



2026-2027

BENEFITS ENROLLMENT

GUIDE



Availability of Summary Health Information

As an employee, the health benefits available to you represent a significant component of your compensation package. They also provide important protection for you and your eligible dependents in the case of illness or injury.

The Summary of Benefits and Coverage (SBC), which summarizes important information about your health coverage, is available from Human Resources.

Medicare Part D - Prescription Drug Information

If you (and/or your eligible dependents) are covered by Medicare or will become eligible for Medicare in the next 12 months, a Federal law gives you more choices about your prescription drug coverage. Please see the Legal Notices in Benefitsolver for more details.

LETTER TO OUR EMPLOYEES



COUNTY OF CURRITUCK

Human Resources Department

Emily Beasley, Director
153 Courthouse Road
Currituck, NC 27929
252-232-3228
FAX: 252-232-2750

April 2026

Dear Colleagues,

Employee wellness plays a key role in our organization's ongoing success. We remain committed to supporting your health and well-being year-round by providing access to preventive care, wellness programs, educational resources, and special events.

Through our continued partnership with the North Carolina Health Insurance Pool (NCHIP), we offer comprehensive medical and dental coverage, along with optional vision benefits for employees. This year, we are pleased to maintain the same high-quality benefits while keeping dependent coverage premiums competitive.

Within this booklet, you'll find detailed information about all available benefits, as well as highlights of special programs like Teladoc for convenient telehealth services and Lantern for access to high-quality surgical care. We will continue to use Vida Health for weight management and the use of anti-obesity GLP-1 medications. New this year is RxSave Card, a way to use subsidized funds to get your GLP-1 medication exclusive for weight loss directly from Lilly Direct Pharmacy (Zepbound) or NovoCare Pharmacy (Wegovy).

Currituck County deeply appreciates your commitment to public service. By prioritizing health and wellbeing, we can continue to show up as the best versions of ourselves to serve the citizens of Currituck. We hope these benefits continue to be a valuable and meaningful part of your overall compensation.

Sincerely,

Emily Beasley
Human Resources Director



BENEFITS OVERVIEW

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Eligibility

You and your dependents are eligible for Currituck County benefits on the first of the month following 30 days of employment.

Eligible dependents are your spouse, children under age 26, disabled dependents of any age, or Currituck County eligible dependents.

Currituck County is proud to offer a comprehensive benefits package to eligible, full-time employees who work 30 hours or more per week. The complete benefits package is briefly summarized in this booklet. You will receive plan booklets, which give you more detailed information about each of these programs.

Currituck County provides benefit options to you and your family at reasonable group rates that you can purchase through payroll deductions.

Benefits Offered

- Medical
- Dental
- Vision
- Flexible Spending Account (FSA)

Annual Enrollment is held this year

April 27th - May 8th

You may make any desired changes to your benefits during that time. Any changes or enrollments made during Annual Enrollment will take effect on July 1st. You cannot make any changes to your benefits until the next enrollment period unless you have a qualifying life event or change of status. If you experience a qualifying event, you must contact HR within 30 days.



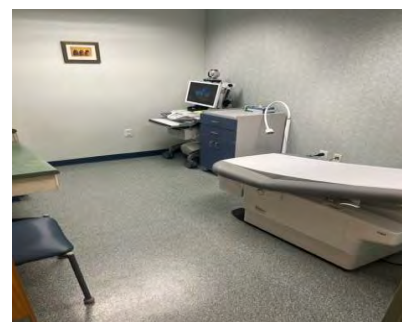
EMPLOYEE WELLNESS CLINIC



The Employee Wellness Clinic provides care to employees and their families. The Wellness Clinic is available for appointments and walk-ins.

People eligible to access the Wellness Clinic are:

- All Currituck County employees covered under the County's medical plan
- Retirees covered under the County's medical insurance plan
- Dependents covered under the County's medical insurance plan



Currituck County's Health Department
2795 Caratoke Highway
Currituck, North Carolina 27929
Hours: Monday - Friday, 8:00 am - 5:00 pm
Telehealth services provided.

It is best to schedule an appointment by calling
252-232-2271

There is a nurse on call for after hours.
(staff can leave a message for nurse to return your call)

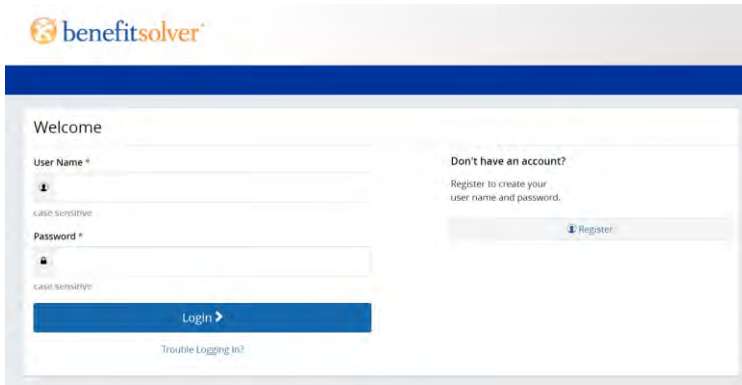
If you are sick and need to visit the clinic, please call to schedule an appointment for that day. You will be told what time is the best to be seen, working to eliminate wait times around other scheduled appointments.



How to Enroll In Your Benefits



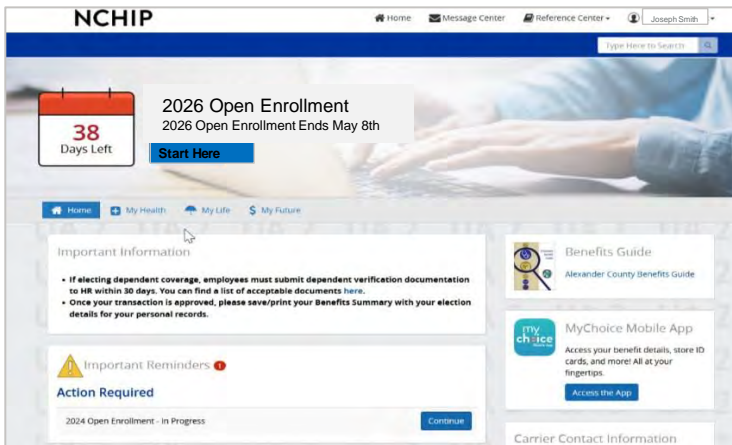
Open Enrollment is April 27th - May 8th



REGISTER AND LOGIN

1. Visit www5.benefitsolver.com and login by entering your user name and password.
2. If you are a first-time user, click on **Register** to set-up your user name, password and security questions.
3. Our Company Key is **NCHIP** (note: it's case sensitive).

RETURNING USERS: Click on the **Trouble Logging In?** link to reset your login details.



EXPLORE YOUR OPTIONS

Explore the site to learn about your benefits. You will find lots of helpful information in the **Reference Center**, located at the top of the page in the navigation menu.

The Calendar on the Home Page lets you know how many days you have left to enroll.

START YOUR ENROLLMENT

Click the **Start Here** button to review your personal information and add or edit any dependents you wish to cover.

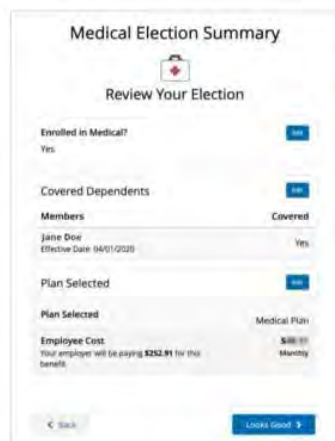
Be prepared to provide each dependent's legal name, Social Security Number, and birth date to add them to your coverage. You may be required to provide documentation to prove your relationship to each dependent.

ENROLL IN COVERAGE

Use the **Next** and **Back** buttons to review and elect options available to you. **DO NOT** use the back arrow in your browser to navigate between pages.

Choose or decline coverage for each option, and select which family members you wish to cover.

Review plan documents and use the Compare and Plan details tools to view details and costs for the options available to you.



www5.benefitsolver.com
Company Key: NCHIP

How to Enroll In Your Benefits



REVIEW AND FINALIZE YOUR ELECTIONS

Make sure your personal information, elections, dependents, and beneficiaries are accurate, then approve your elections.

To finish, click **I Agree**. When your enrollment is complete, you will receive a confirmation number and can print your **Benefit Summary** for your records.

AFTER YOU ENROLL

You can return to the **Home** page to check for any additional tasks needed to complete your enrollment, view or download your Benefit Summary, and download the MyChoice Mobile App.

Visit this site anytime you want to learn more about your benefits or make a change to your coverage if you experience a Qualifying Life Event.

DOWNLOAD THE MYCHOICE MOBILE APP AND




Providing you access to your benefits when and where you need it.

Available on iOS and Android

MAKE MID-YEAR CHANGES

The benefit elections you make will remain in effect until the end of the plan year, unless you experience a Qualifying Life Event (QLE) such as:

- Getting married or divorced
- A change in job status (for you or an enrolled dependent)
- Having a baby or adopting a child

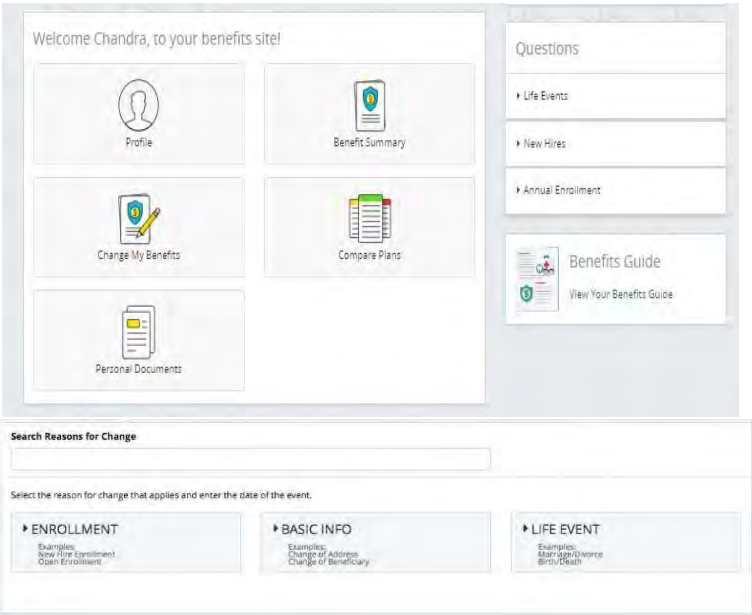
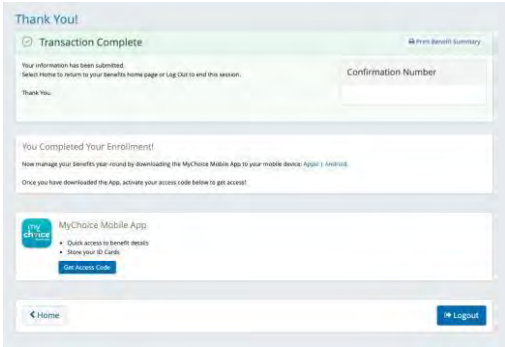
If you experience any of these Qualifying Life Events, you must provide the required supporting documentation and make changes within 30 days of the event.

Login to www5.benefitsolver.com

Click on **Change My Benefits** button to make election changes or update your basic information

Select the **LIFE EVENT** button and the event you wish to file. Then, follow the same election steps above to complete your life changing event.

www5.benefitsolver.com
Company Key: NCHIP



BLUE CONNECT

Register with Blue Connect

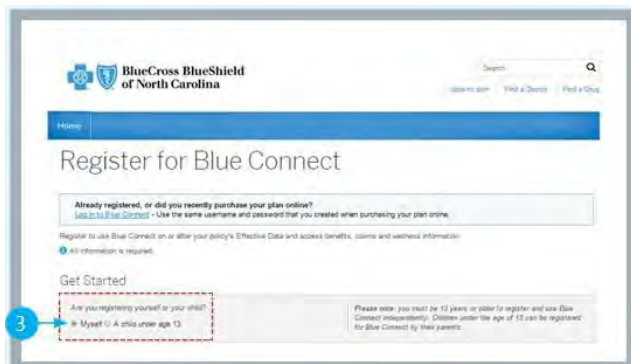
Your gateway to online tools and resources

You can find information about your benefits and claims. It's designed to make health care easier, giving you on-the-go access when, where and how you want it. Register today to set up your User ID and Password!

Have your Blue Cross NC Member ID card on hand and follow the instructions below.

1. Go to www.BlueConnectNC.com.
2. Click Register Now.
3. Select the correct box based on who is registering. Note: participants must register themselves unless they are under 13 years old, in which case they must be registered by one of their parents.
4. To confirm your identity, enter your Subscriber ID found on your Blue Cross NC Member ID card. Your Subscriber ID contains both letters and numbers.
5. Enter the date of birth of the person who is being registered. Enter the date using 2 digits for the month, 2 digits for the day and 4 digits for the year.
6. Enter the ZIP code of the mailing address where you receive correspondence from Blue Cross NC regarding your health insurance.
7. Click Continue to go to the next page.
8. Verify that the information shown is correct and continue to step 9.
9. You need to create a User ID and Password. Keep this information in a safe place. We also suggest using a User ID and Password that you can remember easily.

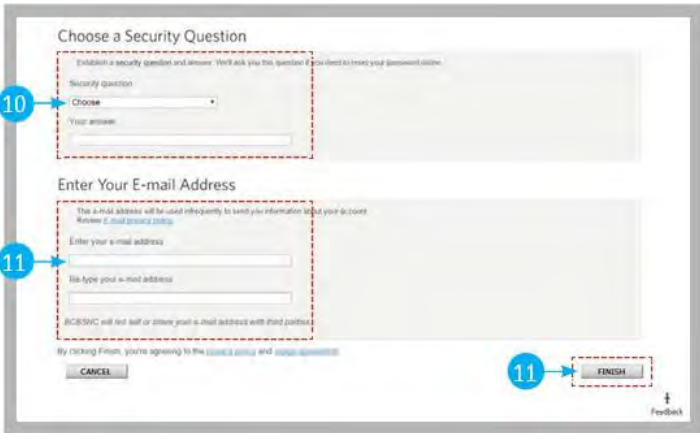
- The User ID must be at least 7 characters with no spaces, and can be a combination of numbers and letters.
- The Password must be at least 7 characters with no spaces, and must include a number or symbol.
- You need to enter your Password a second time to confirm it.



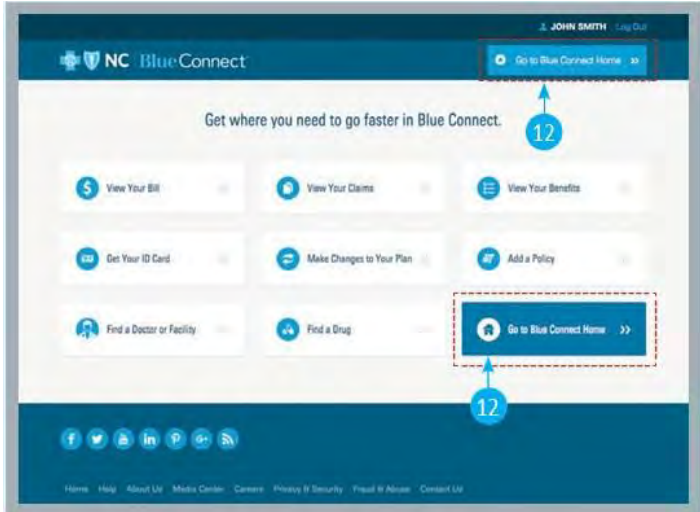
BLUE CONNECT

10 - Select a security question or choose to create your own and create your answer.

11 - Enter your email address, then click Finish.



12 - Click Go to Blue Connect Home.



13 - Your registration will be complete when you see this screen.



Yes, there's an app for that!

About Blue Connect

Download the mobile app

Download the mobile app for iOS and Android devices. You can sign in with AppleTouch ID, Android Fingerprint ID or Apple Face ID.*



MEDICAL BENEFITS



Administered by Blue Cross Blue Shield of North Carolina

BlueCross BlueShield of North Carolina will be our medical plan provider. The county has changed the medical plan to a PPO (Preferred Provider Organization) Plan. This means you will have copays at your doctor visits instead of co-insurance after deductible. Review the chart below for the amount you will pay for the medical service listed.

	PPO Plan	
	In-Network	Out-of-Network
Annual Deductible (Individual/Family)	\$1,500/\$3,000	\$3,000/\$6,000
Coinsurance (you pay)	20% after deductible	40% after deductible
Annual Out-of-pocket Maximum (Individual/Family)	\$5,000/\$10,000	\$8,000/\$16,000
Preventive Care	Covered at 100%	40% after deductible
Office Visits		
Primary Care	\$25 copay	40% after deductible
Specialist	\$50 copay	40% after deductible
Urgent Care	\$75 copay	\$150 copay
Telehealth	\$0 copay	N/A
Emergency Room	\$300 copay (waived if admitted)	
Hospital Services		
Inpatient	20% after deductible	40% after deductible
Outpatient	20% after deductible	40% after deductible

NO COPAY for 3 Primary Care visits/year

Your copay is waived for your first 3 primary care visits. To obtain this benefit, **you must register** your Primary Care Physician (PCP) on BlueConnectNC.com



Finding In-network Providers

You save the most money when you choose in-network doctors, facilities and pharmacies. Log on to www.BCBSNC.com or call to find providers in the BCBCNC network.

Terms to Know

- **Copay** - A set dollar amount you pay for a covered health care service, usually when you receive the service.
- **Deductible** - What you pay out of pocket for health care services before the plan begins to pay a portion.
- **Coinsurance** - Your share of the costs of covered health care services after you reach the deductible. You pay the percentage noted in the table above, and the medical plan pays the rest.
- **Out-of-pocket Maximum** - What you have to pay before the plan pays 100% of your covered costs.
- **Network** - The facilities and providers the medical plan has contracted with to provide health care services. In-network providers typically provide services at a lower negotiated rate.

PHARMACY BENEFITS



Prescription drug coverage through Blue Cross Blue Shield of North Carolina (BCBS-NC) is included with the medical plan. Beginning July 1, 2026, weight loss GLP-1 medications (Saxenda, Wegovy, and Zepbound) will no longer be covered under the BCBS-NC pharmacy plan. Instead, payment for these medications will transition to the RxSave Card. Currituck County will partially subsidize the cost. To qualify, these medications must continue to be prescribed by a Vida provider. GLP-1 medications prescribed for diabetes treatment (Ozempic, Mounjaro, and Trulicity) are **not impacted** by this change and will continue to be covered under the pharmacy plan. Please see page 12 for additional details about Vida and the RxSave Card.

Review the chart below for the amount you will pay for the prescription drug service listed.



***New* GLP-1s for Weight Loss**

GLP-1 Weight Loss solutions will now be covered outside of the BCBS-NC Pharmacy Plan using RxSaveCard (virtual debit card).

	PPO Plan	
	In Network	Out of Network
Retail (30-day Supply)		
Generic Tier 1	\$10	\$10
Generic / Some Brand Tier 2	\$10	\$10
Preferred Brand Tier 3	\$40	\$40
Non-preferred Brand Tier 4	\$50	\$50
Specialty Tier 5	75% (Min \$100, Max \$250)	75% (Min. \$100, Max \$250)
Mail-order (90-day Supply)		
Generic Tier 1	\$20	\$20
Preferred Tier 2	\$20	\$20
Non-preferred Tier 3	\$80	\$80
Specialty Tier 4	\$100	\$100
Specialty Tier 5	75% (Min \$200, Max \$400)	75% (Min \$200, Max \$400)

Generic Drugs

Generic drugs are FDA-approved and shown to be just as safe and effective as their more expensive brand-name counterparts. If you choose a brand-name drug when a generic drug is available, you will pay the brand-name copay plus the cost difference between the generic equivalent and the brand-name drug.

Preferred Drugs

Blue Cross Blue Shield of NC regularly reviews the latest prescription drugs on the market and maintains a list of preferred drugs that are clinically effective and not cost-restrictive. These drugs are available at a lower price than those not included on the list, which are called non-preferred drugs.

Specialty Drugs

Specialty drugs are typically used to treat chronic conditions like cancer or multiple sclerosis. These drugs tend to be more expensive and usually require special handling and monitoring.

Mail Order - Amazon Pharmacy MedsYourWay™

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) offers access to Amazon Pharmacy, which lets you easily order and quickly get non-specialty medications delivered at home. Plus, you'll get access to MedsYourWay prescription drug discount card pricing. The prescription discount card gives you up to 80% savings on brand and generic medications and is seamlessly built-in to the Amazon Pharmacy experience. You can get the lowest cost available on your prescription, all while saving time and money. Using the MedsYourWay discount card is not insurance; however, using it for covered medicines will count toward your Blue Cross NC deductible and out-of-pocket maximum.

Two Ways to Save

You can purchase using either your insurance copay or integrated MedsYourWay discount price. Eligible purchases count toward your deductible and/or out-of-pocket maximum regardless of how you pay.

Start saving today

Sign up www.amazon.com/bluecrossNC.

Amazon Pharmacy Customer Care: 855-963-4546
M - F 8am - 10pm and Sat - Sunday 10am - 8pm EST.



Your Health Support Resources

Take full advantage of your Currituck County medical benefits! As an employee enrolled in the Currituck County medical plan, you have access to a wide range of health support programs - most of them available at no cost to you. Through Currituck County's partnership with NCHIP (North Carolina Health Insurance Pool), you and your family can get personalized health support designed to help you stay well, manage ongoing conditions, and navigate care with confidence. These programs are here to make your health journey easier, more affordable, and more supported—whether you're focused on preventive care, managing a chronic condition, or facing a new health challenge.



Full program details are available online.

This guide provides brief descriptions of the programs available to you, including new offerings such as **Stella**, **Hinge**, and **RxSaveCard**. For a deeper look, we encourage you to explore the full online resource using the QR code or link provided. There you'll find additional details, program flyers, and direct links to all services available to you.



NCHIP Health Resources Guide Currituck County

Your Health Support Programs

NEW PROGRAMS Coming SOON - Plan Year 2026-27



Gretchen
BSN, RN, CCM
847-879-2000
care@stellahealthnav.com

Note: For questions about your BCBS-NC claims, billing, or how to use your plan, the **NCHIP Concierge Team** at BCBS-NC remains available to assist you.



Meet Gretchen, your dedicated **Stella** Health Navigator. Gretchen is here to help you and your family with clinical needs and guide you through the complexities of healthcare.

Stella is your healthcare navigation and advocacy service included with our medical plans at no cost to you. Gretchen is here to help you and your family with clinical needs and guide you through the complexities of healthcare. Your Nurse, Gretchen, can help you find top doctors, navigate a new diagnosis or challenging healthcare journey, connect you to your benefit solutions, and more.

You can contact Gretchen, your healthcare navigator, when you have questions or need support. You may also receive a call, text, or email from Gretchen. She is a dedicated and compassionate nurse here to guide you, making your healthcare experience easier and more accessible.

Website: www.stellahealthnavigation.com
Save Stella to your contacts: [Add to Contacts](#)

Tackle joint and muscle pain where you need it most



With **Hinge Health**, get access to a tailored program that gives you access to virtual physical therapy and more to help you recover from injuries, build strength, improve your mobility, and more. Whether your aches are short-term or chronic, we'll help you get moving again.

Free, personalized virtual physical therapy with 1-on-1 support, tailored exercise plans, real-time guidance, and tools to reduce joint and muscle pain; helping you move better, feel better, and stay active on your schedule.

100% covered by NCHIP

\$0
cost to you

Scan QR
Code or
visit:



hinge.health/nchip-25

Employees and dependents 18+ enrolled in the medical plan are eligible.



Your Health Support Programs



Your healthiest life, made possible

Vida Health is a virtual health program that offers personalized weight loss programs and live, one-on-one support from an expert care team

Since July 2025, Vida Health has been the exclusive provider for weight loss GLP-1 medications (Wegovy, Saxenda, and Zepbound) for Currituck County employees and their dependents. This partnership is designed to support long-term success by providing access to Vida's anti-obesity specialists and comprehensive clinical care.

Employees who are currently using GLP-1 medications for weight loss may continue their treatment under Vida's care. However, beginning July 1, 2026 payment for these medications will transition to the RxSave Card, as these GLP-1 medications will no longer be covered under the pharmacy plan. To receive coverage, employees must be enrolled in Vida Health and have the medication prescribed by a Vida provider. The Currituck County will partially subsidize the cost of the medication using RxSaveCard.

Getting Started is Easy

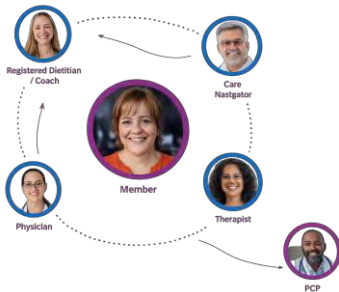
Sign up at:
VIDA.com/bluecrossnc



Answer some questions about your health history, goal and preferences.



Download the app and schedule your first session to get started.



Vida delivers support from behavioral change to pharmacological interventions.

Your Team of Providers:

- Physicians and Nurse Practitioners
- Obesity Specialists (CSOWMs)
- Registered Dietitians
- Licensed Mental Health Therapists
- Certified Health Coaches



GLP-1 Weight Loss solutions will now be covered outside of the BCBS-NC Pharmacy Plan using RxSaveCard

RxSave Card is a **virtual** debit card that Currituck County loads with funds each month to help you pay for GLP-1 weight loss medications. These medications are available outside of your insurance plan. If you are currently taking GLP-1s for weight loss (Zepbound, Wegovy or Saxenda), you will now be able to obtain your prescription using the RxSaveCard.. Your authorization will be grandfathered through 6/30/27. The medications will be delivered to you directly from the manufacturer, Eli Lilly or Novo Nordisk.



Step 1. Sign up for Vida and Meet with your provider. Once you are set up, you will meet with a Vida Medical Provider (VMP) who can evaluate you for a GLP-1 medication for weight loss. If appropriate, your VMP will send your prescription directly to Lilly Direct Pharmacy or NovoCare Pharmacy.

Step 2. Once prescription is sent you will receive a text or email confirmation (24-48 hours) from GiftHealth (Zepbound) or CoAssist (Wegovy).

Step 3. Check your email for an activation link from RxSaveCard (no-reply@service.rxsavcard.com) to create your account. Activate your 'GLP-1s for weight loss card'. There will be payment details for you to use at checkout.

Step 4. Click the link from the second message from GiftHealth (Zepbound) or CoAssist (Wegovy) telling you your prescription is ready and complete checkout.

support@rxsavecard.com

Your Health Support Programs

NCHIP BCBS-NC Concierge provides you with personalized support from dedicated customer service representatives who help you understand your benefits, resolve claims or billing issues, find lower-cost care and guidance of how to use [Blue Connect](#).



800-795-9402
Secure email log into
BlueConnectNC.com

[Blue Connect](#) is Blue Cross NC's secure member portal and mobile app that gives you quick access to your digital ID card, plan details, claims, and tools to manage your health coverage anytime, anywhere.

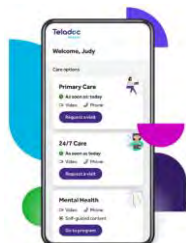


[How to register for member portal](#)

[Teladoc P360](#) gives you convenient virtual primary care with your own provider and care team - offering checkups, chronic condition support, prescriptions, behavioral health, therapy, nutrition, dermatology, and nutritional coaching.



[Teladoc.com](https://www.teladoc.com)



[Teladoc Mental Health](#) offers access to licensed a Therapist or Psychiatrist to help you manage anything from stress and anxiety to substance abuse and grief. Talk to a licensed mental health expert of your choice by phone or video, 7 days a week, from the privacy of your home.



[Teladoc Mental Health](#)

[Teladoc CCM Diabetes Prevention \(Livongo\)](#) provides you with a smart scale, personalized lifestyle plans, and one-on-one coaching - all at no cost - so you can build healthier habits and reduce your risk of diabetes in a way that fits your life

[Teladoc CCM Diabetes Management \(Livongo\)](#) gives you a connected glucose meter, unlimited strips and lancets, real-time support, and one-on-one coaching - all at no cost - so you can manage diabetes more confidently with personalized, easy-to-use tools.



To Get Started, Register
[My.Livongo.com](https://www.mylivongo.com)

Or call 800-945-4355
Code: BCNC2

[Teladoc CCM Hypertension \(Livongo\)](#) gives you a connected blood pressure monitor, personalized insights, and one-on-one health coaching - all at no cost - so you can manage high blood pressure with simple, supportive tools that fit your life.

[Lantern](#) is a surgery excellence provider offering low cost or no-cost surgery benefit. Lantern connects you with experienced, board-certified surgeons, provides a dedicated Care Advocate to guide you from consultation through recovery including help with travel, lodging, and scheduling - so you can get high-quality care with less stress.



 **LANTERN**

www.mylanternncare.com
You deserve excellent and
affordable surgical care.



For more detailed
information, please see
online your
[NCHIP Health Resources
Guide for Currituck County](#)

 NCHIP

DENTAL BENEFITS



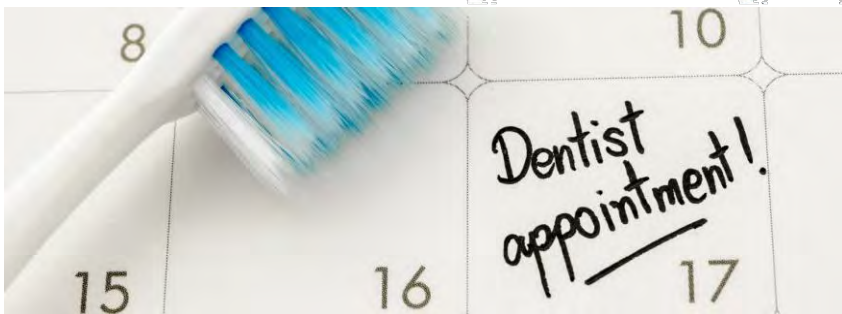
Good oral care enhances overall physical health, appearance and mental well-being. Problems with the teeth and gums are common and easily treated health problems. Keep your teeth healthy and your smile bright with the Currituck County dental benefit plan.

Please review the chart below for the benefits available, should you enroll in the plan.

	Dental PPO Plan	
	In Network	Out of Network*
Annual Deductible (Individual/Family)	\$50/\$100 <i>(per plan year for Basic & Major services)</i>	\$50/\$100 <i>(per plan year for Basic & Major services)</i>
Annual Maximum (Per Person)	\$1,250 per plan year	\$1,250 per plan year
Preventive Care (cleanings, exams, x-rays)	Covered 100%	Covered 100%
Basic Services (fillings, root canal therapy, oral surgery)	20% after deductible	20% after deductible
Major Services (extractions, crowns, inlays, onlays, bridges, dentures, repairs)	50% after deductible	50% after deductible
Orthodontia (Up to the age 19)	50% / No Deductible	50% / No Deductible
Orthodontia Lifetime Maximum	\$500 per person	\$500 per person

***Out-of-Network**

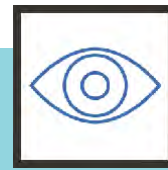
When you receive services from a Nonparticipating Dentist, the percentages in this column indicate the portion of Delta Dental's Nonparticipating Dentist Fee that will be paid for those services. This Nonparticipating Dentist Fee may be less than what your dentist charges, which means that you will be responsible for the difference.



Finding In-network Dentists

You can find an in-network dentist in the Delta Dental network by visiting www.deltadentalnc.com/findadentist.

VISION BENEFITS



Regular eye examinations can not only determine your need for corrective eyewear but also may detect general health problems in their earliest stages. Protection for the eyes should be a major concern to everyone.

Vision Care Benefits	Your Cost In-Network	Your Cost Out-of-Network
Eye Exam (every 12 months)	\$10 Copay	up to \$45
Contact Lens Fit and Follow-Up	Up to \$60	N/A
Frame Allowance (every 24 months)	\$150 Allowance; An extra \$20 to spend on featured frame brands	up to \$70
Lenses (every 12 months)		
Single Vision	\$10 copay	up to \$30
Bifocal	\$10 copay	up to \$50
Trifocal	\$10 copay	up to \$65
Standard Progressive	\$10 copay	up to \$50
Contact Lenses (every 12 months)	\$150 Allowance	up to \$105
Medically Necessary	100% after copay	up to \$210
Other Discounts and Services		
Lasik Surgery	15% off Retail or 5% off promotional price	N/A
Multiple Glasses / Sunglasses (non-prescription)	20% savings on unlimited additional pairs of prescription glasses and/or nonprescription sunglasses from any VSP network provider within 12 months of exam.	N/A

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras for additional savings. Maximize your coverage with bonus offers and additional savings that are exclusive to Premier Program locations—including private practice doctors and Visionworks® retail locations nationwide.

VSP Network Provider Choices



DeltaVision

Finally, a vision plan with teeth

Finding In-network Eye Doctors

You can find an in-network eye doctor in the VSP network by visiting www.vsp.com.





FLEXIBLE SPENDING ACCOUNTS

Paying for Health Care

To help you save money on health care costs, Currituck County offers employees Flexible Spending Accounts through Flores. The purpose of a Flexible Spending Account (FSA) is to allow you to set money aside on a pre-tax basis to cover expenses that are not otherwise covered under a traditional medical, dental, or vision plan. For example, if you are in a 30% tax bracket, for every \$100 you set aside on a pre-tax basis, you save \$30 on taxes. FSA contributions are exempt from federal and state income taxes as well as FICA. You can participate in one, both or neither of the accounts - it is your choice.

The FSA Plan year runs from July 1st through June 30th.

There are two types of Flexible Spending Accounts available to you:

1. Health Care Reimbursement Account
2. Dependent Care Reimbursement Account

Important Notes

Federal tax law requires separate accounts for the two types of expenses, and you must elect a separate amount to be deposited in each account in which you elect to participate.

How Does an FSA Work?

- ⇒ FSA contributions are taken from your paycheck on a pre-tax basis according to your annual elections.
- ⇒ When you have an eligible health care or dependent care expense, you can pay for it with tax-free money.

	Health Care Flexible Spending Account (HCFSA)
What expenses are eligible?	Medical, prescription drug, dental and vision care (See IRS publication 502 for a full list of eligible expenses) https://www.irs.gov/pub/irs-pdf/p969.pdf
When can I use the funds?	All of the funds you elect for the year are available July 1st
Can I roll over funds each year?	You have from July 1, 2026 through June 30, 2027 to incur qualified expenses eligible for reimbursement. If you do not incur qualified expenses eligible for reimbursement by June 30, 2027, and/or file for reimbursement by September 30, 2027, excess contributions over \$680 will be forfeited under the “ use-it or lose-it ” rule.
How do I pay for eligible expenses?	With your Flores debit card (you can also submit claims for reimbursement online at www.flores247.com)
Can I use my FSA for OTC medicine?	Over-the-counter medicines now require a prescription, written by a physician, for FSA reimbursement.
How much can I contribute each year?	Up to \$3,400 in 2026
Can I change my contributions throughout the year?	No, unless you have a qualifying life event, you choose an annual election amount during open enrollment and that amount is taken out of each paycheck in equal increments throughout the year.

SAVE ON QUALIFIED EXPENSES

You can use the tax-free dollars in your FSA for any qualified expense, for example:

- Medical Co-pays, coinsurance & deductibles
- Routine wellness visits
- Prescription expenses
- Vision expenses
- LASIK Surgery
- Hearing expenses
- Dental expenses (excluding cosmetic procedures)
- Orthodontia payments
- Prescribed and Non-prescribed over-the-counter items
- Menstrual products

1-800-532-3327

HOW TO SUBMIT:

- Online: www.flores247.com
- Get form online and fax in claim
- Download the app for mobile filing



FLEXIBLE SPENDING ACCOUNTS

Paying for Dependent Care

You can contribute pre-tax dollars into a Dependent Care FSA to pay for eligible child or elderly care expenses.

	Dependent Care Flexible Spending Account (DCFSA)
What is it?	An account that allows you to set aside pre-tax dollars from each paycheck to pay for eligible child or elderly care expenses while you and your spouse work full time
Why should I consider it?	You can lower your taxable income to save some money while you take care of your daycare expenses
What expenses are eligible?	Daycare expenses for your children under age 13 or dependents who are mentally or physically incapable of caring for themselves (including elderly dependents)
When can I use the funds?	Funds are available as you contribute to the account with each paycheck
Can I roll over funds each year?	No, you will lose any funds remaining in your account at the end of the year
How do I pay for eligible expenses?	You can also submit claims for reimbursement online at www.flores247.com or by using the Flores mobile app. You may also submit via fax or mail.
How much can I contribute each year?	The maximum you can contribute is \$7,500 or \$3,750 if you are married and file separate tax returns.

Important Note

Both the health care and dependent care FSAs have a “**use-it or lose-it**” rule. For the health care FSA, you can rollover **\$680** into the next plan year, anything greater will be forfeited. The dependent care FSA does not have a rollover provision. Any unused funds at the end of the year will be forfeited.

Examples of eligible expenses for dependent care

- Before and after school programs
- Nursery and pre-school tuition
- Summer and sports day camp
- Au pair / nanny expenses
- Day care centers
- Care at home by a licensed provider



Self-Service Features:

- Access your account information
- Requests for reimbursement from your account
- Submit supporting documentation for transactions
- Available through App store or Google Play

1-800-532-3327

HOW TO SUBMIT:

Online: www.flores247.com

Get form online and fax in claim

Download the app for mobile filing

Mail: P O Box 313397

Charlotte, N.C. 28231

Fax: 704.335.0818 or 800.726.9982

 **Flores Mobile App**

EMPLOYEE CONTRIBUTIONS



EMPLOYEE CONTRIBUTIONS FOR BENEFITS



BENEFIT PLAN	MONTHLY
MEDICAL PPO PLAN	
Employee	\$0.00
Employee + Spouse	\$572.00
Employee + Child	\$301.00
Employee + Child(ren)	\$603.00
Family	\$821.00
BENEFIT PLAN	
DENTAL RATES	
Employee	\$0.00
Employee + Spouse	\$36.20
Employee + Child(ren)	\$11.81
Family	\$45.42
VISION RATES	
Employee	\$6.26
Employee + Spouse	\$12.50
Employee + Child(ren)	\$13.38
Family	\$21.38

Important Warning

If you decline enrollment for yourself or for an eligible dependent, you must complete our form to decline coverage. On the form, you are required to state that coverage under another group health plan or other health insurance coverage (including Medicaid or a state children's health insurance program) is the reason for declining enrollment, and you are asked to identify that coverage. If you do not complete the form, you and your dependents will not be entitled to special enrollment rights upon a loss of other coverage as described above, but you will still have special enrollment rights when you have a new dependent by marriage, birth, adoption, or placement for adoption, or by virtue of gaining eligibility for a state premium assistance subsidy from Medicaid or through a state children's health insurance program with respect to coverage under this plan, as described above. If you do not gain special enrollment rights upon a loss of other coverage, you cannot enroll yourself or your dependents in the plan at any time other than the plan's annual open enrollment period, unless special enrollment rights apply because of a new dependent by marriage, birth, adoption, or placement for adoption, or by virtue of gaining eligibility for a state premium assistance subsidy from Medicaid or through a state children's health insurance program with respect to coverage under this plan.

CONTACT INFORMATION



CONTACT INFORMATION

If you have specific questions about a benefit plan, please contact the administrator listed below, or your local human resources department.

BENEFIT	ADMINISTRATOR	PHONE	WEBSITE/EMAIL
Medical	Blue Cross Blue Shield of North Carolina	877.275.9787	www.bluecrossnc.com
Telehealth	Teladoc	800.835.2362	www.teladoc.com
Surgery Provider	Lantern	855.204.3922	www.LanternCare.com
Dental	Delta Dental of North Carolina	800.662.8856	www.deltadental.com
Voluntary Vision	Delta Vision	800.877.7195	www.vsp.com
Flexible Spending Account	Flores & Associates	800.532.3327	www.flores247.com
Human Resources	Emily Beasley	252.232.3228	Emily.Beasley@currituckcountync.gov





This benefit summary prepared by



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