City of Enid – 2023 Summary of Benefits - Fire

BC/BS Health Care Two Options Deductible	<u>Plan A - High Deductible</u> \$1,500 Individual \$3,000 Aggregate	Plan B - Co-Pay Plan \$1,000 Single \$1,500 Family
Office Visit	80% after deductible	\$35 excludes lab/x-ray; \$75 Specialist Visit
RX	After deductible Generic - 10% of cost pd Preferred - 25% of cost pd Non-preferred -40% of cost pd	\$15 co-pay for Generic Brand - 35% of cost of Drug
Annual Coverages	Preventive – 100%	Preventive – 100%
Bi-Weekly Premiums	\$48.15 Employee Only \$81.74 Employee/Child(ren) \$102.93 Employee/Spouse \$116.27 Family	\$53.28 Employee Only \$87.99 Employee/Child(ren) \$112.08 Employee/Spouse \$149.43 Family
Out of Pocket Max network)	\$5,000 Individual/Aggregate	\$6,600 Single (in \$13,200 Family
Vision Care First Eye Exam Frames Single Vision Lens Bifocal Lens Trifocal Lens Contact Lenses Lasik Eye Surgery	Eye Med One per 12 months \$120 in network \$0 Copay in network \$0 Copay in network \$0 Copay \$0 Copay \$0 Copay/\$120 allowance Discounts available	BC/BS One per 12 months \$60 allowance \$60 allowance \$90 allowance \$120 allowance \$120 single vision \$150 bifocal vision \$1,000.00 per lifetime; deductible waived
<u>Dental Care</u>	\$50 individual deductible; \$150 family deductible Two preventive care visits per year paid at 100%; deductible waived \$2,500 maximum benefit per calendar year.	
Bi-Weekly Premium	\$ 5.35 Single \$15.68 Family	
State Fire Pension		e City of Enid contributes 14% of salary to the Pension and Retirement System
Mission Square 457	Firefighters are also eligible to partic	cipate in the City of Enid's 457 plan.
Life Insurance/AD&D	Employer pays 100% of premium for	or a \$25,000. Life Insurance policy for each employee:

Life Insurance/AD&D Employer pays 100% of premium for a \$25,000 Life Insurance policy for each employee; that reduces by 35% at age 65, cease at retirement.