



2025 EMPLOYEE BENEFITS GUIDE



PDCM
INSURANCE

SMARTER.

Welcome!

The City of Marion strives to provide you and your family with a rich and comprehensive benefits package. We want to make sure you're getting the most out of our benefits—that's why we've put together this Benefit Guide.

This guide will outline all of the different benefits the City of Marion offers, so you can identify which offerings are best for you and your family. If you have questions about any of the benefits mentioned in this guide, please don't hesitate to reach out to Human Resources or PDCM Insurance.

Please refer to carrier and employer plan documents for details. If there is a discrepancy between these summaries and the written legal plan documents, the plan documents shall prevail. This booklet and plan summaries do not constitute a contract of employment.

Eligibility

Eligible Employee

Eligible employees are those who are not in a temporary status and who are regularly scheduled to work at least 30 hours per week, unless otherwise specified in the plan documents.

**Police and Fire Unions are not eligible for Long-Term Disability Benefits as they are covered under Iowa Code Chapter 411*

**Marion Water Department employees are not eligible for any FSA benefits or Equitable Deferred Comp.*

Eligible Dependent

Eligible employees have the option to enroll eligible dependents, which include:

- Legal Spouse, domestic partners are not eligible
- Dependent Child, married or unmarried, up to age 26 (for health, dental and vision)
- Dependent Child, an unmarried full-time student, regardless of age (for health, dental and vision)
- Dependent Child, disabled before age 26 and remains unmarried after age 26

Waiting Period for New Hires

Employees are eligible for benefits on the first of the month following eligibility date (i.e. new hire date). You must enroll yourself and your dependents within 30 days.

Open Enrollment

The City of Marion holds an Annual Open Enrollment period and during this time, employees have the opportunity to make changes to enrollment selections without cause. Examples of such changes include electing a benefit for the first time or adding a dependent who was not previously covered.

Changes During the Year

Choose your benefits carefully. Benefits and reimbursement account contributions made on a pre-tax basis may not be changed mid-year unless you experience a qualified life event, per IRS regulations.

Qualified life events include, but are not limited to:

- Marriage or divorce
- Birth or adoption of a child
- Death of a spouse or child
- Loss of dependent status (such as attainment of age 26)
- Involuntary loss of coverage
- Eligibility for premium assistance under Medicaid or CHIP
- Termination of Medicaid or CHIP coverage

You must contact HR within 30 days of the Qualifying Event if you wish to change your benefit elections. With eligibility for Medicaid or CHIP or termination of Medicaid or CHIP, you have 60 days to contact HR. Written documentation supporting your eligibility to make changes may be required.

Health Insurance Resources & Tools

MyWellmark —online or mobile app!

Your personal health care information is at your fingertips with myWellmark® — no matter your location — with tools, resources, and insights to help you manage health care spending and live a healthier life. Visit www.mywellmark.com to get started.

Get the information you need

- Find an in-network provider near you
- Know what your visits will cost before you go
- See how close you are to meeting your deductible and out-of-pocket maximum

Keep tabs on claims and spending

On your personalized myWellmark, you'll see an at-a-glance overview of recent claims activity and whether a claim is paid, pending, or denied (and why). Need more details, including your share of the cost? Just click on any claim.



GETTING STARTED IS EASY.

- 1 Download the Doctor On Demand™ app or visit DoctorOnDemand.com.
- 2 Have your Wellmark member ID card ready.
- 3 Create an account or sign in.

Doctor on Demand: Virtual Care

Ever wish you had a doctor friend you could call up for incidentals or situations where you know what the issue is and you just need a medication to clear it up? Well with Doctor on Demand, you have that friend! Available through the Wellmark Health Insurance, access Doctor on Demand by phone 24 hours a day, 7 days a week, 365 days a year!

Access a doctor by calling 800-997-6169 or using the Doctor on Demand app!

- Cold & Flu
- Bronchitis & Sinus Infection
- Sore Throat
- Fever
- Headache

IDX Identity Protection

Your Wellmark health insurance coverage keeps you safe, secure and protected from more than the cost of health care. Just by being a member, you and your dependents have exclusive, free access to identity protection services called IDX Identity. It's just another way you get more as a Wellmark member.



Monitor your credit record.



Keep track of your online activity 24 hours a day, seven days a week.



Have access to complete identity recovery if fraudulent activity is found.

Blue365 — Exclusive Wellness Discounts

By being a Wellmark member, you have access to Blue365. Members get exclusive discounts on wellness products and services, like fitness trackers, eyeglasses and athletic shoes. Sign up at wellmark.com/blue365.



Health Insurance Network

Visit www.wellmark.com to find a provider or use your myWellmark online account or mobile app.

	Wellmark Blue PPO
Coverage Area	National Coverage
Coverage of Iowa Hospitals	100% of All Iowa Hospitals
Coverage of Iowa Physicians	99% of Iowa Physicians
Out of Network Coverage	Included, Additional Costs May Apply
Emergency Care	Covered at the In Network Level
Mayo Clinic	Included In Network

Preventive Care Services

Preventive care services are those linked to routine wellness exams and screenings. Non-preventive services are those considered diagnostic or treatment for an illness, injury or other medical condition.

If a preventive screening reveals a condition, it might no longer qualify as preventive care and could be classified as diagnostic, potentially affecting coverage.

Preventive care is covered at 100% in-network. The US Preventive Services Task Force maintains a list of preventive services that all Health Care Reform compliant plans should cover at 100% for in-network providers. The following is a list of common services:

- Routine physical exam
- Well baby
- Immunizations
- Cholesterol screenings
- Mammograms
- Pap smears/pelvic exams
- Colonoscopies
- Prostate test
- Lab procedures
- Domestic violence screening
- Breastfeeding supplies
- Contraception
- Smoking cessation



Health Insurance

<i>In-Network Benefits Unless Otherwise Noted</i>		Traditional Plan	High-Deductible Health Plan (HDHP)
Network		PPO	PPO
Embedded or Non-Embedded		Embedded	Embedded
Deductible (Individual/Family)	In Network	\$1,000/\$2,000	\$3,300/\$6,600
	Out of Network		\$6,600/\$13,200
Coinsurance (Carrier/Member)	In Network	80%/20%	Not Applicable
	Out of Network	70%/30%	Not Applicable
Out-of-Pocket Maximum (Individual/Family)	In Network	\$2,000/\$4,000	\$3,300/\$6,600
	Out of Network		\$6,600/\$13,200
Primary Care Provider		20% Coinsurance	Deductible Applies
Specialist Provider		20% Coinsurance	Deductible Applies
Chiropractor		20% Coinsurance	Deductible Applies
Hospital Inpatient and Outpatient		Deductible & 20% Coinsurance	Deductible Applies
Telemedicine—Doctor on Demand		20% Coinsurance	Deductible Applies
Urgent Care		20% Coinsurance	Deductible Applies
Emergency Room		Deductible & 20% Coinsurance	Deductible Applies
Retail Pharmacy		Deductible & 20% Coinsurance	Deductible Applies
Specialty Pharmacy*		Deductible & 20% Coinsurance	Deductible Applies
Annual Health Screening		Covered at 100%	Covered at 100%

*Specialty Prescriptions must be obtained through CVS Specialty Pharmacy.

*Specialty Prescriptions on the PrudentRx Prescription Drug List will require members to opt-in to this program to receive eligible Specialty Prescriptions.

- If enrolled in the Traditional Plan option, the member will have no cost for the Specialty Prescription. If a member fails to opt-in to the program, the cost of the medication will not apply to out-of-pocket maximum.

- If enrolled on the HDHP option, a member must still meet their deductible/out-of-pocket maximum first.

Health Insurance Premiums

Traditional Plan				
Monthly Premiums	Non-Bargaining & AFSCME	Fire Union	Police Union Non-Tobacco/Tobacco	
EE Only—EE Wellness	\$69.69	\$69.69	\$69.69	\$94.61
EE Only—No Wellness	\$99.69	\$99.69	\$99.69	\$124.61
FAM—EE Wellness	\$219.22	\$219.22	\$219.22	\$281.53
FAM—EE/ES Wellness	\$204.22	\$204.22	\$204.22	\$266.53
FAM—No Wellness	\$249.22	\$249.22	\$249.22	\$311.53
High-Deductible Health Plan (HDHP)				
Monthly Premiums	Non-Bargaining & AFSCME	Fire Union		
EE Only—EE Wellness	\$55.19	\$55.19		
EE Only—No Wellness	\$85.19	\$85.19		
FAM—EE Wellness	\$182.97	\$182.97		
FAM—EE/ES Wellness	\$167.97	\$167.97		
FAM—No Wellness	\$212.97	\$212.97		

EE: Employee | FAM: Family | ES: Employee Spouse

An employee who is eligible for family coverage but elects only single coverage qualifies for the Health Insurance Premium Incentive. This incentive is reflected as \$157.58 post-tax income on an employee's paycheck each month.

For any employee enrolled in a tobacco rate, the City shall provide a tobacco cessation program or resource so that they may lower their insurance rate to that of a non-tobacco-using employee.



Dental Insurance

<i>In-Network Benefits Unless Otherwise Noted</i>	Base Plan	Buy-Up Plan
Network	Delta Dental Premier	Delta Dental Premier
Deductible *Waived for Diagnostic & Preventive	\$50 per Single/\$150 per Family	\$50 per Single/\$150 per Family
Maximum Benefit	\$500 Per Covered Member	\$1,000 Per Covered Member
Diagnostic & Preventive*	Covered at 80%, Deductible Waived	Covered at 100%, Deductible Waived
Routine & Restorative	Covered at 50%, Deductible Applies	Covered at 80%, Deductible Applies
Major Services	No Benefit	Covered at 50%, Deductible Applies
Orthodontics (For children up to age 19)	Not Covered	Not Covered
Monthly Premiums		
Employee Only	No Cost	\$16.74
Family	No Cost	\$44.90

Deductible and Maximum Benefit are based on the Calendar Year and reset on Jan. 1.



Vision Insurance

<i>In-Network Benefits Unless Otherwise Noted</i>	
Exam Copay	\$10 <i>Additional Cost may apply for Contact Lens Fit & Follow-Up</i>
Materials Copay	\$10
Frames Allowance	\$150 Retail Value Allowance
Standard Lenses	Covered after Materials Copay
Lens Options	Options Covered in Full Include: Adult Polycarbonate, Standard Scratch-Resistant Coating, UV Screening, Standard Tint, Standard Anti-Reflective Coating, Level 1 & 2 Progressives*
Contacts (In lieu of spectacle lenses and frames)	\$150 Allowance in lieu of Glasses
Benefit Frequency	
Exam	12 Months
Frames	24 Months
Lenses	12 Months
Contacts	12 Months
Monthly Premiums	
Employee Only	\$13.37
Employee + Spouse	\$25.67
Employee + Child(ren)	\$27.97
Family	\$35.99

Benefit Frequencies are based on the Benefit Year and reset on Jan. 1.

Flexible Spending Accounts (FSA)

Flexible spending accounts help save money by allowing participants to pay for certain types of expenses on a pre-tax basis. The annual election amount is payroll deducted and deposited into the applicable account. Availability of funds will depend on the elected amount and account type.

Save all receipts! Eligible expenses are defined by the IRS and in the event of an audit, documentation may be required.

FSA Administrator: HealthEquity | WageWorks
FSA Plan Year: Jan. 1—Dec. 31

Generally, you cannot increase, decrease or cancel your contributions during the year without a qualifying family status change. The IRS requires forfeiture of unused dollars.

Flexible
Spending
Account



Medical FSA

- Used for most health, dental and vision care expenses (copayments, deductibles, eyeglasses, etc.)
- Maximum Election Amount: \$3,200
- Fund Expiration: Plan allows for up to \$640 of unused funds to be carried into the next plan year
- Visit www.irs.gov for a current list of eligible expenses (Publication 502)
- Not eligible if contributing to a Health Savings Account (HSA)

Limited FSA

- Used for most dental and vision care expenses
- Maximum Election Amount: \$3,200
- Fund Expiration: Plan allows for up to \$640 of unused funds to be carried into the next plan year
- Visit www.irs.gov for current list of eligible expenses (Publication 502)
- Eligible if contributing to a Health Savings Account (HSA)

Dependent Care FSA

- Used for dependent care expenses not reimbursed elsewhere
- Maximum Election Amount: \$5,000
- Fund Expiration: Monies must be used by the end of the plan year
- Visit www.irs.gov for specific guidance on limits under Code 129
- Plan allows expenses for children under age 13 or an adult who is your dependent and unable to care for themselves
- Funds must be payroll deducted and deposited to be available for reimbursement

Please see plan documents for complete details and additional information.

**Marion Water Department employees are not eligible for any FSA benefits.*

Health Savings Account (HSA)

An HSA is a personal bank account that you can use to pay out-of-pocket health care expenses with pre-tax dollars. Funds in your HSA can be used for your expenses and those of your spouse and eligible dependents, even if they are not covered by the HDHP. Contributions may be payroll deducted on a pre-tax basis. When deciding on your deposit amount, take into account employer contributions, as they also factor into the IRS maximum limit.

HSA Administrator: Lively

Annual Maximum Contributions

- Single coverage: \$4,300 for 2025
- Family coverage: \$8,550 for 2025
- Individuals ages 55 and older can also make additional “catch-up” contributions of up to \$1,000 annually

Save all receipts! Eligible expenses are defined by the IRS and in the event of an audit, documentation may be required.



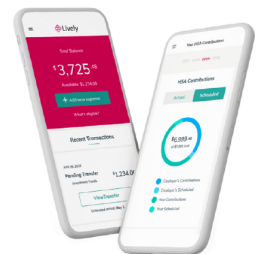
Eligibility:

- Enrolled on an HSA-qualified, High Deductible Health Plan (HDHP)
- Not covered by a second plan that is not an HSA-qualified plan
- Are not enrolled in Medicare
- Cannot be claimed as a dependent on someone else’s tax return
- Cannot be enrolled in a full-purpose Flexible Spending Account (FSA)

Contributions to the account must stop once you are enrolled in Medicare. However, you can still use your HSA funds to pay for medical expenses tax-free.

Download the Mobile App by scanning the QR Code- available on iPhone and Android

- **Account Management**
View balances, see recent transactions, manage debit cards and more
- **Track Spending**
Debit card transactions appear within the app in real-time
- **Monitor Investments**
View and monitor your invested HSA funds with all the tools you need from your phone
- **Easy Reimbursement**
Take and upload photos of receipts, and easily schedule reimbursement



Life and Disability Insurance

Employer-Paid Life and Accidental Death & Dismemberment (AD&D) Insurance

Please note the listed benefit will begin to reduce at age 70, see policy for details.

Life and AD&D Insurance	
Permanent Full-Time Non-Union Employees	1 x Annual Salary to a Maximum of \$50,000
Personnel Covered by Fire Union Contract	\$50,000
Personnel Covered by AFSCME Union	\$50,000
Water Department Personnel	\$50,000
Personnel Covered by Police Union Contract	\$30,000

Employer-Paid Disability Insurance

This benefit is available to all active, full-time City employees, excluding Police and Fire Unions (which are covered under Iowa Code Chapter 411).

In the event of a disability, there may be other sources of income that will reduce or offset the listed disability benefit amount.

Long-Term Disability Benefit	
Elimination Period	90 Consecutive Calendar Days
Maximum Monthly Benefit	66 2/3% of Pre-Disability Earnings up to \$8,334
Benefit Duration for Own Occupation	Maximum Benefit Duration
Maximum Benefit Duration	To Social Security Normal Retirement Age, 12 Month Minimum

Life and Disability Insurance

Voluntary Life

Please note elected employee and spouse benefits will reduce at age 70 and terminate at retirement, see policy for details. This policy does not include an AD&D rider.

*Please be advised the Guarantee Issue Amount is only applicable at initial eligibility. Elections or requests to increase coverage after this opportunity may be subject to Evidence of Insurability (EOI).

Employee	
Life Benefit	\$10,000 Increments to a Maximum of \$150,000
Guarantee Issue Amount	\$150,000
Spouse	
Life Benefit	\$5,000 Increments to a Maximum \$75,000 not to exceed 50% of Employee Election
Guarantee Issue Amount	\$25,000
Dependent	
Life Benefit	Option 1: Birth to 6 months: \$500 Age 6 months - limiting age: \$5,000 Option 2: Birth to 6 months: \$1,000 Age 6 months - limiting age: \$10,000

Rate Table – Employee and Spouse Supplemental Life	
Age of Employee/Spouse*	Rate per \$1,000
0 – 29	\$0.05
30 – 34	\$0.08
35 – 39	\$0.09
40 – 44	\$0.12
45 – 49	\$0.20
50 – 54	\$0.30
55 – 59	\$0.51
60 – 64	\$0.68
65 – 69	\$1.27
70 – 74	\$2.06
75 – 79	\$3.56
80+	\$5.37
Dependent Child Basic Life:	
Option 1: \$0.75 per month	
Option 2: \$1.50 per month	

Calculate your Premium:	
1. Write the amount of Employee Supplemental Life coverage you elected.	Line 1: _____
2. Take the number in Line 1; divide by 1,000.	Line 2: _____
3. Select your rate from the table and enter on Line 3.	Line 3: _____
4. Multiply the numbers on Line 2 and Line 3. This represents your monthly cost.	Line 4: _____
Repeat steps 1– 4 for the Spouse Supplemental Life coverage elected.	

Employee Assistance Program

Mercy Medical Center's Employee Assistance Program (EAP) is a benefit provided by the City of Marion for you and your dependent family members to assist with relationship, family, work, emotional and mental health concerns. There is no cost to you or your family members when using EAP services. Individual, couples and family counseling are offered in a client-centered, supportive environment to help you and your family achieve health, balance and well-being.

Mercy EAP can assist with:

- Anxiety
- Anger
- Communication skills
- Depression
- Divorce, blended families and co-parenting
- Emotional/mental health concerns
- Family/relationship concerns
- Grief/loss
- Resolving conflict
- Stress
- Trauma/abuse
- Work/career concerns
- Alcohol/drug abuse
- Financial and legal counseling (available by referral in the Cedar Rapids metro area)

To schedule an EAP appointment, simply contact Mercy EAP and share your name, that you are employed by the City of Marion along with your area(s) of concern. An intake appointment will be scheduled as soon as possible. Mercy EAP is offered at several convenient MercyCare locations in the Cedar Rapids metro area. When calling to make an appointment, please indicate which MercyCare location is most convenient for you and your family.



Please call (319) 398-6694 or (800) 383-6694 to schedule an appointment.

To ensure confidentiality, the following precautions will be taken:

- No information will be released without your informed written consent.
- Only non-identifying data on EAP usage will be provided to your employer.
- Confidentiality may be waived if there is a clear and present danger to human life.
- Client records remain the property of Mercy EAP Services.

457 Deferred Compensation

The City of Marion provides full-time employees with two options to join a 457 Deferred Compensation plan through MissionSquare Retirement or Equitable Advisors. This benefit is optional as you evaluate your personal financial needs and goals for the future. The City of Marion does not provide any matching funds.

Joining your 457 Deferred Compensation plan can be an easy way to save for your future.

To connect with your plan, go to www.icmarc.org/enroll or download our app at www.icmarc.org/mobile-app.

Eligibility

You are immediately eligible to join the plan upon hire.

Investments

Your contributions will be invested in the funds that you select, and the value of your account will fluctuate based on the performance of the funds. Carefully review your investment options before making your selections. You can make changes to your investments at any time.

Enrollment

Join your plan online at www.icmarc.org/enroll.

Withdrawals

After you separate from service with your employer, you will be eligible to withdraw your money at any time. However, you will not be required to take any withdrawals until after age 72. While you are still employed, your withdrawal options are limited to attaining age 70½, balances under \$5,000 (with no contributions made for a period of two years), or emergency withdrawals, as defined by the IRS.

Contributions

You decide the amount to contribute and can change your contribution amount at any time. Log in to account access to change your contributions. You can elect to make pre-tax and/or Roth after-tax contributions. You may also transfer, or roll over, other eligible retirement accounts to the plan. The IRS limits contributions. For current limits, visit www.icmarc.org/contributionlimits.

Loans

The plan design does not allow for loans.

Vesting

Vesting refers to your ownership of the money in your account. You are always 100% vested in your own contributions and their earnings.

Account Management

Log in to www.icmarc.org/login to manage your account, sign-up for e-delivery and text updates, and connect all of your finances in one view.

Your MissionSquare representative:

Michael McIntosh
Retirement Plans Specialist
202-264-0904 | mmcintosh@icmarc.org

457 Deferred Compensation

Prepare for a Comfortable Retirement with a 457(b) Plan

A 457(b) deferred compensation plan, which is like a 401(k) for public service employees, can help supplement your pension. It's specifically designed for those who work for the state or local government, has the flexibility to adjust as your needs change and can help you turn your salary into a more comfortable retirement.

Your Pension and 457(b) Plan Work Together

How can a 457(b) deferred compensation plan help you save?

- Every dollar counts – Start saving whatever amount works for you, start or stop, decrease or increase your contributions up to the federal maximum, at any time.
- It's automatic – You pay yourself first, because your savings are deducted right from your paycheck.
- It's flexible – Select the investments you're most comfortable with – and change them when you want.

You won't pay taxes while you're saving – Your contributions into the 457(b) plan are deducted from your salary before income taxes, meaning that taxes are deferred until you withdraw the money from your account, which is typically when you're retired and often in a lower tax bracket. That means all of your earnings stay invested, letting your money grow faster than it would in a taxable account.

Employees in the Public Sector Trust Equitable

We know public service employees have unique needs. You spend your time making our communities better every day. We want to help you make your retirement better too.

Since 1859, Equitable has helped people build and secure their financial futures. Our 457(b) plan is designed to meet the specific needs of public service professionals. That's just one reason why we are the #1 choice for educators in K-12 schools¹ and a top choice for many other public service employees across the country. We've won the DALBAR Service Award for outstanding customer service seven years in a row² (2011-2017).

Contact Dale Rettenmeier CLU, ChFC, LUTCF, RICP

Financial Consultant

Dale.Rettenmeier@equitable.com

Equitable Advisors, LLC

4027 Glass Road NE Cedar Rapids, IA 52402

Bus: (319) 365-6983 Fax: (319) 364-3669

www.equitable.com

**Marion Water Department employees are not eligible for Equitable Deferred Comp benefits.*



Contacts

City of Marion & Water Department

Lucas Sperflage	Sue Wilber	Greg Hosier	Janice Lawrence
HR Manager	HR Generalist	Payroll & Benefits Manager	Water Department
(319) 743-6329	(319) 743-6318	(319) 743-6304	(319) 743-6314
lsperflage@cityofmarion.org	swilber@cityofmarion.org	ghosier@cityofmarion.org	jlawrence@cityofmarion.org

Insurance Carriers

Refer to this list when you need to contact one of your benefit vendors.

Carrier	Phone	Website
Wellmark BCBS of Iowa	(800) 524-9242	www.wellmark.com
Delta Dental of Iowa	(800) 544-0718	www.deltadentalia.com
Avesis	(855) 214-6777	www.avesis.com
HealthEquity	(877) 924-3967	www.healthequity.com
Lively	(888) 576-4837	www.livelyme.com
Madison National	(800) 356-9601	www.madisonlife.com

PDCM Insurance

Have a question?

Contact	Phone	Email
Kelsey Carriger, Account Executive	(319) 296-7610	kcarriger@pdc.com
Dennis Curtis, Vice President	(319) 234-8888	dcurtis@pdc.com
Kaylee Vette, Wellness Coordinator	(319) 234-8888	kvette@pdc.com

PDCM Insurance is retained to assist employees with benefit-related questions, some examples:

- Understanding an Explanation of Benefits (EOB) or Invoice from a service provider
- Locating or Understanding the Prescription Drug Formulary (PDL)
- Finding an In-Network Provider

Questions about Medicare? PDCM Insurance expert, Nathan Link, is available by phone (319) 296-7036 or email nlink@pdc.com at your convenience.

Disclaimer: If any part of these policies conflicts with a valid collective bargaining agreement or an employment agreement or contract between an employee and the City, the collective bargaining agreement, contract or agreement shall take precedence, but the remaining portions of the employee handbook shall continue to apply to the affected employee(s). The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the City of Marion. The text contained in this guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the guide and actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about the guide, please contact HR.