

2026 - 2027 Benefits At A Glance



Medical	Cigna OAP Base Plan	Cigna OAP Enhanced Plan
In-Network Overview		
Plan Year Deductible Individual / Family	Embedded \$3,000 / \$9,000	Embedded \$1,500 / \$4,500
Coinsurance Plan Pays / You Pay	70% / 30%	80% / 20%
Out-of-Pocket Max Individual / Family	\$10,000 / \$20,000	\$5,000 / \$10,000
Preventive Services	No Charge	No Charge
Primary Care	\$50 Copay	\$30 Copay
Specialist Visit	\$75 Copay	\$60 Copay
Urgent Care	\$75 Copay	\$60 Copay
Emergency Room	\$750 Copay	\$500 Copay
Inpatient Hospital	30% Coinsurance	20% Coinsurance
Outpatient Facility	30% Coinsurance	20% Coinsurance
Out-of-Network Overview		
Deductible	Embedded \$6,000 / \$18,000	Embedded \$2,250 / \$6,750
Out-of-Pocket Maximum	50% / 50%	70% / 30%
Coinsurance	\$20,000 / \$40,000	\$10,000 / \$20,000

Pharmacy	Base Plan		Enhanced Plan		Flexible Spending Accounts 2026 IRS Maximums	
	30 Day Retail	90 Day Mail Order	30 Day Retail	90 Day Mail Order	Healthcare	Dependent Care
Tier 1	\$15	\$30	\$10	\$20	\$3,400	\$7,500
Tier 2	\$75	\$125	\$50	\$100		
Tier 3	\$125	\$250	\$75	\$125		
Tier 4	\$200	N/A	\$100	N/A		

Scan the QR code to view our full benefit offerings

Your Cost – Semi-Monthly Employee Deductions					
	Employee Only	Employee & Spouse	Employee & Child	Employee & Children	Employee & Family
Base Plan	\$63.84	\$183.84	\$175.67	\$234.40	\$371.77
Enhanced Plan	\$70.83	\$203.99	\$194.92	\$260.09	\$412.51

This guide is meant to provide a convenient summary of company offered benefit plans. If there are any inconsistencies between the information in this guide and the plan documents or contracts, the plan documents and contracts will prevail. Certificates and/or plan documents, which provide more details about each benefit plan, can be located on your enrollment site.

Dental	Base Plan	Enhanced Plan
Benefits		
Plan Year Deductible Individual/Family	\$50/\$150 Type II and III expenses only	
Annual Benefit Maximum	\$750 per person	\$2,000 per person
Preventive Services	Covered at 100%	
Basic Services	80%	
Major Services	50%	
Orthodontia Adults & Children	N/A	50%
Orthodontia Lifetime Maximum	N/A	\$1,500
Your Cost- Semi-Monthly Employee Deductions		
Employee	\$0	\$9.02
Employee + 1	\$11.50	\$22.50
Employee + Family	\$27.00	\$51.50

Vision	Exam & Materials Plan	Materials Only Plan
Benefits		
Exam	\$0	N/A
Frames	\$150 Retail Allowance	
Lenses	\$15 Copay	
Contacts	\$150 Retail Allowance	
Frequency of Services		
Exam	Once every 12 months	N/A
Frames	Once every 24 Months	
Lenses or Contacts	Once every 12 Months	
Your Cost- Semi-Monthly Employee Deductions		
Employee	\$4.34	\$2.87
Employee + 1	\$8.43	\$5.55
Employee + Family	\$14.67	\$9.52

Additional Voluntary Benefits

FSA - Employees can contribute pre-tax dollars to a Health Care and/or Dependent Care Spending Account.

Voluntary Life - Employees who want to supplement their group life insurance benefits may purchase additional coverage.

Short Term Disability (STD) - Offers up to 13 weeks of partial income replacement when you are unable to work due to sickness or injury.

Long Term Disability (LTD) - For longer periods of disability, the LTD Plan can provide protection for 60% of your salary.

Group Accident - This plan pays you lump sum benefits based on your injury and the treatment you need. It includes a \$75 annual wellness benefit for each covered member.

Group Critical Illness - The elected lump sum benefit is paid directly to you at the first diagnosis of a covered condition. The plan includes a \$100 annual wellness benefit for each covered member.

Hospital Indemnity - This plan pays you based on each covered hospital admissions. It includes a \$50 annual wellness benefit for each covered member.

Benefits Provided at no Cost to Employees

Basic Life Insurance - Full-time employees receive life insurance coverage equal to 1.5x your annual salary, up to \$150,000.

Employee Assistance Program (EAP) - Employees and family members have access to licensed professional counselors 24/7 to assist with work, personal or financial related issues.

On-Site and Virtual Behavioral Health Services - Free and unlimited sessions with local professionals, available to employees by appointment.

Wellness Program - Incentives available to all employees and spouses covered on the Forsyth County Medical Plan. Consists of biometric screenings, health risk assessment, and health coaching.

On-site Employee Health & Wellness Clinic- All full-time employees, retirees and family members ages 2+ who are enrolled in the Forsyth County medical plan can be seen for sick visits, wellness exams, and health management services at our on-site clinic, free of charge. Available by appointment.

This guide is meant to provide a convenient summary of company offered benefit plans. If there are any inconsistencies between the information in this guide and the plan documents or contracts, the plan documents and contracts will prevail. Certificates and/or plan documents, which provide more details about each benefit plan, can be located on your enrollment site.