



2025

Employee Benefits, Programs, Policies & Procedures

Get Started »

Contents

3	Montgomery County Contacts	18	Vision
4	Benefit Contacts	19	Life & AD&D
5	Welcome	20	Disability Insurance
6	How to Enroll	21	Accident Insurance
7	Eligibility	22	Critical Illness Insurance
8	Medical Benefits	23	Hospital Indemnity Insurance
9	Pharmacy Benefits	24	Universal Life + Living Benefits
10	Medical Resources	25	Employee Assistance Program
12	Care Navigation	26	457b Retirement Plan
13	Wellness Center	27	T.C.D.R.S Retirement Plan
14	Next Level Prime	28	Worker's Compensation
16	Flexible Spending Accounts	29	Programs, Policies & Procedures
17	Dental	30	Legal Notices

About This Guide



Return to the Table of Contents page at any time by clicking this icon located in the footer on each page.



View informational videos to deepen your understanding of your benefits.



Look for underlined links and clickable resources throughout this guide for additional information.

Montgomery County Contacts

Montgomery County Contacts	Phone	Email
Risk Management Main	936.760.6935 HIPPA FAX: 936.538.8169	
Montgomery County Benefits	-	employeebenefits@mctx.org
Angelica McMonagle - Benefits Risk Analyst (A-L) Active Employees & retirees	936.538.5513	Angelica.McMonagle@mctx.org
Stacey Wilson - Benefits Risk Analyst (M-Z) Active Employees & Retirees	936.538.8194	Stacey.Wilson@mctx.org
Michael Howard - Director of Risk Management	936.760.6935	Michael.Howard@mctx.org
Dana Moreno - Asst. Director of Risk Management	936.538.8188	Danam.moreno@mctx.org
Amy Gomez - Benefits Administrator	936.538.8142	Amy.Gomez@mctx.org
Victor Castillo - Admin. Assistant	936.538.5520	Victor.Castillo@mctx.org
Irene Gonzales - P/C Claims	936.538.8183	Irene.gonzales@mctx.org
Kim Schuessler - Workers' Comp	936.538.5596	Kimberly.Schuessler@mctx.org
Michael Lynch - Safety Officer	936.538.5595	Michael.lynch@mctx.org

This Benefit Summary does not provide all of the details about all of the benefit programs. Additional information is available in each program's Certificate of Coverage (COC). The COC's can be accessed through the Montgomery County website under Risk Management: https://www.mctx.org/departments/departments_q_-_z/rm_new/index.php This brochure summarizes the coverage that is available during the 2025 plan year. If there is ever a question about one of these plans or policies, or if there is a conflict between the information in this guide and the formal language of the plan or policy documents, the formal wording in the plan or policy documents will govern.



Benefit Contacts

Benefit/Carrier	Phone	Website/Email
Medical - UMR Group # 76-417189	800.486.0364	umr.com
Pharmacy - Maxorplus	Member Services: 800.687.0707 MXP Mail Order: 800.687.8629 Specialty Pharm: 866.629.6779	maxorplus.com
Care Navigation - Kempton Group	888.884.5498	KPPFree.com
Wellness Center - NextLevel	Triage Line: 281.783.8162 Center: 936.538.3779	nextlevelurgentcare.com
Flexible Spending Accounts - UMR	800.826.9781	umr.com / umr-fsa@umr.com
Dental PPO - MetLife Group # 218370-1-G	800.638.5433	metlife.com
Dental HMO - Solstice Group # 15028	877.760.2247	mysmile365.com
Vision - MetLife Group # 218370-1-G	800.638.5433	metlife.com
Term Life/ Supplemental - MetLife Group # 218370-1-G	800.638.5433	metLife.com
Disability STD/LTD - UNUM Group # 660057 012	866.679.3054	unum.com
Accident, Critical Illness, & Hospital Indemnity Insurance - Wellfleet Group # 540364	855.664.5838	wellfleetworkplace.com/register
Universal Life + Living Benefits - Transamerica Group # G000052400	888.763.7474	transamerica.com
Optional Retirement - Transamerica	800.755.5801	my.trsrretire.com
Retirement - Texas County & District Retirement System (TCDRS)	800.823.7782 FAX: 512.328.8887	tcdrs.org
EAP - Aetna Group # EA16891410001	1.888.238.6232/ TTY: 711	resourcesforliving.com



Welcome to Your Benefits

We are pleased to provide you with a wide range of competitive benefits that are a vital part of your total compensation. You have the flexibility to select from a full range of benefits to keep you and your family healthy, provide financial protection in the event of an unforeseen event and help you build long-term security for retirement.

This guide was designed to answer some of the basic questions you may have about your benefits. Please take the time to review this guide to make sure you understand the benefits that are available to you and your family.

Hire Date	Benefits Effective
Oct 5, 2024 to Nov 3, 2024	Jan 1, 2025
Nov 4, 2024 to Dec 4, 2024	Feb 1, 2025
Dec 5, 2024 to Jan 1, 2025	Mar 1, 2025
Jan 2, 2025 to Feb 1, 2025	Apr 1, 2025
Feb 2, 2025 to Mar 3, 2025	May 1, 2025
Mar 4, 2025 to Apr 3, 2025	June 1, 2025
Apr 4, 2025 to May 3, 2025	July 1, 2025
May 4, 2025 to June 3, 2025	Aug 1, 2025
June 4, 2025 to July 4, 2025	Sept 1, 2025
July 5, 2025 to Aug 3, 2025	Oct 1, 2025
Aug 4, 2025 to Sept 3, 2025	Nov 1, 2025
Sept 4, 2025 to Oct 3, 2025	Dec 1, 2025
Oct 4, 2025 to Nov 3, 2025	Jan 1, 2026
Nov 4, 2025 to Dec 4, 2025	Feb 1, 2026

Benefit Deductions		
Pay Frequency	All Benefits (outside of T.C.D.R.S Retirement & 457 Optional Retirement)	T.C.D.R.S Retirement & 457 Optional Retirement
Monthly Paid Employees	12 Paycheck Deductions	26 Paycheck Deductions
Bi-Weekly Paid Employees	24 Paycheck Deductions	26 Paycheck Deductions



How to Enroll - New Hires

New Hire Enrollment

All benefits eligible new hires have 45 days from date of hire to complete enrollment. Failure to complete will result in auto-enrollment of high deductible medical plan. You have the option to waive all benefits; however, you must wait until the following Annual Enrollment for an opportunity to enroll unless you experience a Qualified Life Event. See [page 7](#) for more details on Qualified Life Events.

Your elected benefits will begin the 1st of the month following 58 days from your date of hire.

During your new hire onboarding, the Montgomery County Benefits Risk Analyst Team will provide assistance on enrolling, explaining the benefits available, and answering any questions.

Montgomery County Benefit Contacts		
Angelica McMonagle - Benefits Risk Analyst (A-L) Active Employees & retirees	936.538.5513	Angelica.McMonagle@mctx.org
Stacey Wilson - Benefits Risk Analyst (M-Z) Active Employees & Retirees	936.538.8194	Stacey.Wilson@mctx.org
Montgomery County Benefits	employeebenefits@mctx.org	

Self-Service Enrollment Process	
Step 1	• Access your enrollment portal: www.benselect.com/Montgomery
Step 2	• Enter your Username and PIN Username: Full Social Security # without the dashes PIN: The last 4 digits of your Social Security # and last 2 digits of your year of birth
Step 3	• Read the Opening Presentation & click “Next” to proceed • Click “Next” to proceed to verifying your personal & dependent information for accuracy • Click “Next” to proceed to your benefits
Step 4	• Click the “Review” button on each benefit to make your benefit elections • Proceed to the “Sign and Submit” section & electronically sign your form with the same PIN you logged in with Remember, your enrollment is not complete until you sign your form
Step 5	• Once you electronically sign your form, you will be sent a confirmation email



Eligibility

You are eligible for benefits if you are a full-time regular employee in a budgeted position for Montgomery County or an elected/appointed official who holds a County Office. Your benefits are effective on the 1st of the month following 58 days from your date of hire. You may also enroll your eligible dependents for coverage. Documentation will be required for dependents. Please see below:

Eligible Dependents	Documentation Needed
• Legal Spouse • Children (natural, adopted, or step) under the age of 26, regardless of student, dependency or marital status • Grandchildren • Children who are past the age of 26 and are fully dependent on you for support due to a mental or physical disability, and who are indicated as such on your federal tax return	• Certified Marriage License • Certified Birth Certificate • Social Security or ITIN • Legal Guardianship Decree • Legal Adoption Decree

Note: When adult children turn 26 their coverage will end on the last day of their birth month.

Qualified Life Events

Generally, you may only change your benefit elections during the Open Enrollment period. However, you also may change your benefit elections during the year if you experience a Qualified Life Event. Examples include:

- Loss or gain of coverage through your spouse
- Loss of eligibility of a covered dependent
- Death of your covered spouse or child
- Birth or adoption of a child
- Marriage, divorce or legal separation
- Switch from part-time employment to full-time employment

Changing Benefits After Enrollment

During the year, you cannot make changes to your benefits unless you experience a Qualified Life Event. You must initiate your Qualified Life Event in Selerix within 45 days of the event date. Documentation will be required.

1. Log in to your Selerix Benefits Portal: www.benselect.com/Montgomery
2. Scroll to the box title “What do you want to do?” and click “Change my benefits due to a qualifying life event”
3. Choose the life event that most closely applied to your reason for changing your benefit elections at this time and click “Next” to follow the prompts for enrollment.
4. Select which plans you would like to make a change to and then click “Next” to enroll/re-enroll each plan selected.
5. After you have enrolled all plans that you selected to change, submit your enrollment by click “Sign Form” at the bottom of the enrollment confirmation. The benefit changes and corresponding change to payroll deductions will not be effective until your employer has approved the enrollment and all required documentation has been received. If you are unable to electronically upload your verification documents, please provide them to employeebenefits@mctx.org.



Medical Benefits

Montgomery County offers two medical plans administered by UMR utilizing the UnitedHealthcare network. Both medical plans provide comprehensive coverage that gives you the complete freedom to choose any doctor or health care provider; however, you will pay less out-of-pocket when using in-network providers. To find in-network providers visit umr.com or call 800.486.0364.

	Low Deductible Plan		High Deductible Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible	\$250 individual	\$500 individual	\$1,000 individual/ \$3,000 family	\$2,000 individual/ \$6,000 family
Out-of-Pocket Maximum	\$2,250 individual	\$8,000 individual	\$2,000 individual/ \$6,000 family	\$5,750 individual/ \$17,250 family
Preventive Care Visit	\$25	50%*	\$25	50%*
Immunizations - Child(ren) ONLY	\$0	\$0	\$0	\$0
Physician Office Visit	\$25	50%*	\$25	50%*
Specialist Office Visit	\$25	50%*	\$25	50%*
Diagnostic test & Imaging X-ray, blood work, CT/PET, MRI	10%*	50%*	10%*	50%*
Urgent Care Center	\$75	50%*	\$75	50%*
Emergency Room	\$150 copay + 10%*	50%*	\$150 copay + 10%*	50%*
Inpatient Hospital	10%*	50%*	10%*	50%*
Outpatient Surgery	10%*	50%*	10%*	50%*

*After deductible

This is meant to be a brief summary only. For full plan details please refer to the benefit summary

REMINDER: The Montgomery County Care Navigation program administered through Kempton Group utilizing the KPPFree program provides imaging and surgery benefits to you and your dependents at no cost. You must engage with the program to receive these benefits. Please see [page 12](#) for more details.

Bi-Weekly Deduction	Low Deductible Plan	High Deductible Plan
Employee	\$37.50	\$0.00
Employee + Spouse	\$110.00	\$40.00
Employee + Child(ren)	\$105.00	\$35.00
Employee + Family	\$177.50	\$75.00



Pharmacy Benefits

Employees enrolled in a Montgomery County health plan have pharmacy benefits provided by Maxor.
[View your plans formulary list here.](#)

	Low Deductible Plan	High Deductible Plan
Generic	The greater of 10% coinsurance or \$15 copay	The greater of 10% coinsurance or \$15 copay
Preferred Brand	The greater of 20% coinsurance or \$25 copay	The greater of 20% coinsurance or \$25 copay
Non-Preferred Brand	The greater of 30% coinsurance or \$35 copay	The greater of 30% coinsurance or \$35 copay
Specialty* Generic Preferred Non-Preferred	10% copay with max patient pay of \$15 20% copay with max patient pay of \$25 30% copay with max patient pay of \$35	10% copay with max patient pay of \$15 20% copay with max patient pay of \$25 30% copay with max patient pay of \$35

*Specialty drugs are limited to a 90-day supply & must be purchased from the Maxor Specialty Pharmacy. See below for details.
 This is a brief summary. Please reference the benefit summary for full details.

Maxor Member Portal

The MaxorPlus Member Portal connects you to your benefits and empowers you to make the best purchasing decisions for you and your family. Features include:

- Help reordering prescriptions
- View your deductible & out-of-pocket max
- Live Chat with a Member Advocate
- View your prescription history
- Price drugs & find pharmacies

Visit members.maxorplus.com to register or log in.

Home Delivery Service

MaxorPlus Pharmacy provides a convenient, cost effective way to home delivery your long term, maintenance prescriptions. Medications obtained through home delivery are limited to a 90-day supply and are quickly shipped at no additional charge to you. To maximize your savings, please ask your doctor to write, submit electronically, or fax your prescription for a 90-day supply with refills up to one year. To get started, please use one of the following options:

- **Go Online** - Create a MaxorPlus member web portal account at members.maxorplus.com. After you have successfully created an account, select the 'Sign-Up for Home Delivery' feature.
- **By Mail** - Print and fill out a home delivery form from the MaxorPlus website. Mail in your completed form to the pharmacy with your prescription(s) and form of payment.
- **By Phone** - Call 800.687.0707 and follow menu instructions to speak to a Member Advocate, available Monday - Friday from 7AM to 9PM, Saturday from 8AM to 6PM and Sunday from 9AM to 5PM CT.

Specialty Pharmacy

The Maxor Specialty Pharmacy focuses on personalized service for the most complex disease states. This program offers the therapies and resources you need to help manage your condition. The Maxor Specialty pharmacist and patient care coordinators are available 24/7/365 to answer any questions that may arise.

Visit maxorspecialty.com or call 866.629.6779 for more information and to get started on your journey.



Medical Resources

UMR Member Portal - umr.com

Your UMR Member Portal gives you simple, online access to your health and insurance information. You can access your UMR Member Portal from your mobile device, web browser, or download the mobile app. Go to umr.com and register or click the icons below to download the UMR mobile app.

- Check your benefits and see what's covered
- Look up what you owe and how much you've paid
- Find a doctor in-network
- Access tools and trusted resources to help you live a healthier life
- Access your member ID Card
- And more!



Find an In-Network Provider

1. Go to umr.com & click "Find a Provider" icon



Find a provider

2. In the "Enter network name" search bar, type "UnitedHealthcare Choice Plus Network (English or Spanish)"

Enter network name

UnitedHealthcare Choice Plus Network (English)

Search

4. Click "Search"
5. Scroll to the bottom of the page & Click "View Providers" icon

View Providers →

6. You can now search your in-network providers by physician, facility, locations, etc.

UMR Plan Advisors - Support, Guidance & Answers

UMR Plan Advisors partner with you so you feel more confident in the decision you make about your health. Examples of how UMR Plan Advisors can help include:

- Assistance finding the right providers for your needs
- Connecting you with the high-quality providers at the highest level of benefits
- Assistance with medical claims
- Answer questions
- Explain your benefit details
- And more!



To connect with UMR Plan Advisors, call 800.486.0364 Mon. - Fri. 7am - 7pm CT



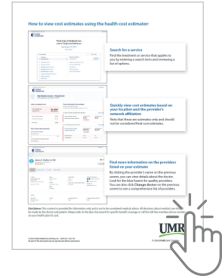
Medical Resources

GOAL - Compare the Cost of Care Tool

Your online services on umr.com include a free health cost estimator.

With this feature you can:

- Search for the type of service you need
- Compare the true costs of care using real data from real doctors
- Check which providers earned our UnitedHealth Premium rating for cost & quality
- See the total charge for your treatment, & know what to expect, beginning to end



How to get started

1. Sign in to your UMR Member Portal (umr.com)
2. If you haven't registered, select the Create your account link under the Sign in to your account box.
Make sure you have your ID card handy
3. Once you've signed in, select the Health cost estimator tile on your personal home page.

From there you can:

- **Search for a service** - Find the treatment or service that applies to you by entering a search term and reviewing a list of options.
- **Quickly view cost estimates based on your location and the provider's network affiliation**
- **Find more information on the providers listed on your estimate** - By clicking the provider's name on the previous screen, you can view details about the doctor. Look for the blue hearts for quality providers. You can also click Change doctor on the previous screen to see a comprehensive list of providers.

Understanding your Explanation of Benefits (EOB)

Plan members receive an explanation of benefits (EOB) statement for most health claims submitted by your health care providers. An EOB is not a bill. It simply tells you everything you might want to know about how a recent medical service was covered by your benefits plan. You'll receive a bill from your provider for any amount you may owe.

Remember to review your EOBs for important details about your claims, including:

- Who received the medical service
- The name of the health care provider
- The type(s) of care provided
- How much your provider billed
- Your network discount
- The amount paid by your employer-sponsored plan
- The amount you may owe including copays, deductibles and out-of-pocket amounts

Patient		Claim number	Provider name	Patient account
Elizabeth Blank		000000000	XYZ Provider Inc.	123456789
Service	Amount	Amount paid	Amount owed	Amount paid by employer
Medical	\$1,000.00	\$800.00	\$200.00	\$0.00
Pharmacy	\$500.00	\$400.00	\$100.00	\$0.00
Total	\$1,500.00	\$1,200.00	\$300.00	\$0.00



Care Navigation

When you choose KPPFree through Kempton Group, your medical service is covered at 100%, with **no cost to you!** With more than 200 provider locations, and thousands of procedures, tests, imaging, and other services, using KPPFree is an easy choice!

Examples of Services Available

- General Surgeries
- Diagnostic Imaging
- Orthopedics
- Gastrointestinal
- Ear, Nose, & Throat
- Cardiac
- Oncology
- Gynecological
- Ophthalmological/Ocular
- Kidney
- Sleep Disorders

Easy as 1-2-FREE	
Step 1	<i>First, your doctor must have determined that you need a procedure or surgery. He/she will make the initial determination regarding the procedure or service that you need.</i> • Following your doctor's diagnosis, call our Kempton Care Advocates at 888.884.5498 to see if your procedure is offered under KPPFree. The Kempton Care Advocates offer full concierge service, including helping arrange travel, and providing you with a KPPFree voucher that will enable your procedure to be covered at 100%.
Step 2	• After your appointment is scheduled, you will be provided with a KPPFree Voucher to present to the provider at the time of service. When you arrive at your initial consultation, you will be required to produce your voucher. This helps to ensure that the claim goes through the proper channels and your procedure will be covered at 100%.
Free!	• Well done! By making this valuable choice, all your out-of-pocket costs are waived.

Contact Information

Call: 888.884.5498 - The Kempton Care Advocate team is available to assist you Mon. - Fri. 8am - 5pm CST

KPPFree is now at your fingertips with the Coral Healthcare mobile app!

- View upcoming KPPFree appointments and receive Vouchers
- Search KPPFree providers, facilities, and qualified procedures.
- Request assistance for an upcoming procedure or image through the KPPFree program.

How to Sign Up

1. Search Coral Healthcare in the app store or click the icons to the right
2. Once the app is downloaded, select Sign Up
3. Use your name, date of birth, and last 4 of your social to create your account.



The Montgomery County Health & Wellness Center

Employees enrolled in the medical plan have access to
The Montgomery County Health and Wellness Center!

**521 N. Thompson Street
Conroe, TX 77301**

**936-538-3779
Monday - Friday 7:00AM - 5:00PM**

Medical Professional Services/Staff Provided By: **nextlevel** MEDICAL

Schedule, Change, or Cancel Appointments:



Wellness Center: 936.538.3779 Monday - Friday 7:00AM - 5:00PM

Nurse Line: 281.783.8162 Monday - Friday 7:00AM - 9:00PM



Click the icons to the right to download the
Next Level mobile app.



[Nextlevelurgentcare.com](https://nextlevelurgentcare.com)



Next Level Urgent Care - PRIME

Montgomery County provides you with an extraordinary healthcare benefit through Next Level Urgent Care! Next Level is open from 9:00AM - 9:00PM seven days a week.

A Next Level PRIME membership offers exceptional **NO COST** healthcare services for:

Primary Care	Urgent Care	24/7 Telemedicine & Care Navigators
• Annual physicals • Well Woman Exams • Well Child Exams • Vaccinations • Diabetes • Hypertension • Thyroid Conditions • Depression & Anxiety • Chronic Diseases • Preventive Screenings • Blood Draws • Specialist Referrals	• Upper Respiratory Infections • Urinary Tract Infections • X-ray for Acute Injury • Sprains, Strains, Splints & Casts for Broken Bones • Gastroenteritis • IV fluids for Dehydration • Stitches for Lacerations • Abscesses • Pink Eye • Rashes • Headaches • Back Pain • Ear infections	• Urinary Tract Infections • Gastroenteritis • Pink Eye • Rashes • Headaches • Back Pain • Ear infections • Medication refills • Medical questions • Specialist referrals • Imaging scheduling • Upper Respiratory Infections

How do I get Started?



Click the icons to the right to download the Next Level mobile app. Once downloaded, create your account and begin using your benefit!



Call: 832.957.6200



[Nextlevelurgentcare.com](https://www.nextlevelurgentcare.com)



Next Level

FAQ

Do I need an appointment?

- Preventive Care/Chronic Care – Yes you do! Let us know you are coming so that we can ensure we have the vaccinations or labs you require on hand.
- Urgent Care – You can call ahead or walk right in. But it is always faster when you let us know you are coming.
- Telemedicine – Our Care Navigators will set you up with an appointment any time day or night.

I already have a Primary Care Doctor, can I use PRIME for anything?

If you have a health concern when your PCP is unavailable, use PRIME! At the end of your appointment, we will send a summary of your office visit to your Primary Care Physician.

What if I need lab work, durable medical equipment or a vaccine?

Montgomery County has included these with your Next Level PRIME membership.

How do I schedule my Annual Physical?

Let your Care Navigator know that you would like to be seen for your annual physical. One of our PRIME providers will perform your intake virtually before scheduling your physical at one of our locations. Physicals can be performed between 9am-9pm, 7 days a week.

I have a health concern but it's after 9pm, can Next Level help?

Our Care Navigators are available 24/7 to assist you with any questions or concerns you may have. Additionally, a PRIME provider is always available day or night for a telemedicine appointment.

What if I have a serious medical condition?

If we determine that your condition requires a specialist, we will refer you to a specialist IN NETWORK with your insurance. If your condition is emergent, we will send you to the nearest emergency room.



Flexible Spending Accounts

Flexible Spending Accounts (FSAs) let you save on taxes for certain healthcare and dependent care expenses. When you enroll, you decide how much you want to contribute for the year. Deductions are taken pre-tax from each paycheck and deposited into your account(s). Then, when you incur expenses and submit claims, you are reimbursed with pre-tax dollars from your account. All plan maximum contributions are based on the IRS Limits for 2024. You can access your FSA information at umr.com and following the “View my FSA” link or download the Consumer Accounts with UMR mobile app.

Health Care FSA

Eligible Expenses	Contribution Limits	Administration Fee	
IRS Publication 502	Minimum: \$220 per year Maximum: \$3,200 per year Roll-over: \$640	\$4.50 (Monthly)	\$2.25 (Bi-Weekly)

Roll-over - Amount of unused funds you can roll-over to the 2026 calendar year.

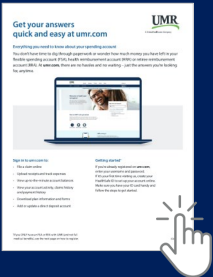
Use-it-or-Lose-it - The IRS has a “use-it-or-lose-it” rule. If you do not use the full amount set aside in your Health Care FSA, in excess of \$640, for expenses incurred during 2025, you will lose any remaining funds. Expenses incurred between January 1 and December 31, 2025, are eligible for reimbursement. Claims must be filed by March 31, 2026. Keep all receipts for your debit card purchases, as you may be required to substantiate expenses.

Dependent Care FSA

Eligible Expenses	Contribution Limits	Administration Fee	
IRS Publication 503	Minimum: \$220 per year Maximum: \$5,000 per year or \$2,500 if married and filling separately Roll-over: None	\$3.50 (Monthly)	\$1.75 (Bi-Weekly)

FSA Resources

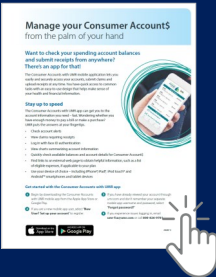
Employee Guide



Using your debit card brochure



Consumer Accounts with UMR Mobile App



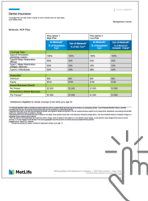
Download on the
App Store

GET IT ON
Google Play



Dental Benefits

All full-time, benefits eligible employees are offered three dental options:

Dental Options	Overview and Contact	Summary
Choice 1: Solstice HMO	This plan does NOT have deductibles, coinsurance or annual plan maximums. Your cost for services is dictated by a fixed fee. You must see an in-network provider for services to be covered. Please reference the schedule of benefits for cost information. To find an in-network provider and manage your benefits visit mysmile365.com or call 877.760.2247.	
Choice 2: MetLife PPO Low Plan Choice 3: MetLife PPO High Plan	These plans have deductibles and coinsurances based on the type of service performed and annual plan maximums. You have the freedom to choose in-network or out-of-network providers; however, you will pay less out-of-pocket when you visit an in-network provider. To find an in-network provider and manage your benefits visit metlife.com/mybenefits or call 800.638.5433.	

	Choice 1 Solstice EPO S700B	Choice 2 Metlife PPO Low Plan	Choice 3 MetLife PPO High Plan
Benefits	In-Network		
Deductible Individual / Family	N/A	\$50 / \$150	\$50 / \$150
Maximum Benefit	N/A	\$1,000 per member	\$2,500 per member
Preventive Services	See Schedule of Benefits for details	Covered in full	Covered in full
Basic Services		20%*	20%*
Major Services		50%*	50%*
Orthodontic Services Eligibility Coinsurance Lifetime Orthodontia Maximum		Children under 19 50% \$1,000 per individual	Children under 19 50% \$1,500 per individual

*After Deductible

Please reference the benefit summaries for full details.

Bi-Weekly Deduction	Choice 1	Choice 2	Choice 3
Employee	\$6.13	\$10.23	\$29.72
Employee + 1 Dependent	\$12.26	\$20.33	\$44.71
Employee + Family	\$17.83	\$30.02	\$77.46



Vision Benefits

All full-time, benefits eligible employees are offered two vision options.

Choice 1: MetLife Low Plan - [Benefit Summary](#)

Choice 2: MetLife High Plan - [Benefit Summary](#)

Please reference the below chart and above benefit summaries to decide which vision plan best meets the needs of you and your dependents.

To find an in-network vision provider and manage your benefits visit metlife.com/mybenefits or call 800.638.5433.

	Choice 1 MetLife Low Plan	Choice 2 MetLife High Plan	Out-of-Network For Both Plans
Benefits	In-Network	In-Network	You Are Reimbursed
Eye Exam	\$10 copay	\$10 copay	Up to \$45
Materials Copay	\$25 copay	\$25 copay	N/A
Standard Lenses			
Single vision	\$25 copay	\$25 copay	Up to \$30
Bifocal	\$25 copay	\$25 copay	Up to \$50
Trifocal	\$25 copay	\$25 copay	Up to \$65
Lenticular	\$25 copay	\$25 copay	Up to \$100
Frames	\$130 allowance* + 20% discount	\$200 allowance* + 20% discount	Up to \$70
Contact Lenses**			
Medically Necessary	Covered in full after \$25 copay	Covered in full after \$25 copay	Up to \$210
Elective	\$130 allowance	\$130 allowance	Up to \$105
Frequency of Services			
Exams	Once every 12 months	Once every 12 months	Same as elected plan
Lenses or Contacts	Once every 12 months	Once every 12 months	
Frames	Once every 24 months	Once every 12 months	

*\$70 allowance at Costco, Walmart & Sam's Club

**Contact benefit is in lieu of eyeglass frames and lens benefit

Please reference the benefit summary for full details.

Bi-Weekly Deduction	Choice 1	Choice 2
Employee	\$3.47	\$4.75
Employee + Family	\$8.74	\$10.68



Life and AD&D Insurance

Montgomery County provides all eligible full-time employees with group basic life and accidental death and dismemberment (AD&D) insurance at **no cost to you**. Life insurance pays a lump-sum benefit to your beneficiary(ies) to help meet expenses in the event of your death. AD&D Insurance pays a benefit if you die or suffer certain serious injuries as the result of a covered accident. In the case of a covered accidental injury (e.g., loss of sight, loss of a limb), the benefit you receive is a percentage of the total AD&D coverage you elected based on the severity of the accidental injury.

Guaranteed Issue and Evidence of Insurability

Employees and spouses who elect voluntary coverage when they are first eligible can elect up to the Guaranteed Issue (GI) amount without Evidence of Insurability (EOI). If the amount requested is more than GI, you will need to provide EOI before the amount over GI becomes effective. If you are required to provide EOI the form can be found in your Selerix portal or can be provided by Risk Management.

Life and AD&D Insurance For You		
Coverage level	Coverage Amount	Evidence of Insurability
Employer-Paid Basic Life and AD&D	\$20,000 up to age 70 \$13,000 age 70 - 75th birthday (35% benefit reduction) \$10,000 age 75+ (50% benefit reduction)	None
Voluntary Employee Life	Increments of \$10,000 not to exceed \$500,000 or 5x your annual earnings	Required if greater than the lesser of 3x annual earnings or \$200,000 during initial enrollment or if coverage was previously declined
Life Insurance For Your Dependents		
Dependent Basic Life	Spouse: \$2,000 max Child(ren): \$1,000 max	None
Voluntary Spouse Life	Increments of \$5,000 up to \$100,000 not to exceed 50% of Employee coverage	Required if greater than \$25,000 during initial enrollment or if coverage was previously declined
Voluntary Child(ren) Life	Flat amount of \$1,000 (newborn - 15 days) Flat amount of \$10,000 (16 days to 26 years)	Required if elected outside of initial enrollment



Disability Insurance

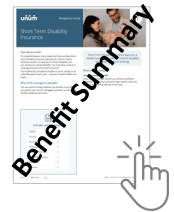
Disability insurance can keep you financially stable should you become disabled and unable to work. It can help provide a sense of security, knowing that if the unexpected should happen, you'll still receive a monthly income. If you need to file a disability claim your benefits will be paid tax-free. A qualifying disability is a sickness or injury that causes you to be unable to perform any other work for which you are or could be qualified by education, training, or experience. Premiums are based on age, income and benefit choice selection. Please see benefit summaries for cost information.

Evidence of Insurability (EOI)

EOI (proof of good health questionnaire) will be required unless signing up when first eligible (new hires). Visit securehealth.unum.com/eoiaccess to submit EOI. Access Code: 48ALW9S

Voluntary Short-Term Disability (STD)

STD coverage pays a percentage of your weekly salary for up to 90 days if you are temporarily disabled and unable to work due to an illness, non-work related injury or pregnancy. You have a choice between 3 STD plan options:



	Choice 1	Choice 2	Choice 3
Coverage	50% of your weekly earnings up to a \$2,000 maximum for 9 weeks	60% of your weekly earnings up to a \$2,000 maximum for 11 weeks	66.67% of your weekly earnings up to a \$2,000 maximum for 13 weeks
Elimination Period Injury / Sickness	30 / 30 days	14 / 14 days	0 / 7 days
Pre-existing Limitation: A Pre-Existing Condition is a Sickness or Injury for which you have been seen, received treatment, or prescribed medication within 3 months prior to your effective date. Any disability contributed to or caused by a Pre-Existing Condition within the first 12 months of your effective date will not be covered.			

This benefit cannot run concurrent with Worker's Compensation

Voluntary Long-Term Disability (LTD)

LTD insurance pays a percentage of your monthly salary for a covered disability or injury that prevents you from working for more than 90 days. You have the choice between 3 LTD plan options:



	Choice 1	Choice 2	Choice 3
Coverage	50% of your monthly earnings up to a \$10,000 maximum for 5 years	60% of your monthly earnings up to a \$10,000 maximum for 10 years	66.67% of your weekly earnings up to a \$10,000 maximum until SSNRA*
Elimination Period	90 days	90 days	90 days
Pre-existing Limitation: A Pre-Existing Condition is a Sickness or Injury for which you have been seen, received treatment, or prescribed medication within 3 months prior to your effective date. Any disability contributed to or caused by a Pre-Existing Condition within the first 12 months of your effective date will not be covered.			

*SSNRA - Social Security Normal Retirement Age

This benefit can run concurrent with Worker's Compensation



Accident Insurance

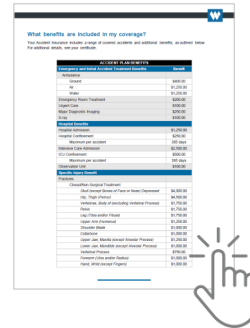
Your Accident coverage is provided by Wellfleet. Accident insurance can cover out-of-pocket medical expenses related to an accidental injury. Accident insurance can help you offset your deductible, copay or coinsurance requirements while paying little to nothing from your own pocket. Benefits can also be used to pay for other expenses that may follow an accident, such as medical supplies, help with childcare or anything else you may need.

What benefits are included in my coverage?
Emergency & Initial Accident Treatment Benefits: up to \$1,250
Hospital Benefits: up to \$2,500
Specific Injury Benefit: up to \$17,500
Surgery Benefits: up to \$1,600
Medical Benefits: up to \$1,500
Follow-Up Care & Transportation Benefits: up to \$2,500
Accidental Death Benefits: Employee \$50,000; Spouse: \$25,000; Child(ren): \$25,000
Accidental Dismemberment Benefits: up to \$25,000
Catastrophic Benefits: up to \$75,000
Health Screening Incentive Benefit: \$75

Please reference the benefit summary for full details.

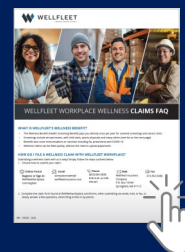
Coverage Tier	Bi-Weekly Contributions
Employee	\$3.70
Employee + Spouse	\$7.25
Employee + Child(ren)	\$8.75
Employee + Family	\$10.42

Benefit Summary



Health Screening Incentive Benefit Cash in Your Pocket!

Your Wellfleet Accident insurance plan comes with a Health Screening incentive benefit. This benefit is paid for each covered person who completes at least one wellness treatment, health screening test or preventive care service. Click the flyer below to view eligible visits/ screenings & instructions on how to claim your wellness incentive.



Limited to one per year per covered person.



855.664.5838
Mon. - Fri. 7:30am to 4pm CT



WellfleetWorkplace.com/register



workplaceclaims@wellfleetinsurance.com



Critical Illness Insurance

Your Critical Illness coverage is provided by Wellfleet. Critical Illness Insurance pays a lump-sum benefit following the diagnosis of a critical illness, such as a heart attack, cancer, or stroke. This coverage complements your core medical insurance by helping to cover unexpected out-of-pocket expenses and features built-in flexibility that allows you to select the coverage level that meets your family's unique needs. Benefits are paid directly to you and can be used however you like.

How does it work?

The amount paid is based on the benefit amount you elect. Employees may elect \$10,000 - \$50,000 in \$10,000 increments. Enrolled dependents will receive 50% of the employee elected amount.

Critical Illness benefits are paid for the initial occurrence, reoccurrences of the same critical illness and occurrences of a different critical illness, up to the elected maximum payment. There is no wait between initial occurrences and different critical illnesses. Reoccurrences of the same critical illness can be paid 1 months after the initial critical illness. Check your benefit schedule for more details around the covered critical illnesses.

What benefits are included in my coverage?

Critical Illness Benefits: 100% of your elected benefit amount
Heart Attack, Stroke, Major Organ Failure, Benign Brain Tumor, Bone Marrow or Stem Cell Transplant, Coronary Artery Bypass Surgery

Cancer Benefits

Cancer (100%), Carcinoma in Situ (50%), Skin Cancer (10%)

Enhanced Benefits

Coma, Paralysis, Loss of Hearing or Sight, Sudden Cardiac Arrest, Severe Burns, Occupational HIV, Occupational Hepatitis B or C, Type 1 Diabetes (100%) Aneurism, Angioplasty, Transient Ischemic Attacks (10%)

Progressive Disease Benefits

ALS, Parkinson's Disease, Advanced Dementia, Multiple Sclerosis, Systemic Lupus, Myasthenia Gravis, Addison's Disease, Systemic Sclerosis (100%) Infectious Disease* (25%)

Additional Childhood Conditions

Cerebral Palsy, Genetic Disorder, Congenital Defect, Congenital Metabolic Disorders (100%) Premature Birth (10%)

Health Screening Incentive Benefit: \$75

* Five day hospitalization requirement

Please reference the benefit summary for full details and cost info.



855.664.5838

Monday - Friday 7:30am to 4pm CT

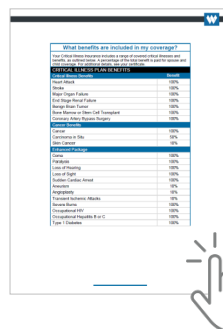


WellfleetWorkplace.com/register



workplaceclaims@wellfleetinsurance.com

Benefit Summary



Health Screening Incentive Benefit Cash in Your Pocket!

Your Wellfleet Accident insurance plan comes with a Health Screening incentive benefit. This benefit is paid for each covered person who completes at least one wellness treatment, health screening test or preventive care service. Click the flyer below to view eligible visits/screenings & instructions on how to claim your wellness incentive.



Limited to one per year per covered person.



Hospital Indemnity Insurance

Your Hospital Indemnity coverage is provided by Wellfleet. Hospital indemnity insurance can help pay for out-of-pocket costs associated with being hospitalized, giving you more of a financial safety net for unplanned expenses brought on by a hospital stay. If you are admitted to a hospital for a covered sickness or injury, following 24 hours of continuous inpatient confinement, you'll receive payments that can be used however you like. If you are hospitalized for 30 continuous days, premium payments will be waived for up to 12 months.

What benefits are included in my coverage?

Hospital Benefits

Admission Benefit: \$1,500 (1x per year)

Daily Confinement Benefit: \$150 per day up to 31 days

Intensive Care Unit (ICU) Benefits

Admission Benefit: \$1,500 (1x per year)

Daily Confinement: \$150 per day up to 31 days

Newborn

Confinement: \$150 per day up to 5 days

Specialty Care Benefits

Inpatient Rehab Facility: \$150 per day*

Inpatient Mental & Nervous Disorder Facility: \$150*

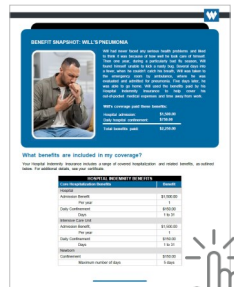
Inpatient Substance Abuse Facility: \$150 per day*

Health Screening Incentive Benefit: \$75

*Maximum days per year: 30; Lifetime maximum: 90 days

Please reference the benefit summary for full details.

Benefit Summary



Health Screening Incentive Benefit Cash in Your Pocket!

Your Wellfleet Accident insurance plan comes with a Health Screening incentive benefit. This benefit is paid for each covered person who completes at least one wellness treatment, health screening test or preventive care service. Click the flyer below to view eligible visits/screenings & instructions on how to claim your wellness incentive.



Limited to one per year per covered person.

Coverage Tier	Bi-Weekly Contributions
Employee	\$11.00
Employee + Spouse	\$23.48
Employee + Child(ren)	\$17.99
Employee + Family	\$32.99



855.664.5838

Mon. - Fri. 7:30am to 4pm CT



WellfleetWorkplace.com/register



workplaceclaims@wellfleetinsurance.com

IMPORTANT: This is a fixed indemnity policy, NOT health insurance. This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill. There might be a limit on how much this policy will pay each year. This policy isn't a substitute for comprehensive health insurance. Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.



Universal Life + Living Benefits

Transamerica’s fully portable Universal Life solution addresses employees needs for permanent life insurance and peace of mind for a lifetime. Help safeguard your family members’ futures with benefits that can assist with your final expenses and your dependents’ care, living expenses, or college tuition. With Transamerica Universal Life Insurance, you also have the opportunity to build cash value that you can borrow against if an unexpected expense arises.

Your Benefits At A Glance			
	Employee Enrollment: Ages 18 - 80	Spouse Enrollment: Ages 18 - 60	Child(ren) Enrollment: 15 days - 26 years
Guaranteed Issue amount Employee must participate to receive Guaranteed Issue on dependents	Up to \$200,000	Up to \$35,000	Up to \$25,000
Portability	Included		
Riders (additional benefits)	Accelerated Death Benefit for Chronic Condition Rider Child Term Insurance Rider: up to \$20,000 Guaranteed Issue Accelerated Death Benefit for Qualified Terminal Condition Rider Waiver of Monthly Deductions for Layoff or Strike Rider		

This is a brief summary, please reference policy for full details.

Example - Meet Alexis

Alexis enrolled in a \$50,000 universal life insurance policy through her employer. This policy includes the Chronic Condition Rider - a feature that helps provide money for care if she were to fall ill. It lets her access her death benefit early if she’s diagnosed with a qualifying condition that leaves her unable to perform at least two of the six Activities of Daily Living, which include bathing, dressing, toileting, transferring (e.g., ability to get into or out of a chair or bed), continence, and eating. And with additional riders, her benefits can go further. Alexis feels better knowing there would be financial support for her family if she passes.

If Alexis is diagnosed with a qualifying condition, she can use the Chronic Condition Rider included in her policy.

\$2,000

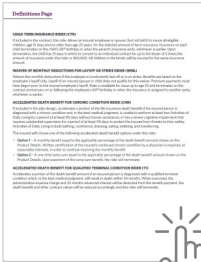
PER MONTH (4% OF \$50,000)

X

25

MONTHS

\$50,000



Click the flyer to learn more about riders (additional benefits)

Employee Assistance Program

You automatically have access to the Employee Assistance Program (EAP) through Resources For Living (Aetna). This program provides professional, confidential telephonic or face-to-face counseling services (up to 8 counseling sessions per issue per year) to you & your household members at **no cost**. The EAP can help you resolve personal issues & problems before they affect your health, relationships, & work performance.

This program is available 24/7 365 for confidential counseling, referral, & follow-up services such as:

- Anxiety
 - Relationship support
 - Depression
 - Self-esteem & personal development
- Work/life balance
 - Family issues
 - Stress management
 - Grief & loss
- Substance misuse
 - And more!

Licensed/Certified First Responder assistance available

It’s important to note that all EAP conversations are voluntary and strictly confidential. If you and your counselor determine that additional assistance is needed, you’ll be referred to the most appropriate and affordable resource available. Although you’re responsible for the cost of referrals, these costs are often covered under your medical plan.



Daily Life Assistance	• Child care, parenting & adoption • Care for older adults • Caregiver support • School & financial aid research	• Community resources/ basic needs • Home repair & improvement • Special needs	• Pet care • Summer programs for kids • Household services & more
Legal Services	• General • Family • Civil/Criminal law	• Divorce • Wills & other document preparation • Elder law & estate planning	• Real estate transactions • Mediation services
Financial Services	• Budgeting • Retirement or other financial planning	• Credit & debt issues • Mortgages & refinancing	• College funding • Tax & IRS questions
Online Resources	• Articles & self-assessments • Adult & child care provider search tool	• Live & recorded webinars • Stress resource center	• Video resources • Mobile app

This is a brief summary, for full details reference the attached flyer

To Access Services:



888.238.6232 / TTY: 771



resourcesforliving.com

Username: mctx
Password: eap



457b Retirement Plan

Optional

The Internal Revenue Service Section 457, Deferred Compensation Plan, is an optional retirement plan provided for the employee to defer compensation on a pre-tax basis, through payroll deductions. The employee will either choose or create a Portfolio to indicate the investment allocations for their contributions using whole percentages which equal 100%. There is no employer match of funds. Newly-hired Full-Time employees are eligible to participate on the first of the month following their waiting period or subsequent enrollment periods in January 1st or July 1st of any given year.

Contributions

Your contributions are deducted from all paychecks throughout the calendar year. The minimum deduction is \$10.00 per pay period. The maximum annual deductions are established and regulated by the IRS each year. The application link is located in the online benefit enrollment. You can choose to decrease or stop your contribution during any pay period to be effective the following month. However, you may only increase your contribution in June (effective July 1st) or in December during annual enrollments (effective January 1st). **Individuals over age 50 please contact Risk Management for additional information on catch-up contribution opportunities.**

Vesting

You are always 100% vested in your contributions to this plan.

Withdrawals:

You may apply for withdrawal of funds with certain conditions and restrictions for the following events:

- Attainment of age 70 ½
- Severance of employment
- Unforeseeable emergency
- Death

IRS Section 457b Deferred
Compensation Plan through
Transamerica

www.trsrretire.com



T.C.D.R.S Retirement Plan

County Provided

Montgomery County participates in the Texas County & District Retirement System (T.C.D.R.S.) with its own individually-defined benefit plan funded by employee deposits, employer contributions and interest from investments.



Eligibility

Participation is required for all regular Part-Time and Full-Time employees

Deductions

There is a mandatory 6% deduction from gross pay per pay period.

Contributions

The County contributes 12.54% and the contribution will vary by year.
The ratio of matching credits upon retirement is 2.5:1.

Vesting

You are 100% vested at 8 years.

3 Methods to Qualify for Retirement

Your age + years of service = 75	Age 60 with 8 years of service	30 years of service at any age
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To view your account 24/7 register online after your second payroll deduction.

- Estimate your benefits
- View timely account information
- Access retirement planning resources

Register or log in at: tcdrs.org



Worker's Compensation

Montgomery County, TX provides Worker's Compensation coverage to all County employees for injuries, illness and exposures. If you are injured or experience an illness or exposure while in the course and scope of employment, **you must notify your supervisor immediately**. Failure to report an injury to your supervisor could lead to a claim being considered non-compensable by the Workers' Compensation Third Party Administrator. The Worker's Compensation Third Party Administrator (TPA) for Montgomery County, TX is AS&G, Inc. The TPA will determine compensability for Workers' Compensation claims.

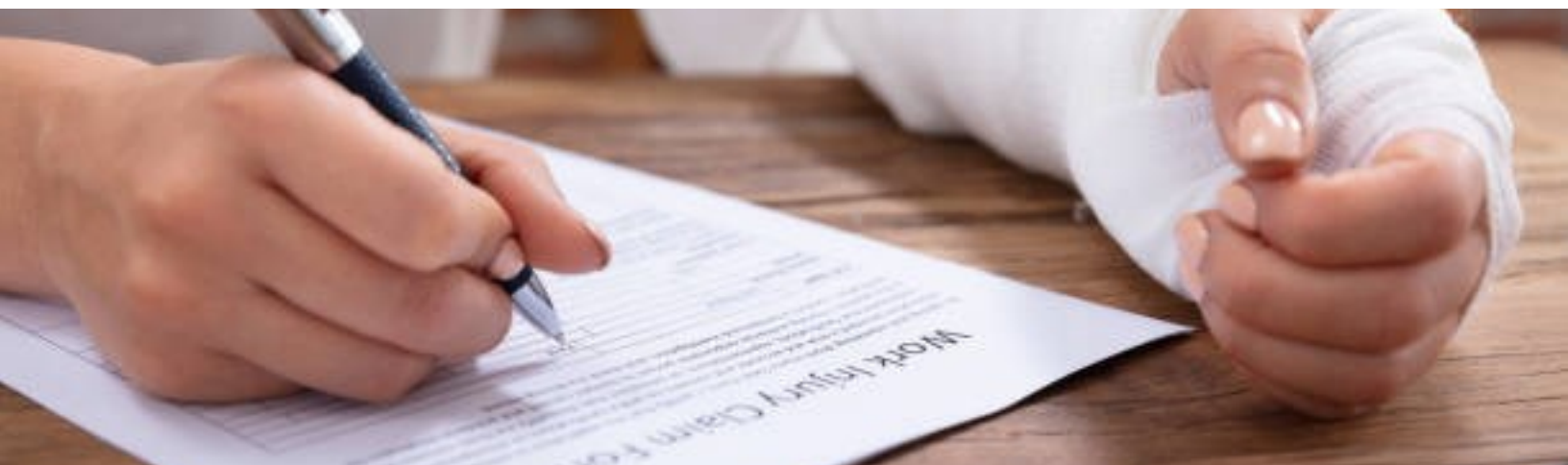
If you require routine medical attention, you must be treated by an approved Worker's Compensation provider. If emergency attention is required, go directly to the nearest Emergency Room. All Emergency Rooms accept Workers' Compensation. If you have follow up appointments, those need to be scheduled before work, during lunch or after work to prevent use of accumulated time balances.



Do **NOT** present your Montgomery County Employee Benefit Plan ID/Prescription Card for medical services or prescriptions relating to a Worker's Compensation injury. Call the Risk Management Department for the billing information to provide to the medical facility or pharmacy at the time of the services.

Supervisors go to Risk Management website and enter claims through the Property & Casualty/Worker's Comp claims portal

Analyst: Kim Schuessler
Kimberly.schuessler@mctx.org



Programs, Policies & Procedures

Department Safety Policies

The Safety Policies may vary for each Department. For more information please consult with your department head or supervisor for emergency exit routes and other safety procedures.

CPR/Defensive Driving Programs

Montgomery County Risk Management offers Defensive Driving & CPR training to all county employees. Training is offered on a monthly basis and registrations will be sent via email. Please approve training with department head or supervisor prior to signing up.

Hepatitis B Immunization Program

Montgomery County, TX offers all county employees the opportunity to receive the Hepatitis B vaccination at no cost to the employee. The vaccination is a three shot series administered by the Montgomery County Wellness Center & each employee is given the option to consent or decline the vaccination during New Employee Orientation. Existing employees may contact the Risk Management Department for the necessary forms to begin the series of shots. If you consent to the vaccination you must complete the series within the timeframe required.

Required Legal Notices

The legal notices describe important rights that you have under the terms of the Montgomery County Health Plan.

If you need a printed copy of these notices or have any questions about them, you may contact:

Your Employer Representative

Amy Gomez

Amy.gomez@mctx.org

or by mail at

Montgomery County

501 N. Thompson Suite 202

Conroe, TX 77301

Important Legal Notices

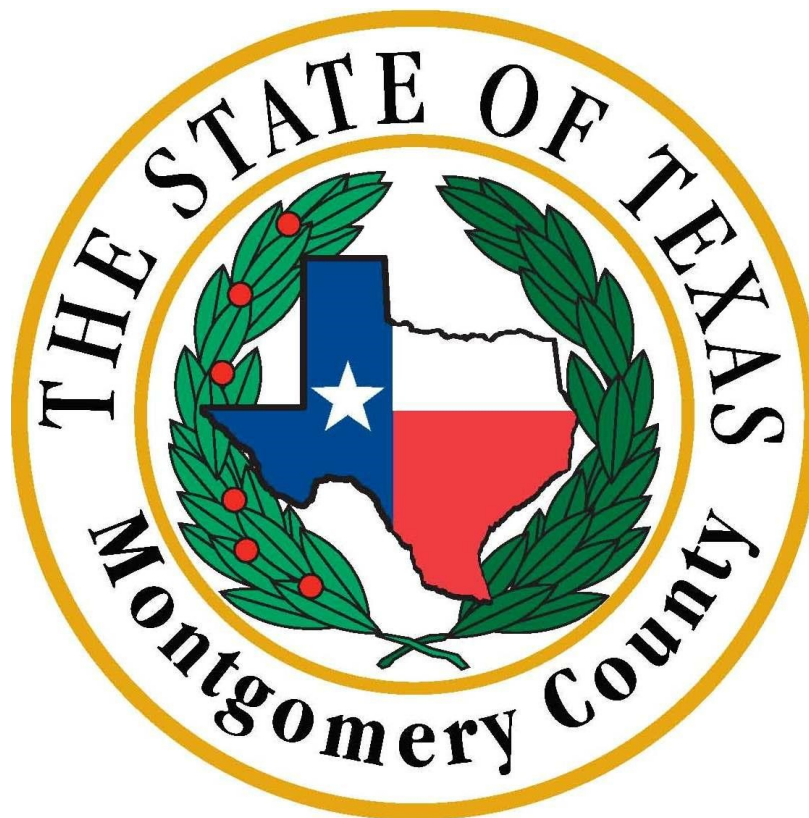
- Grandfathered Plan Status
- WHCRA Notice (Women's Health and Cancer Rights Act)
- Newborn's and Mother's Health Protection Act (NMHPA)
- CHIP Notice (Children's Health Insurance Program)
- Prescription Drug Coverage and Medicare
- Continuation Coverage (COBRA)
- Patient Protection Choice of Providers
- HIPAA Special Enrollment Rights Notice
- Consolidated Appropriations Act (CAA) No Surprises Act



Click the flyer thumbnail on the left to view the Required Legal Notices listed above

IMPORTANT NOTICE: The legal notices are provided to help employers understand the compliance obligations for Health & Welfare benefit plans, but it may not take into account all the circumstances relevant to a particular plan or situation. It is not exhaustive and is not a substitute for legal advice.





The information in this Benefits Summary is presented for illustrative purposes and is based on information provided by your employer. The text contained in this Summary was taken from various summary plan descriptions and benefits information. While every effort was taken to report your benefits, discrepancies or errors accurately are always possible. In case of a discrepancy between the Benefits Summary and the 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 this Summary, contact Human Resources.

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