

2027 Employee Benefits Open Enrollment



Open Enrollment Dates: Tuesday, October 20th – Monday, November 2nd

Key Information

- The 2027 Benefit Open Enrollment Period is Tuesday, October 20th – Monday, November 2nd
- All benefit elections and changes will take effect 01/01/2027
- Payroll deductions will begin January 8th
- The deadline to enroll is November 2nd

Open Enrollment

- Opportunity to make changes to your benefit elections and to review which dependents you will cover
- Elections made during this period will remain in effect for a 12-month period, unless you experience an IRS-approved “qualifying event”
- Approved qualifying events include:
 - Marriage or Divorce
 - Death
 - Birth or adoption of a dependent
 - Change in employment status
 - Change in dependent’s eligibility status
 - Loss of or significant change to your current coverage
 - Judgment, decree or court order
- You have 30 days from the date of the event (varies by state) to notify Human Resources

2027 Changes

What's Changed

- New PPO/HDHP (HSA) Medical Plans
- Increased Medical Plan Spousal Surcharge
- New Dental Carrier SunLife
- Dental Orthodontia Dependent Child(ren) Age

What's Hasn't Changed

- Your EyeMed Vision benefits
- Your Mutual of Omaha Life and Long-Term Disability benefits



MEDICAL/RX

Medical – Plan Highlights

Anthem	Medical Premium Copay	Medical Basic Copay	Medical HDHP/HSA
Annual Deductible	\$3,000 per individual \$6,000 per family	\$5,000 per individual \$10,000 per family	\$3,500 per individual \$7,000 per family
Annual Out-of-Pocket Maximum	\$6,000 per individual \$12,000 per family	\$9,500 per individual \$19,000 per family	\$4,000 per individual \$8,000 per family
Plan Coinsurance (after deductible)	80% in most cases	90% in most cases	80% in most cases
Office Visit	\$30 Copay	\$30 copay	80%, after deductible
Lab & X-ray	80%, after deductible	80%, after deductible	80%, after deductible
Complex Radiology	80%, after deductible	80%, after deductible	80%, after deductible
Inpatient Hospital	80%, after deductible	80%, after deductible	80%, after deductible
Emergency Room	\$300 copay	\$300 copay	80%, after deductible

Out-of-Network Benefits are double the In-Network. See the summary of benefits for details.

Employee Contributions (per pay / 24 pays per year)	Medical Premium Copay	Medical Basic Copay	Medical HDHP/HSA
Single	\$46.49	\$10.56	\$31.68
EE + Spouse	\$143.16	\$121.69	\$104.48
EE + Child(ren)	\$115.80	\$98.43	\$83.55
Family	\$207.96	\$176.77	\$149.47

Employer Health Savings Account Contribution (when electing HDHP): Single Coverage: \$25 / All Other Coverage: \$50 per pay

Medical Plan Spousal Surcharge: \$50 per pay extra for spousal coverage if the spouse has medical available through their own employer

Tobacco User Rates: \$25 upcharge per pay (in addition to selected plan rate)

Prescription Drug— Plan Highlights

CarelonRx	Anthem BCBS Medical Premium Copay	Anthem BCBS Medical Basic Copay	Anthem BCBS HDHP/HSA
Rx Deductible	N/A	N/A	Prescription drug cost are subject to the annual medical deductible
Retail Prescription Drugs 30-day Fill			
Generic	\$15 copay	\$15 copay	80%, <i>after deductible</i>
Preferred Brand Name	\$50 copay	\$50 copay	80%, <i>after deductible</i>
Non-Preferred Brand Name	\$90 copay	\$90 copay	80%, <i>after deductible</i>
Preferred Specialty	\$90 copay	\$90 copay	80%, <i>after deductible</i>
Mail-Order Prescriptions 90-Day Fill			
Mandatory for Maintenance Rx?	N/A	N/A	N/A
Generic	\$30 copay	\$30 copay	80%, <i>after deductible</i>
Preferred Brand Name	\$100 copay	\$100 copay	80%, <i>after deductible</i>
Non-Preferred Brand Name	\$180 copay	\$180 copay	80%, <i>after deductible</i>

CarelonRx Maintenance 90 Program

- Maintenance drugs are medications taken everyday for conditions like high blood pressure, asthma, heartburn, thyroid disease or diabetes.
- When using this benefit, you must fill prescriptions for maintenance drugs at an Rx Maintenance 90 pharmacy or through home delivery.
- Members impacted will be notified by Anthem by mail and will have (2) 30-day courtesy fills before switching to the 90-day fill.

Benefits of this program are:

- Getting a 90-day fill but paying for only 60-day.
- Members receiving 90-day fills at a time, there is a higher rate of coherence with maintenance medications.

CarelonRx Cost Relief Drug Program

CarelonRx's Cost Relief program helps members get specialty drugs at **NO** out-of-pocket cost. The program works by:

- Accessing manufacturer copay assistance. The program works with drug manufacturers to get copay card assistance and maximize available dollars.
- Managing enrollment and renewals:
 - The program offers personalized enrollment support and manages renewals.
 - Specialists provide outreach to manage and coordinate complex and expensive specialty medications.
- Members can enroll at any time, but members must sign up. This program benefit is not automatic.
- Only eligible prescriptions filled after enrollment into the program will have a \$0 out-of-pocket cost.
- If a member renews in a plan that includes Cost Relief, they won't need to re-enroll each year.

Services to keep in mind...

Lab work processed through a stand-alone LabCorp/Quest location or a facility that sends labs to LabCorp to be processed is covered at **100%** as long as it is a covered lab service

12 Chiropractic visits are covered per plan year

- After 12 visits check with your provider on contracted rates

30 Physical Therapy visits per plan year

- In-office visits cost a Specialty Copay
- Outpatient visits are subjected to deductible and coinsurance

24/7 NurseLine, you can connect with a registered nurse who will answer your health questions anytime, day or night. They can help you decide where to go for care and find doctors and other care providers in your area.

24/7 digital support, Building Healthy Families is here to help your family with everything from preconception and pregnancy to childbirth and early childhood. The program features an extensive content library to support diverse families, including single parents, same-sex, or multicultural couples. Log in to anthem.com or the Sydney app to access the library and other tools, such as fertility, diaper change, and feeding trackers; due date calculators; and blood pressure monitoring

How to Choose My Plan

- ✓ Review your prior year's medical expenses
- ✓ Review your total claim costs
- ✓ Ask yourself these questions:
 - Do I anticipate any surgeries or hospitalizations for me or my family in the upcoming year?
 - Do I prefer a higher deductible with a lower payroll deduction?
 - Am I prepared to pay the high deductible in case of an unexpected medical event?

Anthem Wellness Program

Anthem covered employees and their covered spouses can each earn up to \$200	Preventive Care	Condition Management	Digital & Wellness Activities
Complete any of the activities sponsored by your employer and you'll earn rewards to put toward electronic gift cards for select retailers.	Wellness Exam/Well Woman (\$50) Diabetic A1C* Lab Test (\$25) Cholesterol* Test (\$25)	Condition Care (\$25) Asthma Diabetes Heart Disease or Heart Failure Chronic Obstructive Pulmonary Disease (COPD)	Log in to Sydney (\$25) Log Active Minutes (Max \$50) My Health Check-In (\$25)
Program reset on July 1st	Prostate Exam (\$25)		Team Challenge 1 (\$25) Team Challenge 2 (\$25)
Redeem your rewards on the Sydney Health mobile app or anthem.com, under "MyHealth Dashboard" and then select "My Rewards".	Colorectal Cancer Screening (\$25) Mammogram (\$25)		Team Challenge 3 (\$25) Team Challenge 4 (\$25)

See a doctor wherever, whenever.

Get care from anywhere

Virtual visits on LiveHealth Online are an included benefit for Anthem members

LiveHealth[®]
O N L I N E

Care options available to you through LiveHealth Online:

Annual Wellness. Visit with a primary care provider who can help with preventative screenings, chronic health concerns, and referrals for lab work and specialists as clinically appropriate. Annual wellness visits are an important part of maintaining good health, managing chronic conditions, and preventing potential health issues.

Virtual Primary Care. Get regular health visits and checkups with virtual primary care. It's like an office visit with a primary care provider (PCP) — without the office. You can even choose to see a network PCP regularly, so you have the same provider taking care of you over time.

Urgent Care. Get care 24/7 for common health issues, including allergies, COVID-19 symptoms, the flu, sinus infections, and UTIs. Physicians assess your symptoms, provide a treatment plan, and send prescriptions to the pharmacy of your choice when needed.

Allergy. Doctors can provide a treatment plan and send prescriptions to the pharmacy of your choice anytime. No need to wait to feel better. Doctors can treat common allergy symptoms including itchy, puffy, and watery eyes, congestion, runny nose, itchy throat, and more.

Therapy and Psychiatry. See a therapist online from the comfort of your couch to get help for anxiety, depression, panic attacks, stress relief, and more. Psychiatrists are also available by appointment and can prescribe medication when talk therapy isn't enough.



Get started today! LiveHealth Online is available through the SydneySM Health and LiveHealth Online apps, or [Anthem.com](https://www.Anthem.com) and [LiveHealthOnline.com](https://www.LiveHealthOnline.com)

SWORD Program



Relieve aches + pain from the comfort of your home

Tired of chronic pain or loss of mobility? Struggling with discomfort? Meet Sword, the new digital physical therapy program designed to help you overcome your joint, back, or muscle pain—all from home.

Combining licensed PT with easy-to-use technology, Sword is more than just convenient. It's proven to work better than in-person physical therapy, too.*



Here's how it works



Pick Your PT

Thanks to your dedicated PT, your Sword program is entirely customized to you, your goals and your abilities.



Get Your Sword Kit

Your kit comes with your own tablet, and will provide you and your PT with real-time feedback.



Stay Connected

Chat 1:1 with your PT anytime. They'll check in, monitor your progress, and adjust your program as needed.



Feel the Relief

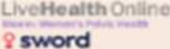
Complete your exercise sessions whenever is most convenient for you. Then feel pain relief for yourself.

Pain doesn't wait. Why should you?
Enroll today to get started!

join.swordhealth.com/cebco/register



Bloom



Bloom is your no-cost, digital pelvic health benefit.

1 in 3 women suffer from pelvic health disorders¹ including bladder issues, bowel dysfunction, and pelvic pain. Sword Health developed Bloom to give you relief with an easy-to-use, at-home pelvic therapy solution.



Here are some signs you may need pelvic therapy:



Leakage (bladder or bowel)



Pain or difficulty emptying bladder



You are, were, or are planning to be pregnant



Pain or pressure in the lower abdomen



Pain during or after intimacy

What you get with Bloom



Expert Care

Bloom's Pelvic Health Specialists all have Doctor of Physical Therapy degrees and provide guidance throughout the program.



Innovative Tech

Women perform short pelvic-therapy sessions from home, using a safe, intravaginal pod that connects to a mobile app.



Real Results

Bloom sessions are fun and interactive. Members track progress and receive guidance through the app.

Activate your no-cost benefit today:

join.hibloom.com/cebc0

Women's Pelvic Health is available at no cost to all US-based employees, spouses, and dependents 18 and older with vaginal anatomy, as a part of the Anthem medical benefits.

1 - Kanne, K.A., Wendt, L. & Brooks Jackson, J. Prevalence of pelvic floor disorders in adult women being seen in a primary care setting and associated risk factors. Sci Rep 12, 9878 (2022). <https://doi.org/10.1038/s41598-022-12802-z>



Scan to enroll

SmartShopper[®]



Compare providers, prices, and rewards, online or by calling.

Schedule your appointment or [have us do it.](#)

Earn your cash reward after you've gone to your appointment.

Earn a reward check every time you and your family choose an eligible lower-cost, high-value doctor or facility for a variety of health services. Simply call a SmartShopper representative or register on the website to search for competitive costs and high-quality care for your next procedure or service and get paid doing it! If you choose a cost-effective location for your care, you can earn reward up to **\$500!**

Call 1-866-285-7078 or visit SmartShopper.com to login to start saving!

Tobacco Cessation



Ohio Tobacco Quit Line

The Ohio Tobacco Quit Line is free of charge to CEBCO members over the age of 18.

Call 1-800-QUIT-NOW to speak with a specialist to discuss assistance to help you quit tobacco. Members should state that CEBCO is their health plan when calling to take advantage of the full benefit such as:

- Five (5) sessions of one-on-one personalized coaching, along with educational materials.
- 8 weeks of Nicotine Replacement Therapy
 - Patches – Two (2) 28-day supplies
 - Gum – Two (2) shipments (100 count); or
 - Lozenges – Two (2) boxes (72 count)



CEBCO Members wishing to explore additional tobacco cessation resources can visit us on the web at www.cebco.org and go to the Wellness tab, then click on Tobacco Cessation.



Prescription Benefits

Members wishing to try medications should make an appointment with their physician as these medications require a prescription.

Medications with a \$0 co-pay for two (2) 90-day prescriptions:

- Nicotine Inhaler
- Nicotine Nasal Spray
- Bupropion (known as Zyban)
- Varenicline (known as Chantix)

Medications that have a co-pay:

- Nortriptyline (known as Aventyl)
- Clonidine (known as Catapres)





SPENDING ACCOUNTS

Health Savings Account (HSA)

What is a Health Savings Account (HSA)? A health savings account (HSA) is an account that you can use to pay medical expenses. This account helps offset your medical and prescription costs by giving you tax advantages, allowing your income to stretch farther by using the dollars that would have otherwise been paid in taxes.

BUT there are still a few rules:

- You must be covered under an HDHP on the first day of the month.
- You must **not** be covered by another health coverage (a non-qualified medical plan that is not an HSA or a spouse's full purpose FSA)
- You must **not** be enrolled in Medicare
- You must **not** be claimed as a dependent on someone else's tax return.

HSA: How Much Can I Contribute for 2027?

Individual Enrollment: \$4,500 and Family Enrollment: \$9,000

For 2027 Clermont County contributes \$25 per pay to your single HSA or \$50 per pay to any other tier.

Subtract this amount from your maximum allowed.



Please remember:

- These maximums should include any employer contributions.
- Those 55 years and older and not enrolled in Medicare can contribute an additional \$1,000 “catch-up” each year.
- If you have not had an HSA previously you will need to open up an HSA Account at a bank or credit union of your choice.

Flexible Spending Accounts

Healthcare FSA annual maximum - \$3,400

- Allows IRS-approved medical, Rx, dental or vision expenses not covered by the insurance plan with pre-tax dollars.
- You can now carryover up to \$500 to the following calendar year.
- Full annual election amount available immediately.
- Some examples include:
 - Medical and Pharmacy copays and out-of-pocket expenses
 - Hearing services, including hearing aids and batteries
 - Vision services, including contact lenses and solution, eye exams and eyeglasses
 - Dental services and orthodontia
 - Over-the-Counter medications when prescribed by a Physician
 - Require substantiation for any expenses that are not a copay on the medical or pharmacy plan.



Limited Healthcare FSA - Allows IRS-approved dental or vision expenses not covered by the insurance plan with pre-tax dollars.

- If you are contributing to an HSA account, you can only enroll in the Limited FSA.

Flexible Spending Accounts

Plan Year – January 1 thru December 31

Decision is IRREVOCABLE for the entire plan year!

Be conservative! The IRS has a strict **“Use it or Lose it”** rule. If you do not use the full amount in your FSA, you will lose any remaining funds (*except the \$500 rollover for the HealthCare FSA*).

- Adjustments can be made if a “qualifying event” (marriage, divorce, death, birth, adoption) occurs.
- You cannot transfer funds from one FSA to another.
- The plan provides a Grace Period.
- You have until March 31st to submit claims for reimbursement.
- You cannot have a Healthcare FSA and an HDHP plan, unless you have a Limited Purpose FSA Plan.



Dependent Care FSA Plan

Dependent care FSA annual maximum is \$7,500. Features of this plan include:

- This program lets you pay for certain IRS-approved dependent daycare expenses with pre-tax dollars.
- Rollover provision does not apply. Use it or lose it rule applies.
- Eligible for care while parents are at work or school.
- ONLY amount payroll deducted to date is available for distribution.
- Some examples include:
 - Daycare/Preschool for dependent children to age 13
 - Adult daycare
 - Before and after school programs
 - Camps





DENTAL

Dental - Benefit Highlights

MetLife	Basic Plan	Premium Plan
	In-Network Benefits	In-Network Benefits
Individual	\$50 applies to Basic and Major Benefits only	\$50 applies to Basic and Major Benefits only
Family	\$150 applies to Basic and Major Benefits only	\$150 applies to Basic and Major Benefits only
Annual Maximum Per Covered Member	\$1,000	\$1,500
Preventive Coverage	100%	100%
Basic Coverage	80%	80%
Major Coverage (Inc. Implants)	50%	50%
Orthodontia Benefit	Not Covered	50%
Orthodontia Dependent Child(ren)	Not Covered	Covered Limited to eligible dependent children under age 26
Orthodontia Lifetime Maximum	Not Covered	\$1,500

Dental (per pay/24 pays per year)	Basic Plan	Premium Plan
Single	\$15.20	\$17.18
EE + Spouse	\$41.66	\$48.50
EE + Child(ren)	\$38.36	\$44.64
Family	\$46.52	\$54.18



VISION

Vision – Benefit Highlights

SUMMARY OF BENEFITS

Vision Care Services	In-Network Member Cost	Out-of-Network Member Reimbursement
EXAM SERVICES once every plan year		
Exam	\$10 copay	Up to \$40
FRAME once every other plan year		
Frame	\$0 copay; 20% off balance over \$160 allowance	Up to \$80
STANDARD PLASTIC LENSES <i>in lieu of contacts</i> once every plan year		
Single Vision	\$20 copay	Up to \$30
Bifocal	\$20 copay	Up to \$50
Trifocal/Lenticular	\$20 copay	Up to \$70
Progressive – Standard	\$20 copay	Up to \$50
Progressive – Premium Tier I, II, or III	\$105, \$115, \$130 copay	Up to \$50
Progressive – Premium Tier IV	\$205 copay	Up to \$50
Progressive – Premium Tier V	\$245 copay	Up to \$50
LENS OPTIONS		
Polycarbonate – Standard < 19 years of age	\$0 copay	Up to \$20
CONTACT LENSES <i>in lieu of lenses</i> once every plan year		
Contacts – Conventional	\$0 copay; 15% off balance over \$160 allowance	Up to \$80
Contacts – Disposable	\$0 copay; 100% of balance over \$160 allowance	Up to \$80
Contacts – Medically Necessary	\$0 copay; paid-in-full	Up to \$300
Discounts:		
Additional pairs of glasses	40% off	
Any item not covered by the plan, including		
Non-prescription sunglasses	20% off	
Retail price or 5% off promotional price for Lasik or PRK from US Laser Network	15% off	
Hearing aids, with an extended warranty and free batteries through Amplifon Hearing Health Care Network	up to 66% off	

Vision - EyeMed (per pay/24 pays per year)

Single	\$2.53
EE + Spouse	\$5.31
EE + Child(ren)	\$6.08
Family	\$7.29





LIFE AND DISABILITY BENEFITS

Basic Life/AD&D

Clermont County provides \$25,000 Basic Life and \$25,000 AD&D benefits to all eligible full-time employees at no cost to you*.

The Life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan.

**Does not apply to CCDD employees – see your personnel department for details.*

Please be sure to review and update your beneficiary information as needed; does not have to be done during Open Enrollment.

Voluntary Life Insurance

New Hire / New Benefit Eligible Employees	• New Hires can elect up to up to \$250,000; can apply for up to \$500,000 maximum by completing an EOI* (Evidence of Insurability) • Elect up to \$50,000 for spouse without EOI • Elect child life up to \$20,000 without EOI • Spouse and/or child(ren) coverage cannot be more than the employee's own voluntary life coverage.
CHANGES PERMITTED DURING OPEN ENROLLMENT:	
Employee	Employees currently enrolled in Voluntary Life may: • Maintain current coverage. • Increase coverage by up to \$10,000 during open enrollment without EOI, provided the election amount does not exceed the Guarantee Issue amount \$250,000 • Decrease coverage or cancel coverage. • Maximum coverage is \$500,000.
Spouse	Spouses currently enrolled in Voluntary Dependent Spouse Life may: • Maintain current coverage. • Increase spouse coverage with an EOI. • Maximum coverage is \$300,000 with approved EOI but may not exceed 100% of the employees' own coverage.
Child(ren)	• Can elect up to \$20,000 (increments of \$5,000) • Maximum is \$20,000 (one policy covers all children in the family) • Dependent child(ren) coverage cannot exceed 100% of the employee's own coverage.
Evidence of Insurability (EOI)	You will be required to submit an EOI if requesting: 1. Employees or spouses who previously declined Voluntary Life coverage must complete EOI and receive underwriting approval before coverage can become effective. 2. If Employee or spouses elect over the Guarantee Issue amount.

ENROLLMENT NOTES: Enter the coverage amount in ESS – the system will calculate the per pay deduction based on age.

*EOI is the acronym for Evidence of Insurability (a medical information declaration).

Long Term Disability

Clermont County provides you with long-term income protection through Mutual of Omaha Financial in the event you become unable to work due to a non-work-related illness or injury until you have 5 years of OPERS service. The following highlights details regarding our long-term disability plan.

Mutual of Omaha Long-Term Disability (LTD)	
Elimination Period	180 days
LTD Benefit	60% up to a monthly maximum of \$5,000
Definition of Disability	3 years own occupation
Maximum Disability Period	Social Security normal retirement age.
Pre-Existing Condition Limitations	12 months for conditions treated within the 12 months prior to effective date of coverage

*Employees with 5 or more years of service may qualify for a similar benefit through the Ohio Public Employees Retirement System

Mutual Solutions Hearing Discount Program

Program Benefits Include

- ✓ **Custom hearing solutions** - we find the solution that best fits your lifestyle and your budget from one of our 10 manufacturers
- ✓ **Risk-free 60-day trial** - 100 percent money-back guarantee on hearing aid purchase
- ✓ **Hearing aid low price guarantee** - if you find the same product at a lower price, bring us the local quote and we'll not only match it, we'll beat it by 5 percent
- ✓ **Continuous Care** - one year free follow-up, two years of free batteries and a three-year warranty

Accessing Your Benefits is as Easy as...

1. Call Amplifon at 1-888-534-1747 and a Patient Care Advocate will assist you in finding a hearing care provider near you.
2. Our advocate will explain the Amplifon process, request your mailing information and assist you in making an appointment with a hearing care provider.
3. Amplifon will send information to you and the hearing care provider. This will ensure your Amplifon discounts are activated.

To learn more visit amplifonusa.com/mutualofomaha



Mutual of Omaha

amplifon
Hearing
Health Care



SUPPLEMENTAL PLANS

Supplemental Plans

Clermont County also offers a wide selection of supplemental plans. Supplemental plans are available for full-time and also part-time employees who are regularly scheduled to work 20 hours or more per week.

- The Standard Cancer Coverage
- The Standard Critical Illness
- The Standard Accident Insurance
- The Standard Universal Life Insurance
- Trustmark Voluntary STD (Short-term Disability) Insurance
- Trustmark Voluntary LTD (Long-term Disability) Insurance

Open Enrollment for these supplemental coverages will take place in May 2027 and is effective June 1, 2027.

For Additional Information and rates, call Star Robbins Company: 800-486-7721



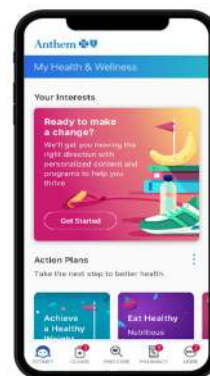
RESOURCES

If you haven't done so already...Register Today!



From your computer

1. Got to Anthem.com/register
2. Provide the information requested
3. Create a username and password
4. Set your email preferences
5. Follow the prompts to complete your registration



From your mobile device

1. Download the free Sydney mobile app and Select *Register*
2. Confirm your identity
3. Create a username and password
4. Confirm your email preferences
5. Follow the prompts to complete your registration

Text **SYDHEALTH** to **268436**



for a link to download our app,
or visit anthem.com/signup

Need help signing up? Call your member services number on the back of your Anthem ID card.

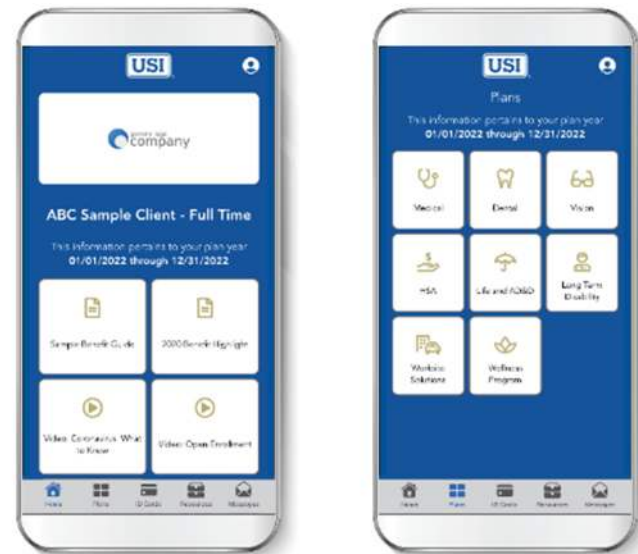
Benefits Mobile App

MyBenefits2GO provides on-the-go access to your benefit plan details, HR contact information and more!

MyBenefits2GO is a quick and simple way for you and your enrolled dependents to access benefit summaries and other important information about our group plans. Store photos of ID cards and easily locate carrier and HR contact information—all in one place. The app is free and available for iPhone and Android.

Download in the App Store or Google Play Store and enter code [G28511](#) in the app to access your benefits.

- **Stay Organized**
Store your benefit plan information and ID cards in one easy-to-find place.
- **Lighten Your Wallet**
Save a photo of your ID card for each plan so you always have it when you need it.
- **Get In Touch**
Find the contact information for carriers and HR all in one spot.





Life is filled with change and uncertainty. The responsibilities and demands on our time can be overwhelming. It happens to all of us. Whenever you or your immediate family members need help dealing with life's challenges, our Employee Assistance Program, administered by ComPsych is here to help.

You and your dependents have access to five (5) free face to face sessions or to other resources per year provided by Clermont County employees and their immediate family members through ComPsych. Services include:



For full list of resources please go online.

To schedule a confidential appointment: Call: **877.327.4452** TTY: **800.697.0353**

Your toll-free number gives you direct, 24/7 access to a GuidanceConsultantSM, who will answer your questions and, if needed, refer you to a counselor or other resources.

Online: **guidanceresources.com**

App: **GuidanceNowSM**

Web ID: **EAPCEB**

Log on today to connect directly with a GuidanceConsultant about your issue or to consult articles, podcasts, videos and other helpful tools.

Benefit Resource Center

Contact the USI Benefit Resource Center (BRC) for free, confidential help!

- Benefit coverage levels
- Carrier information
- Claims assistance
- Billing issues

855-874-0829

BRCMidwest@usi.com

Monday through Friday 8:00am to 5:00pm Eastern & Central Standard Time



Website Links

Clermont County Employee Benefit Website: www.hr.clermontcountyohio.gov

Anthem: <https://www.anthem.com/> and **Carelon Rx:** <https://www.carelonrx.com/>

Medical insurance provider and prescription coverage.

Bloom: <https://meet.swordhealth.com/bloom/cebco>

1 in 3 women suffer from pelvic health disorders including bladder issues, bowel dysfunction, and pelvic pain. Sword Health developed Bloom to give you relief with an easy-to-use, at-home pelvic therapy solution.

Carelon Rx Cost Relief Program: The Cost Relief program offers you select specialty medicines at no cost to you. That means a \$0 copay when you fill the prescription with the exclusive specialty pharmacy in your network. Please call 877-638-4008 Monday through Friday from 8 a.m. to 8 p.m. ET

ComPsych Guidance Resources is our Employee Assistance Program (EAP) : www.guidanceresources.com

EAP program provides **5 free** sessions per incident for finding child or elderly care/ movers/ home repair/ pet care, free legal consultation: divorce/ adoption/ wills/ trusts, retirement planning/ insurance/ budgeting/ bankruptcy and an online library with articles/ podcasts/ videos/ on-demand training.

LiveHealth Online: <https://livehealthonline.com/>

Online Medical lets you visit a doctor 24/7.

Mutual of Omaha/Amplifon Hearing Discount Program <https://amplifonusa.com/mutualofomaha>

Special money-savings offers and FREE hearing screening appointment . Call 1-888-534-1747.

SmartShopper: <https://smartshopper.com/>

Earn a reward check every time you and your family choose an eligible lower-cost, high-value doctor or facility for a variety of health services.

Sword: <https://meet.swordhealth.com/thrive/cebco>

The Sword digital physical therapy programs combine guidance from dedicated physical therapists with easy-to-use technology that result in real, meaningful results. Available to dependents 13+ years of age.

Sydney Health: <https://www.sydneyhealth.com/>

Wellness Plan and so much more!



Thank you!!

Thank you for your participation in this year's open enrollment presentation.

All election changes are due by:

Monday, November 2nd

Failure to elect medical, dental, vision or FSA will result in no coverage for 2027. Your next opportunity to make changes to your benefits will be if you experience a life event.