings benefits		money you contribute (up to fede you withdraw to pay for eligible ex	
You can make contributions	You contribute pre-tax money up to the IRS limits for 2026:  • \$3,300  • \$120 minimum per year	You contribute pre-tax money up to the IRS limits for 2026:  • \$3,300  • \$120 minimum per year	You can contribute pre-tax money up to the IRS limits for 2026:  • \$5,000 per household; or  • \$2,500 (if married and file taxes separately from your spouse)  • \$120 minimum per year
Howyou canuse your spending account	Eligible medical expenses like your annual deductible and coinsurance, prescription drug copays, and eligible dental and vision expenses.	Eligible dental and vision expenses only. Medical expenses are not eligible to maintain HSA eligibility.	Eligible expenses like child and adult daycare.
Does your account balance roll over from year to year?	Up to \$660 in unused FSA funds will rollover to the next year. The minimum balance eligible for rollover is \$25.	Up to \$660 in unused FSA funds will rollover to the next year. The minimum balance eligible for rollover is \$25.	Unused funds do not roll over to the next plan year.

# FSAs are easy with P&A Group

#### When you access P&A Group, you can:

- Check your account balances
- Submit a claim for reimbursement
- Review a list of eligible expenses

#### To pay for eligible expenses with your FSA, you can:

- Use your P&A debit card
- Reimburse yourself by filing a claim online



# Income protection

Wake County knows how important it is to have enough life insurance coverage to help protect your family from the unexpected. That's why we provide basic term Life and Accidental Death and Dismemberment (AD&D) insurance for you at no cost.

You may choose additional supplemental life and AD&D insurance for yourself and your dependents. It's another way to ensure peace of mind, knowing money is available to protect your family.

Premiums for supplemental life and AD&D insurance are deducted from your paycheck. Life and AD&D Insurance options are offered through Unum.

#### **County-Paid Employee Life and AD&D Insurance**

#### **Life Insurance**

Equal to your annual salary, rounded up to the next highest \$1,000, up to a maximum of \$200,000.

# Accidental Death & Dismemberment

Equal to your annual salary, rounded up to the next highest \$1,000, up to a maximum of \$200.000.

# Additional Life Insurance

- Coverage may be elected in increments of \$10,000, up to a maximum of \$500,000\*
- Spouse life coverage may be elected in increments of \$10,000, up to a maximum of \$200,000\*
- Child life coverage may be elected in increments of \$2,500, up to a maximum of \$10,000

#### **Additional AD&D Insurance**

- Coverage may be elected in increments of \$10,000, up to a maximum of \$500,000\*
- Spouse AD&D coverage may be elected in increments of \$10,000, up to a maximum of \$200,000\*
- Child AD&D coverage may be elected in increments of \$2,500, up to a maximum of \$10,000

Employees pay the full cost of additional Life and AD&D and Short-Term Disability.



### **Short-Term Disability**

Short-term disability insurance replaces a portion of your income when you are unable to work due to a non-work-related injury or illness. The weekly benefit is 60% of weekly wages, reduced by deductible income, up to a maximum of \$4,000. You can choose a 15- or 30-day waiting period.

# **Long-Term Disability**

If you have completed 1 to 5 years of eligible Wake County service and are disabled for more than 180 days due to a non-work-related injury or illness, long-term disability will pay a benefit of 60% of your monthly income up to a maximum of \$1,500 per month. This benefit is provided at no cost to you. After 5 years of service, disability retirement may be applied for through the Local Government Employees Retirement System (LGERS).

<sup>\*</sup>Restrictions apply.

#### **Accidental Death & Dismemberment**

Employees & Spouses Rate per paycheck

COVERAGE AMOUNT	RATE
\$10,000	\$0.21
\$20,000	\$0.41
\$30,000	\$0.62
\$40,000	\$0.82
\$50,000	\$1.03
\$60,000	\$1.23
\$70,000	\$1.44
\$80,000	\$1.64
\$90,000	\$1.85
\$100,000	\$2.05
\$110,000	\$2.26
	\$2.26
\$120,000	\$2.46
\$130,000	
\$140,000	\$2.87
\$150,000	\$3.08
\$160,000	\$3.28
\$170,000	\$3.49
\$180,000	\$3.69
\$190,000	\$3.90
\$200,000	\$4.10
\$210,000	\$4.31
\$220,000	\$4.51
\$230,000	\$4.72
\$240,000	\$4.92
\$250,000	\$5.13
\$260,000	\$5.33
\$270,000	\$5.54
\$280,000	\$5.74
\$290,000	\$5.95
\$300,000	\$6.15
\$310,000	\$6.36
\$320,000	\$6.56
\$330,000	\$6.77
\$340,000	\$6.97
\$350,000	\$7.18
\$360,000	\$7.38
\$370,000	\$7.59
\$380,000	\$7.79
\$390,000	\$8.00
\$400,000	\$8.20
\$410,000	\$8.41
\$420,000	\$8.61
\$430,000	\$8.82
\$440,000	\$9.02
\$450,000	\$9.23
\$460,000	\$9.43
\$470,000	\$9.64
\$480,000	\$9.84
\$490,000	\$10.05
\$500,000	\$10.25
\$300,000	Ψ10.23

#### **Child Life Insurance**

Rate per paycheck

COVERAGE AMOUNT	RATE
\$2,500	\$0.29
\$5,000	\$0.58
\$7,500	\$0.87
\$10,000	\$1.16

#### **Child AD&D Insurance**

Rate per paycheck

COVERAGE AMOUNT	RATE
\$2,500	\$0.05
\$5,000	\$0.10
\$7,500	\$0.15
\$10,000	\$0.21

#### **Short-Term Disability**

Rate per paycheck per \$10 of weekly benefit

Rate per \$10 of Weekly Benefit							
Age as of 1/1/2026	15-Day Waiting Period	30-Day Waiting Period					
<30	\$0.12	\$0.07					
30-39	\$0.15	\$0.08					
40-49	\$0.20	\$0.10					
50-54	\$0.25	\$0.13					
55-59	\$0.32	\$0.15					
60-64	\$0.47	\$0.25					
65+	\$0.51	\$0.28					

Short-Term Disability pays 60% of your weekly wage. To calculate your semi-monthly rate:

- 1. Multiply your hourly rate of pay by your weekly scheduled hours.
- 2. Multiply by 0.60.
- 3. Divide by 10.
- 4. Multiply by the rate for your age and plan selection in the chart above.

### **Your Beneficiaries**

#### Be sure to update your beneficiaries in Dayforce!

For your own Life and AD&D insurance, you may name anyone as your beneficiary. You are automatically the beneficiary of your spouse and child Life and AD&D insurance policies.

# Additional Life Insurance - Employee Rates (Spouse rates are on page 21.)

Rate per paycheck –Rates are based on employee's age on January 1st

	AGE OF EMPLOYEE									
Coverage	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65- 69	70+
Amount			<u>.</u>					<u>.</u>	<u>.</u>	
\$10,000	\$0.22	\$0.28	\$0.38	\$0.47	\$0.85	\$1.44	\$2.35	\$3.66	\$4.45	\$7.21
\$20,000	\$0.44	\$0.56	\$0.75	\$0.94	\$1.69	\$2.88	\$4.69	\$7.32	\$8.89	\$14.42
\$30,000	\$0.66	\$0.84	\$1.13	\$1.41	\$2.54	\$4.32	\$7.04	\$10.98	\$13.34	\$21.63
\$40,000 \$50,000	\$0.88 \$1.10	\$1.12 \$1.40	\$1.50 \$1.88	\$1.88 \$2.35	\$3.38 \$4.23	\$5.76 \$7.20	\$9.38 \$11.73	\$14.64 \$18.30	\$17.78 \$22.23	\$28.84 \$36.05
\$60,000	\$1.10	\$1.40 \$1.68	\$1.00	\$2.35 \$2.82	\$4.23 \$5.07	\$7.20 \$8.64	\$11.73 \$14.07	\$18.30 \$21.96	\$22.23 \$26.67	\$43.26
\$70,000	\$1.54	\$1.96	\$2.63	\$3.29	\$5.92	\$10.08	\$14.07	\$25.62	\$31.12	\$50.47
\$80,000	\$1.76	\$2.24	\$3.00	\$3.76	\$6.76	\$11.52	\$18.76	\$29.28	\$35.56	\$57.68
\$90,000	\$1.98	\$2.52	\$3.38	\$4.23	\$7.61	\$12.96	\$21.11	\$32.94	\$40.01	\$64.89
\$100,000	\$2.20	\$2.80	\$3.75	\$4.70	\$8.45	\$14.40	\$23.45	\$36.60	\$44.45	\$72.10
\$110,000	\$2.42	\$3.08	\$4.13	\$5.17	\$9.30	\$15.84	\$25.80	\$40.26	\$48.90	\$79.31
\$120,000	\$2.64	\$3.36	\$4.50	\$5.64	\$10.14	\$17.28	\$28.14	\$43.92	\$53.34	\$86.52
\$130,000	\$2.86	\$3.64	\$4.88	\$6.11	\$10.99	\$18.72	\$30.49	\$47.58	\$57.79	\$93.73
\$140,000	\$3.08	\$3.92	\$5.25	\$6.58	\$11.83	\$20.16	\$32.83	\$51.24	\$62.23	\$100.94
\$150,000	\$3.30	\$4.20	\$5.63	\$7.05	\$12.68	\$21.60	\$35.18	\$54.90	\$66.68	\$108.15
\$160,000	\$3.52	\$4.48	\$6.00	\$7.52	\$13.52	\$23.04	\$37.52	\$58.56	\$71.12	\$115.36
\$170,000	\$3.74	\$4.76	\$6.38	\$7.99	\$14.37	\$24.48	\$39.87	\$62.22	\$75.57	\$122.57
\$180,000	\$3.96	\$5.04	\$6.75	\$8.46	\$15.21	\$25.92	\$42.21	\$65.88	\$80.01	\$129.78
\$190,000	\$4.18	\$5.32	\$7.13	\$8.93	\$16.06	\$27.36	\$44.56	\$69.54	\$84.46	\$136.99
\$200,000	\$4.40	\$5.60	\$7.50	\$9.40	\$16.90	\$28.80	\$46.90	\$73.20	\$88.90	\$144.20
\$210,000	\$4.62	\$5.88	\$7.88	\$9.87	\$17.75	\$30.24	\$49.25	\$76.86	\$93.35	\$151.41
\$220,000	\$4.84	\$6.16	\$8.25	\$10.34	\$18.59	\$31.68	\$51.59	\$80.52	\$97.79	\$158.62
\$230,000	\$5.06	\$6.44	\$8.63	\$10.81	\$19.44	\$33.12	\$53.94	\$84.18	\$102.24	\$165.83
\$240,000	\$5.28	\$6.72	\$9.00	\$11.28	\$20.28	\$34.56	\$56.28	\$87.84	\$106.68	\$173.04
\$250,000	\$5.50	\$7.00	\$9.38	\$11.75	\$21.13	\$36.00	\$58.63	\$91.50	\$111.13	\$180.25
\$260,000 \$270,000	\$5.72 \$5.94	\$7.28 \$7.56	\$9.75 \$10.13	\$12.22 \$12.69	\$21.97 \$22.82	\$37.44 \$38.88	\$60.97 \$63.32	\$95.16 \$98.82	\$115.57 \$120.02	\$187.46 \$194.67
\$280,000	\$5.9 <del>4</del> \$6.16	\$7.56	\$10.13	\$12.69	\$23.66	\$40.32	\$65.66	\$102.48	\$120.02	\$201.88
\$290,000	\$6.38	\$8.12	\$10.88	\$13.63	\$24.51	\$41.76	\$68.01	\$106.14	\$124.40	\$209.09
\$300,000	\$6.60	\$8.40	\$11.25	\$14.10	\$25.35	\$43.20	\$70.35	\$109.80	\$133.35	\$216.30
\$310,000	\$6.82	\$8.68	\$11.63	\$14.57	\$26.20	\$44.64	\$72.70	\$113.46	\$137.80	\$223.51
\$320,000	\$7.04	\$8.96	\$12.00	\$15.04	\$27.04	\$46.08	\$75.04	\$117.12	\$142.24	\$230.72
\$330,000	\$7.26	\$9.24	\$12.38	\$15.51	\$27.89	\$47.52	\$77.39	\$120.78	\$146.69	\$237.93
\$340,000	\$7.48	\$9.52	\$12.75	\$15.98	\$28.73	\$48.96	\$79.73	\$124.44	\$151.13	\$245.14
\$350,000	\$7.70	\$9.80	\$13.13	\$16.45	\$29.58	\$50.40	\$82.08	\$128.10	\$155.58	\$252.35
\$360,000	\$7.92	\$10.08	\$13.50	\$16.92	\$30.42	\$51.84	\$84.42	\$131.76	\$160.02	\$259.56
\$370,000	\$8.14	\$10.36	\$13.88	\$17.39	\$31.27	\$53.28	\$86.77	\$135.42	\$164.47	\$266.77
\$380,000	\$8.36	\$10.64	\$14.25	\$17.86	\$32.11	\$54.72	\$89.11	\$139.08	\$168.91	\$273.98
\$390,000	\$8.58	\$10.92	\$14.63	\$18.33	\$32.96	\$56.16	\$91.46	\$142.74	\$173.36	\$281.19
\$400,000	\$8.80	\$11.20	\$15.00	\$18.80	\$33.80	\$57.60	\$93.80	\$146.40	\$177.80	\$288.40
\$410,000	\$9.02	\$11.48	\$15.38	\$19.27	\$34.65	\$59.04	\$96.15	\$150.06	\$182.25	\$295.61
\$420,000	\$9.24	\$11.76	\$15.75	\$19.74	\$35.49	\$60.48	\$98.49	\$153.72	\$186.69	\$302.82
\$430,000	\$9.46	\$12.04	\$16.13	\$20.21	\$36.34	\$61.92	\$100.84	\$157.38	\$191.14	\$310.03
\$440,000	\$9.68	\$12.32	\$16.50	\$20.68	\$37.18	\$63.36	\$103.18	\$161.04	\$195.58	\$317.24
\$450,000	\$9.90	\$12.60	\$16.88	\$21.15	\$38.03	\$64.80	\$105.53	\$164.70	\$200.03	\$324.45
\$460,000 \$470,000	\$10.12 \$10.34	\$12.88 \$13.16	\$17.25 \$17.63	\$21.62 \$22.09	\$38.87 \$39.72	\$66.24 \$67.68	\$107.87 \$110.22	\$168.36 \$172.02	\$204.47	\$331.66 \$338.87
\$480,000	\$10.34 \$10.56	\$13.16 \$13.44	\$17.63 \$18.00	\$22.09 \$22.56	\$39.72 \$40.56	\$67.68 \$69.12	\$110.22 \$112.56	\$172.02 \$175.68	\$208.92 \$213.36	\$338.87 \$346.08
\$490,000	\$10.56	\$13.44 \$13.72	\$18.00	\$22.56	\$40.56 \$41.41	\$69.12 \$70.56	\$112.56 \$114.91	\$175.68 \$179.34	\$213.36 \$217.81	\$346.08
\$500,000	\$10.76	\$13.72	\$18.75	\$23.50	\$42.25	\$70.56	\$117.25	\$179.34	\$217.01	\$360.50

# **Additional Life Insurance - Spouse Rates**

Rate per paycheck – Spouse rates are based on employee's age on January 1st

	AGE OF EMPLOYEE									
Coverage Amount	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65- 69	70+
\$10,000	\$0.32	\$0.40	\$0.54	\$0.67	\$1.21	\$2.06	\$3.35	\$5.23	\$6.35	\$10.30
\$20,000	\$0.63	\$0.80	\$1.07	\$1.34	\$2.41	\$4.12	\$6.70	\$10.45	\$12.70	\$20.60
\$30,000	\$0.95	\$1.20	\$1.61	\$2.01	\$3.62	\$6.18	\$10.05	\$15.68	\$19.05	\$30.90
\$40,000	\$1.26	\$1.60	\$2.14	\$2.68	\$4.82	\$8.24	\$13.40	\$20.90	\$25.40	\$41.20
\$50,000	\$1.58	\$2.00	\$2.68	\$3.35	\$6.03	\$10.30	\$16.75	\$26.13	\$31.75	\$51.50
\$60,000	\$1.89	\$2.40	\$3.21	\$4.02	\$7.23	\$12.36	\$20.10	\$31.35	\$38.10	\$61.80
\$70,000	\$2.21	\$2.80	\$3.75	\$4.69	\$8.44	\$14.42	\$23.45	\$36.58	\$44.45	\$72.10
\$80,000	\$2.52	\$3.20	\$4.28	\$5.36	\$9.64	\$16.48	\$26.80	\$41.80	\$50.80	\$82.40
\$90,000	\$2.84	\$3.60	\$4.82	\$6.03	\$10.85	\$18.54	\$30.15	\$47.03	\$57.15	\$92.70
\$100,000	\$3.15	\$4.00	\$5.35	\$6.70	\$12.05	\$20.60	\$33.50	\$52.25	\$63.50	\$103.00
\$110,000	\$3.47	\$4.40	\$5.89	\$7.37	\$13.26	\$22.66	\$36.85	\$57.48	\$69.85	\$113.30
\$120,000	\$3.78	\$4.80	\$6.42	\$8.04	\$14.46	\$24.72	\$40.20	\$62.70	\$76.20	\$123.60
\$130,000	\$4.10	\$5.20	\$6.96	\$8.71	\$15.67	\$26.78	\$43.55	\$67.93	\$82.55	\$133.90
\$140,000	\$4.41	\$5.60	\$7.49	\$9.38	\$16.87	\$28.84	\$46.90	\$73.15	\$88.90	\$144.20
\$150,000	\$4.73	\$6.00	\$8.03	\$10.05	\$18.08	\$30.90	\$50.25	\$78.38	\$95.25	\$154.50
\$160,000	\$5.04	\$6.40	\$8.56	\$10.72	\$19.28	\$32.96	\$53.60	\$83.60	\$101.60	\$164.80
\$170,000	\$5.36	\$6.80	\$9.10	\$11.39	\$20.49	\$35.02	\$56.95	\$88.83	\$107.95	\$175.10
\$180,000	\$5.67	\$7.20	\$9.63	\$12.06	\$21.69	\$37.08	\$60.30	\$94.05	\$114.30	\$185.40
\$190,000	\$5.99	\$7.60	\$10.17	\$12.73	\$22.90	\$39.14	\$63.65	\$99.28	\$120.65	\$195.70
\$200,000	\$6.30	\$8.00	\$10.70	\$13.40	\$24.10	\$41.20	\$67.00	\$104.50	\$127.00	\$206.00
\$210,000	\$6.62	\$8.40	\$11.24	\$14.07	\$25.31	\$43.26	\$70.35	\$109.73	\$133.35	\$216.30
\$220,000	\$6.93	\$8.80	\$11.77	\$14.74	\$26.51	\$45.32	\$73.70	\$114.95	\$139.70	\$226.60
\$230,000	\$7.25	\$9.20	\$12.31	\$15.41	\$27.72	\$47.38	\$77.05	\$120.18	\$146.05	\$236.90
\$240,000	\$7.56	\$9.60	\$12.84	\$16.08	\$28.92	\$49.44	\$80.40	\$125.40	\$152.40	\$247.20
\$250,000	\$7.88	\$10.00	\$13.38	\$16.75	\$30.13	\$51.50	\$83.75	\$130.63	\$158.75	\$257.50
\$260,000	\$8.19	\$10.40	\$13.91	\$17.42	\$31.33	\$53.56	\$87.10	\$135.85	\$165.10	\$267.80
\$270,000	\$8.51	\$10.80	\$14.45	\$18.09	\$32.54	\$55.62	\$90.45	\$141.08	\$171.45	\$278.10
\$280,000	\$8.82	\$11.20	\$14.98	\$18.76	\$33.74	\$57.68	\$93.80	\$146.30	\$177.80	\$288.40
\$290,000	\$9.14	\$11.60	\$15.52	\$19.43	\$34.95	\$59.74	\$97.15	\$151.53	\$184.15	\$298.70
\$300,000	\$9.45	\$12.00	\$16.05	\$20.10	\$36.15	\$61.80	\$100.50	\$156.75	\$190.50	\$309.00
\$310,000	\$9.77	\$12.40	\$16.59	\$20.77	\$37.36	\$63.86	\$103.85	\$161.98	\$196.85	\$319.30
\$320,000	\$10.08	\$12.80	\$17.12	\$21.44	\$38.56	\$65.92	\$107.20	\$167.20 \$172.43	\$203.20	\$329.60
\$330,000 \$340,000	\$10.40 \$10.71	\$13.20 \$13.60	\$17.66 \$18.19	\$22.11 \$22.78	\$39.77 \$40.97	\$67.98 \$70.04	\$110.55 \$113.90	\$172.43 \$177.65	\$209.55 \$215.90	\$339.90 \$350.20
\$350,000	\$10.71	\$13.60	\$18.73		\$40.97 \$42.18	\$70.04	\$117.25	\$177.65	\$215.90	\$360.50
\$360,000	\$11.03	\$14.00	\$19.26	\$23.45 \$24.12	\$43.38	\$72.10	\$120.60	\$188.10	\$228.60	\$370.80
\$370,000	\$11.5 <del>4</del> \$11.66	\$14.40	\$19.26	\$24.12 \$24.79	\$43.56 \$44.59	\$74.16	\$120.00	\$193.33	\$220.00	\$370.80
\$370,000	\$11.97	\$15.20	\$20.33	\$25.46	\$45.79	\$78.28	\$123.33	\$193.55	\$234.30	\$391.40
\$390,000	\$12.29	\$15.60	\$20.87	\$25.40	\$47.00	\$80.34	\$130.65	\$203.78	\$247.65	\$401.70
\$400,000	\$12.60	\$16.00	\$20.67	\$26.80	\$48.20	\$82.40	\$130.00	\$209.00	\$254.00	\$412.00
\$410,000	\$12.92	\$16.40	\$21.94	\$27.47	\$49.41	\$84.46	\$137.35	\$214.23	\$260.35	\$422.30
\$420,000	\$13.23	\$16.80	\$21.34	\$28.14	\$50.61	\$86.52	\$140.70	\$219.45	\$266.70	\$432.60
\$430,000	\$13.55	\$17.20	\$23.01	\$28.81	\$51.82	\$88.58	\$144.05	\$224.68	\$273.05	\$442.90
\$440,000	\$13.86	\$17.60	\$23.54	\$29.48	\$53.02	\$90.64	\$147.40	\$229.90	\$279.40	\$453.20
\$450,000	\$14.18	\$18.00	\$24.08	\$30.15	\$54.23	\$92.70	\$150.75	\$235.13	\$285.75	\$463.50
\$460,000	\$14.49	\$18.40	\$24.61	\$30.82	\$55.43	\$94.76	\$154.10	\$240.35	\$292.10	\$473.80
\$470,000	\$14.81	\$18.80	\$25.15	\$31.49	\$56.64	\$96.82	\$157.45	\$245.58	\$298.45	\$484.10
\$480,000	\$15.12	\$19.20	\$25.68	\$32.16	\$57.84	\$98.88	\$160.80	\$250.80	\$304.80	\$494.40
\$490,000	\$15.44	\$19.60	\$26.22	\$32.83	\$59.05	\$100.94	\$164.15	\$256.03	\$311.15	\$504.70
\$500,000	\$15.75	\$20.00	\$26.75	\$33.50	\$60.25	\$103.00	\$167.50	\$261.25	\$317.50	\$515.00

# **Voluntary Benefits**

In addition to medical, dental, and vision coverage, you can choose to enroll in several voluntary benefit options.

#### **Supplemental Insurance**

We offer several supplemental insurance options to make sure you and your family can cover expenses if you face a critical illness, have an accident, or are admitted to the hospital. Additionally, each plan offers an annual Be Well Benefit for completing preventive screenings.

**Accident Insurance** is available to help pay expenses due to an accident. Expenses can include deductibles, treatment, transportation to/from medical centers, childcare, and house payments. The Be Well Benefit is \$50.

**Specified Disease Insurance** helps you take financial control when faced with a covered critical illness such as cancer, heart attack, or stroke. It pays you a lump-sum amount for expenses that health insurance might not cover. You may select \$10,000 or \$20,000 in coverage. To enroll your spouse, you also must be enrolled. Spouse coverage is 100% of the employee coverage amount. Children are automatically covered on the employee plan with a benefit of 50% of the selected coverage amount. The Be Well Benefit is \$100.

**Hospital Indemnity Insurance** complements your medical coverage by easing the financial impact of a covered hospitalization, whether it's expected or unexpected. It provides a cash benefit you can use as you see fit for hospital admission, accident-related inpatient rehabilitation, and hospital stays. The Be Well Benefit is \$50.

The payment is sent directly to you, and you decide the best way to spend it – giving you the flexibility to pay medical bills or help pay for everyday living expenses.

#### Rates per paycheck

Accident Insurance						
Employee Only	\$5.70					
Employee + Spouse	\$10.42					
Employee + Child(ren)	\$12.89					
Employee + Family	\$17.61					

Hospital Indemnity Insurance						
Employee Only	\$8.63					
Employee + Spouse	\$17.36					
Employee + Child(ren)	\$13.74					
Employee + Family	\$22.47					

Specified Disease Insurance											
		EMPL	OYEE		SPOUSE*						
	NON-TOBACCO TOBACCO USER				NON-TO	ВАССО	ТОВАС	CO USER			
Age	Low Plan (\$10,000)	High Plan (\$20,000)	Low Plan (\$10,000)	High Plan (\$20,000)	Low Plan (\$10,000)	High Plan (\$20,000)	Low Plan (\$10,000)	High Plan (\$20,000)			
18-29	\$3.90	\$ 7.80	\$5.20	\$10.40	\$4.35	\$8.70	\$5.65	\$11.30			
30-39	\$5.40	\$10.80	\$8.35	\$16.70	\$5.85	\$11.70	\$8.80	\$17.60			
40-49	\$10.20	\$20.40	\$16.60	\$33.20	\$10.75	\$21.50	\$17.25	\$34.50			
50-59	\$18.00	\$36.00	\$30.30	\$60.60	\$18.85	\$37.70	\$31.50	\$63.00			
60+	\$32.35	\$64.70	\$54.75	\$109.50	\$33.60	\$67.20	\$56.80	\$113.60			

<sup>\*</sup>To enroll your spouse in Specified Disease Insurance, you must also enroll in Specified Disease Insurance.

#### **Identity Theft Protection**

Unfortunately, identity theft is on the rise. You can protect yourself and your family members with IDShield. This plan offers you and your eligible family members credit monitoring, child identity monitoring, 24/7 personalized support, and identity restoration services, plus a \$5 million identity fraud protection plan.

#### **Legal Plan**

Legal plan services through LegalShield give you the opportunity to have attorney access whenever you need it – just like having an attorney on retainer. The legal plan gives you easy and low-cost access to a wide variety of personal legal services, such as creating a will, resolving minor traffic violations, divorce, and reviewing simple legal documents. The legal plan automatically covers you, your spouse, and dependent children under age 26.

To learn more about LegalShield and IDShield plans at benefits.LegalShield.com/wakecounty



### Rates per Paycheck

	Employee	Family
LegalShield	\$8.23	
IDShield	\$4.23	\$7.75
LegalShield & IDShield	\$11.95	\$14.98

#### **Pet Insurance**

Pet Insurance through Nationwide helps you save money when your pet is injured or sick and partially reimburses the cost of veterinarian services for covered pet injuries, illnesses, and wellness care. Dogs, cats, and certain exotic animals are eligible for coverage. Contact Nationwide to see if your exotic pet is eligible.

#### **Pet Insurance Covers:**

- ✓ Injuries
- ✓ Illness
- ✓ Exam Fees
- √ X-rays and Diagnostic Tests
- ✓ Surgeries
- ✓ Hospital Stays
- ✓ Hip Dysplasia
- ✓ Hereditary Conditions
- Congenital Conditions
- ✓ Chronic Conditions
- ✓ Alternative Care
- And more!

	Customizable Plan Options	Additional Benefits
Benefit Limits	\$2,500 or \$5,000	Vet Helpline: 24/7 pet telehealth
Deductible	\$100 to \$500	PetRxExpress: Discounted medications
Reimbursements	50%, 70%, 80%	Petro Vet Services: 10% discount
Routine Wellness Allowance	\$0, \$450, or \$800	The teas were derivided. 10% discount

#### **How Pet Insurance works**



Select and enroll in coverage:

1-877-738-7874 PetsNationwide.com



Take your pet to any vet, with no network or preapprovals required



Pay the bill and send the claim to Nationwide submitmyclaim@petinsurance.com or

petinsurance.com/submit-claim



Receive reimbursement by direct deposit or check

# Your enrollment checklist

Annual Enrollment is Oct. 27 - Nov. 7, 2025, 5:00 p.m.

Use this checklist to help manage your enrollment.

#### >> Before enrollment

- ☐ Think about your health needs in 2026.
  Having a baby or planning to adopt? Need surgery?
  —
- ☐ Understand what's new for 2026. Read the What's Changing for 2026 section on page 2 in this Benefits Guide.
- ☐ Consider other benefits. Think about other benefits you might need during the year, such as accident insurance, income and identity protection, legal services, and more.
- **Budget for your benefits.** Consider how much you can spend on benefits and if you should contribute more to a tax-advantaged account.
- ☐ **Visit the Virtual Benefits Fair** to understand your coverage options.
- Follow-up with Human Resources at HRConnect@wake.gov or 919-856-6090 if you have questions.

# >> During enrollment

- ☐ Go to Living Great @ Wake and find all Wake County Benefits resources:
  - Compare your 2026 benefit options.
  - Access your 2026 Summary of Benefits and Coverage (SBC) and other annual notices.
  - Enroll in 2026 benefits in Dayforce by 5:00 pm ET on Nov. 7.

- □ **Log on to Dayforce** from any computer to see your current benefit elections and access the open enrollment wizard to make your 2026 benefit elections.
- ☐ Submit dependent documentation. If you are enrolling a spouse and/or children who have not previously been enrolled on a Wake County benefit plan, you must submit documentation showing their eligibility. See page 4 for details.
- ☐ Enroll in tax-advantaged accounts. A Health Savings Account (HSA), Health Care and Child/Elder Care FSA help save money. If you are currently enrolled and want to participate in 2026, you must re-enroll during Annual Enrollment.
- ☐ Be sure to finalize your elections by clicking the submit button. Your benefit enrollment elections for 2026 will be available to view immediately in Dayforce in the Benefits section.

#### >> After enrollment

- Review your January 15, 2026, pay stub to confirm your benefit deductions match your benefit enrollment confirmation statement.
- If you find discrepancies in your enrollment, you must provide your confirmation statement to Human Resources to make corrections.

#### **Virtual Benefits Fair**

The fair is accessible from anywhere on any platform - laptop, tablet, or mobile phone - and available to you and your family 24/7.



To visit the Virtual Benefits Fair, log in at

VirtualFairHub.com/WakeCounty

Username: wakecounty Password: WCbenefits

# Other benefits

These benefits are available throughout the year and do not need to be elected during Annual Enrollment.

#### **Retirement benefits**

Wake County offers a defined benefit pension plan, and three supplemental retirement savings plans to help you prepare for retirement.

Benefits-eligible employees are members of the North Carolina Local Governmental Employees' Retirement System (LGERS) and are required to contribute 6% through pre-tax payroll deductions. To help you supplement your LGERS pension benefit in retirement, Wake County contributes 5% to your NC 401(k) plan. You also may contribute to your NC 401(k) plan and have the option to contribute to the 457(b) plan and Roth IRA as well.



	401(k)	457(b)	Roth IRA
Wake County Contribution	5% (Pre-Tax) No matching required	None	None
Contribution Types	Voluntary Pre-Tax & After-Tax Roth	Voluntary Pre-Tax & After-Tax Roth	Voluntary After-Tax Roth
2025 Annual Contribution Limits  (2026 limits to be announced in late 2025)	\$23,500  Catch-Up Contributions: If you are age 50+*, you may contribute \$7,500 more (\$31,000 in total).  If you are age 60-63*, you may contribute \$11,250 more (\$34,750 in total).	\$23,500  Catch-Up Contributions: If you are age 50+*, you may contribute \$7,500 more.  If you are age 60-63*, you may contribute \$11,250 more (\$34,750 in total).  If you are within 3 years of retirement, you may be eligible to contribute up to an additional \$23,500 (\$47,000 in total).	\$7,000  Catch-Up Contributions: If you are age 50+, you many contribute \$1,000 more.  To be eligible to make full contributions to this plan, your IRS Modified Adjusted Gross Income must be less than the income limits set by the IRS.
Enrollment Options	You are automatically enrolled upon hire. You can change your contribution any time.	You can enroll or change your contribution at any time.  Enroll Online Plan # 300909	You can enroll or change your contribution at any time.  Enroll Online Plan # 706340
In Service Withdrawals	Loans & Hardship Withdrawals	Loans & Unforeseeable Emergency Withdrawals	Contributions can be withdrawn at any time. Restrictions on withdrawal of account earnings.

<sup>\*</sup>Catch-Up Contributions must be After-Tax Roth contributions for employees aged 50+ who earned more than \$145,000 (indexed for inflation) in wages in the prior calendar year.

#### Leave benefits

Wake County provides a generous leave package that affirms our commitment to supporting employees and their families. Wake County understands the importance of a work-life balance and the importance of supporting an employee's health and well-being. Therefore, the County provides paid and unpaid leave to benefit eligible employees. Paid leave for part-time benefit-eligible employees is prorated based on the position's budgeted scheduled hours. For complete details, please refer to **Section 2200 of the HR Policy Manual.** 

#### **Annual Leave**

Annual leave accrues based on years of service. Full-time employees earn annual leave as shown in the chart.

#### **Sick Leave**

Sick leave accrues at the rate of 4 hours per pay period.

#### **Additional Sick Leave**

Up to an additional 60 days of sick leave accrues in the 12 months following an employee's 5th, 10th, 15th, and 20th anniversary with Wake County.

Annual Leave Accruals		
Years of Current and Reinstated Service	Hours Earned Per Year	
Less than 5 years	112	
5 but less than 10 years	136	
10 but less than 15 years	160	
15 but less than 20 years	184	
20 years or more	208	

#### **Sick Leave Transfers**

If you worked for the State of North Carolina or another North Carolina Local Government employer within 12 months of your hire date with Wake County, you may transfer your remaining sick leave balance from your prior employer to Wake County within six months of your hire date.

#### **Shared Leave Program**

When an employee has inadequate sick leave to cover absences related to their own serious health condition or that of a family member, eligible employees may donate annual or sick leave to that employee's sick leave balance.

#### **Holiday Leave**

Wake County provides 13 paid holidays.

#### **Wellness Leave**

Two workdays of paid leave are offered to support mental wellness.

#### **Paid Family Illness Leave**

Three weeks of paid leave in a rolling 12-month period to care for a family member who has a serious health condition.

#### **Paid Parental Leave**

Wake County offers 8 weeks of paid parental leave.

# **Community Involvement Leave**

This paid leave offers 16 hours per year to use for parent involvement with your child in school, volunteer at schools, volunteer for a not-for-profit organization, volunteer as a precinct official in a North Carolina election, or vote in an election.

#### **Bereavement Leave**

Wake County provides 40 hours of bereavement leave per year to grieve the loss of a family member.

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### Holidays

New Year's Day
Martin Luther King, Jr. Day
Good Friday
Memorial Day
Juneteenth
Independence Day
Labor Day
Veteran's Day
Thanksgiving (2 days)
Christmas (3 days)

#### **Emergency Banked Leave**

When County offices close due to an emergency, such as a hurricane, employees who are required to engage in the emergency response and are assigned duties through the Emergency Operations Center (EOC) will receive 8 hours of emergency banked leave per day.

#### **Extraordinary Leave**

Full-time employees classified as exempt under Fair Labor Standards Act (FLSA) who work beyond 50 hours per week for an extended period (typically longer than eight weeks), may be awarded up to 80 hours of extraordinary leave per calendar year by the Department Head.

#### **Other Leave**

The County offers a variety of other leaves including Family Medical Leave (FMLA), Worker's Compensation Leave, Civil Leave, and Military Leave.

#### **Education benefits**

Paying for college is expensive. Wake County offers education benefits to help make it more affordable.

#### NC 529 College Savings Plan

Saving for college is easy with post-tax payroll deductions. A 529 Account is a tax-advantaged way to save and invest for education. The money invested may grow over time and any earnings are free from federal and state income tax when withdrawn and used for qualified education expenses. 529 funds can be used for two- and four-year college expenses, trade schools and apprenticeship programs, K-12 tuition, and certain student loan payments. Visit cfnc.org to learn more and open an account.



#### **Tuition Reimbursement**

Benefits-eligible employees who have been employed continuously by Wake County for at least one year are eligible to participate in the tuition reimbursement program of up to \$2,500 per fiscal year in qualified expenses. For complete program details, please refer to Section 2600 of the HR Policy Manual.

#### **College Loan Forgiveness**

The Public Service Loan Forgiveness (PSLF) Program forgives the remaining balance on your Direct Loans after you have made 120 qualifying monthly payments under a qualifying repayment plan while working full-time for a qualifying employer. Your employment with Wake County may qualify you for participation in this program. Visit <a href="StudentAid.gov/manage-loans/forgiveness-cancellation/public-service">StudentAid.gov/manage-loans/forgiveness-cancellation/public-service</a> to see if you are eligible.

#### **Online University Discounts**

Wake County has partnered with the following universities to provide discounts on tuition costs.

Capella University	University of Phoenix	Walden University	
10% tuition discount	Complete 5 classes, get the 6 <sup>th</sup> free (15% tuition discount)	10% tuition discount	
Capella.edu/wake/	Phoenix.edu/wakecounty	WaldenU.edu/wakegov	

#### **Financial benefits**

#### **Civic Credit Union**

Wake County employees are eligible for membership with Civic Credit Union (Formerly LGFCU).

#### **Mortgage Discounts**

When you finance your home loan with Rate, you'll have a dedicated mortgage team, get low rates, and pay no lender fee. Call (833) 795-1594 to speak with a mortgage specialist or visit <a href="rate.com/corp/offer/WakeCounty">rate.com/corp/offer/WakeCounty</a>

#### **Travel and Entertainment benefits**

#### **Triangle Transit Go Pass**

Employees can ride all <u>GoTriangle</u> routes and the routes of GoTriangle partners for free.

#### **RDU Fast Park and Relax**

Wake County employees can park in the Fast Park and Relax lot at the RDU airport for a reduced rate. The lot is fully fenced, all parking spots are covered, and the shuttle to the airport terminal is free.

#### **Ticket Discounts**

Wake County partners with various venues to bring special discounted rates to employees.

#### **Health and Fitness benefits**

#### **Gym Memberships**

Wake County partners with YMCA of the Triangle and other local gyms and Cigna's Active Fit & Direct program to bring discounted membership joining fees and dues to employees.

#### **Fitness Classes**

Wake County offers virtual Pilates, Yoga, and Zumba classes.

# **Nutrition Program Discounts**

Wake County partners with The Produce Box, Savory Living, and Mom's Meals to encourage health eating.

#### **Wellness Coach**

Improve your mind, body, and sleep with digital wellness tools through Wellness Coach. Resources include daily meditations, podcasts, short workouts, and live classes on stress, self-care, goal setting, and more.



# Who to contact?

Wake Benefits Team		Benefits Websites	
Email: <u>HRConnect@Wake.gov</u> Phone: 919-856-6090		<u>Living Great @ Wake</u> <u>Virtual Benefits Fair</u> Username: wakecounty Password: WCbenefits	
Carrier	Phone Number	Website & Claims Address	
<b>Cigna</b> Health & Prescription Drug Group #: 3341120	1-800-244-6224 Pre-Enrollment Line: 1-888-806-5042	myCigna.com	Cigna Medical Claims P.O. Box 182223 Chattanooga, TN 37422 Cigna Pharmacy Claims
			P.O. Box 188053 Chattanooga, TN 37422
<b>Delta Dental</b> Dental Insurance Group #: 470606	1-800-662-8856	DeltaDental.com/members	<b>Dental Claims</b> PO Box 9085 Farmington Hills, MI 48333
Employee Health Center	1-919-856-5600	myPremiseHealth.com	
<b>EyeMed</b> Vision Insurance Standard Group #: 9925438 Premium Group #: 9925363	1-866-800-5457	<u>EyeMed.com</u>	Out-of-Network Claims First American Administration P.O. Box 8504 Mason, OH 45040-7111
<b>HSA Bank</b> Health Savings Account	1-800-244-6224	myCigna.com	
LegalShield / IDShield Legal & Identity Theft Protection	1-866-470-1694	benefits.legalshield.com/wakecounty	
<b>LGERS Retirement</b> Pension Plan	1-877-627-3287	myNCretirement.gov	
Mission Square Retirement 457(b) & Roth IRA Retirement Plan 457(b) Group #: 300909 Roth IRA Group #: 706340	1-800-669-7400 Reggie Johnosn, Rep. 1-202-759-7086	MissionSq.org  RKJohnson@misssq.org	
<b>myS.E.L.F.network</b> Employee Assistance Program Group #: N/A	1-800-633-3353	MyGroup.com	Username: mySELFnetwork Password: Guest
<b>Nationwide</b> Pet Insurance	1-877-7387874	PetsNationwide.com	
NC 401(k) Retirement Plan	1-866-627-5267	myNCplans.com	
Group #: 002003-018340	Margaret Hendershot, Rep 303-737-5980	Margaret.Henderson@Empower.com	
<b>P&amp;A Group</b> Flexible Spending Accounts Group #: 593	1-716-852-2611 Fax: 1-877-855-7105	padmin.com	<b>P&amp;A Group</b> 6400 Main Street Williamsville, NY 14221
Unum Life and AD&D Policy # 987051 Short-term Disability Policy # 989175 Long-term Disability Policy # 987050 Accident Policy # 987052 Specified Disease Policy # 987053 Hospital Indemnity Policy # 987054	1-866-868-6737	Unum.com/support/employees	<b>Unum</b> P.O. Box 100158 Columbia, SC 29202