

EMPLOYEE BENEFIT HIGHLIGHTS



**SARASOTA COUNTY
SHERIFF'S OFFICE**

INTEGRITY | RESPECT | SERVICE | FAIRNESS

2026



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This booklet is merely a summary of employee benefits. For a full description, refer to the plan document. Where conflict exists between this summary and the plan document, the plan document controls. Sarasota County Sheriff's Office reserves the right to amend, modify or terminate the plan at any time. This booklet should not be construed as a guarantee of employment.



Contact Information

Human Resources Bureau	Kari Legg, HR Specialist Bethany Chapman, Benefits Administrator	Phone: (941) 861-4157 Email: Kari.Legg@SarasotaSheriff.org Phone: (941) 861-4270 Email: Bethany.Chapman@SarasotaSheriff.org
Aetna On-Site Representative	Glendy Alvarez	Phone: (941) 861-4893 Email: alvarezg4@aetna.com
Wellness Coordinator	Ryan Ingalls	Phone: (941) 861-4095 Email: Ryan.Ingalls@SarasotaSheriff.org
 Online Benefit Enrollment	Bentek Support	Phone: (888) 5-Bentek (523-6835) Email: support@mybentek.com app.mybentek.com/sarasotasheriff
 Mobile Clinic	WalkonClinic	Phone: (833) 633-7276 www.walkonclinic.as.me
 Medical Insurance	Aetna	Phone: (866) 983-0110 www.aetna.com
 Prescription Drug Coverage & Mail-Order Program	Aetna RX Home Delivery	Phone: (888) 792-3862 www.aetna.com
 Specialty Pharmacy	Prudent Rx	Phone: (800) 578-4403 www.prudentrx.com
 Telehealth	CVS Health Virtual Care	www.cvs.com/virtual-care
 Health Reimbursement Account	Aetna	Phone: (866) 983-0110 www.aetna.com
 Dental Insurance	Aetna	Phone: (877) 238-6200 www.aetna.com
 Vision Insurance	Superior Vision	Phone: (800) 507-3800 www.superiorvision.com
 Flexible Spending Accounts	P&A Group	Phone: (716) 852-2611 www.padmin.com
 Basic Life and AD&D Insurance	The Standard	Phone: (800) 628-8600 www.standard.com
 Voluntary Life and AD&D Insurance	The Standard	Phone: (800) 628-8600 www.standard.com
 Long Term Disability Insurance	The Standard	Phone: (800) 628-8600 www.standard.com
 Employee Assistance Program	CuraLinc	Phone: (800) 490-1585 www.supportlinc.com
 Behavioral Health Support	Aetna AbleTo	Phone: (844) 330-3648 www.aetna.com
 Supplemental Benefits	Allstate Benefits	Phone: (800) 521-3535 www.allstatebenefits.com/mybenefits
 Legal Insurance	LegalShield	Phone: (800) 729-7998 www.legalshield.com
 ID Theft Insurance	Allstate Identity Protection	Phone: (800) 789-2720 www.myaiip.com
 Pet Insurance	MetLife	Phone: (800) 438-6388 www.metlifepetinsurance.com
 Farmers Insurance Offerings	Farmers Insurance	Phone: (800) 438-6381 www.Farmers.com
 Claims, Billing & Benefit Assistance	Gehring Group	Phone: (800) 244-3696 Email: sarasotasheriff@gehringgroup.com



Benefit News For 2026

The Sheriff is proud to be able absorb the full cost of the premium increase for plan year 2026. As healthcare costs continue to rise, ensuring our employees and their families can continue to receive the best care is a top priority. For the first time since 2019 the annual Deductible and Out-of-Pocket Maximum were increased.

March of 2025, we rolled out a new, more holistic, wellness program. Partnering with Wellworks for You, all employees can take part in the program that focuses on year-round wellness. Through the Wellworks for You website and app, employees can track their progress towards Premium Reduction on their medical insurance, earn e-Gift Cards, and receive Extra Vacation Time by completing monthly active minutes and e-learning programs. There is so much potential with this program, stay tuned for what's to come.

The Sheriff's Office takes the mental health of our employees just as seriously as their physical health. Employees have access to many resources for the different life events that can happen throughout both their professional and personal lives. No cost onsite counseling with a licensed clinical social worker every Thursday from 9:00AM-1:00PM at HQ or EOB. Up to six coaching sessions per life event with our EAP, CuraLinc, at no cost. Newly added through our Aetna health insurance, Telemynnd has specialized training in the public sector to better care for those who care for our communities. All services are completely confidential between the employee and provider.



Introduction

The Sarasota County Sheriff's Office provides group insurance benefits to eligible employees. The Employee Benefit Highlights Booklet provides a general summary of the benefit options as a convenient reference. Please refer to the Sheriff's Office Personnel Policies and/or Certificates of Coverage for detailed descriptions of all available employee benefit programs and stipulations therein. If an employee requires further explanation or needs assistance regarding claims processing, please refer to the customer service phone numbers under each benefit description heading or contact Human Resources.

On-Site Aetna Representative

The Sarasota County Sheriff's Office provides an Aetna on-site representative, Glendy Alvarez, who is available to assist with any questions or issues employees may have regarding Aetna's medical, pharmacy and dental plans. Glendy is available via phone and email. Her normal schedule is Monday through Friday, 8:30am - 5:00pm.

In order to assist members throughout the agency, Glendy will travel to different locations several times a month. There is a calendar located on SharePoint that will also have Glendy's schedule and locations. Look for "Aetna Representative" on the right hand side of the SharePoint Homepage. If employees have questions and are unable to stop by and see the representative, please feel free to reach her at extension 14893.

This booklet contains benefit information for the 2026 plan year. The Open Enrollment Period for those employees who wish to make changes to these plans will be 11/03/2025 to 11/14/2025

Online Benefit Enrollment

The Sheriff's Office provides employees with an online benefits enrollment platform through Bentek's Employee Benefits Center (EBC). The EBC provides benefit-eligible employees the ability to select or change insurance benefits online during the annual Open Enrollment Period, New Hire Orientation, or for Qualifying Events.

Accessible 24 hours a day, throughout the year, employees may log in and review comprehensive information regarding benefit plans, and view and print an outline of benefit elections for employee and dependent(s). Employee also has access to important forms and carrier links, can report qualifying events and review and make changes to Life insurance beneficiary designations.



To Access the Employee Benefits Center:

- ✓ Visit app.mybentek.com/sarasotasheriff
- ✓ Sign in with existing username and password or select "Create an Account."
- ✓ If needed, select "Forgot Username/Password" to recover login credentials.
- ✓ Use the Launchpad to review enrollment, explore options, and make changes or update beneficiary designations.

For technical issues directly related to using the EBC, contact:

support@mybentek.com
(888) 5-Bentek (523-6835)

Hours of Operation: Monday through Friday 8:30 am - 5:00 pm (EST)



Scan QR Code to
Access Bentek



Group Insurance Eligibility



The Sheriff's Office insurance plan year is January 1 through December 31.

Employee Eligibility

Employees are eligible to participate in the Sheriff's Office insurance plans if they are full-time employees working a minimum of 30 hours per week. Coverage will be effective the first of the month following 30 days. For example, if an employee is hired on April 11, then the effective date of coverage will be June 1.

Retirees are eligible to continue medical, dental and vision coverage that was in effect at the time of retirement. The Sheriff's Office will continue to offer a \$5,000 retiree Life insurance policy through The Standard. Please note, employee must make these elections at the time of retirement. If employee is currently retired and did not elect coverage at retirement, employee will be unable to elect it now or in the future. Retirees can only add or delete dependents to the coverages they elected at the time of retirement, as the result of a change of status or during Open Enrollment.

Separation of Employment

If employee separates employment from the Sheriff's Office, insurance will continue through the end of month in which separation occurred. Medical, dental, vision, EAP and FSA continuation of coverage may be available as applicable by law.

Dependent Eligibility

A dependent is defined as the legal spouse and/or dependent child(ren) of the participant or spouse. The term "child" includes any of the following:

- A natural child
- A stepchild
- A legally adopted child
- A newborn child (up to the age of 18 months) of a covered dependent (per Florida State Statute)
- A child for whom legal guardianship has been awarded to the participant or the participant's spouse

Required Documentation

All employees who have enrolled new dependents on either the medical, dental or vision plans must supply documentation supporting their dependents. For a dependent spouse, employee will need a marriage certificate. For dependent child(ren), employee will need a birth certificate.

Dependent Age Requirements

Medical Coverage: A dependent child may be covered through the end of the calendar year in which the child turns age 26. An over-age dependent (taxable dependent) may continue to be covered on the medical plan to the end of the calendar year in which the child reaches age 30, if the dependent meets the following requirements:

- Unmarried with no dependents; and
- A Florida resident, or full-time or part-time student; and
- Otherwise uninsured; and
- Not entitled to Medicare benefits under Title XVIII of the Social Security Act, unless the child is disabled.

Dental Coverage: A dependent child may be covered through end of calendar year in which child turns age 26.

Vision Coverage: A dependent child may be covered through the end of the calendar year in which child turns age 26.

Voluntary Dependent Child Life: A dependent child may be covered through end of the calendar year in which child turns age 25.

Please see deductions related to "Over-Age" dependents if covering eligible over-age dependents.

Disabled Dependents

Coverage for a dependent child may be continued beyond age 26 if:

- Is physically or mentally disabled and incapable of self-sustaining employment (prior to age 26); and
- Unmarried and primarily dependent upon the employee for support; and
- Is otherwise eligible for coverage under the group's insurance plans; and
- Has been continuously insured.

Proof of disability will be required upon request. Contact Human Resources for more information.

Deductions Related to "Over-Age" Dependents (Ages 27-30)

Employees who choose to cover dependents beginning January 1 of the calendar year in which the dependent child reaches age 27 through the end of the calendar year in which the dependent child reaches age 30, will be responsible for paying the full cost of both the employer and employee share of a single-tier premium for each dependent in this age range. This cost is in addition to the standard medical premiums for the rest of the family. Please note that deductions for this coverage will be taken on an after-tax basis. Employee should consult a tax advisor for questions.

Dependents aged 26–30 with a qualifying disability may remain on the employee's policy without incurring the additional premium.



Qualifying Events and Section 125

Section 125 of the Internal Revenue Code

Premiums for medical, dental, vision insurance, contributions to Flexible Spending Accounts (FSA), and/or certain supplemental policies are deducted through a Cafeteria Plan established under Section 125 of the Internal Revenue Code and are pre-taxed to the extent permitted. Under Section 125, changes to an employee's pre-tax benefits can be made ONLY during the Open Enrollment Period unless the employee or qualified dependent(s) experience(s) a Qualifying Event and the request to make a change is made within 31 days of the Qualifying Event.

Under certain circumstances, employee may be allowed to make changes to benefit elections during the plan year, if the event affects the employee, spouse or dependent's coverage eligibility. An "eligible" Qualifying Event is determined by Section 125 of the Internal Revenue Code. Any requested changes must be consistent with and due to the Qualifying Event.

Examples of Qualifying Events:

- Employee gets married or divorced
- Birth of a child
- Employee gains legal custody or adopts a child
- Employee's spouse and/or other dependent(s) die(s)
- Loss or gain of coverage due to employee, employee's spouse and/or dependent(s) termination or start of employment
- An increase or decrease in employee's work hours causes eligibility or ineligibility
- A covered dependent no longer meets eligibility criteria for coverage
- A child gains or loses coverage with other parent or legal guardian
- Change of coverage under an employer's plan
- Gain or loss of Medicare coverage
- Losing or becoming eligible for coverage under a State Medicaid or CHIP (including Florida Kid Care) program (60 day notification period)

IMPORTANT NOTES

If employee experiences a Qualifying Event, **Human Resources must be contacted within 31 days of the Qualifying Event** to make the appropriate changes to employee's coverage. Employee must furnish valid documentation supporting a change in status or "Qualifying Event". If approved, changes will be effective the first of the month following the Qualifying Event. Newborns are effective on the date of birth. Employee will be responsible for premiums back to the effective date of the change. Qualifying Events will be processed in accordance with employer and carrier eligibility policy. Beyond 31 days, requests will be denied and employee may be responsible, both legally and financially, for any claim and/or expense incurred as a result of employee or dependent who continues to be enrolled but no longer meets eligibility requirements.

Please Note: If employee needs to make an update due to a Qualifying Event, please contact HR Specialist, Kari Legg, at Ext. 14157 or via email at kari.legg@sarasotasheriff.org.

Summary of Benefits and Coverage

A **Summary of Benefits & Coverage (SBC)** for the Medical Plans is provided as a supplement to this booklet being distributed to new hires and existing employees during Open Enrollment. The summary is an important item in understanding employee's benefit options. A free paper copy of the SBC document may be requested or is also available as follows:

From: Human Resources
Address: 6010 Cattleridge Blvd.
Sarasota, FL 34232
Phone: (941) 861-4157
Website URL: app.mybentek.com/sarasotasheriff

The SBC is only a summary of the plan's coverage. A copy of the plan document, policy, or certificate of coverage should be consulted to determine the governing contractual provisions of the coverage. A copy of the group certificate of coverage can be reviewed and obtained by contacting Human Resources or downloading from Bentek Resource Center.



Walk on Clinic

Sarasota County Sheriff's Office Walk on Clinic

The onsite mobile clinic is available Monday through Friday to all employees, covered dependents (ages 16+), and retirees covered under the medical insurance plan at no additional cost. The clinic is administered by Walk On, a third-party vendor, providing convenient medical services for team members at their workplace. Utilization is voluntary. All visits with Walk On Clinic staff are completely confidential and no personal information is shared with the Agency.

Why choose the Walk on Clinic ?

- ✓ Full range of primary care services available
- ✓ Online scheduling with dedicated 25-minute appointments
- ✓ 100% confidential and HIPAA compliant

What can be treated at the Walk on Clinic ?

Walk On Clinic provides primary care services to employees, covered dependent(s) (16+), and retirees, for many non-emergency illnesses.

Primary care services. Services include:

<ul style="list-style-type: none"> ✓ Wellness exams ✓ Prescription refills ✓ Comprehensive blood work ✓ B12 injections ✓ Treatment for minor cuts and scrapes 	<ul style="list-style-type: none"> ✓ Covid testing ✓ Immunizations ✓ Preventive and sick visits ✓ Allergy testing ✓ Many other services available
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How to Access Care:

- Scan the QR code to schedule an appointment; or
- Schedule with the medical staff by using the online portal at www.walkonclinic.as.me ; or
- Call or Text (833) 633-7276 and select the time and location.



Walk on Clinic Hours of Operation

Monday	Headquarters 6:00am - 4:00pm	
Tuesday	Training 6am -10am	HQ 12pm - 4pm
Wednesday	Courthouse/Corrections 6am - 4pm	
Thursday	Headquarters 6:00am - 4:00pm	
Friday	Courthouse/Corrections 6am - 4pm	

Phone: (833) 633-7276 | www.walkonclinic.as.me

Telehealth

Aetna provides access to telehealth services as part of the medical plan. CVS Health Virtual Care is a convenient video consultation company that provides immediate medical assistance for many conditions.

The benefit is provided to all enrolled members. Registration is required and should be completed ahead of time. This program allows members 24 hours a day, seven (7) days a week on-demand access to affordable medical care via online video consultations when needing immediate care for non-emergency medical issues. Telehealth should be considered when employee's primary care doctor is unavailable, after-hours or on holidays for non-emergency needs. Many urgent care ailments can be treated with telehealth, such as:

<ul style="list-style-type: none"> ✓ Acne ✓ Allergies ✓ Cold and Flu 	<ul style="list-style-type: none"> ✓ Fever ✓ Headache/Migraine ✓ Rash 	<ul style="list-style-type: none"> ✓ Sore Throat ✓ Stomachache ✓ UTIs and More
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Telehealth doctors do not replace employee's primary care physician but may be a convenient alternative for non-emergent, urgent care and ER visits.

CVS Health Virtual Care

www.cvs.com/virtual-care

Lantern Specialty Care

Lantern

Lantern is an additional medical benefit that provides access to excellent and affordable care for many planned, non-emergency surgical procedures. Lantern Care Advocates are there to provide personalized support and assistance in finding and receiving care from the best, most qualified surgeon saving members time and money throughout the surgical planning process, educating members on benefits and surgical needs, and providing resources to help make the best decisions regarding care.

Commonly covered procedures are:

<ul style="list-style-type: none"> ✓ Knee Replacement ✓ Hysterectomy ✓ Hernia Repair 	<ul style="list-style-type: none"> ✓ Colonoscopy ✓ Spinal and More.
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For additional information, please contact Lantern at (888) 726-1361 or visit www.lanterncare.com/for-members.

Lantern

Phone: (888) 726-1361 | www.lanterncare.com/for-members



Medical Plan Resources

Enrolled employees and dependents have access to additional services and discounts through value added programs. Resources such as in-network providers, benefits, deductibles, ID cards, claims, and more are easily accessed through the carrier portal and mobile app. For more details regarding medical plan resources, contact customer service.

Mobile App

Mobile app provides on-the-go access to the medical benefit account to view benefits, download ID card, locate providers, or view claims.

Aetna | Phone: (866) 983-0110 | www.aetna.com

PrudentRx

As part of the prescription plan, the PrudentRx Copay Program allows members to get select specialty medications at no cost. That means \$0 out-of-pocket (OOP) for any medications on the plan's exclusive Specialty Drug List when filled by CVS Specialty®. PrudentRx will work with manufacturers to get copay card assistance, and will manage enrollment and refills for members.

Even if there is no copay card program for select medications, the cost will be \$0 for as long as member is enrolled in the program. Copay assistance is a process in which drug manufacturers provide financial support to patients by covering all or most of the patient cost share for select medications, in particular specialty medications. The PrudentRx Copay Program will help plan members get copay assistance from drug manufacturers to reduce a member's cost share for eligible medications thereby reducing out-of-pocket expenses. Members currently taking one (1) or more medications included in the plan's exclusive Specialty Drug List, will receive a welcome letter and phone call from PrudentRx providing information about the program as it pertains to the medication. For additional details, please contact PrudentRx.

PrudentRx
Phone: (800) 578-4403

Regenexx

The Sheriff's Office covers Regenexx outpatient procedures for qualified members who participate in the group's medical plan. Regenexx uses the body's natural healing agents replacing the need of 70% of elective orthopedic surgeries for chronic and acute injuries. For qualifying information and additional details, please contact Regenexx.

Regenexx
Phone: (866) 939-8259
www.regenexxbenefits.com/sarasotasheriff

Health Reimbursement Account

The Sheriff's Office provides employees who participate in the Aetna Choice POS II with HRA Plan, a Health Reimbursement Account (HRA) through Aetna. HRA monies are funded by the Sheriff's Office and can be used for any qualified medical expenses such as copayments, deductibles and coinsurance for physician services, hospital services, prescription drugs, etc. The HRA monies provide tax-free funds to cover qualified out-of-pocket expenses incurred under the medical plan.

Plan Year Funding

Employer HRA Funding Allotment for 2026:

- Employee Only: \$500
- Employee + Spouse: \$1,000
- Employee + Child(ren): \$1,000
- Family: \$1,000
- HRA amounts will be prorated for new hires eligible outside Sheriff's Office annual Open Enrollment Period.
- Funds may rollover each year as long as employee remains in the Aetna Choice POS II with HRA Plan, otherwise funds will be forfeited.

How HRA Works

Eligible health care claims are paid directly from the HRA fund by Aetna. Eligible expenses must be necessary for the diagnosis, treatment, cure, mitigation or prevention of a specific medical condition. Cosmetic expenses are not eligible for reimbursement. When employee incurs an eligible expense, Aetna will automatically debit the HRA to cover the member responsibility portion until the account funds are exhausted. For more information regarding eligible expenses, visit Aetna online at www.aetna.com.

How to Check Available HRA Balance

Balance, activity and account history are available on the online portal, mobile app or by contacting customer service.

Aetna
Phone: (866) 983-0110 | www.aetna.com



Medical Insurance Rates - Active

The Sheriff's Office offers medical insurance through Aetna to benefit-eligible employees. The costs per pay period for active employees are listed in the premium tables below. For more detailed information about the medical plans, please refer to the carrier's Summary of Benefits and Coverage (SBC) document or contact Aetna's customer service.

Medical Insurance – Aetna Choice POS II Plan

26 Payroll Deductions – Per Pay Period Cost

Tier of Coverage	Employer Premium Per Pay Period	Employee Premium Per Pay Period
Employee Only	\$468.50	\$72.00
Employee + Spouse	\$834.04	\$301.00
Employee + Child(ren)	\$793.99	\$287.00
Employee + Family	\$1,151.44	\$416.00

Medical Insurance – Aetna Choice POS II with HRA Plan

26 Payroll Deductions – Per Pay Period Cost

Tier of Coverage	Employer Premium Per Pay Period	Employee Premium Per Pay Period
Employee Only	\$360.13	\$55.00
Employee + Spouse	\$640.78	\$231.00
Employee + Child(ren)	\$610.26	\$220.00
Employee + Family	\$884.88	\$319.00

Medical Insurance – Aetna Choice POS II Plan Premium Reduction

26 Payroll Deductions – Per Pay Period Cost

Tier of Coverage	Employer Premium Per Pay Period	Employee Premium Per Pay Period
Employee Only	\$500.50	\$40.00
Employee + Spouse (1 Qual.)	\$866.04	\$269.00
Employee + Spouse (2 Qual.)	\$898.04	\$237.00
Employee + Children	\$825.99	\$255.00
Employee + Family (1 Qual.)	\$1,183.42	\$384.00
Employee + Family (2 Qual.)	\$1,215.43	\$352.00

Medical Insurance – Aetna Choice POS II with HRA Plan Premium Reduction

26 Payroll Deductions – Per Pay Period Cost

Tier of Coverage	Employer Premium Per Pay Period	Employee Premium Per Pay Period
Employee Only	\$392.13	\$23.00
Employee + Spouse (1 Qual.)	\$672.78	\$199.00
Employee + Spouse (2 Qual.)	\$704.78	\$167.00
Employee + Children	\$642.26	\$188.00
Employee + Family (1 Qual.)	\$916.88	\$287.00
Employee + Family (2 Qual.)	\$948.89	\$255.00

Aetna | Phone: (866) 983-0110 | www.aetna.com



Medical Insurance Rates - Retirees

The Sheriff's Office offers medical insurance through Aetna to benefit-eligible retirees. The costs per month for retirees are listed in the premium tables below. For more detailed information about the medical plans, please refer to the carrier's Summary of Benefits and Coverage (SBC) document or contact Aetna's customer service.

Medical Insurance – Aetna Choice POS II Plan

Monthly Premium

Tier of Coverage	Employer Premium Per Month	Retiree Premium Per Month
Retiree Only	\$225.00	\$946.08
Retiree + Spouse	\$225.00	\$2,234.26
Retiree + Child(ren)	\$225.00	\$2,117.15
Retiree + Family	\$225.00	\$3,171.11

Medical Insurance – Aetna Choice POS II with HRA Plan

Monthly Premium

Tier of Coverage	Employer Premium Per Month	Retiree Premium Per Month
Retiree Only	\$225.00	\$674.45
Retiree + Spouse	\$225.00	\$1,663.86
Retiree + Child(ren)	\$225.00	\$1,573.91
Retiree + Family	\$225.00	\$2,383.42

Medical Insurance – Aetna Choice POS II Plan Premium Reduction

Monthly Premium

Tier of Coverage	Employer Premium Per Month	Retiree Premium Per Month
Retiree Only	\$257.00	\$914.08
Retiree + Spouse (1 Qual.)	\$257.00	\$2,202.26
Retiree + Spouse (2 Qual.)	\$289.00	\$2,170.26
Retiree + Children	\$257.00	\$2,085.15
Retiree + Family (1 Qual.)	\$257.00	\$3,139.11
Retiree + Family (2 Qual.)	\$289.00	\$3,107.11

Medical Insurance – Aetna Choice POS II with HRA Plan Premium Reduction

Monthly Premium

Tier of Coverage	Employer Premium Per Month	Retiree Premium Per Month
Retiree Only	\$257.00	\$642.45
Retiree + Spouse (1 Qual.)	\$257.00	\$1,631.86
Retiree + Spouse (2 Qual.)	\$289.00	\$1,599.86
Retiree + Children	\$257.00	\$1,541.91
Retiree + Family (1 Qual.)	\$257.00	\$2,351.42
Retiree + Family (2 Qual.)	\$289.00	\$2,319.42



Aetna Choice POS II Plan At-A-Glance

Aetna Choice POS II (Open Access)		
Network	Aetna Choice POS II (Open Access)	
Calendar Year Deductible (CYD)	In-Network	Out of Network*
Individual	\$750	\$1,500
Family	\$1,500	\$3,000
Coinsurance		
Member Responsibility	20%	40%
Calendar Year Out-of-Pocket Maximum		
Individual	\$3,000	\$4,000
Family	\$6,000	\$8,000
What Applies to the Out-of-Pocket Maximum?	Deductible, Coinsurance, Copays and Rx	
Physician Services		
Primary Care Physician (PCP) Office Visit	\$20 Copay	40% After CYD
Specialist Office Visit	\$40 Copay	40% After CYD
Non-Hospital Services: Freestanding Facility		
Clinical Lab (Blood Work)**	No Charge	40% After CYD
X-rays	No Charge	40% After CYD
Advanced Imaging (MRI, PET, CT)	\$200 After CYD	\$200 After CYD
Outpatient Surgery at Surgical Center	20% After CYD	40% After CYD
Physician Services at Surgical Center	20% After CYD	40% After CYD
Urgent Care (Per Visit)	\$75 Copay	40% After CYD
Hospital Services		
Inpatient Hospital (Per Admission)	20% After CYD	40% After CYD
Outpatient Hospital (Per Visit)	20% After CYD	40% After CYD
Physician Services at Hospital	20% After CYD	40% After CYD
Emergency Room (Per Visit; Waived if Admitted)	\$400 Copay	\$400 Copay
Mental Health/Alcohol & Substance Abuse		
Inpatient Hospital Services (Per Admission)	20% After CYD	40% After CYD
Outpatient Services (Per Visit)	No Charge	40% After CYD
Outpatient Office Visit	\$30 Copay	40% After CYD
Prescription Drugs (Rx)		
Generic	\$9 Copay	50% Coinsurance After INN Copay
Preferred Brand Name	20% Coinsurance (\$25 Min/\$40 Max Copay)	50% Coinsurance After INN Copay
Non-Preferred Brand Name	40% Coinsurance (\$40 Min/\$55 Max Copay)	50% Coinsurance After INN Copay
Specialty	30% Coinsurance	Not Covered
90 Day Supply (Mail Order/Retail Pharmacy)	Generic: \$22.50 Copay Preferred: 20% (\$62.50 Min/\$100 Max Copay) Non-Preferred: 40% (\$100 Min/\$137.50 Max Copay)	Not Covered



Locate a Provider

To find a participating provider, contact customer service or visit www.aetna.com. When searching, select the Aetna Choice POS II (Open Access) network.



Plan References

***Out-Of-Network Balance Billing:**
For information regarding out-of-network balance billing that may be charged by out-of-network providers, please refer to the Summary of Benefits and Coverage (SBC) document.

****LabCorp or Quest Diagnostics are the preferred labs for bloodwork through Aetna. When using another lab, please confirm the lab is contracted with the plans network before receiving services.**



Important Notes

- The plan's deductible and out-of-pocket limit accumulate on a calendar year basis (January 1 - December 31).
- For Family Planning and Infertility Treatment including lab, radiology testing, counseling and surgical treatment, contact Aetna's customer service for pre-determination of benefits or refer to the plan's documents.
- Preventive services are covered at 100%. Please see the Onsite Aetna Representative for further information on Preventive Services.



Aetna Choice POS II with HRA Plan At-A-Glance



Locate a Provider

To find a participating provider, contact customer service or visit www.aetna.com. When searching, select the Aetna Choice POS II (Open Access) network.



Plan References

*Out-Of-Network Balance Billing:

For information regarding out-of-network balance billing that may be charged by out-of-network providers, please refer to the Summary of Benefits and Coverage (SBC) document.

**LabCorp or Quest Diagnostics are the preferred labs for bloodwork through Aetna. When using another lab, please confirm the lab is contracted with the plans network before receiving services.



Important Notes

- The plan's deductible and out-of-pocket limit accumulate on a calendar year basis (January 1 - December 31).
- For Family Planning and Infertility Treatment including lab, radiology testing, counseling and surgical treatment, contact Aetna's customer service for pre-determination of benefits or refer to the plan's documents.

- Preventive services are covered at 100%. Please see the Onsite Aetna Representative for further information on Preventive Services.

Network	Aetna Choice POS II (Open Access)	
Calendar Year Deductible (CYD)	In-Network	Out of Network*
Individual	\$1,750	\$3,500
Family	\$3,500	\$7,000
Coinsurance		
Member Responsibility	20%	40%
Calendar Year Out-of-Pocket Maximum		
Individual	\$4,000	\$7,000
Family	\$8,000	\$14,000
What Applies to the Out-of-Pocket Maximum?	Deductible, Coinsurance and Rx	
Physician Services		
Primary Care Physician (PCP) Office Visit	20% After CYD	40% After CYD
Specialist Office Visit	20% After CYD	40% After CYD
Non-Hospital Services; Freestanding Facility		
Clinical Lab (Blood Work)**	20% After CYD	40% After CYD
X-rays	20% After CYD	40% After CYD
Advanced Imaging (MRI, PET, CT)	20% After CYD	40% After CYD
Outpatient Surgery at Surgical Center	20% After CYD	40% After CYD
Physician Services at Surgical Center	20% After CYD	40% After CYD
Urgent Care (Per Visit)	20% After CYD	40% After CYD
Hospital Services		
Inpatient Hospital (Per Admission)	20% After CYD	40% After CYD
Outpatient Hospital (Per Visit)	20% After CYD	40% After CYD
Physician Services at Hospital	20% After CYD	40% After CYD
Emergency Room (Per Visit; Waived if Admitted)	20% After CYD	20% After INN CYD
Mental Health/Alcohol & Substance Abuse		
Inpatient Hospital Services (Per Admission)	20% After CYD	40% After CYD
Outpatient Services (Per Visit)	20% After CYD	40% After CYD
Outpatient Office Visit	20% After CYD	40% After CYD
Prescription Drugs (Rx)		
Generic	\$9 Copay	50% Coinsurance After INN Copay
Preferred Brand Name	20% Coinsurance (\$25 Min/\$40 Max Copay)	50% Coinsurance After INN Copay
Non-Preferred Brand Name	40% Coinsurance (\$40 Min/\$55 Max Copay)	50% Coinsurance After INN Copay
Specialty	30% Coinsurance	Not Covered
90 Day Supply (Mail Order/Retail Pharmacy)	Generic: \$22.50 Copay Preferred: 20% (\$62.50 Min/\$100 Max Copay) Non-Preferred: 40% (\$100 Min/\$137.50 Max Copay)	Not Covered



Wellness Program

Fit for Duty

Sarasota County Sheriff's Office Wellness Program gives employees the opportunity to earn valuable rewards for taking care of their health. By participating, employee can qualify for 2027 plan year premium reduction, e-Gift Cards through the Rewards Mall, and even extra Vacation Time. Please reference the 2026 Wellworks Program Guide for the full details of the Wellness Program.

Premium Reduction

To receive the full premium reduction for 2027, medically enrolled employees and covered spouses must complete three preventive screenings between October 1, 2025, and September 30, 2026.

- \$32/payroll premium reduction: If employee or spouse completes the required screenings (aligns with 1 Qual. tier on premium reduction chart)
- \$64/payroll premium reduction: If both employee and spouse complete the required screenings (aligns with 2 Qual. tier on premium reduction chart)

Screenings can be completed with employee's primary care physician or at the Walk-On Clinic (just once per screening type). Completing the same screening at both locations will result in an out-of-pocket charge and will not count toward your incentive. Options include annual physical, bloodwork, colonoscopy/Cologuard, mammogram/Bexa exam, routine pap smear/cervical cancer screening, dental preventive visit, routine eye exam, prostate exam/prostate specific antigen test, well-women exam, and various vaccinations.

e-Gift Cards

Employees and covered spouses can also earn up to \$200 in e-Gift Cards by completing select activities before September 30, 2026. Each activity, such as the "Know Your Number" assessment, a dermatology exam, or online learning courses, offers a \$50 reward.

Vacation Time

Full-time employees can earn up to 40 hours of extra vacation time per year by participating in physical fitness and educational activities. Part-time employees can earn up to 20 extra hours of vacation time per year. This is split into two earning periods: 1/1/26 – 6/30/26 and 7/1/26 – 12/31/26. This allows full-time employees to earn up to 20 extra hours per period and part-time employees up to 10 extra hour per period. The number of extra vacation hours earned will be determined by the number of points accumulated through completing physical fitness and educational activities. The goal of the program is to encourage employees to maintain a healthy lifestyle throughout the year.

Log Into The Wellness Portal

1. www.wellworksforyoulogin.com
2. Username:
Employee: SCSO_Employee ID Number
Spouse: SCSO_Employee ID Number + S
3. Temporary first time password:
Employee & Spouse: Birthdate in MMDDYYYY
4. After entering credentials, click Login
5. After initial access with temporary password, user will be prompted to change password.



Dental Insurance

Aetna Dental PPO Plan

The Sheriff's Office offers dental insurance through Aetna to benefit-eligible employees and retirees. The costs per pay period for active employees and monthly costs for retirees are listed in the premium tables below and a brief summary of benefits is provided on the following page. For more detailed information about the dental plan, please refer to the carrier's summary plan document or contact Aetna's customer service.

Employee Rates

Dental Insurance – Aetna Dental PPO Plan

26 Payroll Deductions - Per Pay Period Cost

Tier of Coverage	Employer Premium Per Pay Period	Employee Premium Per Pay Period
Employee Only	\$23.49	\$0.00
Employee + Spouse	\$23.49	\$28.80
Employee + Child(ren)	\$23.49	\$28.80
Employee + Family	\$23.49	\$38.65

Retiree Rates

Dental Insurance – Aetna Dental PPO Plan

Monthly Premium

Tier of Coverage	Employer Premium Per Month	Retiree Premium Per Month
Retiree Only	\$0.00	\$50.90
Retiree+ Spouse	\$0.00	\$113.30
Retiree+ Child(ren)	\$0.00	\$113.30
Retiree + Family	\$0.00	\$134.64

In-Network Benefits

The Dental PPO plan provides benefits for services received from in-network and out-of-network providers. It is also an open-access plan which allows for services to be received from any dental provider without having to select a Primary Dental Provider (PDP) or obtain a referral to a specialist. The network of participating dental providers the plan utilizes is the Aetna Dental PPO network. These participating dental providers have contractually agreed to accept Aetna's contracted fee or "allowed amount." This fee is the maximum amount an Aetna dental provider can charge a member for a service. The member is responsible for a Calendar Year Deductible (CYD) and then coinsurance based on the plan's charge limitations.

Out-of-Network Benefits

Out-of-network benefits are used when member receives services by a non-participating Aetna Dental PPO provider. Aetna reimburses out-of-network services based on what it determines as the Usual, Customary, and Reasonable value (UCR). The UCR is defined as the most common charge for a particular dental procedure performed in a specific geographic area. If services are received from an out-of-network dentist, the member may be responsible for balance billing. Balance billing is the difference between Aetna's UCR and the amount charged by the out-of-network dental provider. Balance billing is in addition to any applicable plan deductible or coinsurance responsibility.

Calendar Year Deductible

The Dental PPO plan requires a \$50 individual or \$150 family deductible to be met for in-network or out-of-network services before most benefits will begin. The deductible is waived for preventive services.

Calendar Year Benefit Maximum

The maximum benefit the Dental PPO plan will pay for each covered member is \$2,000 for in-network and out-of-network services combined. All services, including preventive services accumulate toward the benefit maximum. Once the plan's benefit maximum is met, the member will be responsible for charges for the remainder of the calendar year.

Mobile App

Mobile app provides on-the-go access to the dental benefit account to view benefits, download ID card, locate providers or view claims.

Aetna

Phone: (877) 238-6200 | www.aetna.com



Aetna Dental PPO Plan At-A-Glance

Network	Dental PPO/PDN with PPO II		
Calendar Year Deductible (CYD)	In-Network	Out-of-Network*	
Per Member		\$50	
Per Family		\$150	
Waived for Class I Services?		Yes	
Calendar Year Benefit Maximum			
Per Member	\$2,000		
Class I Services: Diagnostic & Preventive Care			
Routine Oral Exam (2 Per Year)	Plan Pays: 100% Deductible Waived	Plan Pays: 100% Deductible Waived (Subject to Balance Billing)	
Routine Cleanings (4 Per Year)			
Complete X-rays (1 Every 3 Years)			
Bitewing X-rays (2 Sets Per Year)			
Class II Services: Basic Restorative Care			
Fillings	Plan Pays: 90% After CYD	Plan Pays: 80% After CYD (Subject to Balance Billing)	
Simple Extractions			
Endodontics (Root Canal Therapy)			
Periodontal Services			
Class III Services: Major Restorative Care			
Crowns	Plan Pays: 60% After CYD	Plan Pays: 50% After CYD (Subject to Balance Billing)	
Bridges			
Dentures			
Anesthetics			
Oral Surgery			
Implants			
Class IV Services: Orthodontia			
Lifetime Maximum	\$2,000		
Benefit (Dependent Child(ren) and Adults)	Plan Pays: 50% Deductible Waived	Plan Pays: 50% Deductible Waived (Subject to Balance Billing)	



Locate a Provider

To find a participating provider, contact customer service or visit www.aetna.com. When searching, select the Dental PPO/PDN with PPO II network.



Plan References

***Out-Of-Network Balance Billing:** For information regarding out-of-network balance billing that may be charged by an out-of-network provider, please refer to the Out-of-Network Benefits section on the previous page.



Important Notes

- The plan's deductible and benefit maximum reset on a calendar year basis (January 1 through December 31).
- Each covered family member may receive up to four (4) routine cleanings per calendar year covered under the preventive benefit.
- For any dental work expected to cost \$200 or more, the plan will provide a "Pre-Determination of Benefits" upon the request of the dental provider. This will assist with determining approximate out-of-pocket costs should employee have the dental work performed.
- Waiting periods and age limitations may apply.
- Benefit frequency limitations may apply to certain services.



Vision Insurance

Superior Vision Plan

The Sheriff's Office offers vision insurance through Superior Vision to benefit-eligible employees and retirees. The costs per pay period for active employees and monthly costs for retirees are listed in the premium table below and a brief summary of benefits is provided on the following page. For more detailed information about the vision plan, please refer to the carrier's summary plan document or contact Superior Vision's customer service.

Vision Insurance - Superior Vision Plan

26 Payroll Deductions - Per Pay Period Cost

Tier of Coverage	Employee Premium Per Pay Period	Retiree Premium Per Month
Employee Only	\$2.75	\$5.95
Employee + Spouse	\$5.40	\$11.70
Employee + Child(ren)	\$5.29	\$11.47
Employee + Family	\$9.36	\$20.27

In-Network Benefits

The vision plan offers employees, retirees and covered dependent(s) coverage for routine eye care, including eye exams, eyeglasses (lenses and frames) or contact lenses. To schedule an appointment, employee, retiree and covered dependent(s) may select any network provider who participates in the Superior Vision National network. At the time of service, routine vision examinations and basic optical needs will be covered as shown on the plan's schedule of benefits. Cosmetic services and upgrades will be additional if chosen at the time of the appointment.

Out-of-Network Benefits

Employee, retirees and covered dependent(s) may choose to receive services from vision providers who do not participate in the Superior Vision National network. When going out of network, the provider will require payment at the time of appointment. Superior Vision will then reimburse based on the plan's out-of-network reimbursement schedule upon receipt of proof of services rendered.

Calendar Year Deductible

There is no calendar year deductible.

Calendar Year Out-of-Pocket Maximum

There is no out-of-pocket maximum. However, there are benefit reimbursement maximums for certain services.

Mobile App

Mobile app provides on-the-go access to the vision benefit account to view benefits, download ID card, locate providers or view claims.

Superior Vision

Phone: (800) 507-3800 | www.superiorvision.com



Superior Vision Plan At-A-Glance

Network		Superior Vision National	
Services		In-Network	Out-of-Network
Eye Exam		\$10 Copay	Up to \$28 Reimbursement After \$10 Copay
Contact Lens Exam (<i>Fit and Follow-up</i>)	Standard	\$30 Copay	Not Covered
	Specialty	\$50 Copay	Not Covered
Materials		\$15 Copay	Reimbursement Based on Type of Service
Retinal Imaging		Up to \$39 Copay	Not Covered
Frequency of Services			
Examination		One Per Plan Year	
Lenses		One Per Plan Year	
Frames		Every Other Plan Year	
Contact Lenses		One Per Plan Year	
Lenses			
Single		No Charge after \$15 Materials Copay	Up to \$28 Reimbursement
Bifocal		No Charge after \$15 Materials Copay	Up to \$40 Reimbursement
Trifocal		No Charge after \$15 Materials Copay	Up to \$53 Reimbursement
Frames			
Allowance		\$150 Allowance After \$15 Materials Copay 20% Off Balance Over \$150	Up to \$70 Reimbursement
Contact Lenses*			
Non-Elective (<i>Medically Necessary</i>)		No Charge	Up to \$210 Reimbursement
Elective	Conventional	\$135 Allowance 20% Off Balance Over \$135	\$100 Reimbursement
	Disposable	\$135 Allowance 10% Off Balance Over \$135	\$100 Reimbursement



Locate a Provider

To find a participating provider, contact customer service or visit www.superiorvision.com. When searching, select the Superior Vision National network.



Plan References

*Contact lenses are in lieu of spectacle lenses.



Important Notes

Member options, such as LASIK, UV coating, progressive lenses, etc. are not covered in full, but may be available at a discount.



Flexible Spending Accounts

The Sheriff's Office offers Flexible Spending Accounts (FSA) administered through P&A Group. The FSA plan year is from January 1 to December 31.

If employee or family member(s) has predictable health care or work-related day care expenses, then employee may benefit from participating in an FSA. An FSA allows employee to set aside money from employee's paycheck for reimbursement of health care and day care expenses they regularly pay. The amount set aside is not taxed and is automatically deducted from employee's paycheck and deposited into the FSA. During the year, employee has access to this account for reimbursement of some expenses not covered by insurance. Participation in an FSA allows for substantial tax savings and an increase in spending power. Participating employee must re-elect the dollar amount to be deducted each plan year. There are two (2) types of FSAs:

Health Care FSA

This account allows participant to set aside up to an annual maximum of \$3,400. This money will not be taxable income to the participant and can be used to offset the cost of a wide variety of eligible medical expenses that generate out-of-pocket costs. Participating employee can also receive reimbursement for expenses related to dental and vision care (that are not classified as cosmetic).

Listed below are examples of common expenses that qualify for reimbursement.

Sheriff's office will provide a 5% annual match of employee's plan year elected amount, not to exceed the IRS annual maximum.

Please Note: The entire Health Care FSA election is available for use on the first day coverage is effective.

Dependent Care FSA

This account allows participant to set aside up to an annual maximum of \$7,500 if single or married and file a joint tax return (\$3,750 if married and file a separate tax return) for work-related day care expenses. Qualified expenses include day care centers, preschool, and before/after school care for eligible children and dependent adults.

Please note, if family income is over \$20,000, this reimbursement option will likely save participants more money than the dependent day care tax credit taken on a tax return. To qualify, dependents must be:

- A child under the age of 13, or
- A child, spouse or other dependent who is physically or mentally incapable of self-care and spends at least eight (8) hours a day in the participant's household.

Sheriff's office will provide a 25% annual match of employee's plan year elected amount, not to exceed the IRS annual maximum.

Please Note: Unlike the Health Care FSA, reimbursement is only up to the amount that has been deducted from participant's paycheck for the Dependent Care FSA.

A sample list of qualified Health Care expenses eligible for reimbursement include, but not limited to, the following:

✓ Prescription/Over-the-Counter Medications	✓ Physician Fees and Office Visits	✓ LASIK Surgery
✓ Menstrual Products	✓ Drug Addiction	✓ Mental Health Care
✓ Ambulance Service	✓ Experimental Medical Treatment	✓ Nursing Services
✓ Chiropractic Care	✓ Corrective Eyeglasses and Contact Lenses	✓ Optometrist Fees
✓ Dental and Orthodontic Fees	✓ Hearing Aids and Exams	✓ Sunscreen SPF 15 or Greater
✓ Diagnostic Tests	✓ Injections and Vaccinations	✓ Wheelchairs
✓ Health Screenings	✓ Alcoholism Treatment	✓ Family Planning

Log on to www.irs.gov/publications/p502/index.html for additional details regarding qualified and non-qualified expenses.



Flexible Spending Accounts (Continued)

FSA Guidelines

- Employee may carry over up to \$680 of unused Health Care FSA funds into the next plan year if the employee re-enrolls. Dependent Care funds cannot be carried over.
- The Health Care FSA has a run out period at the end of the plan year (90 days) to submit reimbursement on eligible expenses incurred during the period of coverage within the plan year.
- When a plan year ends and all claims have been filed with the exception of the \$680 rollover for the Health Care FSA, all unused funds will be forfeited and not returned.
- Enrollment is only available during the Open Enrollment Period, New Hire Orientation or Qualifying Life Events.
- Funds cannot be transferred between FSAs.
- Reimbursed expenses cannot be deducted for income tax purposes.
- Employee and dependent(s) cannot be reimbursed for services not received.
- Employee and dependent(s) cannot receive insurance benefits or any other compensation for expenses reimbursed through an FSA.
- Domestic Partner's health care expenses are not eligible for reimbursement as Federal law does not recognize them as a qualified dependent.

Filing a Claim

Claim Form

Submit a completed claim form with a receipt by mail, fax, online, or via the mobile app. The IRS requires participant to keep documentation for a minimum of one (1) year.

Mobile App

Mobile app provides on-the-go access to the FSA benefit account to view account activity, file a claim and upload receipts.

Debit Card

FSA participants will receive a debit card. The card is accepted at many medical providers and pharmacies allowing direct payment instead of reimbursement requests. P&A Group may request supporting documentation for purchases; failure to provide supporting documentation when requested may result in card suspension. Please keep the issued card for use next year. Additional or replacement cards may be requested, however, a small fee may apply.



HERE'S HOW IT WORKS!

An employee earning \$50,000 elects to place \$1,000 into a Health Care FSA. The payroll deduction is \$38.46 based on a 26 pay period schedule. As a result, health care expenses are paid with tax-free dollars, giving the employee a tax savings of \$197.

	With a Health Care FSA	Without a Health Care FSA
Salary	\$50,000	\$50,000
FSA Contribution	-\$1,000	-\$0
Taxable Pay	\$49,000	\$50,000
Estimated Tax 19.65% = 12% + 7.65% FICA	-\$9,628	-\$9,825
After Tax Expenses	-\$0	-\$1,000
Spendable Income	\$39,372	\$39,175
Tax Savings	\$197	

Please Note: Be conservative when estimating health care and/or dependent care expenses. IRS regulations state that any unused funds remaining in an FSA, after a plan year ends and after all claims have been filed, cannot be returned or carried forward to the next plan year with the exception of the \$680 carry over that may be allowed for the Health Care FSA. This rule is known as "use-it or lose-it."

P&A Group

Phone: (716) 852-2611 | www.padmin.com



Basic Life and AD&D Insurance

Basic Term Life Insurance

The Sheriff's Office provides Basic Term Life insurance for all eligible employees at no cost, through The Standard. Eligible employees will receive a benefit amount of one (1) times annual salary rounded to the next higher multiple of \$1,000 to a maximum of \$200,000.

Accidental Death & Dismemberment Insurance (AD&D)

Also, at no cost to employee, the Sheriff's Office provides Accidental Death & Dismemberment (AD&D) insurance, which pays in addition to the Basic Term Life benefit when death occurs as a result of an accident. The AD&D benefit amount equals the Basic Term Life benefit, partial benefits may also be payable.

Life Insurance Imputed Income

The IRS requires the imputed cost of employer paid Employee Basic Term Life insurance benefit in excess of \$50,000 must be included as income and is subject to Federal, Social Security and Medicare taxes.

Retirees

Eligible retirees may elect to purchase Life insurance coverage at the time of their retirement in the amount of \$5,000 for \$1.75 per month. Benefit amount is not subject to any age reduction schedules.

Always remember to keep beneficiary information updated.

***Beneficiary information may be updated
at anytime through Bentek.***

The Standard

Phone: (800) 628-8600 | www.standard.com

Voluntary Life and AD&D Insurance

Voluntary Employee Life and AD&D Insurance

Eligible employee may elect to purchase additional Life and AD&D insurance on a voluntary basis through The Standard. This coverage may be purchased in addition to the Basic Term Life and AD&D coverage. Voluntary Life insurance offers coverage for employee, spouse and/or child(ren) at different benefit levels.

New Hires may purchase Voluntary Employee Life insurance without being subject to Medical Underwriting, also known as Evidence of Insurability (EOI), **up to the Guaranteed Issue amount of \$250,000.**

- Eligible employees have the opportunity during Open Enrollment to purchase or increase Voluntary Employee Life and AD&D insurance but must go through medical underwriting known as Evidence of Insurability (EOI)
- Units can be purchased in increments of one (1) to four (4) times annual salary not to exceed \$500,000, rounded to the next higher multiple of \$1,000.

Voluntary Spouse Life Insurance

New Hires may purchase Voluntary Spouse Life insurance without being subject to Medical Underwriting, also known as Evidence of Insurability (EOI), **up to the Guaranteed Issue amount of \$20,000.**

- Eligible employees have the opportunity during Open Enrollment to purchase or increase Voluntary Spouse Life insurance but must go through medical underwriting known as Evidence of Insurability (EOI)
- Spouse coverage may be purchased in the amount of \$10,000 or \$20,000 not to exceed 100% of the employee's Basic Life coverage amount.
- Per pay premium for a \$10,000 policy is \$0.462 and a \$20,000 policy is \$0.923.

Please note: Spouses who are also employed by the Sarasota County Sheriff's Office are not eligible for Voluntary Spouse Life coverage.

The Standard

Phone: (800) 628-8600 | www.standard.com



Voluntary Life and AD&D Insurance *(Continued)*

Voluntary Employee Life and AD&D Insurance Rate Table

Premium Per Pay

Age Bracket (Based on Employee Age)	Employee (Rate Per \$1,000 of Benefit)
< 25	\$0.04015
25-29	\$0.04385
30-34	\$0.05308
35-39	\$0.07800
40-44	\$0.10569
45-49	\$0.15738
50-54	\$0.19892
55-59	\$0.24369
60-64	\$0.46431
65-69	\$0.84692
70-74	\$0.96692
≥75	\$1.78846

Voluntary Dependent Child(ren) Life Insurance

- Coverage may be purchased for dependent child(ren) from birth to end of calendar year in which child(ren) reaches age 25 in the amount of \$10,000, not to exceed 100% of the employee Basic Life coverage amount.
- Cost for Voluntary Dependent Child(ren) Life coverage elected is \$0.923 per pay period for all eligible dependent children enrolled.

Please note: If both parents are employees of the Sarasota County Sheriff's Office only one parent can elect Voluntary Dependent Life coverage.

Always remember to keep beneficiary information updated. Beneficiary information may be updated at anytime through Bentek.

The Standard

Phone: (800) 628-8600 | www.standard.com

Long Term Disability

The Sheriff's Office provides Long Term Disability (LTD) insurance at no cost to all eligible employees through The Standard. The LTD benefit pays employee a percentage of monthly earnings if employee becomes disabled due to an illness or injury.

Long Term Disability (LTD) Benefits

Option 1 – Employer Paid

- LTD provides a benefit of 40% of employee's monthly earnings up to a benefit maximum of \$10,000 per month.
- Employee must be disabled for 90 consecutive days prior to becoming eligible for benefits (known as the elimination period).
- Benefit payments will begin on the 91st day of disability.
- Employee may continue to be eligible for partial benefits if employee returns to work on a part-time basis.
- The maximum benefit period is determined based on age at the time of disability.
- Benefits may be reduced by other income and may be taxable.

Long Term Disability (LTD) Benefits

Option 2 – Employee Paid

- LTD provides an option to buy-up an additional 20% for a total benefit of 60% of employee's monthly earnings up to a benefit maximum of \$10,000 per month. The rate per \$100, per pay period is \$0.104.
- Employee must be disabled for 90 consecutive days prior to becoming eligible for benefits (known as the elimination period).
- Benefit payments will begin on the 91st day of disability.
- Employee may continue to be eligible for partial benefits if employee returns to work on a part-time basis.
- The maximum benefit period is determined based on age at the time of disability.
- Benefits may be reduced by other income and may be taxable.

The Standard

Phone: (800) 628-8600 | www.standard.com



Employee Assistance Program

The Sheriff's Office cares about the well-being of all employees on and off the job and provides, at no cost, a comprehensive Employee Assistance Program (EAP) through CuraLinc. EAP offers all employees (including part-time), each member of the household and dependent child(ren) up to age 26 access to licensed mental health professionals through a confidential program protected by State and Federal laws. EAP is available to help employees gain a better understanding of problems that affect them, locate the best professional help for a particular problem, and decide upon a plan of action. EAP counselors are professionally trained and certified in their fields and available 24 hours a day, seven (7) days a week.

What is an Employee Assistance Program (EAP)?

An Employee Assistance Program offers covered employees and family members free and convenient access to a range of confidential and professional services to help address a variety of problems that may negatively affect employee or family member's well-being. Coverage includes six (6) visits with a specialist, per person, per issue, per year, unlimited telephonic consultation, online material/tools and webinars. Coverage also includes 30 minute legal consultation as well as 20-30 minute financial consultation, at no charge. EAP offers counseling services on issues such as:

✓ Child Care Resources	✓ Work Related Issues
✓ Legal Resources	✓ Adult & Elder Care Assistance
✓ Grief and Bereavement	✓ Financial Resources
✓ Stress Management	✓ Family and/or Marriage Issues
✓ Depression and Anxiety	✓ Substance Abuse

Are Services Confidential?

Yes. Receipt of EAP services are completely confidential. If, however, participation in the EAP is the direct result of a Management Referral (a referral initiated by a supervisor or manager), we will ask permission to communicate certain aspects of the employee's care (attendance at sessions, adherence to treatment plans, etc.) to the referring supervisor/manager. The referring supervisor/manager will not receive specific information regarding the referred employee's case. The supervisor/manager will only receive reports on whether the referred employee is complying with the prescribed treatment plan.

Onsite dedicated counselor

Lindsey Zevallos

www.supportlinc.com/sarasota-county-sheriffs-office-appointment-scheduler

CuraLinc

Phone: (800) 490-1585 | www.supportlinc.com

Group Code: sarasotasheriff

Aetna Behavioral Health AbleTo

AbleTo is a convenient program to help manage life's changes. Aetna has teamed up with AbleTo, a leading behavioral health care provider, to offer a convenient 8-week program offering counseling or coaching by phone or video. This benefit is provided through your Aetna Medical plan but it's not like traditional programs. It makes it easy to get the help you need, when you need it.

Meet face-to-face with a therapist and behavior coach using online video or simply talking on the phone, if you prefer. This saves you travel time and you choose the times that work best for you. During the day, in the evening or on weekends.

The goal is to make it easy for you to complete the program and to help you see that you are in control and can make healthy changes. For more information call AbleTo at (844) 330-3648.

Aetna Behavioral Health AbleTo

Phone: (844) 330-3648 | www.aetna.com



Supplemental Benefits

Allstate Benefits

Allstate Benefits offers a variety of voluntary supplemental plans that may be purchased separately on a voluntary basis and premiums paid by payroll deduction. Allstate Benefits pays money directly to members, regardless of what other insurance plans they may have. To learn more about these Allstate Benefits plans and/or to schedule a personal appointment, contact the Sheriff's Office local Allstate Benefits Agent.

Available Allstate Benefits plans include coverage for:

- ✓ Accident
- ✓ Cancer
- ✓ Critical Illness

Allstate Benefits

Phone: (800) 521-3535 | www.allstatebenefits.com/mybenefits

Legal Insurance

The Sheriff's Office employees have the opportunity to enroll in a voluntary pre-paid legal program provided by LegalShield. By enrolling in this plan, a participant will have direct access to attorneys who will provide legal assistance, 24 hours a day, seven (7) days a week, for a variety of situations that include:

✓ Divorce	✓ Criminal Defense
✓ Adoption	✓ Traffic Tickets
✓ Civil Litigation	✓ Wills & Living Trusts
✓ Child Custody and Support	✓ Real Estate
✓ Bankruptcy	✓ Credit Report Issues
✓ Name Changes	✓ Contract Review

This includes coverage for the entire household including spouses and dependent children (Up to age 21; if full-time student to age 23 or disabled children covered to any age living with parent) regardless of the number of eligible dependents enrolled in the plan. Plan benefits include unlimited phone consultations, free preparation of standard and living will, review of legal documents, letters / phone calls to third parties on the employee's behalf and much more. The plan is \$6.90 per pay period. To learn more about the plan, contact customer service at (800) 729-7998 or visit LegalShield online at www.legalshield.com.

LegalShield

Phone: (800) 729-7998 | www.legalshield.com

ID Theft Insurance

The Sheriff's Office offers the option to enroll in a voluntary pre-paid Identity Theft program provided by Allstate Identity Protection. The plan has no age limits with a generous Under Roof/Under Wallet participant definition that provides protection for the whole family and acceptance of all pre-existing conditions. A dedicated Privacy Advocate reduces stress, handles alert escalations, contacts merchants and more to remediate on behalf of the employee. The individual cost for this plan is \$3.67 per pay and the family plan is \$6.44 per pay. Allstate Identity Protection includes 24 hours day, seven (7) days a week customer care and assists with identity protection and restoration such as, credit report monitoring, credit score analysis, fraud alerts, restoration and much more.

For questions or additional information please contact Allstate Identity Protection or Human Resources.

Allstate Identity Protection

Phone: (800) 789-2720 | www.myair.com

Miscellaneous

Payroll deductions for the following items are offered for employee's convenience:

- ✓ Florida Prepaid College Program
- ✓ Florida PBA dues
- ✓ FOP dues
- ✓ YMCA membership dues (North and/or South County)

Please contact Payroll for additional information at (941) 861-4828.



Pet Insurance

MetLife

The Sheriff's Office offers full time, part time employees and retirees the opportunity to purchase pet insurance on a voluntary basis through MetLife. The plan allows members to visit any licensed vet or specialist, and may receive up to 100% reimbursement from MetLife on vet bills. Also, included at no additional cost is MetLife 24/7 access to Telehealth Concierge Services.

MetLife

Phone: (800) 438-6388

Pet Insurance Site: www.metlifepetinsurance.com
Enrollment Site: www.metlife.com/getpetquote

Farmers Insurance Offerings

Farmers Insurance offers a variety of supplemental insurance plans that may be purchased separately on a voluntary basis for full time, part time employees and retirees. When calling Farmer's Insurance mention the Sheriff's discount code FHD.

- ✓ Auto
- ✓ Boat
- ✓ Renters
- ✓ Recreational Vehicle (RVs)
- ✓ Motorcycle
- ✓ Personal Excess Liability

Farmers Insurance

Phone: (800) 438-6381 | www.farmers.com/groupselect

Q&A

Claims, Billing & Benefit Assistance

If employees have questions on claims, receive bills from providers which they do not understand or would like general information on any of the employee benefits provided, please contact the Gehring Group Service Team or the Onsite Aetna Representative.

The Service Team works directly with the Sheriff's Office and its employees to provide claims and benefits service and will assist employees with their concerns. Please remember this is in addition to the Human Resources Bureau and is not replacing assistance employee may need from Human Resources or the Onsite Aetna Representative.

Employee may contact a claims specialist by:

1. Email: sarsaotasheriff@gehringgroup.com

Please include your name, contact information and a brief description of the issue. A Claims Specialist will respond via email or phone to gather additional information.

OR

2. Call: (800) 244-3696

When calling, please identify yourself as an employee of the Sarasota County Sheriff's Office and ask to speak to a Claims Specialist or another member of the Sheriff's Office designated team to assist with questions or concerns.

Office hours are Monday through Friday, 8:30am – 5:00pm (EST). If calling after office hours, please leave a message indicating you are a Sarasota County Sheriff's Office employee who would like to speak to a Claims Specialist. Please leave full name, contact information and a brief message and a Claims Specialist will be in contact with you the following business day.

Our goal is to be your advocate and ensure issues are resolved as quickly as possible.

Employees may also call the Onsite Aetna Representative, Glendy Alvarez by calling (941) 861-4893 between the hours of 8:30am - 5:00pm.



Notes

Use this section to make notes regarding personal benefit plans or to keep track of important information such as doctors' names and addresses or prescription medications.



3500 Kyoto Gardens Drive, Palm Beach Gardens, Florida 33410
Toll Free: (800) 244-3696 | Fax: (561) 626-6970 | www.gehringgroup.com

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