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About This Booklet

This benefits reference guide provides you with an overview of McDowell County's 2022—2023 benefits program.

Note Carefully: The information in this Enrollment Guide is presented for illustrative purposes only. The text contained in this Guide includes benefit information and was taken, in part, from summary plan descriptions. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In the event of a discrepancy between the Guide and plan documents (Summary Plan Description or Evidence of Coverage), the plan documents will prevail. If you have any questions about your Guide, contact your Human Resources Department.

Please contact Human Resources or [click here](#) for a copy of the Legal Notices package associated with our benefit offerings and this Benefits Guide.

Benefits Eligibility

You are eligible for benefits if you are a regular full-time employee working at least 30 hours per week. If you are working at least 20 hours per week, you are eligible for dental benefits. As an eligible employee, you may also cover your eligible family members, which include your spouse and your children up to age 26. When enrolling as a new hire, there is a waiting period of 90 days for benefits to begin.

Status Changes

A qualifying life event (birth, marriage, divorce, loss of a dependent, etc.) allows you to change your benefits outside of an enrollment period. If you experience a qualifying life event and you want to make corresponding benefit changes, you must submit your request to Human Resources within 31 days of the qualifying life event.

Open Enrollment

If you do not experience a qualifying life event, you will need to wait until the annual Open Enrollment period to make any changes to your benefits.

When Benefits End

Healthcare benefits end the day of your termination. Your benefits through USABLE will end the last day of the month of termination.

How to Enroll

You will need to complete the following steps in their entirety to complete the enrollment process. Once you have completed your enrollment, be sure to review your selections for accuracy.

1. Click on the following link to setup your account in the "Benefit Connector" portal. You will need to click the "Register" tab on the right side of the dialog box.
<https://mcdowellcounty.benefitconnector.com/index.xhtml>
2. Once you have confirmed your identity you may start your enrollment. If you have dependents that you wish to cover, you will need to add them under the dependent section which will require you to enter their social security number and select the appropriate relationship to the dependent. From there follow the prompts on the screen to select your desired medical, dental and vision coverage.
3. The last section of the enrollment process is for the life insurance coverage provided by the county through USABLE. Although you cannot make changes to the amounts, you must enter your beneficiary information in the portal even if we already have it in your personnel file.

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Key Health Insurance Terms

- **Copayments**—a flat fee you pay for certain covered services such as doctor visits, urgent care visits, emergency room visits or prescriptions.
- **Deductible**—a flat dollar amount you must pay out of your own pocket before your plan begins to pay for certain covered services.
- **Coinsurance**—after you’ve reached your deductible, you and your plan may share some of your medical costs; the portion of covered expenses you are responsible for is called coinsurance.
- **Out-of-pocket Maximum**—specific limits for the total amount you will pay out of your own pocket; once you meet this maximum your plan then pays 100% of medical and prescription charges for the remainder of the plan year. Please be aware that this does not apply to out-of-network balance billing.
- **In-Network**— accessing care from a provider contracted with the insurance plan you have selected offers richer benefits and lower out-of-pocket costs.
- **Out-of-Network**— accessing care from a provider that is not contracted with the insurance plan you have selected will result in higher out-of-pocket costs.
- **Emergency Room** — meant for true emergencies to provide fast, life-or-limb saving care for severe and life-threatening conditions. Emergency Rooms are equipped for nearly any type of medical emergency. They have the widest range of services for emergency after-hours care, including diagnostics tests and access to specialists. Emergency Rooms are found at most hospitals and they are typically open 24 hours a day, 7 days a week.
- **Urgent Care Center**— set up to assist patients with an illness or injury that does not appear to be life-threatening, but also can’t wait until the next day or for their primary care physician to see them. A true urgent care center will be staffed with doctors and nurses who have access to x-ray and a lab onsite. Most urgent care centers are open after normal business hours, including evenings and weekends.

Medical

McDowell County provides you with the option to enroll in medical coverage through MedCost. Contributions can be viewed in the Triune enrollment system. You may enroll in the below MedCost medical plan:

- Active PPO Plan: \$1,250 deductible

The Active PPO plan is a Preferred Provider Organization plan that offers convenient copayments or coinsurance for things like primary care, specialist office visits and prescription drugs. Plus, employees never have to go far to find a doctor. You are not required to select a Primary Care Physician and a referral is not required to see a specialist. You have the freedom to receive care from any provider participating in the network or from out-of-network providers. When you use providers within the network, the plan pays the highest level of benefits and you generally will not have to file any claim forms. Significantly reduced benefits may be payable when out-of-network providers are utilized.

ID Cards

You can easily access your ID Cards through the Mobile App or by logging into your online MedCost account.

MedCost Network Providers

MedCost is committed to ensuring access to high-quality healthcare through an extensive network of physicians and hospitals, and other medical professionals. When you choose a network provider, your out-of-pocket costs are less because the providers in the network have agreed to offer services to members for reduced fees. You can check on provider participation status by getting real-time answers from our Customer Service Contact Center through live WebChat during regular business hours. Provider search features are also available on the website 24 hour a day (see below for instructions).

How to Find a Provider

With our online Provider Search Directory, you can quickly and easily find a MedCost network participating provider.

- Go to www.medcost.com
- Click on “Find a Doctor or Facility”
- Choose “MedCost and MedCost ULTRA” network from the drop down menu
- You may search by Provide Name, Facility Name, Provider Type, Provider Radius or Print Your Custom Directory

Medical Plan Resources

Choose the Online Option That Works for You

Option 1: Log in at [MedCost.com/MyMedCost](https://www.MedCost.com/MyMedCost)

With a secure online account, you can:

- Check year-to-date deductible balances and out-of-pocket limits at a glance.
- View Explanation of Benefits (EOB) notices and have EOBs sent directly to your inbox.
- Review the Summary Plan Description for your health plan.
- View (and print) a digital version of your ID Card.
- Receive “care alerts” for any recommended health care services or screenings that you may be missing and need to discuss with your doctor.
- Use the Quick Links section to find additional information specific to your health plan.
- Access MyCarePath, a secure way to record and keep all your health information in one location, track and monitor progress toward your health goals, and communicate directly with your nurse health coach (if enrolled in a MedCost Care Management program).

Option 2: Use the My MedCost mobile app

You can use the My MedCost mobile app to access some of your favorite web features on your mobile device, including the digital version of your ID card. The app is available for quick download from the App Store or Google Play.

Option 3: Access Live Chat

Get real-time answers and support from MedCost Customer Service through Live Chat during our regular business hours of Monday—Friday, 8:30 a.m.—5:00 p.m. ET. To begin, click on Live Chat Support at the top of www.MedCost.com and enter your name and e-mail address. *Note: You do not have to be logged in to access Live Chat.*

Creating an account is as easy as 1-2-3

1. Go to [MedCost.com/MyMedCost](https://www.MedCost.com/MyMedCost) or download the My MedCost mobile app from your preferred app provider. Just search for MedCost.
2. Follow the on-screen prompts and enter your information—you’ll need information from your health plan ID card to complete registration.
3. Confirm that the information you entered is correct to create your account and sign in.

Become A Healthier You (Care Management)

If you are asked to join the Personal Care Management (PCM) program, it’s because you may show early signs of or be at risk for developing a serious health condition. With the support and guidance of a MedCost Benefit Services nurse health coach, you can tackle any challenge. Your nurse health coach will work with you through regularly scheduled contact via phone calls, e-coaching and portal access to develop an action plan that is just right for you, based on where you are right now. Complete your free online health assessment today and start living your healthiest life.

Taking the assessment is easy:

1. Log in to the secure Member portal on www.MedCost.com.
2. Choose Healthy & Whole under Quick Links.
3. Go to MyCarePath and follow the prompts to complete the assessment.

Medical Plan Resources (continued)

Improve Your Overall Mental Wellbeing (Behavioral Health Solution)

MedCost, in partnership with Carolina Behavioral Health Alliance (CBHA) and myStrength™, offers you a behavioral health solution that combines experienced behavioral health case management with an online mental wellness portal.

- Comprehensive support for recovery
- Unlimited online access to powerful tools, including
 - Step-by-step interactive programs
 - Easy-to-use mood trackers
 - Personalized home page and action plans
 - Expert articles, videos and tips
 - *Safe, secure, and confidential environment*

For a brief video introduction to myStrength, visit www.medcost.com/mystrength.

To Sign Up:

1. Click on “Members Login” at www.MedCost.com.
2. Enter your login information or if you are not registered, click on the link below “First Time Users Click Here to Register” and follow the instructions to set up your MedCost account.
3. Click on “myStrength” under the Quick Links section.
4. On the myStrength.com home page, click on the myStrength logo then click on “Sign Up.”
5. Enter the letters MC and the group number shown on your health plan ID card.
6. Complete the myStrenght sign-up process with a brief Wellness Assessment and personal profile.

Healthcare Benefits

	Medical Coverage—MedCost	
	Active PPO Plan	
	In-Network	Out-of-Network
Deductible	\$1,250 Single \$3,750 Family	\$2,500 Single \$7,500 Family
Out-of-Pocket Maximum	\$4,890 Single \$14,670 Family	\$9,780 Single \$29,340 Family
Office Visit	PCP: \$20 copay Specialist: \$30 copay Routine Preventive: Covered in Full	PCP: 30% after deductible Specialist: 30% after deductible Routine Preventive: Not covered
Urgent Care	\$30 copay	
Emergency Room	\$200 Copay then 20% after deductible	
Diagnostic Test (x-ray, blood work)	20% after deductible	30% after deductible
Advanced Imaging (MRI, MRA, CAT Scan, PET Scan)	20% after deductible	30% after deductible
Hospital Inpatient	20% after deductible	30% after deductible
Hospital Outpatient	20% after deductible	30% after deductible

Employee Deductions

Coverage Level	Semi Monthly Wellness Rates
Employee Only	\$25.00
Employee + Spouse	\$266.50
Employee + Child(ren)	\$137.50
Employee + Family	\$382.00

Coverage Level	Semi Monthly Non Wellness Rates
Employee Only	\$63.00
Employee + Spouse	\$304.50
Employee + Child(ren)	\$175.50
Employee + Family	\$420.00

Prescription Drugs

When you enroll in the medical plan, you automatically receive prescription drug coverage with MaxorPlus. Filling prescriptions is easy. MaxorPlus provides pharmacy benefit services nationwide. They also own and operate their own mail order and specialty pharmacies which allow them to provide full-service pharmacy benefits to members.

The prescription drug program offers tier levels, based on MaxorPlus’ prescription drug list. The list is developed and updated on a regular basis according to the recommendations of a panel of participating physicians and pharmacists. You can reduce your out-of-pocket expenses when you and your doctor choose generic drugs, versus preferred and/or non-preferred brand name drugs.

Prescription Drug Coverage	
MaxorPlus	
Retail Pharmacies (up to a 30-day supply)	
Tier 1	\$10 copay
Tier 2	\$30 copay
Tier 3	\$45 copay
Tier 4	25% (\$50 minimum—\$100 maximum)

Retail Pharmacies

The pharmacy program offers a broad network of pharmacies. Show your ID card at a participating retail pharmacy to receive up to a 90-day supply of your non-specialty medication. To find a network pharmacy near you, log on to www.members.maxorplus.com or call customer service at 1-800-687-0707.

Maxor MXP Pharmacy (Mail Order Pharmacy)

Mail Order Service is designed especially for individuals who take prescription medication on an ongoing basis. MXP Pharmacy offers a convenient, cost effective way to order prescribed long-term medications for delivery to your home. Medications obtained through mail order are limited to a 90-day supply. To maximize your savings, please ask your doctor to write, submit electronically, or fax your prescription for a 90-day supply with refills up to one year. Once MXP Pharmacy has your prescription, refills can easily be obtained.

To get started, please use one of the following options:

- Go Online** - Create a MaxorPlus member web portal account at www.maxorplus.com. After you have successfully created an account, select the “Sign-Up for Mail Order” feature.
- By Mail**—Print and fill out a mail order form from the MaxorPlus website. Mail in your completed form to the pharmacy with your prescription(s) and form of payment.
- By Phone**—Call 1-800-687-8629 and follow the menu instructions to speak to a member advocate.

Specialty Prescription Benefits

Maxor Specialty focuses on personalized service for the most complex disease states. They offer the therapies and resources you need to help manage your condition. Their pharmacist and patient care coordinators are available 24/7/365 to answer any questions that may arise. Visit www.maxorspecialty.com or call 1-866-629-6779 for more information.

Your Plan Includes myMaxorLink™

Make the most of your pharmacy benefits with myMaxorLink™. myMaxorLink™ sends you messages about lower cost prescriptions and other health benefit updates for free. There is no app required and you can sign-up in seconds.

1. Have your member ID card ready.
2. Call 1-888-596-0723 or go to mymaxorlink.com/maxorplus.

MaxorPlus Member Portal

The member portal allows users to manage almost all of their pharmacy benefits from the comfort of their computer, tablet, and even smartphone. Using the portal members can sign-up for the MXP Pharmacy and then process refills for their medications directly from the portal. Members can also order replacement insurance cards. May the member need to print or download their prescription history, the member portal makes it easy to choose a date range and print or download a history of medications purchased during that time period.

The MaxorPlus member portal makes managing dependents and other users a breeze. You can even grant access to other users with the click of a button. If you're traveling or just looking for a pharmacy nearby, you can use the portal to locate in-network pharmacies. You can even make direct calls to these pharmacies or find them on a map from your mobile device. Finding a prescription copay is simple using the Calculate Copay section of the portal. Members can also find a formulary and other plan documents in downloadable formats in the Benefit Documents section.

To Register for a Maxor Account:

1. Go to www.members.maxorplus.com. Click Register.
2. On the first page, enter your general information (First Name, Last Name, Email).
3. On the second page, enter the information on your member ID card to tie your prescription benefit information to your account (Rx Group # or GRP Number, Member ID, DOB).
4. Click Link to Patient

OR Download the mobile app for free from iTunes or Google Play!

Note: You are not able to enroll in the member website or app until after your coverage has become effective.

MaxorPlus Dynamic Discounts

Dynamic Discounts with MaxorPlus makes maintenance medications affordable! This program rewards you with lower copays at any network pharmacy when medications are taken correct. Eligible therapy classes include Diabetes, Asthma/COPD, and blood thinner medications. The average member saves \$47 per fill.

PaydHealth

PaydHealth has partnered with McDowell County to advocate on members' behalf to obtain their specialty medication at the lowest out-of-pocket cost. To obtain the alternate funding for your specialty medication, the following steps will be taken:

Step 1: If a Prior Authorization (PA) is required for your specialty medication, your physician will need to provide the requested information. Once the PA is approved, you will receive a welcome call from a PaydHealth care coordinator.

Step 2: An onboarding packet containing required forms and summary documentation necessary to initiate the alternate funding process for your specialty medication. The packet will need to be completed in its entirety and returned to PaydHealth using the prepaid envelope.

Step 3: Temporary alternate funding will be applied to your account while PaydHealth obtains permanent funding. This can take up to four weeks.

Step 4: PaydHealth will work directly with your specialty pharmacy to ensure the fulfillment and delivery of your specialty medication. Before the specialty medication can be shipped, the specialty pharmacy will need to receive your authorization for delivery.

Step 5: Your specialty medication will be shipped, after authorization is provided.

Please call the Select Drugs and ProductsSM Program at 1-877-869-7772 for further information about your specialty drug needs. A case coordinator is available Monday—Friday 8 AM—8 PM CT to speak to you.

Dental

The dental plan, administered by Medcost, gives you the freedom to access dental care from any licensed dentist. Contributions can be viewed in the Triune enrollment system.

Using Your Benefits

Claims will usually be submitted directly to MedCost by your Provider to the address on your ID card. In some instances, you may need to file a claim with MedCost. If you are also enrolled in the medical plan, you will receive one ID card for both your medical and dental benefits..

	Dental Coverage—MedCost Dental	
Deductible	\$100 per individual	
Annual Maximum	\$1,500 per person	
Preventive Services	Covered at 100%	
Basic Services	Covered at 80%	
Major Services	Covered at 50%	
Orthodontic Benefit (Children only)	50% to \$1,500 lifetime maximum	

Coverage Level	Cost Per Paycheck
Employee Only	\$0.00
Employee + Family	\$12.50



Vision

With this vision plan, you have access to an extensive network of Community Eye Care participating vision providers. There are no claims to file when you see an in-network provider. Network providers file claims on your behalf. Additionally, most CEC network providers offer discounts on the average if you exceed your allowance – 20% on glasses and 10% on contact lenses. Maximum coverage for contact lens exams is \$100 for fittings and \$80 for annual evaluations. If you see a non-network provider, simply submit a claim form and a receipt to Community Eye Care. Contributions can be viewed in the Triune enrollment system.

Using Your Benefits

- 1. Select a provider from the Community Eye Care provider network.
- 2. Call the provider to make an eye appointment, and let them know that you have Community Eye Care coverage.
- 3. See the doctor and select your eyewear.
- 4. Your only payments to the provider are your co-pays, plus any discounted amount that exceed the \$150 eyecare allowance.

Vision Plan Coverage		Coverage Level	Cost Per Paycheck
Exam Once every 12 months	\$10 copay	Employee Only	\$4.95
Contact Lens Fitting Once every 12 months	\$10 copay	Employee + One	\$9.41
Lenses, Frames and Contacts Once every 12 months	\$150 allowance	Employee + Family	\$14.36



Flexible Spending Accounts

McDowell County provides you with the opportunity to save money on medical and dependent care expenses with Flexible Spending Accounts (FSAs), administered by Flores & Associates. When you participate, you don't pay federal income or Social Security taxes on the money you contribute to your account.

- **Health Care FSA**—Set aside money each year to pay for eligible medical expenses. You may set aside \$250 up to a maximum of \$2,850 for the year. Up to \$570 of your remaining balance is allowed to be rolled over into the next calendar year.
- **Dependent Care FSA**—Set aside money each year to pay for eligible dependent day care expenses. You may set aside \$250 up to a maximum of \$5,000 (\$2,500 if you are married and file a separate return).

The FSA plan year runs from January 1st—December 31st, and you will have until March 31st of the following year to file claims.

How Does It Work?

- During the annual enrollment period you indicate the total amount you wish to deposit in each account during the upcoming year.
- The annual amount you elect will be divided evenly over the appropriate number of pay periods. Each pay period, an equal portion of the total amount will be deducted from your compensation and credited to the appropriate account(s).
- When you incur eligible expenses, you submit a reimbursement account claim form together with the original itemized bill, receipt or explanation of benefits (EOB) from your insurance carrier.
- In accordance with the Uniform Reimbursement Requirement for Flexible Spending Accounts under the provisions of the Internal Revenue Code, you may obtain reimbursement up to the amount you have elected to deposit into your

Health Care Reimbursement Account.

- Reimbursements for dependent day care expenses are allowed up to the amount actually in your Dependent Care Account at the time you submit your request. If your claim exceeds the amount currently available in your Dependent Care Account, you receive additional reimbursements as money is deposited into your account through payroll deductions.

How An FSA Works

1. You elect the annual amount you want to contribute to either or both FSAs based on your expected healthcare and / or dependent care expenses.
2. Your contributions are deducted from each paycheck before income and Social Security taxes, and deposited into your FSA.
3. You can pay with Medical FSA debit card for eligible medical expenses. For dependent care, you pay for eligible expenses when incurred and then submit a reimbursement claim form or file the claim online.
4. You are reimbursed from your FSA, so you are paying your expenses with pre-tax dollars..

There are multiple ways to submit claims to Flores

1. You can mail the claims to the following address:
Flores & Associates, LLC.
P.O. Box 31397
Charlotte, NC 28231
2. You can fax claims to 800-726-9982 or 704-335-0818.
3. You can submit claims online by creating an account on www.flores247.com and upload documents securely
4. Download the Flores Mobile app available for Apple or Android devices.
5. You may also use your debit card to pay for Health Care expenses.

Visit www.flores247.com or call 1-800-532-3327.

Term Life and Accidental Death and Dismemberment

You have already been enrolled for Group Term Life (GTL) Insurance with AD&D. These benefits are provided by McDowell County at no cost to you. Group Term Life coverage provides a benefit to your designated beneficiary in the event of your death. AD&D coverage provides benefits not only for accidental death, but also for loss of limbs or bodily functions such as sight and hearing.

To be eligible for coverage, you must qualify as an eligible member (working at least 30 hours per week) and be considered actively at work.

Group Life Benefits:

Benefit: \$20,000

Reduces to 65% at age 65; 45% at age 70; 30% at age 75; 20% at age 80; 15% at age 85; 10% at age 90



Work Life Benefits

Employee Assistance Program

Included in your USABLE life insurance policy is an online EAP service through New Directions. This online resource will provide you and your loved ones completely free and confidential access to programs, tools, and services you need to live a balanced and happy life.

EAP representatives are available 24/7/365

- Start a Chat
- Go online for quick and easy access to experts who can immediately point you to the right resources.
- Visit ndbh.com

View more than 10,000 resources to assist you in your improvement journey. Some available resources include:

- Videos
- Will Prep Toolkit
- Calculators
- Self-Assessments
- Budgeting Worksheets
- Legal Documents
- Provider Directories
- Elder & Child Care Resources
- Stress Management Tools

Your ndbh.com login: USAL903

Travel Assistance

Ease some of the worries of traveling whether in the U.S. or internationally. You, your spouse and dependent children have access to a variety of benefits provided through AXA Assistance. These services include travel and medical assistance plus emergency medical evacuation benefits. Assistance is available for travel 100+ miles away from home for up to 120 consecutive days. To learn more about this benefit, visit Principal.com/travelassistance. Call AXA when traveling and need assistance at 1-888-647-2611 (in the US) or 630-766-7696 (collect outside of the US)

Identity Theft Assistance

Identity Theft Assistance is here to help you understand the risks, learn how to prevent theft, and guide you step by step if an when such an unfortunate incident occurs. This service is available to you 24 hours a day, 365 days a year. For assistance, please call 1-866-384-2786 or 630-616-4536 or email medassist-usa@axa-assistance.us.

Benefit	Who to Call	Contact Information
McDowell County Human Resources	Anna Lee, Human Resources Director	Phone: 828-652-7121 ext. 1323 Fax: 828-659-9476 Email: anna.lee@mcdowellgov.com
	Jamey Womack, Human Resources Assistant	Phone: 828-652-7121 ext. 1307 Fax: 828-659-9476 Email: jamey.womack@mcdowellgov.com
Medical #8145	MedCost	Customer Service: 1-800-795-1023 www.MedCost.com
Prescription Drugs #8145	MaxorPlus	1-800-687-0707 www.members.maxorplus.com
Select Drugs and Products Program	Payd Health	1-877-869-7772
Dental #8145	MedCost	Customer Service: 1-800-795-1023 www.MedCost.com
Vision #MCDOWGOV0	Community Eye Care	1-888-254-4290 www.cecvision.com
Flexible Spending Account	Flores & Associates	1-800-532-3327 www.flores247.com
Life and AD&D #50012400	USABLE	1-800-370-5856 www.usablelife.com

[Click here for required notices](#)



