



Madison County Employee Benefits 2019

*Madison County is an
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Employer.*

The following document pertains to Benefits-Eligible Madison County employees. For further information regarding eligibility, please contact the HR Office at 256-532-3614.



Madison County Employee Benefits

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Madison County Employee Benefits

Madison County expects to continue offering the employee benefits plans noted in this document, but reserves the right to amend, cancel, or terminate the plans at any time.

If there is a discrepancy between this document and the official Plan Document(s), the official Plan Document(s) will govern.

*To view the employer marketplace document, please visit:
<http://madisoncountyal.gov/home/showdocument?id=758>*

Free viewers are required for some of the attached documents.

They can be downloaded by clicking on the icons below.





Madison County Employee Benefits

Health Plan Benefits

Plan Description	Plan Details
<p>Local Government Health Insurance (LGHIP): Offered to eligible employees and their eligible dependents. LGHIP is administered by Blue Cross and Blue Shield of Alabama using a national PPO network.</p> <p>Permanent active full-time employees working a minimum of thirty hours per week are eligible for coverage. Eligible employees must enroll in LGHIP unless proof of other group insurance is provided.</p> <p>Subscribers may select on of the following coverage types:</p> <ul style="list-style-type: none">• Single Coverage• Family Coverage	<p>Eligible Dependents: An employee's spouse and dependent child(ren) under age twenty-six are eligible for coverage. A grandchild, niece, or nephew under nineteen in which the court has granted custody to you or your spouse is eligible for coverage. Dependents that are incapacitated beyond twenty-five years of age will be considered for coverage.</p> <p>Bi-Monthly Employee Premiums: LGHIP bills in advance for the following month's coverage.</p> <ul style="list-style-type: none">• Single Coverage: \$47.00• Family Coverage: \$103.50 <p>Coverage Effective Date: Coverage is effective the date of hire, or January 1 if a change is made during open enrollment.</p> <p>Special Enrollment: Employees requesting special enrollment must notify LGHIP in writing within thirty days of a qualifying event. Qualifying events include: marriage, birth, death, divorce, or a change in a spouse's employment.</p>



Madison County Employee Benefits

Dental Plan Benefits

Plan Description	Plan Details
<p>Dental Coverage: Included with LGHIP through Blue Cross and Blue Shield of Alabama at no additional premium to the employee. LGHIP manages dental costs and provides enhanced dental benefits using negotiated discounts with in-network dentists.</p> <p>To locate in-network dentists go to: bcbsal.com.</p>	<p>Annual Deductible: Subscribers are subject to a \$25 per member deductible with a maximum of three deductibles per family annually.</p> <p>Eligible Services: Diagnostics and preventive services conducted at preferred in-network providers are covered at 100% of the Preferred Dental Fee Schedule without a deductible. Basic and major services such as fillings, oral surgery, periodontics, endodontics, and prosthodontics are covered at 50% of the Preferred Dental Fee Schedule and subject to a \$25 annual deductible. Orthodontic services are covered at 50% of the Preferred Dental Fee Schedule subject to a \$25 annual deductible.</p> <p>Annual Benefit: Subscribers over nineteen are eligible to receive an annual \$1,500 dental benefit. For subscribers under nineteen, no benefit maximum applies. Orthodontic services are subject to a \$1,000 lifetime maximum for dependent children under nineteen.</p>



Madison County Employee Benefits

Pharmacy Benefits

Plan Description	Plan Details
<p>Prescription Drug Card Program: This program is offered through LGHIP. At participating pharmacies, members can purchase Tier One drugs utilizing this program.</p> <p>For more information about this program, view the Drug Card Pharmacy Benefit Information Guide at: www.lghip.org/PDF/LGHIP/PharmBenefitsDrugCard.pdf.</p> <p>Point-of-Sale Drug Program for Tier Two and Tier Three Drugs: This program is offered through LGHIP. To obtain coverage through this program, certain guidelines must be met. Members utilizing this program receive discounts on Tier Two and Tier Three Drugs at participating pharmacies.</p>	<p>Usage: To obtain the benefits of either program, members should present their Member ID card at a participating pharmacy and follow the required guidelines for each program.</p> <p>Participating Pharmacies: To locate a participating pharmacy, go to bcbsal.org and click on “Pharmacy” or call the number on the back of your member ID card to find a participating pharmacy near you.</p> <p>Tier One Drug Benefits: Drugs are covered at 100% of the allowance and are subject to a \$10 copay per prescription. Members are allowed a 60-day supply on maintenance drugs for one copay.</p> <p>Tier Two and Tier Three Drug Benefits: Drugs are covered at 80% of the allowance and are subject to the calendar year deductible. A claims authorization number is required to be eligible for reimbursement as part of the Claims Process. Please consult the Point-of-Sale Pharmacy Benefit Information guide.</p>



Madison County Employee Benefits

Vision Plan Benefits

Plan Description	Plan Details
<p>LGHIP Discounted Vision Care Program: Providers within the Routine Vision Care network provide members with discounted routine vision care.</p> <p>For more information or to view a list of providers, visit: www.lghip.org/HealthInsurance/LGHIP/VisionCare.aspx.</p> <p>Vision Services Plan (VSP): Eligible employees may voluntarily enroll in VSP for eye care insurance. This plan allows employees to receive eye exams, lenses, and frames.</p> <p>Subscribers may choose from the following coverage types:</p> <ul style="list-style-type: none">• Single Coverage• Employee + One• Family Coverage	<p>LGHIP Discounted Vision Care Program</p> <p>Discounts: Members can utilize discounts at participating providers for routine eye exams with/without dilation, initial contact lens fitting and follow-up and a 25% discount on eyewear (annually), lenses (plastic or glass), single vision, bifocal, trifocal, and frames.</p> <p>Vision Services Plan (VSP)</p> <p>Eligible Dependents: An employee's spouse or any unmarried child under twenty-five. Older disabled dependents may be eligible for coverage.</p> <p>Covered Services: If in-network, eye exam, frames, lenses, and contact lenses in lieu of glasses are covered (subject to copays and limitations).</p> <p>Bi-Weekly Premiums:</p> <ul style="list-style-type: none">• Single: \$2.77• Employee + One: \$5.82• Family: \$8.92



Madison County Employee Benefits

Flexible Spending Accounts (FSA)

Plan Description	Plan Details
<p>What are Flexible Spending Accounts? Flex plans are administered by TASC. Enrollment allows an employee to pay for medical expenses or day care services with pre-tax dollars. The tax savings can be greater than the exemption gained from a personal return. Annual enrollment is required during open enrollment each November. Employees can participate in a flex plan even if they are not enrolled in Madison County's health insurance plan.</p> <p>Madison County offers two voluntary flexible spending plans (flex plans) to eligible employees:</p> <ul style="list-style-type: none">• Health Care• Dependent Care <p>For more information regarding eligible expenses, please view the Summary of Eligible Expenses at: madisoncountyal.gov/home/showdocument?id=766.</p>	<p>Participant Enrollment: Employees are eligible for enrollment benefits upon date of hire. Enrollment cannot be made during a Plan Year except in the event of a qualifying life event as defined by TASC.</p> <p>Employee Premiums: Compensation is reduced by the cost of the Plan benefits elected. Compensation will be reduced bi-weekly by the elected plan contribution amount divided by the number of payrolls for that year (enrolled all year vs. enrolled midyear).</p> <p>Reimbursement: These plans provide reimbursements for qualifying out of pocket expenses for health care or dependent care.</p> <p>Health Care FSA</p> <p>Annual Contribution Limits: \$2,650</p> <p>Dependent Care FSA</p> <p>Annual Contribution Limits: \$5,000</p>



Madison County Employee Benefits

FSA Example

The example below takes into consideration an employee making \$1,000 bi-weekly, single tax withholding, and contributing 6% to their retirement account and \$20.00 to their flex plan.

Feature	Participating In Flex	NOT Participating in Flex
Gross Pay	\$1,000.00	\$1,000.00
Flex Contribution	\$20.00	\$0.00
Federal Tax	\$67.95	\$70.95
State Tax	\$82.80	\$84.60
Social Security	\$38.64	\$39.48
Medicare	\$13.34	\$13.63
Retirement 6%	\$60.00	\$60.00
Net Pay	\$717.27	\$731.34

Your net pay is only \$14.07 less while your Flex Account had \$20.00 added to it.



Madison County Employee Benefits

Employee's Retirement Systems of Alabama (ERS)

Plan Description	Plan Details
<p>ERS is a defined benefit plan qualified under Section 401(a) of the Internal Revenue Code. A defined benefit plan means that each employee will receive a specific payout at retirement using a benefit formula. The factors determining an employee's retirement benefit include salary, length of service, and a retirement benefit factor. Participation in the ERS is mandatory for Madison County eligible employees.</p> <p>Employees can purchase other forms of creditable service from other types of past employment or military service. For more information, please view the ERSA website at: rsa-al.gov.</p> <p>For more information about Tier One, please view the ERS Tier One Member Handbook at: rsa-al.gov/uploads/files/ERS_Member_Handbook_T1_bookmarked.pdf.</p> <p>For more information about Tier Two, please view the ERS Tier Two Member Handbook at: rsa-al.gov/uploads/files/ERS_Member_Handbook_T2_bookmarked.pdf.</p>	<p>Employee Contribution: Participants contribute 5% to 8.5% of their earnings depending on their hire date and classification. Sworn Certified HR have an accelerated contribution schedule.</p> <p>Vesting: Participants are vested after serving ten years of employment. In the event a participant separates from Madison County (who had at least three years of service), they will receive a pay out of their contributions plus any interest earned.</p> <p>Amount of Benefit: Please reference the Table of Maximum Monthly Retirement Benefit in the ERS Member's Handbook for your tier.</p> <p>Tier One and Two: Retirement plan participation depends on an employee's date of hire. Tier One participants are those hired or who had service credit prior to January 1, 2013. Tier Two participants are those hired or who did not have service credit prior to January 1, 2013.</p>



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Tier One ERS Benefit Example

Jane Doe was hired on March 1, 2007. Her birthdate is March 15, 1957. She was hired into the Tier One retirement plan with the State of Alabama. She has worked for 10 years and is vested the plan. Vesting refers to her right to the benefits Madison County contributes. Using her salary and service, the following example (the date for this example is 03/18/2017) will calculate her monthly benefit from the Employee's Retirement Systems (ERS):

Years of Service & Salary

2007	2008	2009	2010	2011	2012
\$19,280	\$20,244	\$20,244	\$21,256	\$21,256	\$22,425
2013	2014	2015	2016	2017	
\$22,425	\$23,546	\$24,723	\$24,723	\$25,959	

Note: Average final salary is the average of the highest three years (Oct. to Sept.) out of the last 10 years.

Highest 3 Years:	\$25,959	Avg. Salary: \$25,135
	\$24,723	
	<u>\$24,723</u>	
	\$75,405 / 3=	

To compute the maximum monthly retirement benefit, use the following formula for Tier One employees:

$$\frac{\text{Average Final Salary} \times \text{Length of Service} \times \text{Benefit Factor}}{12} = \text{Monthly Benefit}$$

$$\$25,135 \times 10 \text{ years} \times 0.02125 = \$5,314.19 \rightarrow \frac{\$5341.19}{12} = \$445.09$$



Madison County Employee Benefits

Deferred Compensation Plans

Plan Description	Plan Details
<p>Madison County employees are offered two separate 457(b) Deferred Compensation plans: RSA-1 and My Nationwide. Both plans are created pursuant to Section 457 of the Internal Revenue Code.</p> <p>A 457(b) Deferred Compensation plan is a retirement plan that allows public employees to put aside money from each paycheck toward retirement. Note: investing involves market risk, including the possible loss of principle.</p> <p>Employees are vested in their own contributions but are subject to meet certain criteria before account distributions can be made.</p>	<p>Contribution Maximum: Employees can contribute up to \$18,500 annually to 457 Deferred Compensation plans. Employees over fifty qualify for catch-up contributions (up to \$24,500 annually), and employees within three years of normal retirement age, may contribute Special 457 catch-up provisions (up to \$36,000).</p> <p>Deferral Limit: If an employee chooses to participate in both plans, the employee's total deferrals to these plans combined cannot exceed the annual deferral limit. Participants can make changes to their deferral percentages on a monthly basis.</p>
<p>RSA-1 Deferred Compensation Plan</p> <p>RSA -1 funds can be invested in either bonds, short-term investments, stocks, or a combination. Participants may change their investment elections ninety days from their last election. Statements are mailed quarterly.</p> <p>To view the RSA-1 Member Handbook, visit: rsa-al.gov/uploads/files/RSA-1_Member_Handbook_bookmarked.pdf.</p>	<p>Employee Contribution: RSA-1 requires no minimum contribution.</p> <p>Enrollment: To participate: Complete the RSA-1 Enrollment Form, Beneficiary Designation, and Investment Election for New Accounts (these three forms are mailed to RSA-1 P. O. Box 302150, Montgomery, AL 36130-2150). This will establish the account. Next complete the Authorization to Defer Compensation form and return to the Madison County payroll office.</p>



Madison County Employee Benefits

RSA-1 Example

The following is an example of how participation in RSA-1 can help you reduce your current taxes:

Example:

- ◆ An employee earning \$1,000 bi-weekly
- ◆ Deferring \$100 into RSA-1 bi-weekly
- ◆ Filing as single with one withholding allowance

Contributing to RSA-1		Not Contributing to RSA-1	
Semi-monthly pay	\$1000.00	Semi-monthly pay	\$1000.00
RSA-1 Deferral	\$100.00	RSA-1 Deferral	\$0.00
7.5% Retirement Contribution	\$75.00	7.5% Retirement Contribution	\$75.00
Federal Tax*	\$50.75	Federal Tax*	\$65.75
State Tax*	\$29.00	State Tax*	\$33.00
FICA	\$76.50	FICA	\$76.50
Take-Home Pay	\$668.75	Take-Home Pay	\$749.75

*Based on the 2015 tax tables.

In this example, deferring \$100 only decreases your take-home pay by \$81, while saving \$19 on taxes.



Madison County Employee Benefits

RSA-1 Savings Example

The following demonstrates the effect of savings in a RSA-1 fund over a twenty-five year period with varying interest rates.

Effect of Saving Over a 25 Year Period*

Monthly Deferral Amount	Assumed Earnings Rate		
	6%	7%	8%
\$25	\$17,324.85	\$42,251.79	\$23,775.66
\$50	\$34,649.70	\$40,503.58	\$47,551.32
\$100	\$69,299.40	\$81,007.17	\$95,102.64
\$200	\$138,598.79	\$162,014.34	\$190,205.28
\$400	\$277,197.58	\$324,028.68	\$380,410.56

*These examples are provided for illustration purposes only and do not guarantee that the fund will perform at this level in the future.



Madison County Employee Benefits

Plan Description	Plan Details
<p>My Nationwide Deferred Compensation Plan</p> <p>My Nationwide has many investment options including international funds; small, mid and large-cap funds; balanced and bond funds; short-term investments; target date funds; and a fixed account.</p> <p>For more information about your plan, please contact our Nationwide representative, Martha Sutton at 256-509-1389.</p> <p>For more information about My Nationwide Deferred Compensation Plans, visit: www.nrsforu.com/iApp/tcm/nrsforu/index.jsp.</p>	<p>Employee Contribution: Employees can contribute from \$260 to \$18,500 annually (unless eligible for catch-up or special catch-up).</p> <p>Enrollment: Employees can enroll in My Nationwide at any time. To enroll, employees should contact HR and complete the required forms. To enroll you will need the following information:</p> <ul style="list-style-type: none">• Your Social Security number• Your annual income• Contribution amount• Investment selections• Beneficiary names and Social Security numbers <p>Annual Leave Option: Employees retiring with accrued annual leave have the option to allow the dollar value of the leave to be rolled over into their My Nationwide account. This option allows retiring employees to roll-over their leave balance into the account at a pre-taxed value.</p>



Madison County Employee Benefits

My Nationwide Benefit Example

Chart assumptions: Bi-weekly deferrals, 25% tax rate for paycheck impact, 7% annual rate of return. This hypothetical illustration is not intended to predict or project investment results. It does not assume taxes, fees or account withdrawals during accumulation; if it did, results would be lower. This chart is not intended to project the performance of your deferred compensation account. Investments involve market risk, including the possible loss of principal. Actual investment results will vary depending on your investment and market experience. Income stream durations and amounts are not guaranteed.

Growth Period		Ending Balance		
Deferral Per Pay	Paycheck Impact	Accumulation 10 Years	Accumulation 20 Years	Accumulation 30 Years
\$25	\$18.75	\$9,304	\$27,605	\$63,607
\$50	\$37.50	\$18,607	\$55,210	\$127,214
\$75	\$56.25	\$27,911	\$82,815	\$190,821
\$100	\$75.00	\$37,214	\$110,420	\$254,428
\$125	\$93.75	\$46,518	\$138,025	\$318,035
\$150	\$112.50	\$55,821	\$165,631	\$381,642
\$200	\$150.00	\$74,429	\$220,841	\$508,856
\$500	\$375.00	\$186,071	\$552,102	\$1,272,139

Take a look at how an investment could potentially grow over time.



Madison County Employee Benefits

Retiree Health and Dental Benefits

Plan Description	Plan Details
<p>Madison County offers retiree health plan coverage to eligible employees who retire.</p> <p>Employees hired before January 1, 2018 must meet retirement guidelines for ERS in their respective tier to be eligible for benefits. Employees hired after January 1, 2018 must have twenty continuous years of full time service with Madison County and be enrolled in LGHIP for ten years in order to be eligible for health insurance benefits at retirement</p> <p>Coverage is provided for you at the time of retirement if eligible from Madison County. Coverage is also provided for spouses and eligible dependents and ends at the time of death of the retiree. Spouse coverage will be terminated upon divorce.</p> <p>Please see the Retiree Health Insurance Rates table on the next page for more information on premiums. Contribution rates vary.</p> <p>This is subject to change annually.</p> <p>For more information, contact the HR Department.</p>	<p>Non-Medicare Eligible: Most retirees under sixty-five (including spouse and dependents) will remain on the LGHIP Active Employee Plan until becoming Medicare eligible.</p> <p>Medicare Eligible: Most retirees over the sixty-five (including spouse and dependents) will be covered under the UnitedHealthcare Medicare Advantage (PPO) Plan. Some retirees may be Medicare eligible due to a disability.</p> <p>UnitedHealthcare Medicare Advantage (PPO) Plan</p> <p>This is a Medicare Replacement plan that provides the benefits of Medicare Part A and B, an integrated Prescription Part D coverage, and extra programs beyond original Medicare.</p> <p>Included in the Advantage Plan:</p> <ul style="list-style-type: none"> • Dental and Vision Benefits • Routine Foot Care • Hearing Aid Benefits • NurseLine • Virtual Doctor Visits • And MORE!



Madison County Employee Benefits

Retiree Health Insurance Rates

10 Years of Service (Under 65)	\$102.00 / month
15 Years of Service (Under 65)	\$86.00 / month
20 Years of Service (Under 65)	\$58.00 / month
25 Years of Service with Spouse	\$37.00 / month
25 Years of Service (Employee Only)	\$0.00
10 Years of Service (Over 65)	\$86.00 / month
15 Years of Service (Over 65)	\$72.00 / month
20 Years of Service (Over 65)	\$44.00 / month

- Retirees enrolled with UnitedHealthCare pay premiums directly to United.
- Retirees enrolled with LGHIP pay premiums directly to Madison County through ACH.
- **Effective 01/01/2018:** New or rehired employees must have twenty years of continuous full time service and be enrolled in LGHIP for ten years in order to be eligible for Health insurance benefits at retirement.



Madison County Employee Benefits

Life Insurance and AD&D Benefits

Plan Description	Plan Details
<p>Madison County benefits program includes active employee life insurance that provides financial protection if a participant should die or have a serious accident.</p> <p>Madison County pays the full cost for:</p> <ul style="list-style-type: none"> Basic Life Insurance Accidental Death and Dismemberment Line of Duty <p>Employee pays the full cost for:</p> <ul style="list-style-type: none"> Additional Life Insurance Spouse Life Insurance Dependent Child Life Insurance <p>Premiums for the employee/spouse are based on the employee's age. The employee must participate to enroll dependents.</p>	<p>Life Insurance Benefits</p> <p>Basic Life Insurance: \$25,000</p> <p>Additional Life Insurance: Up to \$160,000.</p> <p>Dependent Life Coverage: You may purchase additional life insurance for your eligible dependent:</p> <ul style="list-style-type: none"> • Spouse: Up to \$50,000 • Dependent Child: \$10,000. <p>Accidental Death and Dismemberment Benefits</p> <p>AD&D Benefit: \$25,000</p> <p>Other AD&D Insurance:</p> <ul style="list-style-type: none"> • Seat Belt Coverage • Air Bag Coverage • Career Adjustment Benefit • Child Care Benefit • Higher Education Benefit <p>Effective Date: Coverage is effective on the date of hire for eligible employees for basic coverage. Employees are subject to medical underwriting if they enroll at a time later than new hire orientation.</p>



Madison County Employee Benefits

Employee Clinic

Benefit Description	Benefit Details
<p>Madison County provides a low-cost health clinic to eligible employees through LGHIP. Please refer to Employee Clinic Information for clinic hours and contact information.</p>	<p>Madison County employees and dependents over twelve may use the Employee Health Clinic for the low copay of \$15.00 per visit. To be eligible to use the Clinic, the employee and dependent must be primary on Madison County's health insurance plan.</p> <p>Employees can also fill their prescriptions by visiting the Huntsville Hospital Pharmacy located down the hall from the Employee Clinic. Please refer to the HHS Pharmacy Information for hours and contact information.</p>



Local Government Employee Health Clinic

Location: 1963 Memorial Parkway
Huntsville, AL 35801

Hours: Mon - Fri 7:00 am to 4:00 pm

Phone: 256-265-0220

Fax: 256-265-0225



Madison County Employee Benefits

Other Benefits

Benefit Description	Benefit Details
<p>Employee Assistance Program (EAP)</p> <p>Madison County offers this EAP Benefit through Behavioral Health Systems (BHS). An EAP is a professional service which provides confidential assessment, referral, and short-term counseling services to employees and their dependents for behavioral health-related problems such as (but not limited to):</p> <ul style="list-style-type: none">• Marital/Family• Eating Disorders• Anxiety• Depression• Grief and Loss• Financial/Legal• ADHD/ADD• Substance Abuse	<p>To access more information about your EAP Benefit, visit the Behavioral Health Systems website listed below, and follow the instructions below to login to the site.</p> <p>Website: behavioralhealthsystems.com/members/member-access/.</p> <p>Employee ID: MCA</p> <p>Cost: EAP is a benefit provided to you, at no charge, by your employer. All services that are authorized by BHS are covered at 100% and you do not have to file any claims.</p> <p>Coverage Includes: Initial assessment and two follow-up visits. Individuals can extend treatment using LGHIP in-network providers.</p>



Madison County Employee Benefits

Benefit Description	Benefit Details
<p>Paid Leave</p> <p>Madison County offers annual and sick leave benefits to eligible employees.</p> <p>Annual leave (vacation) benefits are available for vacation and personal business matters.</p> <p>For more information about this benefit, please refer to the Employee Handbook’s section on Annual Leave.</p> <p>Madison County provides paid sick leave benefits for periods of temporary absence due to personal illnesses or injuries, to attend to the needs of immediate family members, and for doctors’ appointments.</p> <p>For more information about this benefit, please refer to the Employee Handbook’s section on Sick Leave.</p>	<p>Upon completion of a probationary period, employees are eligible for paid leave.</p> <p>Regular full-time employees and grant-paid employees (who work full-time hours for the length the grant is in effect) are eligible.</p> <p>Employees begin to earn annual and sick leave benefits from the date of employment; however, they are not credited with any leave benefits and cannot use any leave benefits until completion of the six month probationary period. At the end of satisfactorily completing the probation period, employees are credited with forty-eight hours of sick time and forty-eight hours of annual leave.</p> <p>Eligible employees will accrue sick and annual leave benefits at the rate of ninety-six hours each per year.</p>
<p>Paid Time-Off</p> <p>Madison County offers ten days of paid holiday leave and paid time-off outside of regular annual leave and sick leave.</p> <p>For more information about the benefit, please refer to the Employee Handbook’s section on Paid Time Off.</p>	<p>Eligible employees may receive holiday pay for Commission approved holidays. Employees who are required to work during holidays may be eligible to receive premium pay.</p> <p>Employees may also be eligible for Paid Time Off for bereavement leave, jury duty, witness duty, and visiting the employee clinic (employee visits only).</p>



Madison County Employee Benefits

Benefit Description	Benefit Details
<p>Annual Wellness Screenings</p> <p>Employees enrolled in the Madison County health plan are required to participate in annual confidential wellness screenings. Screenings check for the following risk factors: Blood Pressure, Cholesterol, Glucose, and Body Mass Index.</p> <p>For a list of participating pharmacies, visit:</p> <p>www.lghip.org/pdf/Wellness/ParticipatingPharmacies.pdf</p>	<p>The screenings can be completed at work, at a participating local pharmacy or by the employee's physician (subject to an office copay). Screenings completed at work or with a participating local pharmacy are free of charge. Employees will need to print out the Provider Screening Form and take with them to the physician or the participating pharmacy. The completed Provider Screening Form is returned to LGHIP.</p>
<p>Wellness Programs</p> <p>The following are other wellness programs provided by LGHIP.</p> <p>Physician Supervised Weight Management Program</p> <p>This program is provided to assist in covering the cost of approved physician supervised weight management and nutritional coaching programs.</p> <p>Tobacco Cessation Program</p> <p>This program is provided to help members stop smoking.</p>	<p>LGHIP will reimburse 80% of the cost of the programs with a \$150 calendar year maximum per program.</p> <p>For more information about Physician Supervised Weight Management Program and to learn how to apply for reimbursement, visit:</p> <p>www.lghip.org/PDF/LGHIP/WeightMgmtProgram.pdf</p> <p>For more information and to learn how to apply for reimbursement, visit:</p> <p>www.lghip.org/PDF/Wellness/TobaccoCessation.pdf</p>



Madison County Employee Benefits

Benefit Description	Benefit Details
<p>CollegeCounts</p> <p>The CollegeCounts 529 Fund is a qualified tuition program that makes it easy to invest in the next generation. The program is simple, offers significant tax advantages, requires no minimum contribution and allows easy to set up automatic contributions.</p> <p>For more information or to learn more about CollegeCounts, visit www.CollegeCounts529.com.</p>	<p>The CollegeCounts 529 fund can be used nationwide at most accredited universities, colleges, trade schools, and even graduate schools.</p> <p>Funds can be used for:</p> <ul style="list-style-type: none"> • Tuition and Fees • Room and Board • Books • Supplies • Required Equipment for Enrollment <p>Contributions are made through after-tax payroll deductions. Interest earned is used to cover the student's eligible expenses.</p>
<p>Teladoc</p> <p>Teladoc is a benefit of your LGHIP plan that gives 24/7/365 access to a national network of U.S. board-certified doctors and pediatricians.</p> <p>Teladoc is a telephone and online video consultation service that is available to diagnose, treat and prescribe medication (when necessary) for certain issues.</p> <p>All Teladoc doctors are:</p> <ul style="list-style-type: none"> • U.S. board-certified in internal medicine, family practice, emergency medicine, or pediatrics • U.S. residents and licensed in your state 	<p>Convenience: Teladoc doctors can assist members with many conditions such as:</p> <ul style="list-style-type: none"> • Cold and flu symptoms • Respiratory infection • Ear infection • Urinary tract infection • And MORE! <p>Contact: Telephone and video (where available) consultations are available 24/7/365. To enroll, go to Teladoc.com/Alabama or call 855-477-4549.</p> <p>Cost: Teladoc consultations are covered at 100% of the allowable with no deductible, co-insurance, or copayment.</p>



Madison County Employee Benefits

Benefit Description	Benefit Details
<p>Baby Yourself (Maternity Management)</p> <p>Employees and spouses enrolled in LGHIP's health plan are eligible to utilize LGHIP's maternity management program that offers a mechanism for identifying high-risk pregnancies and managing them to prevent complications at the time of delivery.</p> <p>Please see page 35 of your Health Benefit Handbook for more information at: www.lghip.org/PDF/LGHIP/LGHIPBCBSHealthHandbook2018.pdf.</p>	<p>Baby Yourself Maternity Program helps expecting mothers and their babies receive the best possible healthcare during pregnancy. This program is available to expectant mothers, regardless of pregnancy risk.</p> <p>Enrolled employees/spouses or their doctor must contact BCBS at bcbsal.org/web/health/baby.html or 800-222-4379 as soon as pregnancy is confirmed. By participating in Baby Yourself and notifying Blue Cross and Blue Shield before the end of the second trimester, your inpatient deductible and applicable daily copay(s) will be waived.</p>
<p>Additional Benefits</p>	<p>Sick Leave Bank Parking Cafeteria Plan Rocket City Federal Credit Union Military Leave Worker's Compensation Family Medical Leave (FMLA)</p>



Madison County Employee Benefits

Forms

Form	Usage
<p>LGHIP Enrollment Form</p> <p>To view this form, visit: www.lghip.org/PDF/LGHIP/LG01-EnrollmentForm.pdf.</p> <p>For assistance or more information, please contact HR or LGHIP.</p>	<p>This form should be used to enroll in LGHIP. Submit this form during open enrollment or for a qualifying life event within thirty days. The following is required to add a dependent or spouse: Marriage Certificate, Birth Certificate, and/or Social Security Card. If enrolled, use Dependent Change form.</p> <p>This form should be completed and returned to HR.</p>
<p>LGHIP Declination of Coverage Form</p> <p>To view this form, visit: www.lghip.org/PDF/LGHIP/LG04-DeclinationofCoverageForm.pdf.</p> <p>For assistance or more information, please contact HR or LGHIP.</p>	<p>This form should be use to decline LGHIP coverage for applicable reasons (proof of coverage may be required). If declination is for an enrolled employee, the form must be received a month ahead of the coverage ending.</p> <p>This form should be completed and returned to HR.</p>
<p>LGHIP Dependent Change Form</p> <p>To view this form, visit: www.lghip.org/PDF/LGHIP/LG02-B-DependentChangeForm.pdf.</p> <p>For assistance or more information, please contact HR or ERS.</p>	<p>This form should be used to change LGHIP coverage from Single to Family or adding/removing a spouse or eligible dependent to your current coverage. Submit during open enrollment or at any time for a qualifying life event within thirty days (documentation required).</p> <p>This form should be completed and returned to HR.</p>



Madison County Employee Benefits

Form	Usage
<p>LGHIP Status Change Form</p> <p>To view this form, visit: www.lghip.org/PDF/LGHIP/LG02-ChangeForm.pdf.</p> <p>For assistance or more information, please contact HR or LGHIP.</p>	<p>This form should be used to make status changes to LGHIP coverage. Examples of status changes include changes in:</p> <ul style="list-style-type: none"> • Your Mailing Address • Subscriber's Name • Dependent's Name • Subscriber's Date Of Birth • Dependent's Date Of Birth • Telephone Number • Email Address <p>This form should be completed and returned to HR.</p>
<p>ERS Address Change Form</p> <p>To view this form, visit: www.rsa-al.gov/uploads/files/Address_Change_Notification.pdf.</p> <p>For assistance or more information, please contact HR or ERS.</p>	<p>This form should be used to change your address for ERS purposes. This form should be completed and returned to HR. Additionally, this form can be mailed or faxed to:</p> <p>Retirement Systems of AL PO Box 302150 Montgomery, AL 36130-2150 Fax: 877-517-0021</p>
<p>ERS Beneficiary Change</p> <p>To view this form, visit: www.rsa-al.gov/uploads/files/RSA_100-C_Change_of_Beneficiary.pdf.</p> <p>For assistance or more information, please contact HR or ERS.</p>	<p>This form should be used to change your Beneficiary for ERS purposes only. This form should be completed and returned to HR. Additionally, this form can be mailed to:</p> <p>Retirement Systems of AL PO Box 302150 Montgomery, AL 36130-2150 Fax: 877-517-0021</p>



Madison County Employee Benefits

Form	Usage
<p>RSA-1 Enrollment Form</p> <p>To view this form, visit: www.rsa-al.gov/uploads/files/RSA-1_Enrollment_Packet_2018.pdf.</p> <p>For assistance or more information, please contact HR or RSA.</p>	<p>This form should be used to enroll in an RSA-1. Please mail the completed form to:</p> <p>RSA-1 P. O. Box 302150 Montgomery, AL 36130-2150</p> <p>Submit with the RSA-1 Beneficiary and Investment Election for New Accounts form to establish the account.</p>
<p>RSA-1 Beneficiary Designation Form</p> <p>To view this form, visit: www.rsa-al.gov/uploads/files/Beneficiary_Designation.pdf.</p> <p>For assistance or more information, please contact HR or RSA.</p>	<p>This form should be used to establish or change a beneficiary of a RSA-1. Please mail the completed form to:</p> <p>RSA-1 P. O. Box 302150 Montgomery, AL 36130-2150</p> <p>Submit with the RSA-1 Enrollment and Investment Election for New Accounts form to establish the account.</p>
<p>RSA-1 Investment Election for New Accounts Form</p> <p>To view this form, visit: www.rsa-al.gov/uploads/files/RSA-1_IOE_Investment_Option_Election_for_Existing_Accounts.pdf.</p> <p>For assistance or more information, please contact HR or RSA.</p>	<p>This form should be used to select investment options for a RSA-1 Fund. Please mail the completed form to:</p> <p>RSA-1 P. O. Box 302150 Montgomery, AL 36130-2150</p> <p>Submit with the RSA-1 Enrollment and Beneficiary Designation form to establish the account.</p>



Madison County Employee Benefits

Form	Usage
<p>Sick Leave Bank Enrollment Form</p> <p>To view this form, visit: docs.wixstatic.com/ugd/45fac8_e822bd2f6a75475780e7e092683757e4.pdf.</p> <p>For more information about the Sick Leave bank, please reference Appendix 4 of the Employee Handbook.</p>	<p>This form should be used to enroll in Madison County's sick leave bank. In order to utilize any sick leave benefits, an employee must be enrolled in the sick leave bank.</p> <p>This form should be printed and completed before returning it to HR.</p>
<p>Sick Leave Bank Recipient Form</p> <p>To view this form, visit: docs.wixstatic.com/ugd/45fac8_e822bd2f6a75475780e7e092683757e4.pdf.</p> <p>For more information about the Sick Leave bank, please reference Appendix 4 of the <u>Employee Handbook</u>.</p>	<p>This form is used when requesting sick leave benefits from the Sick Leave Bank (after exhaustion of personal accrual). It is subject to approval from: the Department Head, Director of HR, and Review Committee.</p> <p>This form should be completed and returned to HR.</p>



Madison County Employee Benefits

Form	Usage
<p>Provider Screening Form</p> <p>To view this form, visit: www.lghip.org/PDF/LGHIP/LG12-ProviderScreeningForm.pdf.</p> <p>For assistance with this form, please contact LGHIP.</p>	<p>This form should be used for Annual Wellness Screenings. Please print this form and take it with you to the physician or participating pharmacy.</p> <p>This form should returned to:</p> <p>Local Government Health Insurance Board Wellness Division P.O. Box 304900 Montgomery, AL 36130 Fax: 334-517-9980</p>
<p>Standard Beneficiary Designation/Change Form</p> <p>To view this form, visit: docs.wixstatic.com/ugd/45fac8_a0ad8435405545d196a204af8ca25eb7.pdf.</p>	<p>This form is used when electing a beneficiary or changing a beneficiary for the Standard Life Insurance policy.</p> <p>This form should and returned to HR.</p>



Madison County Employee Benefits

Provider Contact Information

Provider	Phone	Website
LGHIP	866-836-9137	www.lghip.org
Blue Cross and Blue Shield of Alabama	800-321-4391	www.bcbsal.org
VSP Plan Provider Information	800-877-7195	www.vsp.com
ERS/RSA-1	877-517-0020	www.rsa-al.gov
TASC (Flexible Spending Plans)	800-422-4661	www.tasconline.com
Nationwide Customer Service	877-677-3678	www.nrsforu.com
Standard Life (Policy: 160524)	530-321-7000	www.uhcretiree.com/
Behavioral Health Systems	800-245-1150	www.behavioralhealthsystems.com
Teladoc	855-477-4549	www.teladoc.com/alabama
Baby Yourself	800-222-4379	www.bcbsal.org/web/health/baby.html
UnitedHealthCare	800-457-8506	www.UHCretiree.com



Madison County Employee Benefits

Employee Clinic Information

Hours of Operation	Phone Numbers	Address
Monday - Friday 7:00 AM to 4:00 PM	Phone: 256-265-0220 Fax: 256-265-0225	HH Medical Mall 1963 Memorial Parkway Huntsville, AL 35801

HHS Pharmacy Information

Hours of Operations	Phone Numbers	Address
Monday - Friday 7:00 AM to 5:00 PM	Phone: 256-265-3800 Fax: 855-332-2181 (toll free)	HH Medical Mall 1963 Memorial Parkway Huntsville, AL 35801

HR Contact Information

Hours of Operation	Phone Numbers	Address
Monday - Friday 8:00 AM to 5:00 PM	Phone: 256-532-3614 Fax: 256-532-3322	Madison County Courthouse 100 Northside Square Room 753, 7 th Floor Huntsville, AL 35801



Madison County Employee Benefits