



It's Time!



Complete your Open Enrollment selections by Nov. 19.

Open Enrollment is underway – don't wait another day to make your selections for your benefits:



Medical Plan



Dental Plan



Vision Plan



Flexible Spending Account

You should have already received your packet at home in the mail. More information is available on the MetNet Benefits page or by calling the Benefits-One Line at **651-602-1601**.

Enroll online at metcouncilbenefits.hrintouch.com.

(Remember, if you make no choices, your current selections roll forward, except FSA)

Don't delay!
Get your enrollment done today.

Guide to Open Enrollment for 2022

Choosing the benefits package that works for you!



For Council Employees Eligible for Benefits

Enroll in benefits Nov. 1 through Nov. 19, 2021.

Benefits you select begin Jan. 1, 2022.

- For a Flexible Spending Account, you must enroll each year.
- If you make no choices this year, your current health care selections roll forward to 2022.
- Your selections for 2022 cannot be changed during the plan year, except in a few instances. See the Family Status Changes tab in MetNet under Human Resources/Benefits.

Your Benefit Choices for 2022

Medical Plans

You can keep your current plan or choose another. You can also add or drop coverage, change plans, add or drop dependents.



Empower HRA



Distinctions III



Open Access (ATU only)



Dental Plan

There is one Dental Plan. You can choose to add or drop coverage, add or drop dependents.



Flexible Spending Account

You can choose pre-tax payroll deductions to pay for health care expenses, dependent care (child care), or parking.



Vision Plan

This plan helps pay for new glasses or contact lenses.



Life Insurance

Newly enroll, change coverage, discontinue coverage.

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No plan design changes, but some new rates and new FSA administrator

- Same medical plans. Empower HRA, Distinctions III, and Open Access (ATU only), but some costs are up.
- Same dental plan. HealthPartners Distinctions Dental Plan.
- Same vision plans through VSP.
- New administrator for Flexible Spending Accounts, and you need to enroll for 2022.

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Want more information?

Open Enrollment benefits: Metropolitan Council Benefits Department

Specific enrollment instructions will be mailed to you separately, arriving before November 1.

390 Robert Street North

Saint Paul, MN 55101-1805

Phone: 651.602.1601 - Leave a message, including your employee number. Staff will return your call.

Fax: 651.602.1507

Email: benefits@metc.state.mn.us

Visit metcouncilbenefits.hrntouch.com

Benefits questions while considering retirement: 651.602.1117

**Flexible Spending Accounts: Total Administrative Services Corporation (TASC) Customer Care:
1.800.422.4661**

Medical & Dental Plans: HealthPartners 952.883.5000

Minnesota State Retirement programs: MSRS Pension & Health Care Savings Plan 651.296.2761

MSRS Deferred Compensation: 877.457.6466

PERA Pension (Police units): 651.296.7460

Supplemental Life Insurance, Ochs Inc: 651.665.3789

Vision Plans: VSP 1.800.877.7195



The HRA plan has lower monthly premium costs than the other plans. You start the year with a Council-funded Health Reimbursement Account balance, and you can carry over remaining dollars year after year.

How the HRA plan works

The Council gives you money to help you pay your share of medical costs. The money is saved in a special account, called a Health Reimbursement Account (HRA).

- This plan has a deductible, but the Council puts dollars into your HRA equal to your deductible. That’s the amount you pay before your plan starts covering costs. You can use your HRA dollars to pay expenses before you reach your deductible or for your share of later costs. You’ll use a HealthPartners debit card to pay the balance due on claims from the HRA account.
- After reaching your deductible, you’ll pay 20% of the bill, called “coinsurance.” HealthPartners will cover the rest, until you reach your out-of-pocket maximum, when the plan will pay 100%.
- At the end of the year, any money left over in the account will stay there for you to use for eligible expenses in the future. That’s true even if you change plans or leave the Council. **(Note: do not discard your debit card unless it is expired. Any 2021 claims must be filed manually after Jan. 1, 2022.)**
- Remember, the money in your HRA is yours to use. You get to decide when and how to use it.

HRA by the numbers	You pay	Council pays
Council contributes dollars equal to your deductible into a special account (HRA).	\$0	\$1,375 (single) \$2,750 (family)
Your deductible (fully funded by the HRA account).	\$1,375 (single) \$2,750 (family)	
After the deductible is met, you pay a percentage of your health care costs.	20%	
The most you’ll pay out-of-pocket (not including paycheck deductions).	\$1,500 (single) \$3,000 (family)	

Keep in mind that the premium cost you pay through payroll deductions is part of your total annual health care costs (and is not reflected here).

All Council plans...

- Cover in-network preventive care at no cost to you.
- Cover out-of-network doctors.
- Cover the same services and diagnoses.
- Have the same group of doctors and other health care providers. Note that network providers can change each calendar year; check on your doctor or hospital at www.healthpartners.com/metropolitancouncil.
- Never require referrals.
- Help pay for prescriptions from the same drug list.
- Allow use of nationwide CIGNA network for in-network care outside the area.

This Council medical plan is not available to members of the following unions: Pipefitters, Painters and Allied Trades, Electricians, PT Police LELS 192.

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With the Distinctions III plan, you can easily compare the quality and cost of doctors and medical services.

How the Distinction III plan works

- What you’ll pay for care depends on what kind of care you get and what “benefit level” HealthPartners has assigned your doctor, hospital, or clinic.
- Different types of care have different ways you pay for them. For an office visit, you’ll pay a set amount (“copay”) based on the “benefit level” of the provider (see description below). For a stay at a hospital, for example, you pay costs up to a certain amount. For services such as ambulance transportation, you pay 20% (“coinsurance”) of the bill until you meet your out-of-pocket maximum.
- Once you reach your out-of-pocket maximum, HealthPartners pays 100% of your eligible claims for the rest of the calendar year.

What the benefit levels mean

- There are three benefit levels, where doctors, hospitals and clinics are categorized based on quality and cost.
- Benefit Level 1 is the best value for your dollar – highest in quality and lowest in cost.
- You can go to healthpartners.com/metropolitancouncil to check out what level each doctor is in. Or call HealthPartners Member Services:
Mon.-Fri. • 7 a.m.- 7 p.m. Central Time • 952.883.5000 or 800.883.2177 (toll free)

Distinctions III by the numbers	You pay
Your deductible. For some services, the deductible doesn’t apply – there is a copay or the plan pays the entire cost.	\$275 (single) \$550 (family)
The most you’ll pay out-of-pocket in deductibles, copays and coinsurance (not including paycheck deductions).	\$1,100 (single) \$2,200 (family)

Keep in mind that the premium cost you pay through payroll deductions is part of your total annual health care costs (and is not reflected here).

All Council plans...

- Cover in-network preventive care at no cost to you.
- Cover out-of-network doctors.
- Cover the same services and diagnoses.
- Have the same group of doctors and other health care providers. Note that network providers can change each calendar year; check on your doctor or hospital at healthpartners.com/metropolitancouncil.
- Never require referrals.
- Help pay for prescriptions from the same drug list.
- Allow use of nationwide CIGNA network for in-network care outside the area.

This Council medical plan is not available to members of the following unions: Pipefitters, Painters and Allied Trades, Electricians, PT Police LELS 192.



MEDICAL PLANS

Open Access (ATU employees only)

This plan is offered only to ATU members. With the Open Access Plan, your out-of-pocket costs are lower, but your monthly premiums are much higher than the other two plans.

How the Open Access plan works

What you'll pay for care depends on what kind of care you get.

- For an office visit, you'll pay a set amount – a “copay.”
- For services, such as ambulance services, you pay 20% (“coinsurance”) of the costs up to your out-of-pocket maximum.
- Once you reach your out-of-pocket maximum, HealthPartners pays 100% of your eligible claims for the rest of the calendar year.

Open Access by the numbers	You pay
Your deductible	\$0
The most you'll pay out-of-pocket in copays and coinsurance (not including paycheck deductions).	\$1,000 (single) \$2,000 (family)

Keep in mind that the premium cost you pay through payroll deductions is part of your total annual health care costs (and that is not reflected here).

All Council plans...

- Cover in-network preventive care at no cost to you.
- Cover out-of-network doctors.
- Cover the same services and diagnoses.
- Have the same group of doctors and other health care providers. Note that network providers can change each calendar year, check on your doctor or hospital at healthpartners.com/metropolitancouncil
- Never require referrals.
- Help pay for prescriptions from the same drug list.
- Allow use of nationwide CIGNA network for in-network care outside the area.

This Council medical plan is only available to ATU union members.

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FREE HEALTH CARE

The virtuwel online clinic and Well@Work Clinic make access to health care convenient, timely, and free. Both are benefits of all three health care plans – Empower HRA, Distinctions III, and Open Access.

virtuwel

The HealthPartners virtuwel clinic is an online clinic that provides diagnosis and treatment of common medical conditions. The service combines medical expertise with the convenience of 24/7 online access to care, including prescriptions if needed. No appointment is necessary. Visit www.virtuwel.com.

Available Day and Night. Experienced nurse practitioners are available 24 hours to treat adults and children for conditions such as cold, cough and allergy, sinus infections, ear pain, yeast and urinary tract infections, and acne.

First Three Visits Free. There is no charge for the first three visits to virtuwel per calendar year for each person on a Council medical plan – no deductible, no copay.

After First Three Visits. You pay the same as you would for a clinic visit. The full cost of the service is only \$59, so it's very cost effective, even if you haven't met your Empower HRA deductible, or you are not covered by a health plan. HealthPartners guarantees your satisfaction.

Available to everyone living in, working in or traveling to Wisconsin or Minnesota. Patients do not need to be enrolled in a HealthPartners health plan to use virtuwel. However, the first three visits are free only to those enrolled in a Council medical plan

Well@Work Clinics

Your Well@Work onsite clinics are a lot like your regular clinic, but care and most prescriptions are free if you're on a Metropolitan Council medical plan. Claims for care or prescriptions are not submitted to your medical plan.

Privacy. As with all HealthPartners clinics, all clinic records are private between you and your doctors.

Spouses and children (age 18 months and older) who are covered through the Met Council's HealthPartners medical plans can be treated at either Well@Work clinic. Services available include preventive care, cold and flu, ear infections, strep throat, immunizations, and more.

Robert/Jackson Clinic

Location. 375 Jackson Street, Suite 240, in the Saint Paul skyway next to the Metropolitan Council Robert Street building.

Hours. You can visit the clinic Monday, Wednesday and Friday, 6 a.m. to 2:30 p.m., and Tuesday and Thursday from 9:30 a.m. to 6 p.m.

Making an Appointment. Call the appointment center at 952.967.5474. After you've been seen once, you can make appointments online by visiting healthpartners.com and logging on to your myHealthPartners account. For more information, go to MetNet/Regional Admin/Human Resources/Benefits/Online clinic.

Parking. Well@Work patients will receive validation for free parking at First National Bank ramp (5th Street, between Minnesota and Robert Streets) and US Bank Ramp (5th Street and Minnesota Street). Bring your ramp ticket with you to the clinic for validation. There is no mileage reimbursement.

Heywood Clinic

Location. 560 6th Avenue North, Minneapolis in the Heywood Office and Police Building (1st floor, in the old chambers area).

Hours. You can visit the clinic Monday, Wednesday and Friday, 6 a.m. to 2:30 p.m., and Tuesday and Thursday from 9:30 a.m. to 6 p.m.

Making an Appointment. Call the appointment center at 952.967.7468. After you've been seen once, you can make appointments online by visiting healthpartners.com and logging on to your myHealthPartners account. For more information, go to MetNet/Regional Admin/Human Resources/Benefits/Online clinic.

Parking. Well@Work patients will have access to two reserved parking spots for the clinic in front of the Heywood Building. In addition, patients may receive validation for parking in the ABC Ramps. (See the Heywood reception staff for a validated ticket – staff are available only until 4:55 p.m. weekdays.) There is no mileage reimbursement.

DENTAL, VISION, FLEXIBLE SPENDING AND LIFE INSURANCE



Dental Plan

The Council has one dental plan – the Dental Distinctions Plan - that has three levels of coverage. You get all three levels of coverage when you enroll in this plan.

Go to healthpartners.com/metropolitancouncil to find a dentist or see what level your dentist is in.

The plan covers basic care, special care and prosthetics, preventive and diagnostic care, and orthodontic services. The primary cost and coverage differences are associated with the clinic you choose:

- Benefit level 1: Health Partners Dental, Park Dental, Orthodontic Care Specialists, WOW Orthodontics
- Benefit level 2: All other network providers
- Benefit level 3: Out-of-network providers

Preventive dental care is covered at 100% in all benefit levels.

The table below highlights the key differences between the benefits for each level.

	Benefit Level 1	Benefit Level 2	Benefit Level 3
Annual Maximum (per person)	Plan pays \$2,000 per calendar year	Plan pays \$1,500 per calendar year	Plan pays \$1,000 per calendar year
Deductible	\$0	\$10 per person; \$30 per family	\$25 per person; \$75 per family
Lifetime Maximum for Orthodontic Services (per person- benefit available for all ages)	\$3,000	\$3,000	\$1,500

This Council dental plan is not available to members of the following unions: Pipefitters, Painters and Allied Trades, Electricians, PT Police LELS 192.

Vision Plan



You may purchase optional coverage to help pay for glasses and contact lenses. (Routine vision exams and treatment of eye disorders are covered under the Council's medical plans.)

You have two plans to choose from that have similar benefits, both provided through VSP.

You pay the full cost of the plan in post-tax deductions, deducted from the first and second paycheck of each month.

Basic plan: new glasses or contacts every other year.

Buy-Up plan: new glasses or contacts every year, plus a higher frame allowance than the Basic Plan.

Visit VSP.com or call 800.877.7195 to learn more about VSP providers. In order to utilize the plan, you must see a VSP provider. In addition, you won't get an ID card with this plan - when you visit a VSP provider, tell them you have VSP and they'll take care of the rest.

Full plan details are also available on the Benefits information pages (metcouncilbenefits.hrintouch.com).

Basic Plan	Buy Up Plan
Monthly Cost: Employee only: \$4.97 Employee + Spouse: \$9.94 Employee + Children: \$10.64 Employee + Family: \$17.06	Monthly Cost: Employee only: \$7.38 Employee + Spouse: \$14.74 Employee + Children: \$15.94 Employee + Family: \$25.45

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Virtual Open Enrollment Information Meetings

The Metropolitan Council will offer virtual information meetings throughout the Open Enrollment period. Visit the Benefits page on MetNet for a full schedule, and watch your email for updated information.



We offered flu shot clinics earlier this year, rather than waiting until the Open Enrollment period. But the good news is you can still get a flu shot at one of the Well@Work clinics, through your regular clinic, or a convenience clinic (such as those in Target, Walgreens, or CVS) near you. Flu shots are free to anyone enrolled in a Met Council medical plan. You may need to make an appointment, so call ahead.

Flexible Spending Accounts



The flexible spending accounts (FSA) are optional plans that allow you to use pre-tax payroll deductions to pay for health care expenses not paid by your medical plan (Health FSA) for daycare (Dependent Care FSA), or for work related parking expenses (Parking FSA). You use a debit card to access funds you contribute to these accounts. We are partnering with a new company to administer FSAs. We'll be communicating more information about the process with the new administrator in early 2022.

You are not automatically re-enrolled in Flexible Spending Accounts from year to year.

You must enroll each year if you want to contribute toward the account in 2022.

If you have a 2021 health FSA and it ends the year with a balance of up to \$550, those funds will automatically roll over into 2022, even if you haven't enrolled in a 2022 FSA. NOTE: You will not be able to use those rollover funds until after March 31, 2022 (when the 2021 year closes out) and if you don't enroll in a health FSA for 2022, you will only have those rollover dollars to draw from. Also, parking account balances will roll over automatically into 2022, but you will not be able to use those rollover funds until after Feb. 1, 2022 (when the 2021 closes out) and if you don't enroll in a parking FSA for 2022, you will only have those rollover dollars to draw from.

Dependent care FSA funds do not roll over to the next year.

Parking and dependent care accounts are funded as you contribute from your paycheck. Even if you enroll in a parking or dependent care account for 2022, you will not have any funds in these accounts until after your first paycheck in 2022. If you swipe your FSA debit card for parking or dependent care and the amount is more than your contributed balance, your debit card will decline. We will be sending more information in early 2022 about how to access the website and mobile app for the new administrator - we hope you will find these conveniences helpful as you manage your accounts.

This Council FSA plan is not available to members of PT Police LELS 192.

Life Insurance

The Council offers additional life insurance for yourself, your spouse, and your children. **You may change your supplemental life insurance selection at any time.** When you choose to newly enroll or increase your supplemental life insurance, you will be asked to complete health information by Securian/Minnesota Life, and coverage may be declined by the carrier. Please see complete details regarding coverage maximums and pricing on the online enrollment site. Note that rates are age banded, meaning they increase as you get older. Your current coverage will automatically increase in cost at the start of a calendar year after you've moved from one age band to another.



This Council supplemental life plan is not available to members of the following unions: Pipefitters, Painters and Allied Trades, Electricians, PT Police LELS 192.



BEFORE YOU ENROLL

What's the right medical plan for me?



I'm not sure where to start.

Consider how much coverage you think you might actually need before you decide on a plan. For example:

- What health care have you used in previous years? What health care might you need in the coming year?
- What would your premiums and out-of-pocket expenses be under each plan?
- What would be the cost of your care when you go to a doctor, clinic or hospital?

Of all the people on our health plans, two-thirds have less than \$2,500 in a calendar year in health claims. Keep in mind how much coverage you'll actually need before you decide what plan you'll enroll in this year. Even if you underestimate your need, the out-of-pocket maximum is there to protect you.



I want the least amount of paperwork.

The Open Access (ATU) and Distinctions III plans require the least amount of follow-up with medical bills.



I want the least cost overall, no matter what my year brings.

The Empower HRA plan has the lowest monthly cost from your paycheck. When combined with the maximum out-of-pocket of the plan, the HRA plan allows most people to pay the least amount.



I want the most choices of doctors, hospitals and pharmacies.

All three Council plans use **exactly the same provider networks**. You will never have to change doctors just because you change plans. All three plans also have coverage for out-of-network doctors, and coverage for out-of-area providers through the CIGNA network.



I want the plan that covers the most care.

All three Metropolitan Council plans **cover the same services and diagnoses**.



I want the plan that allows me to save for future health care expenses.

The Empower HRA health plan includes an employer-funded Health Reimbursement Account. Any dollars unspent at the end of the year stay in your account until you use them. If you stay enrolled in the Empower HRA plan the next year, any prior balance is added to that year's contribution. There is no balance maximum, and no service charges until you leave the Empower HRA plan (then it's \$51 per year).



What if I get really sick? I don't want to go broke.

All three Metropolitan Council plans have a **maximum out-of-pocket amount you will pay**. The out-of-pocket maximum is the most you'll pay in deductible, copays and coinsurance each calendar year. This protects you from a catastrophic year. If you meet the out-of-pocket maximum (either as an individual or as a family), HealthPartners pays the rest of your covered claims at 100% for the rest of the calendar year.



I want the maximum amount of money in my paycheck.

The Empower HRA plan has the lowest monthly employee-paid premiums of any plan offered at the Council.

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Does the Council benefit from my enrollment in the Empower HRA plan?

Employees save the most. But when you add the dollars the Council contributes to the Health Reimbursement Account to the employer-paid premiums, the Council does save some compared to Distinctions III (around 20%) and even more compared to Open Access (around 33%). On average, a single employee saves 75% in premiums over other plans, and families save 45% compared to Distinctions III and 81% compared to Open Access. Plus, research has shown that plans involving an employee's own money (**and the Council's contribution to the HRA account is your money**) encourage employees to make better choices, which help reduce overall claims costs and keep premiums low.



I want to see a comparison of the health care plans.

You can easily compare them in the Medical Plans section of this packet, or by going to www.Healthpartners.com/metropolitancouncil.



I want to hear about how the plans work.

Take a look at these videos on the MetNet Benefits page.

Part I – Health Plan Basics – definitions, and brief explanations about how our medical insurance works (about 7 minutes)

Part II- Health Plan Specifics – helpful information on each medical plan and tips on how to choose a medical plan (about 15 minutes)



I want all the details.

Review full HealthPartners plan documents at healthpartners.com/metropolitancouncil. Complete details are also available at metcouncilbenefits.hrntouch.com. Once you sign in, find information by hovering your cursor over “Benefits.” Full instructions on how to enroll will be sent prior to Open Enrollment.



I want to see what I’m enrolled in and what I pay now. Sign into your account at metcouncilbenefits.hrntouch.com and click on “Enroll Now.” On the next page, scroll down until you see “My Docs” on the left side of the page. Click on your employee summary report or employee detail report to see a complete list of your coverage and costs. When you complete your open enrollment, these reports will show your current year elections and the open enrollment (2021) elections.



I want to talk to a person

Attend an Open Enrollment Virtual Info Session (see MetNet for Open Enrollment Virtual Info Sessions)



Call HealthPartners Member Services for questions on medical, dental or 2021 FSA: Mon.-Fri. • 7 a.m.- 7 p.m. Central Time • 952.883.5000 or 800.883.2177 (toll free)

Call MSRS for questions on HCSP, deferred compensation or your pension: 651.296.2761 or 800.657.5757 (toll free)

Call Metropolitan Council Benefits Department at 651.602.1601, and leave a message with your employee ID and question. Staff will return your call. You can also email benefits@metc.state.mn.us.

Call PERA Pension staff at 651.296.7460





2022 MEDICAL PLAN COSTS

As you weigh options for health care coverage, consider three main cost factors.

- Your monthly premium
- Your annual premium (your lowest cost scenario)
- Your annual premium plus the maximum you can pay out of your pocket (your highest possible cost scenario)
Once you reach your “out-of-pocket maximum,” your health plan will completely cover the rest of your costs for your in-network care.

Below are summaries showing these factors for each Council health care plan, for all employees.

Empower HRA Plan

The full monthly premium of this plan is \$623 for single coverage and \$1,557 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

With this plan, the Council puts funds in a Health Reimbursement Account (HRA). You can use those funds to pay your full deductible or any eligible health care costs. Any funds in your account at the end of the year roll over for your use in later years.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum – annual HRA contribution
Single- Full Time Employee	\$50	\$600 leaving \$1,375 in HRA	\$2,100
Family- Full Time Employee	\$173	\$2,076 leaving \$2,750 in HRA	\$5,076
Single- Part Time Employee	\$193	\$2,316 leaving \$1,375 in HRA	\$3,816
Family- Part Time Employee	\$519	\$6,228 leaving \$2,750 in HRA	\$9,228

Distinctions Plan

The full monthly premium of this plan is \$951 for single coverage, and \$2,373 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$95	\$1,140	\$2,240
Family- Full Time Employee	\$359	\$4,308	\$6,508
Single- Part Time Employee	\$309	\$3,708	\$4,808
Family- Part Time Employee	\$862	\$10,344	\$12,544

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



Open Access Plan

The full monthly premium of this plan is \$1,239 for single coverage, and \$3,097 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$123	\$1,476	\$2,476
Family- Full Time Employee	\$619	\$7,428	\$9,428
Single- Part Time Employee	\$402	\$4,824	\$5,824
Family- Part Time Employee	\$1,238	\$14,856	\$16,856



2022 ATU Dental Plan Costs

The full monthly premium of this plan is \$47 for single coverage, and \$125 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*	Coverage Level	Monthly Premium*
Single- Full Time Employee	\$1	Single- Part Time Employee	\$13
Family- Full Time Employee	\$25	Family- Part Time Employee	\$50

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.





2022 MEDICAL PLAN COSTS

AFSCME

As you weigh options for health care coverage, consider three main cost factors.

- Your monthly premium
- Your annual premium (your lowest cost scenario)
- Your annual premium plus the maximum you can pay out of your pocket (your highest possible cost scenario)
Once you reach your “out-of-pocket maximum,” your health plan will completely cover the rest of your costs for your in-network care.

Below are summaries showing these factors for each Council health care plan, for all employees.

Empower HRA Plan

The full monthly premium of this plan is \$623 for single coverage and \$1,557 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

With this plan, the Council puts funds in a Health Reimbursement Account (HRA). You can use those funds to pay your full deductible or any eligible health care costs. Any funds in your account at the end of the year roll over for your use in later years.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum – annual HRA contribution
Single- Full Time Employee	\$27	\$324 leaving \$1,375 in HRA	\$1,824
Family- Full Time Employee	\$296	\$3,552 leaving \$2,750 in HRA	\$6,552
Single- Part Time Employee	\$176	\$2,112 leaving \$1,375 in HRA	\$3,612
Family- Part Time Employee	\$612	\$7,344 leaving \$2,750 in HRA	\$10,344

Distinctions Plan

The full monthly premium of this plan is \$951 for single coverage, and \$2,373 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$60	\$720	\$1,820
Family- Full Time Employee	\$437	\$5,244	\$7,444
Single- Part Time Employee	\$283	\$3,396	\$4,496
Family- Part Time Employee	\$921	\$11,052	\$13,252

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.

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2022 AFSCME Dental Plan Costs

The full monthly premium of this plan is \$47 for single coverage, and \$125 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*	Coverage Level	Monthly Premium*
Single- Full Time Employee	\$3	Single- Part Time Employee	\$14
Family- Full Time Employee	\$20	Family- Part Time Employee	\$47

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.





As you weigh options for health care coverage, consider three main cost factors.

- Your monthly premium
- Your annual premium (your lowest cost scenario)
- Your annual premium plus the maximum you can pay out of your pocket (your highest possible cost scenario)
Once you reach your “out-of-pocket maximum,” your health plan will completely cover the rest of your costs for your in-network care.

Below are summaries showing these factors for each Council health care plan, for all employees.

Empower HRA Plan



The full monthly premium of this plan is \$623 for single coverage and \$1,557 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

With this plan, the Council puts funds in a Health Reimbursement Account (HRA). You can use those funds to pay your full deductible or any eligible health care costs. Any funds in your account at the end of the year roll over for your use in later years.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum – annual HRA contribution
Single- Full Time Employee	\$50	\$600 leaving \$1,375 in HRA	\$2,100
Family- Full Time Employee	\$121	\$1,452 leaving \$2,750 in HRA	\$4,452

Distinctions Plan



The full monthly premium of this plan is \$951 for single coverage, and \$2,373 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$95	\$1,140	\$2,240
Family- Full Time Employee	\$474	\$5,688	\$7,888

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



2022 Full-time Police Officers Dental Plan Costs

The full monthly premium of this plan is \$47 for single coverage, and \$125 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*
Single- Full Time Employee	\$0
Family- Full Time Employee	\$25

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



2022 MEDICAL PLAN COSTS

Police Administration and Command

As you weigh options for health care coverage, consider three main cost factors.

- Your monthly premium
- Your annual premium (your lowest cost scenario)
- Your annual premium plus the maximum you can pay out of your pocket (your highest possible cost scenario)
Once you reach your “out-of-pocket maximum,” your health plan will completely cover the rest of your costs for your in-network care.

Below are summaries showing these factors for each Council health care plan, for all employees.

Empower HRA Plan

The full monthly premium of this plan is \$623 for single coverage and \$1,557 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

With this plan, the Council puts funds in a Health Reimbursement Account (HRA). You can use those funds to pay your full deductible or any eligible health care costs. Any funds in your account at the end of the year roll over for your use in later years.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum – annual HRA contribution
Single- Full Time Employee	\$62	\$744 leaving \$1,375 in HRA	\$2,244
Family- Full Time Employee	\$270	\$3,240 leaving \$2,750 in HRA	\$6,240

Distinctions Plan

The full monthly premium of this plan is \$951 for single coverage, and \$2,373 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$95	\$1,140	\$2,240
Family- Full Time Employee	\$459	\$5,508	\$7,708

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.

(turn over)



2022 Dental Plan Costs - Police Administration and Command Dental Plan Costs

The full monthly premium of this plan is \$47 for single coverage, and \$125 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*
Single- Full Time Employee	\$0
Family- Full Time Employee	\$8

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



2022 MEDICAL PLAN COSTS

Operating Engineers - Local 49

As you weigh options for health care coverage, consider three main cost factors.

- Your monthly premium
- Your annual premium (your lowest cost scenario)
- Your annual premium plus the maximum you can pay out of your pocket (your highest possible cost scenario)
Once you reach your “out-of-pocket maximum,” your health plan will completely cover the rest of your costs for your in-network care.

Below are summaries showing these factors for each Council health care plan, for all employees.

Empower HRA Plan

The full monthly premium of this plan is \$623 for single coverage and \$1,557 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

With this plan, the Council puts funds in a Health Reimbursement Account (HRA). You can use those funds to pay your full deductible or any eligible health care costs. Any funds in your account at the end of the year roll over for your use in later years.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum – annual HRA contribution
Single- Full Time Employee	\$19	\$228 leaving \$1,375 in HRA	\$1,728
Family- Full Time Employee	\$172	\$2,064 leaving \$2,750 in HRA	\$5,064

Distinctions Plan

The full monthly premium of this plan is \$951 for single coverage, and \$2,373 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$54	\$648	\$1,748
Family- Full Time Employee	\$293	\$3,516	\$5,716

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



2022 Dental Plan Costs - Operating Engineers - Local 49

The full monthly premium of this plan is \$47 for single coverage, and \$125 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*
Single- Full Time Employee	\$5
Family- Full Time Employee	\$22

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



As you weigh options for health care coverage, consider three main cost factors.

- Your monthly premium
- Your annual premium (your lowest cost scenario)
- Your annual premium plus the maximum you can pay out of your pocket (your highest possible cost scenario)
Once you reach your “out-of-pocket maximum,” your health plan will completely cover the rest of your costs for your in-network care.

Below are summaries showing these factors for each Council health care plan, for all employees.

 **Empower HRA Plan**

The full monthly premium of this plan is \$623 for single coverage and \$1,557 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

With this plan, the Council puts funds in a Health Reimbursement Account (HRA). You can those funds to pay your full deductible or any eligible health care costs. Any funds in your account at the end of the year roll over for your use in later years.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum – annual HRA contribution
Single- Full Time Employee	\$27	\$324 leaving \$1,375 in HRA	\$1,824
Family- Full Time Employee	\$296	\$3,552 leaving \$2,750 in HRA	\$6,552
Single- Part Time Employee 75%	\$176	\$2,112 leaving \$1,375 in HRA	\$3,612
Family- Part Time Employee 75%	\$612	\$7,344 leaving \$2,750 in HRA	\$10,344

 **Distinctions Plan**

The full monthly premium of this plan is \$951 for single coverage, and \$2,373 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$60	\$720	\$1,820
Family- Full Time Employee	\$437	\$5,244	\$7,444
Single- Part Time Employee 75%	\$283	\$3,396	\$4,496
Family- Part Time Employee 75%	\$921	\$11,052	\$13,252

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



2022 MANA Dental Plan Costs

The full monthly premium of this plan is \$47 for single coverage, and \$125 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*	Coverage Level	Monthly Premium*
Single- Full Time Employee	\$3	Single- Part Time Employee 75%	\$14
Family- Full Time Employee	\$20	Family- Part Time Employee 75%	\$47


*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



As you weigh options for health care coverage, consider three main cost factors.


- Your monthly premium
- Your annual premium (your lowest cost scenario)
- Your annual premium plus the maximum you can pay out of your pocket (your highest possible cost scenario)
Once you reach your “out-of-pocket maximum,” your health plan will completely cover the rest of your costs for your in-network care.

Below are summaries showing these factors for each Council health care plan, for all employees.

 **Empower HRA Plan**
The full monthly premium of this plan is \$623 for single coverage and \$1,557 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

With this plan, the Council puts funds in a Health Reimbursement Account (HRA). You can use those funds to pay your full deductible or any eligible health care costs. Any funds in your account at the end of the year roll over for your use in later years.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum – annual HRA contribution
Single- Full Time Employee	\$19	\$228 leaving \$1,375 in HRA	\$1,728
Family- Full Time Employee	\$209	\$2,508 leaving \$2,750 in HRA	\$5,508

 **Distinctions Plan**
The full monthly premium of this plan is \$951 for single coverage, and \$2,373 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$65	\$780	\$1,880
Family- Full Time Employee	\$317	\$3,804	\$6,004

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



2022 MACHINISTS Dental Plan Costs

The full monthly premium of this plan is \$47 for single coverage, and \$125 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*
Single- Full Time Employee	\$5
Family- Full Time Employee	\$23

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.






As you weigh options for health care coverage, consider three main cost factors.


- Your monthly premium
- Your annual premium (your lowest cost scenario)
- Your annual premium plus the maximum you can pay out of your pocket (your highest possible cost scenario)
Once you reach your “out-of-pocket maximum,” your health plan will completely cover the rest of your costs for your in-network care.

Below are summaries showing these factors for each Council health care plan, for all employees.

 **Empower HRA Plan**
The full monthly premium of this plan is \$623 for single coverage and \$1,557 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

With this plan, the Council puts funds in a Health Reimbursement Account (HRA). You can use those funds to pay your full deductible or any eligible health care costs. Any funds in your account at the end of the year roll over for your use in later years.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum – annual HRA contribution
Single- Full Time Employee	\$30	\$360 leaving \$1,375 in HRA	\$1,860
Family- Full Time Employee	\$253	\$3,036 leaving \$2,750 in HRA	\$6,036
Single- Part Time Employee	\$178	\$2,136 leaving \$1,375 in HRA	\$3,636
Family- Part Time Employee	\$579	\$6,948 leaving \$2,750 in HRA	\$9,948

 **Distinctions Plan**
The full monthly premium of this plan is \$951 for single coverage, and \$2,373 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$63	\$756	\$1,856
Family- Full Time Employee	\$409	\$4,908	\$7,108
Single- Part Time Employee	\$285	\$3,420	\$4,520
Family- Part Time Employee	\$900	\$10,800	\$13,000

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



2022 NON-REPRESENTED Dental Plan Costs

The full monthly premium of this plan is \$47 for single coverage, and \$125 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*	Coverage Level	Monthly Premium*
Single- Full Time Employee	\$0	Single- Part Time Employee 75%	\$11
Family- Full Time Employee	\$25	Family- Part Time Employee 75%	\$50

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



As you weigh options for health care coverage, consider three main cost factors.

- Your monthly premium
- Your annual premium (your lowest cost scenario)
- Your annual premium plus the maximum you can pay out of your pocket (your highest possible cost scenario)
Once you reach your “out-of-pocket maximum,” your health plan will completely cover the rest of your costs for your in-network care.


Below are summaries showing these factors for each Council health care plan, for all employees.

 **Empower HRA Plan**

The full monthly premium of this plan is \$623 for single coverage and \$1,557 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

With this plan, the Council puts funds in a Health Reimbursement Account (HRA). You can use those funds to pay your full deductible or any eligible health care costs. Any funds in your account at the end of the year roll over for your use in later years.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum – annual HRA contribution
Single- Full Time Employee	\$27	\$324 leaving \$1,375 in HRA	\$1,824
Family- Full Time Employee	\$296	\$3,552 leaving \$2,750 in HRA	\$6,552

 **Distinctions Plan**

The full monthly premium of this plan is \$951 for single coverage, and \$2,373 for family coverage. Metropolitan Council pays the difference between the full premium and the amount you pay.

Coverage Level	Monthly Premium*	Lowest possible cost: annual premium only	Highest possible cost: annual premium + out-of-pocket maximum
Single- Full Time Employee	\$60	\$720	\$1,820
Family- Full Time Employee	\$437	\$5,244	\$7,444

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.



2022 TMSA Dental Plan Costs

The full monthly premium of this plan is \$47 for single coverage, and \$125 for family coverage. Metropolitan Council pays the difference between the full premium and what you pay.

Coverage Level	Monthly Premium*
Single- Full Time Employee	\$3
Family- Full Time Employee	\$20

*Premiums are deducted on a pre-tax basis and will be deducted from the first and second paycheck of each month.