

Employee Benefits Guide

Plan year Jan. 1–Dec. 31, 2023



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CARRIERS	PHONE	WEBSITE
Medica	1-855-727-5178	www.medica.com
MetLife	1-800-942-0854	www.metlife.com/insurance/ dental-insurance
EyeMed	1-866-804-0982	www.eyemedvisioncare.com
Alerus	1-800-433-1685	www.alerusrb.com
PERA	651-296-7460	www.mnpera.org
MSRS/HCSP/ MN Deferred Compensation	1-800-657-5757	www.msrs.state.mn.us
National Insurance Services/Madison Life	1-500-627-3600 x1365	www.nisbenefits.com
Nationwide	1-877-669-6877	www.nationwide.com
MissionSquare Retirement	1-866-731-1053	www.icmarc.org
AFLAC - Leesa Churchill	612-991-5850	www.aflac.com
John Hancock via Edward Jones	1-800-395-1113	www.johnhancock.com



City staff enjoy an employee picnic together in summer 2022.

The City of Shakopee is committed to support you during the moments that matter most. We are proud to provide a rich and diverse selection of benefits as part of our compensation package.

This guide is designed to help you understand each benefit, so you can make decisions that are best for you and your family.

You will also find information about additional education, leave and wellness benefits available to you as a city employee.

EMPLOYEES

All full-time employees and part-time employees authorized to work at least 30 hours per week are eligible for benefits. Employees who are covered with another carrier (spouse, parent, veteran insurance) may waive by completing the necessary forms or select double coverage.

DEPENDENTS

When you enroll in a medical, dental, vision and/or dependent life insurance plan, you may also elect coverage for:

- Your children up to age 26 regardless of student or marital status
- · Your legal spouse

ENROLLMENT INFORMATION

Open enrollment and new hire enrollment

are your opportunity to elect or waive medical, dental, vision and supplemental life insurance coverage, as well as participate in the Health Savings and/or Flexible Spending Accounts. When choosing the benefit options that are right for you and your family, consider the following:

MEDICAL, DENTAL

best for you and your family?

your needs?

Do you want to enroll in

HSA AND FSA OPTIONS

Do you expect to have child care expenses that could be reimbursed by FSA Dependent Care pre-taxed dollars?

How much do you want to contribute to your health savings account if you have a high-deductible plan?

Do you need to add or update beneficiary designations for your life insurance and Health

STATUS CHANGES

Outside of the annual enrollment period, you can only add or drop coverage and/or dependents when you have a status change. Qualifying events include:

- · Marriage or divorce
- Birth of a child or adoption
- Death of a dependent
- Gain or loss of a spouse's coverage
- Change in your spouse's employment status

HOW TO REQUEST A CHANGE

Notify Human Resources within 30 days of the qualified change-in-status event.

Provide documentation to support the requested change.

Ensure the change is permitted under the terms of the plan document or insurance contract.

Coverage begins the first of the month following the qualified event, unless the change is due to birth, adoption or marriage, in which case coverage is effective on the date of the event.

& VISION QUESTIONS

Which medical plan will work

Which medical network fits

dental or vision plans?

IMPORTANT REMINDERS

Savings Account (HSA)?

Do you need to cover eligible family members under your health or insurance benefits?

ANNUAL OPEN ENROLLMENT **ONLINE**

- Open enrollment takes places annually in early November through Employee Self Service (ESS) at www.jde.logis.org
- All benefits-eligible employees, including those electing no coverage, must make their benefit selections for the following year.
- Benefit elections will be effective Jan. 1 of each year.
- Questions? Contact the Human Resources Division Monday-Friday 8 a.m. to 4:30 p.m.

NEW HIRE ENROLLMENT IN-PERSON

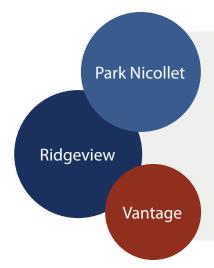
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- Information provided during new hire orientation
- You must submit your enrollment within 30 days of your hire date.
- You will not be able to make any changes to your elections until the next open enrollment period, unless you have a qualifying life event.
- Your elected benefits will be effective the first of the month following date of hire.

IWO WAYS TO ENROLL

NFTWORKS

When it comes to health care, everyone loves having choices. With five different Medica networks to choose from, you and your family can find the medical services that best meet your needs.



The Park Nicollet, Ridgeview and Vantage networks are Accountable Care Organizations (ACOs). ACOs are networks or teams of health care providers (such as clinics, hospitals, doctors, and specialists) that collaborate with Medica to make health care more efficient and improve the member experience. Specialty doctors may require a referral from your primary care provider and that referral is likely to be to a specialist within that care system; you can be referred outside this network, which would be covered as in-network.

- Smaller networks
- · Significant cost saving products
- Better member engagement and care coordination

Elect

The Elect network is organized around care systems, including Allina. The Elect network requires you to identify a primary care clinic on your enrollment form and to notify Medica if you wish to change to a different primary care clinic.

Passport

The Passport network is a larger, open-access network in which individuals may see any provider within the Passport network without seeking a referral.

IT PAYS TO STAY IN NETWORK!

During your benefit enrollment period, carefully consider your medical plan elections and ensure your preferred providers are in network to avoid additional costs later.

Find out if your physician or facility are in network by visiting medica.com/ members. Select your desired plan and use the "Find a physician or facility" link available in that plan.

WHEN CHOOSING A NETWORK CONSIDER:



Do I need to see a specialist frequently?



Is it important to keep my current doctor?



Is this network big enough for my family's needs?

HOW MY HEALTH CARE PLAN WORKS



BEGINNING OF THE YEAR

Medica pays for preventive care services throughout the year at no cost to you.

You pay full cost or copays of certain services like office visits and urgent care.

You pay for other medical costs until you reach your deductible.



ONCE YOU'VE MET YOUR DEDUCTIBLE

You continue to pay coinsurance and copays until you meet your out-ofpocket-maximum.

If there is more than one person in your plan, you may have to meet 2 party or family, as well as individual out-of-pocket-maximums.

ONCE YOU'VE MET YOUR OUT-OF-POCKET MAXIMUM(S)

Medica pays for all other covered services. You won't owe a thing.

END OF THE YEAR

Your deductible and out-of-pocket cost reset for the next year.

THE PLANS

The city offers two high-deductible plans under each of our networks and one traditional plan under the Park Nicollet and Passport networks. The city contributes 100 percent of the monthly Park Nicollet/Ridgeview ACO premium for single coverage on the HDHP and a smaller percentage for all other coverages. You then pay the plan difference. This is how they compare:

	1500/3000 HIGH DEDUCTIBLE	3000/6000 HIGH DEDUCTIBLE	TRADITIONAL	
Annual Deductible	\$1,500 per individual \$3,000 2-party/family	\$3,000 per individual \$6,000 2-party/family	\$500 per individual \$1,000 2-party/ family	
Coinsurance	In network, you pay 10%	In network, you pay 10%	In network, you pay 20%	
Out-of- Pocket Maximum	In network, you pay no more than: \$2,500 per individual or \$4,900 per family	In network, you pay no more than: \$3,650 per individual or \$7,300 per family	In network, you pay no more than: \$2,750 per individual or \$5,500 per family	
Preventative Services	\$0	\$0	\$0	
Office Visits Prescription Medications	You pay full cost of visit until you meet the annual deductible, then you	You pay full cost of visit until you meet the annual	\$25 co-pay, which does not apply toward deductible	
List available at Medica.com	List available at		deductible, then you pay coinsurance	Generic \$10 Preferred \$25 Non-preferred \$50
			Specialty preferred 20% coinsurance no more than \$200	
			Specialty Non- preferred 40%	
Health Care Accounts	Health Savings Account (HSA) Limited Purpose FSA Dependent Care FSA	Health Savings Account (HSA) Limited Purpose FSA Dependent Care FSA	Flexible Spending Account (FSA) Dependent Care FSA	

Employees who have single coverage on an HDHP will receive \$750 towards their HSA account. Those that have two-party or family coverage will receive \$1,500 towards their HSA account. Employees on the Traditional plan do not receive an HSA contribution.

3000/6000 DEDUCTIBLE, HEALTH SAVINGS ACCOUNT PLAN **VANTAGE** PARK NICOLLET/RIDGEVIEW **EMPLOYER EMPLOYEE** SEMI-MONTHLY **EMPLOYER EMPLOYEE** SEMI-MONTHLY **TOTAL TOTAL Employee** \$548.19 \$548.19 \$0.00 **Employee** \$548.19 \$548.19 \$0.00 Employee+1 \$1,096.38 Employee+1 \$1,096.38 \$61.29 \$30.65 \$1,035.09 \$61.29 \$1,035.09 \$30.65 \$1,451.25 \$1,748.11 \$1,451.25 Family \$1,748.11 \$296.86 \$148.43 **Family** \$296.86 \$148.43 **PASSPORT ELECT** TOTAL **EMPLOYER EMPLOYEE** SEMI-MONTHLY TOTAL **EMPLOYER EMPLOYEE** SEMI-MONTHLY \$564.31 \$564.31 **Employee** \$0.00 **Employee** \$644.93 \$627.61 \$17.32 \$8.66 Employee+1 \$1,128.62 \$1,010.04 \$118.58 \$59.29 Employee+1 \$1,289.85 \$1,076.20 \$213.65 \$106.83 Family \$1,799.53 \$1,416.50 \$383.03 \$191.52 **Family** \$2,056.60 \$1,509.79 \$273.41 \$546.81 1500/3000 DEDUCTIBLE, HEALTH SAVINGS ACCOUNT PLAN PARK NICOLLET/RIDGEVIEW VANTAGE SEMI-MONTHLY **TOTAL EMPLOYER EMPLOYEE TOTAL EMPLOYER EMPLOYEE** \$605.83 \$605.83 \$592.76 \$6.54 **Employee** \$592.76 \$13.07 \$6.54 **Employee** \$13.07 Employee+1 \$1,211.65 \$1,038.64 \$173.01 \$86.51 Employee+1 \$1,211.65 \$1,038.64 \$173.01 \$86.51 \$1,931.91 \$237.58 \$237.58 **Family** \$1,456.75 \$475.16 **Family** \$1,931.91 \$1,456.75 \$475.16 **ELECT PASSPORT** TOTAL **EMPLOYER EMPLOYEE** SEMI-MONTHLY TOTAL **EMPLOYER EMPLOYEE** SEMI-MONTHLY **Employee** \$623.64 \$591.10 \$32.54 \$16.27 **Employee** \$712.74 \$629.70 \$83.04 \$41.52 Employee+1 \$1,247.29 \$1,013.64 \$233.65 \$116.83 Employee+1 \$1,425.47 \$1,080.26 \$345.21 \$172.61 **Family** \$1,988.73 \$1,422.07 \$566.66 \$283.33 **Family** \$2,272.84 \$1,516.11 \$756.73 \$378.37 TRADITIONAL PLAN **PARK NICOLLET PASSPORT** SEMI-MONTHLY SEMI-MONTHLY **TOTAL EMPLOYER EMPLOYEE TOTAL EMPLOYER EMPLOYEE** \$228.96 **Employee** \$660.58 \$548.19 \$112.39 \$56.19 **Employee** \$777.15 \$548.19 \$114.48 Employee+1 \$1,321.16 \$1,035.09 \$286.07 \$143.03 **Employee+1** \$1,554.30 \$1,035.09 \$519.21 \$259.60 **Family** \$2,106.51 \$1,451.25 \$655.26 \$327.63 **Family** \$2,478.25 \$1,451.25 \$1,027.00 \$513.50



DENTAL & VISION

DENTAL INSURANCE

Dental coverage is available through MetLife. You have the freedom to select the dentist of your choice; however, when you visit a participating, in-network dentist, you will have lower out-of-pocket costs.

The city contribution toward dental insurance is equal to the cost of single coverage (\$39.90).

For a listing of dentists associated with each plan, please visit www.metlife.com/stories/dental-insurance and select "Find a Dentist."

2023 MONTHLY PLAN RATES

Single	\$0
2-Party	\$45.08
Family	\$81.37

PLAN OPTIONS	IN-NETWORK	OUT-OF-NETWORK
Annual Deductible Amount you must pay before the plan begins to pay benefits (waived for preventive, diagnostic, and orthodontia services)	\$0 \$25 individual \$75 family	
Annual Benefit Maximum Maximum amount the plan will pay in a year; does not include preventive & diagnostic or orthodontia services	Plan pays \$2,000 per person each calendar year	
Preventive & Diagnostic Services Oral exams, cleanings, x-rays, fluoride treatments	Covered at 100%	
Basic Restorative Services Fillings, sealants, space maintainers	Covered at 80%	
Major Services, Repairs & Adjustments Crowns, dentures, bridges	Covered at 50% after deductible, if out-of-network	
Lifetime Orthodontic Maximum \$1,000 per dependent child up to age 19	Covered at 50%	

VISION INSURANCE

Your sight is important, and we want to help you protect it. You receive one annual preventive eye exam through your medical coverage election. We offer additional vision coverage with EyeMed at an affordable rate.

Here are some of the benefits:

- \$10 co-pay for an eye exam (once every 12 months)
- \$150 frame allowance (once every 24 months)
- Co-pays for lenses and lens options (once every 12 months)
- \$130 allowance for contact lenses (once every 12 months)
- · Discounts on laser vision correction
- · Additional discounts when you buy multiple pairs of eyewear

2023 MONTHLY PLAN RATES

Single	\$6.40
Employee + Spouse	\$12.14
Employee + Child(ren)	\$12.78
Family	\$18.79

LEAVE & DISABILITY

SICK LEAVE

We get it! Life happens and sometimes your body can't take it. That's why we offer sick time.

Sick leave may be accrued to a maximum of 960 hours.

Days/Year

SICK LEAVE CONVERSION

If you have more than 160 sick hours, you can convert up to 60 hours to vacation time at a 3:1 ratio.

3 sick hours = 1 vacation hour

SICK LEAVE DONATION

We know you are generous and have a big heart. If you ever have more sick time than with which you know what to do, feel free to voluntarily donate it to someone who has exhausted all paid leave due to a medical emergency.

TRADE TIME FOR FITNESS

Our Wellness Committee offers a unique program in which benefits-eligible employees may cash out a portion of their accrued sick leave to be reimbursed for the cost of wellness-related expenses. For more information, see CityNet.



ADDITIONAL TYPES OF LEAVE



FAMILY MEDICAL LEAVE





MILITARY LEAVE



VOTING LEAVE



LONG-TERM DISABILITY

The city provides all benefits-eligible employees with long-term disability insurance that takes effect after a disabled employee has been unable to work for 180 days.

If you're interested in having some form of insurance that would take effect sooner, we offer Aflac.

SHORT-TERM DISABILITY

You can purchase several different types of insurance policies from Aflac, including short-term disability. These are customizable policies that let you decide when the policy takes effect and how much income you want to cover.

REMINDER

Aflac is not subject to the open enrollment period and can be added or adjusted at any time throughout the year.

LIFE INSURANCE

The city provides \$25,000 in life insurance and \$25,000 in accidental death and dismemberment insurance for all benefits-eligible employees, plus \$5,000 in coverage for spouses and \$2,000 for dependent children age 6 months and older.

Want more insurance? We have options.





This life insurance costs \$16 per month. You are automatically eligible for this coverage, without any medical questionnaires or exams. This is a decreasing term life insurance, meaning the amount of coverage decreases as you age, even though the monthly premium remains the same. The following is a listing of the coverage provided at different ages:

MEMBER'S	EMPL	OYEE	SPOUSE/		
AGE AT TIME OF CLAIM	TERM LIFE INSURANCE	AD&D*	DOMESTIC PARTNER	CHILD(REN)	
Less than 25	\$225,000	\$100,000	\$20,000	\$4,000	
25–29	\$170,000	\$100,000	\$20,000	\$4,000	
30–39	\$100,000	\$100,000	\$20,000	\$4,000	
40–44	\$65,000	\$100,000	\$18,000	\$4,000	
45–49	\$40,000	\$100,000	\$15,000	\$4,000	
50-54	\$30,000	\$100,000	\$10,000	\$4,000	
55–59	\$18,000	\$100,000	\$7,000	\$4,000	
60-64	\$12,000	\$100,000	\$5,000	\$4,000	
65 and over	\$7,500	\$7,500	\$4,000	\$4,000	

^{*}AD&D stands for Accidental Death and Dismemberment. This is an additional amount (on top of the term life insurance) paid out if the death is due to a covered accident.



You can purchase additional coverage through Madison Life. New employees are not subject to health history questionnaire. However, employees wishing to increase coverage must fill out the questionnaire.

Under this plan, you select the amount of coverage you want, in \$5,000 increments up to a total of \$100,000 in supplemental coverage, which includes accidental death and dismemberment.

AGE BAND	RATES (PER \$1,000)
Under 25	.08
25–29	.09
30–34	.11
35–39	.12
40–44	.15
45–49	.23
50–54	.33
55–59	.54
60-64	.71
65-69	1.30
70–74	2.09
75–79	3.59
80+	5.40

HEALTH CARE ACCOUNTS

Pre-tax health care accounts can help you off-set many medical related expenses such as co-pays, prescriptions, contact lenses and more. Better yet, it's pre-taxed and tax free when you use the funds.

HEALTH SAVINGS ACCOUNT

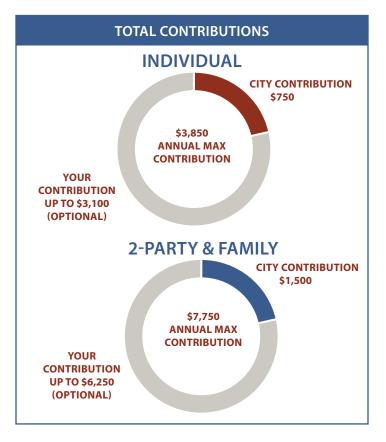
We make an annual contribution to your account when you select a high-deductible medical plan. You can also contribute an additional amount to help you cover all your expenses. You may front-load your HSA contributions to ensure that funds are available early in the year or spread contributions throughout the year.

Employees over the age of 55 can contribute an additional \$1,000 (over the annual limits listed below) into their HSA.

WHO IS ELIGIBLE FOR HSA COVERAGE?

You are eligible to open and contribute to an HSA if:

- You are covered by an HSA qualifying high deductible health plan (HDHP)
- You are not covered by any other health plan that is not a high deductible plan
- You are not enrolled in Medicare, TRICARE or TRICARE for Life
- You are not claimed as a dependent on someone else's
- You are not covered by a health care flexible spending account (FSA)
- You have not received Veterans Administration (VA) benefits within the past three months, except for preventive care. If you are a veteran with a disability rating from the VA, this exclusion does not apply.



FLEXIBLE SPENDING ACCOUNT (FSA)

You can also select a FSA (full or limited) for even more savings.

MEDICAL FSA

The maximum annual contribution for medical FSA is \$3.050 per account (not household) for 2023. Employees can either have a Full or a Limited Purpose FSA. You are allowed to carry \$500 to the next year.

Full FSA: If you are not enrolled in either a high-deductible health plan or do not have a Health Savings Account, you are entitled to an FSA. It can be used for approved medical, dental and vision expenses.

Limited Purpose FSA: If you do have an HSA but also want a FSA, you can only be approved for the Limited FSA. Funds are limited for dental and vision expenses.



DEPENDENT CARE FSA

For dependent care FSAs, the maximum contribution is \$5,000 per household if married and filing jointly or if you are single. If you are married and file separate tax returns, the maximum contribution is \$2,500.

RETIREMENT

Planning for retirement doesn't have to be scary. We've got your back with plans that are easy to understand and manage.



MANDATORY

PERA-PUBLIC EMPLOYEE RETIREMENT ACCOUNT

- Administers statewide public employee pension plan
- Employees and city contribute a set percentage of gross salary, as determined by the Minnesota Legislature.

CONTRIBUTION

- General staff: Employees 6.5%; City 7.5%
- Police and Fire: Employees 11.3%; City 16.95%

MANDATORY

HCSP - HEALTH CARE SAVINGS PLAN

 Tax-free medical saving account available when your employment ends for reimbursements of eligible health care expenses

CONTRIBUTION

- The city contributes \$45/month (\$540 annually).
- You contribute a fixed percentage after your first year anniversary, which increases with years of service.
- Union employees' contribution varies and are negotiated upon contact renewals.
- A percentage of your sick time accrual is deposited at the time of separation or retirement for eligible employees.

VOLUNTARY

457 DEFERRED COMPENSATION

- Available through Nationwide, MissionSquare, John Hancock via Edward Jones and MNDCP (Minnesota Deferred Compensation)
- The best thing is you can enroll and make changes any time during the year.
- For more information, visit their websites or stop by the HR office to pick up an informational package.

CONTRIBUTION

- The city does not contribute to deferred compensation plans.
- You may set and change your contribution any time during the year. Contribution changes are effective the month following the change.

VOLUNTARY

PAYROLL ROTH IRA

- Account compatible with retirement plans used to reach a variety of savings goals
- You may set and change your contribution any time during the year.
- Available through MissionSquare

CONTRIBUTION

- You have the flexibility to withdraw contributions at any time with no taxes or penalties.
- The city does not contribute to Roth IRAs.

ADDITIONAL BENEFITS



CONTINUOUS YEARS OF SERVICE	NON-EXEMPT STAFF	EXEMPT STAFF
0–5 years	80 hours	120 hours
6–15 years	120 hours	160 hours
16–20 years	160 hours	200 hours
21+ years	+ 8 hours for each year over 20 to maximum of 200 hours	+ 8 hours for each year over 20 to maximum of 240 hours

HOLIDAY	OBSERVED
New Year's Day	Jan. 1
Martin Luther King Jr.'s Birthday	Third Monday in January
Presidents Day	Third Monday in February
Memorial Day	Last Monday in May
Independence Day	July 4
Labor Day	First Monday in September
Veterans Day	Nov. 11
Thanksgiving	Fourth Thursday in November
Day after Thanksgiving	Fourth Friday in November
Christmas Eve	Dec. 24
Christmas Day	Dec. 25
Floating Holiday	One day per calendar year with supervisor approval

CONTINUING EDUCATION

Are you looking to start or continue your education? We know this is an important decision and we want to support your efforts every step of the way. This can mean up to \$3,000 a year. Here are the steps you need to follow:



Course is job related, and you checked department budget for available funds.

PRE-APPROVAL

Use Tuition Pre-Approval Form to receive approval from department head and City Administrator.

You did it! You completed the course

COMPLETION

with a C or above

for technical and undergraduate, B or above for graduate school.

Submit forms, proof of completion and itemized receipt.

REIMBURSEMENT

Tuition reimbursement covers the cost of tuition expenses, not books and

materials.

Stick with us for two years after you complete the course.

ELIGIBILITY

You can find more information about our policy by reviewing the employee handbook on CityNet.

WELLNESS PROGRAMS

WELLNESS PROGRAMS

Focusing on wellness is investing in your health, which can save you money in the long run. When you're in good health and feel well, you can be your best at home and at work.

MY HEALTH REWARDS INVEST

Medica offers a program where you can earn up to \$75 in your HSA per month (up to \$900 per calendar year) by meeting three monthly wellness goals. Log on to www.mymedica.com for more information.

EMPLOYEE ASSISTANCE

Our Employee Assistance Program can help you find answers and resources when

life doesn't go according to plan. This service is free to you, as part of your benefit plan. Calls and conversations with EAP specialists are confidential, in accordance with the law. You are also eligible for five free face-to-face counseling sessions. You do not need to be a Medica member to participate.

Specialist are available 24 hours a day, 7 days a week, 365 days a year at 1-800-626-7944 or online at www.medica.com/ wellness/employee-assistance-program.

WELLNESS ACTIVITIES

The City of Shakopee is also committed to your health and wellbeing. Through our Wellness Committee you'll experience numerous fun and educational activities all year long that will help you stay connected, fit and live a balanced lifestyle.



MEMBERSHIP PERKS:

- Fitness center (cardio, free weights, weight machines) and classes
- · Indoor Aquatic Center (open swim, lap swim, classes, sauna, whirlpool)
- Shakopee Ice Arena (open skating, hockey)
- The Lookout Indoor Playground, Kids Cove child care
- Gymnasiums, walking track

COMMUNITY CENTER MEMBERSHIP

Did you know you are eligible for a free membership to the Shakopee Community Center?

All employees can receive a free individual membership or upgrade to a family membership (spouses and/or children) for an additional cost.

The membership is a free health benefit to all employees and is considered taxable income. The annual cost of an individual membership (\$399) must be added to your gross income, resulting in a slight increase in federal and state, FICA and Medicare withholdings.

Membership forms are available at the Community Center.

UPGRADE TO A FAMILY **MEMBERSHIP**

Pay the difference between an individual (\$399) and family (\$630) membership. The difference must be paid upfront when purchasing a membership.