2026
BENEFITS GUIDE

mission kansas

CITY OF MISSION

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WELCOME TO ANNUAL ENROLLMENT!

The City of Mission is committed to providing you and your family access to competitive benefits at an affordable cost. Please take time to review this summary.

Open Enrollment is your one opportunity each year to make changes to your benefit elections. Elections made during Open Enrollment become effective January 1, 2026, and remain in place throughout 2026, unless you experience a qualifying event that allows you to make changes midyear. Examples of qualifying events are marriage, divorce, and birth or adoption of a child. You have 30 days from the date of the qualifying event to make changes to your benefit elections. Changes must be consistent with the qualifying event.

If you experience a qualifying event, please contact Kathy Stratman at 913.676.8354 or kstratman@missionks.org to discuss your options.

Basic Terms and Definitions

Below you will find some medical insurance terms and basic claim examples to help you understand how our plans work.

IN-NETWORK VERSUS OUT-OF-NETWORK
A network is comprised of contracted providers. An insurance carrier requests that providers participate in its network, and in return, the providers agree to offer discounted services to their patients. If you pick an out-of-network provider, your claims could cost more because you will not receive the discounts that an in-network provider offers.

Please note: In 2026, Blue Cross Blue Shield will continue to administer our comprehensive medical plans. Blue KC's network offers exceptional access to in-network providers and deep discounts on services, resulting in lower costs for our employees and our plan. It is highly recommended that you verify that all associated providers are participating in the network. This includes not only your doctor but also anesthesiologists, lab facilities, etc. This helps you avoid incurring any unexpected out-of-network charges and ensures cost-effective use of your health plan.

PREVENTIVE CARE Routine healthcare services can minimize the risk of certain illnesses or chronic conditions. Examples of preventive care services include but are not limited to physicals, mammograms, flu vaccines, prostate tests, and smoking cessation. As a reminder, regardless of which plan you enroll in, preventive care services will continue to be covered at 100% when you visit an in-network provider.

DEDUCTIBLE A deductible is the amount you owe for covered healthcare services before your plan begins to pay benefits. For example, if the deductible is $2,000, your plan won't pay anything until you've paid the first $2,000 of the bill for your covered healthcare services that are subject to the deductible. Preventive care is not subject to the deductible because it is covered 100% in-network by all three medical plan options.

EMBEDDED DEDUCTIBLE An embedded deductible is a system that combines individual and family deductibles in a family health insurance policy. If you are enrolled in the family tier of the medical plan, the plan will contain two deductible components: an individual deductible and a family deductible. An individual in the family plan can meet the individual embedded deductible, and Blue KC will cover that individual's medical bills prior to the aggregate family deductible being met. The individual deductible is embedded in the family deductible. One person in the family will never exceed more than the individual deductible or the individual out-of-pocket maximum.

COINSURANCE Coinsurance is your share of the costs of a covered healthcare service, calculated as a percentage (for example, 10%) of the allowed amount for the service. Your coinsurance will begin after you have met your deductible. For example, if the charge for an X-ray is $1,000 and you have met your deductible, your coinsurance payment of 10% would be $100. Your health insurance pays the rest of the allowed amount. You will often see coinsurance displayed as a percentage of what the plan will pay. For example, 90% means that the plan is paying 90% and the employee picks up the remaining 10%.

CO-PAY A co-pay is a fixed dollar amount that you pay for a healthcare service. The amount can vary by the type of service. Your co-pays do not count toward your deductible but will count toward your out-of-pocket maximum.

OUT-OF-POCKET MAXIMUM The out-of-pocket maximum is designed to protect you in the event of a catastrophic illness or injury. Your out-of-pocket maximum includes your deductible, coinsurance and co-pays that you pay for out of your own pocket. After you have paid the specified out-of-pocket amount during a policy year, Blue KC pays the remaining covered services at 100%.

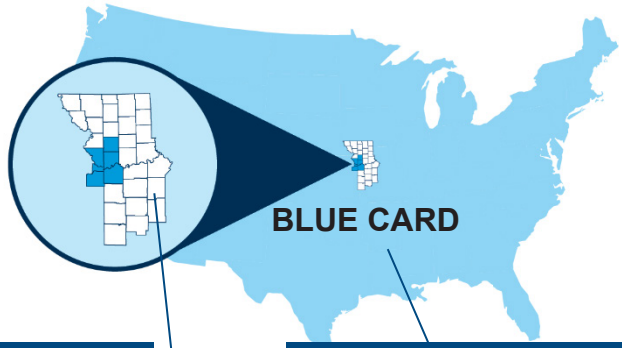
EXPLANATION OF BENEFITS (EOB) The EOB is a statement from the insurance company showing how a claim was processed. It tells you what portion of the claim was paid to the doctor or hospital and what portion of the payment, if any, you are responsible for paying. Remember to hold on to these documents!

2026 Benefits Summary

- Medical/Prescription coverage will continue to be with Blue Cross Blue Shield of Kansas City.
- Dental plan continues with Delta Dental of Kansas with no plan changes.
- Vision plan continues with EyeMed with no changes to the plan design. The city will continue to pay the full cost of this benefit.
- Life and Disability—The Standard will continue to administer these plans.
- Flexible Spending Account will continue to be administered by BASIC.
- Aflac will continue to offer voluntary programs for you and your family.
- Voluntary Retirement plans will continue to be offered through Empower, The Principal, or MissionSquare Retirement.
- Spouse and Child Optional Group Term Life will be offered through KPERS/KP&F.
- The City of Mission Wellness Program will continue in 2026.

Medical and Prescription Drug

The City is committed to offering comprehensive health insurance to our employees and their families. We are pleased to announce that in 2026 The City of Mission will continue its partnership with Blue Cross Blue Shield of Kansas City (Blue KC).



Plan Options

- Base PPO plan — BlueSelect Plus network
- Spira Care EPO plan — BlueSelect Plus network
- Buy-Up PPO plan — Preferred Care Blue network

Understanding Your Plan Network Options

Base PPO Plan—BlueSelect Plus Network

- Blue KC's high-performance network with access to care within the Kansas City metropolitan area.
- Includes 4,100 in-network physicians and specialists and 10 top hospitals.
- You do not have to select a primary care physician.
- In- and out-of-network coverage, as well as national and international coverage through Blue Card.

In-network providers in these counties:

Missouri: Clay, Jackson, Platte, Cass, Clinton, DeKalb, Johnson, Lafayette, Ray, Caldwell.

Kansas: Johnson and Wyandotte.

In-network providers through Blue Card:

National and international coverage through Blue Card program providing in-network access to medical care when you travel.

Out-of-network providers in these counties

You have out-of-network coverage—but higher out-of-pocket costs.

Hospitals included in the BlueSelect Plus Network:

- AdventHealth Shawnee Mission
- Cameron Regional Medical Center
- Children's Mercy Hospital
- Children's Mercy Hospital — South
- Liberty Hospital
- North Kansas City Hospital
- Olathe Medical Center
- Truman Medical Center — Hospital Hill
- Truman Medical Center — Lakewood
- University of Kansas Hospital

Spira Care EPO Plan—BlueSelect Plus Network

- Blue KC Spira Care Centers serve members' primary care needs while still providing access to the BlueSelect Plus network with coverage for specialty or emergency needs outside the Care Centers.
- No co-pays, no deductibles, and no additional costs for procedures at Spira Care Centers.
- In-network benefits only, there are no out-of-network benefits for this plan.
- To learn more about Spira Care, visit spiracare.com.
- See pages 8 and 9 for in depth information regarding the Spira plan.

Buy-Up PPO Plan—Preferred Care Blue Network

- Blue KC's broadest network of healthcare providers and hospitals with coverage in both Metro and Non-KC Metro areas.
- Includes 6,200 in-network physicians and specialists and 50 hospitals.
- You do not have to select a primary care physician.
- In- and out-of-network coverage, as well as national and international coverage through Blue Card.
- National and international coverage.

Locate a Provider

- To locate an in-network physician or hospital, visit bluekc.com and click Find Care.
- Existing members can log in to their member portal and search for providers within their current plan's network. If you are considering changing your plan/network or if you are a new member, continue your search as a guest. Select either the BlueSelect Plus or Preferred Care Blue network and enter your ZIP code.
- Remember, if you enroll in the Spira Care EPO plan option, you will need to visit a Spira Care Center for your primary care needs if you do not want to incur out-of-pocket costs.

Hospital Network Comparison

Hospital Name	Preferred-Care Blue	BlueSelect Plus
AdventHealth Shawnee Mission	YES	YES
Belton Regional Medical Center	YES	
Cameron Regional Medical Center	YES	YES
Cass Regional Medical Center	YES	
Center Point Medical Center	YES	
Children's Mercy Hospitals	YES	YES
Lee's Summit Hospital	YES	
Liberty Hospital	YES	YES
Menorah Medical Center	YES	
North Kansas City Hospital	YES	YES
Olathe Health System	YES	YES
Overland Park Regional Medical Center	YES	
Providence Medical Center	YES	YES
Research Medical Center	YES	
St. Joseph Medical Center	YES	YES
St. Luke's Health System	YES	
St. Mary's Medical Center		YES
University Health (Formerly Truman Medical Centers)	YES	YES
University of Kansas Health System	YES	YES

Spira Care EPO

This offering is crafted for members looking to simplify and personalize their healthcare experience. If you believe that your family's health needs in the next year will largely fall within primary care, including labs and X-rays, and routine behavioral health services, you can enjoy the peace of mind that comes with knowing that there will be no additional charges outside your monthly premiums. For needs outside the Spira Care Centers, you'll have access to the BlueSelect Plus network within the Kansas City metropolitan area.

What Is Spira Care?

Spira Care is health insurance with a primary care clinic at no additional cost. It's a healthcare package designed for those seeking simplicity in navigating their healthcare journeys. In contrast to traditional plans, Spira Care provides the easiest-imaginable access to a member-centered experience so that members can count on accessing care from a welcoming place without all of the complexity.

The entire experience was designed by patients from start to finish to provide comprehensive care at convenient locations with no deductibles, no co-pays, and no additional cost for any procedures received at the care centers.

Spira Care Services

Comprehensive Services

- Routine, preventive care
- Adult and pediatric primary care
- Chronic condition management
- Behavioral health services
- Digital X-rays
- Lab draws

Convenient Benefits

- Behavioral health services
- Specialist referrals and scheduling
- Patient wellness follow-ups
- Outside-care-center support
- Extended full-service hours
- Access to A Healthier You platform

SPIRA CARE LOCATIONS

Spira Care Shawnee
10824 Shawnee Mission Parkway
Shawnee, KS 66216

Spira Care Liberty
8350 N Church Road
Kansas City, MO 64158

Spira Care Olathe
15710 W 135th Street
Suite 200
Olathe, KS 66062

Spira Care Crossroads
1916 Grand Blvd
Kansas City, MO 64108

Spira Care Lee's Summit
760 NW Blue Parkway
Lee's Summit, MO 64086

Spira Care Wyandotte
98th and Parallel Parkway
Kansas City, KS

Spira Care Tiffany Springs
8765 N Ambassador Drive
Kansas City, MO 64153

Spira Care Overland Park
7431 W 133rd Street
Overland Park, KS 66203

Spira Care Independence
3717 Whitney Avenue
Independence, MO 64055

The Team That Supports Members

CARE GUIDES: Every Spira Care member will have access to a team of care guides to walk with them on their health journey. Care guides are available to answer insurance questions, coordinate care, and more.

FIRST-CLASS DOCTORS: Spira Care's team of doctors is known for an exceptional level of care. They're member-centric experts with a passion for family care and a dedication to ongoing wellness and member peace of mind.

CARE TEAM: Our nurses, doctors, and care guides are unified in creating a wellness road map for each member. Together, this care team provides a complete healthcare support system.

Spira Care Examples

Jake, age 22: Recently promoted, feeling pressure at work

Since taking on greater responsibilities at work, Jake has loved the fact that he doesn't have to worry about budgeting for his primary care services at Spira Care. He rarely needs care beyond regular doctor visits and occasional labs, and it's a weight off his shoulders knowing that he'll never see a bill for any care center appointment.

Jake already has enough on his plate, so he takes advantage of meeting with his Spira Care behavioral therapist at no additional cost to make sure that he's keeping his anxiety in check.

Dana, age 58: Recently diagnosed with cancer, little experience with insurance

Dana has always been fairly healthy, so she's never had a reason to pay close attention to her health plan. However, a thyroid cancer diagnosis earlier this year has turned her world upside down. She currently has over 50 insurance claims, feels overwhelmed and confused, and has no idea what to do next.

With Spira Care, Dana's care guide will not only answer her questions regarding claims and benefits but also help coordinate specialist care within the BlueSelect Plus network. Dana regularly meets with her primary care doctor at no additional cost, and all oncologist appointments are applied toward a simple annual deductible.

FAQs

Q: What prescriptions are filled at Spira Care?

A: Spira Care offers the convenience of on-site prescription services for approximately 50 of the top generic prescriptions at your regular co-pay level.

Q: What about prescriptions that can't be filled at Spira Care?

A: Your care team will facilitate prescription services through convenient mail order or at your preferred pharmacy at your regular co-pay level.

Q: What happens if I go to a physician out-of-network?

A: Spira Care is built on an exclusive provider organization (EPO) insurance model. Except for emergency services, members must receive all care from in-network providers (BlueSelect Plus network in the KC area or BlueCard network outside the 32-county service area). Nonemergency services received out-of-network will not be covered.

Q: I already have a primary care or pediatric physician I love. Can I still see that physician?

A: While this plan is ideal for members who utilize the no-additional-cost primary and pediatric care at the care centers, members still have access to more than 3,600 providers in the BlueSelect Plus network. Members will also have the nationwide coverage of the BlueCard network outside the 32-county Blue KC service area.

Comparing Your Medical Plan Options

BlueSelect Plus Network

City of Mission has minor plan design changes for the 2026 plan year to ensure that you have diverse and affordable options to choose from. The Base PPO and Spire Care EPO both offer the narrower BlueSelect Plus network through Blue KC that offers deeper discounts, leading to lower premium offerings for you and your family. The City covers 80% of the premium for these plans while employees pay for 20%.

Benefit	Base PPO Plan BlueSelect Plus Network		Spira Care EPO BlueSelect Plus Network	
	In-network	Out-of-network	In-network	Out-of-network
Deductible Deductible applies to all services unless indicated otherwise.	$2,000 individual/$4,000 family	$2,000 individual/$4,000 family	$3,500 individual/$7,000 family	Not covered
Coinsurance	80%	50%	100%	
Out-of-pocket maximum	$4,000 individual/$8,000 family	$20,000 individual/$40,000 family	$3,500 individual/$7,000 family	
Preventive services	100%	Ded., then 50%	100%	
Physician office visits	$35	Ded., then 50%	Deductible*	
Specialist office visits	$70	Ded., then 50%	Deductible	
Inpatient hospital	Ded., then 80%	Ded., then 50%	Deductible	
Outpatient hospital	Ded., then 80%	Ded., then 50%	Deductible	
Urgent care	$70	Ded., then 50%	Deductible	
Emergency room	$100 co-pay then 80%	$100 co-pay then 80%	Deductible	In-network deductible
Prescription drugs	**In-network**	**Out-of-network**	**In-network**	**Value-based Rx**
Retail				
Generic	$15 co-pay	$15 co-pay	$15 co-pay	Not covered
Preferred brand	$70 co-pay	$70 co-pay	$70	
Nonpreferred brand	$110 co-pay	$110 co-pay then 50%	$110	
Specialty	$200 co-pay	$200 co-pay then 50%	Deductible	
Mail order				
Generic	$37.50 co-pay	$37.50 co-pay	$37.50	Not covered
Preferred brand	$175 co-pay	$175 co-pay	$175	
Nonpreferred brand	$275 co-pay	$275 co-pay then 50%	$275	

*No charge when you seek care in a Spira Care Center.

Preferred Care Blue Network

The Buy-Up PPO plan utilizes the Blue KC Preferred Care Blue network. This is the broader network offering of local and nationwide healthcare providers. The discounts in this network are less than the BlueSelect Plus network, but it offers greater freedom to choose doctors and hospital providers. To find eligible providers for both networks, visit bluekc.com and use the provider search tool. The City covers 75% of the premium for this plan and employees pay for 25%.

Benefits	Buy-Up PPO Plan Preferred Care Blue Network	
	In-network	Out-of-network
Deductible Deductible applies to all services unless indicated otherwise.	$3,000 individual/$6,000 family	$3,000 individual/$6,000 family
Coinsurance	80%	60%
Out-of-pocket maximum	$5,000 individual/$10,000 family	$10,000 individual/$20,000 family
Preventive services	100%	Ded., then 60%
Physician office visits	$35	Ded., then 60%
Specialist office visits	$70	Ded., then 60%
Inpatient hospital	Ded., then 80%	Ded., then 60%
Outpatient hospital	Ded., then 80%	Ded., then 60%
Urgent care	$70	Ded., then 60%
Emergency room	$100 co-pay then 80%	$100 co-pay then 80%
Prescription drugs	**In-network**	**Value-based Rx**
Retail		
Generic	$15 co-pay	$15 co-pay
Brand name	$70 co-pay	$70 co-pay
Nonpreferred	$110 co-pay	$110 co-pay, then 50%
Specialty	$200 co-pay	$200, then 50%
Mail order		
Generic	$37.50 co-pay	$37.50 co-pay
Brand name	$175 co-pay	$175 co-pay
Nonpreferred	$275 co-pay	$275 co-pay, then 50%

Employee Contributions

Base PPO plan: BlueSelect Plus Network

	Total monthly premium	Monthly employer contribution	Monthly employee contribution	Per payroll (24)	Increase from 2025
Employee	$858.36	$686.69	$171.67	$85.84	$4.02
Employee + spouse	$1,802.56	$1,442.05	$360.51	$180.26	$8.43
Employee + child(ren)	$1,545.05	$1,236.04	$309.01	$154.51	$7.23
Employee + family	$2,575.09	$2,060.07	$515.02	$257.51	$12.04

Spira Care EPO: BlueSelect Plus Network

	Total monthly premium	Monthly employer contribution	Monthly employee contribution	Per payroll (24)	Increase from 2025
Employee	$801.14	$640.91	$160.23	$80.11	$3.74
Employee + spouse	$1,682.39	$1,345.91	$336.48	$168.24	$7.87
Employee + child(ren)	$1,442.05	$1,153.64	$288.41	$144.21	$6.75
Employee + family	$2,403.42	$1,922.74	$480.68	$240.34	$11.24

Buy-Up PPO Plan: Preferred Care Blue Network

	Total monthly premium	Monthly employer contribution	Monthly employee contribution	Per payroll (24)	Increase from 2025
Employee	$904.14	$678.11	$226.04	$113.02	$5.29
Employee + spouse	$1,898.70	$1,424.03	$474.68	$237.34	$11.10
Employee + child(ren)	$1,627.46	$1,220.60	$406.87	$203.43	$9.51
Employee + family	$2,712.43	$2,034.32	$678.11	$339.05	$15.85

Virtual Health

Blue KC offers access to video visits with board-certified doctors and behavioral health therapists right from your smartphone, tablet, or computer. Blue KC Virtual Care is convenient for everyday medical and behavioral healthcare and is always private and secure. Don't want to wait for an appointment? Not in reach of a nearby provider? You can benefit from non-emergent care and consult from the comfort and convenience of wherever you are.

Members can download the Blue KC Virtual Care app or visit bluekcvirtualcare.com to schedule an online appointment. To register, create an account using your Blue KC member ID card for reference. This ensures members are charged the correct amounts when they use telehealth benefits. Register now at bluekcvirtualcare.com or download the Blue KC Virtual Care app in the Apple App Store or in Google Play. If you have questions, please call 888.658.6653.

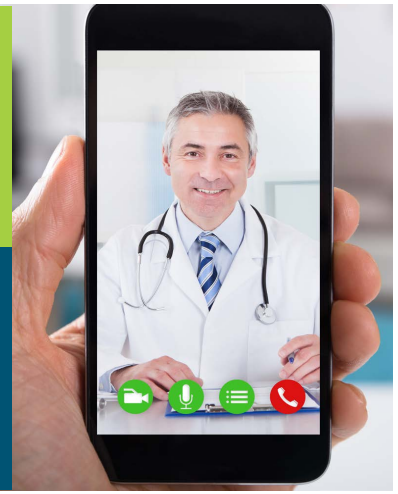
24/7 ACCESS TO VIRTUAL CARE
Online or Mobile Doctor Visits

Get care wherever you are for common medical issues

Why use virtual care?

- Short wait times
- Connect with your camera phone or computer with camera
- Meet with licensed, U.S. board-certified physicians and behavioral healthcare providers
- Get the care you need – including some prescriptions[1]
- Feel safe with private, secure, HIPAA-compliant tool
- Save on drive time or office wait time
- Rest assured if you are traveling and need care quick
- Pay much less than going to emergency room

- **Urgent or sick care needs** available 24/7
- **Behavioral healthcare needs** by appointment
- **Affordable visits based on your plan's benefits** (costs can vary for behavioral healthcare provider type)



What can be treated?

COMMON MEDICAL ISSUES, SUCH AS:

- Sinus Pain
- Mild Asthma
- Mild Allergic Reactions
- Minor Headaches
- Burning with Urination
- Cold Sores
- Sprains, Strains
- Pink Eye
- Nausea, Vomiting, Diarrhea
- Bumps, Cuts, Scrapes
- Coughs, Sore Throat
- Eye Swelling, Irritation, Redness or Pain
- Minor Fevers, Colds
- Rashes, Minor Burns

BEHAVIORAL HEALTHCARE ISSUES, SUCH AS:

- Anxiety
- Bereavement/grief
- Bipolar disorder
- Depression
- OCD
- PTSD/trauma
- Panic attack

How do I start an appointment?

1. Download the **Blue KC Virtual Care mobile app** or visit **BlueKCvirtualcare.com**.
2. Create an account using your Blue KC member ID card for reference.
3. View a list of available doctors, their experience and ratings, and select one.
4. **For urgent or sick care needs:** Stream a live visit directly online or your mobile device.
5. **For behavioral healthcare needs:** Schedule your session with a psychologist or counselor.

Kansas City VIRTUAL CARE

VIRTUAL CARE IS NOT FOR EMERGENCIES
If you have a serious medical concern, go to the emergency room or call 911.

[1] Blue KC does not guarantee a prescription will be written.

Mindful by Blue KC

Blue KC's new Mindful services make behavioral health more affordable and accessible for employees and dependents enrolled in one of the Blue KC medical plans. As your new single point of contact, Blue KC's Mindful Advocates are licensed behavioral health clinicians who match you to providers and services when you need them, including listening, navigating care, crisis management, benefits guidance, connecting you to care, and any necessary follow-up.

What Is Behavioral Health?

Behavioral health refers to the relationship between a person's behavior and their overall well-being. Our behavioral health impacts our ability to function in everyday life and our concept of self. Depression, anxiety, substance use, and other behavioral health issues can affect how we manage our physical health and daily living challenges. Addressing behavioral health is increasingly recognized as a vital part of self-care.

It can be hard to admit you need help — and even harder to get it. But there's never been a better time to face any behavioral health issues head on.

No matter what you're facing, a Mindful Advocate is available 24/7 and is just a call away for topics including:

- Major life events (divorce, loss, etc.)
- Stress
- Financial issues
- Child care
- Other everyday life challenges

View the expansive list of additional resources available to you under the Mindful program by visiting mindfulbluekc.com.

It all starts with the Mindful Advocate

By calling one number and speaking to a Mindful Advocate, who's available 24/7, members can get:

In-the-moment support

Care navigation

Help locating and referring to in network providers

Help connecting to expedited treatment options in crisis situations

A Mindful Advocate can help members access tools including in-person, text, online therapy and virtual visit options specific to the members' behavioral healthcare needs. To learn more call **833-302-MIND (6463)** or visit **MindfulBlueKC.com**.

Kansas City Mindful By Blue KC

Blue KC Services

Livongo for Diabetes

Blue Cross Blue Shield of Kansas City (Blue KC) partners with Livongo to help members with diabetes better manage their care. Any member on the Medical plan with a diagnosis of diabetes can participate — at no cost to you!

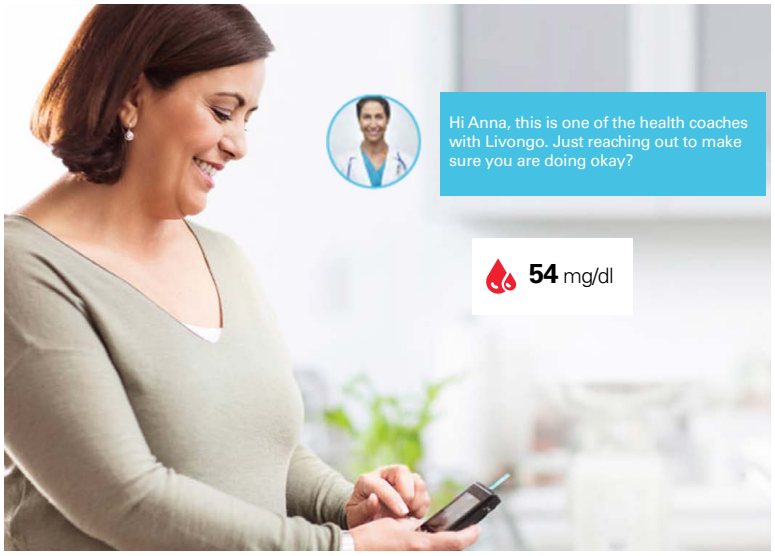
Livongo Diabetes Management

- You will receive a cellularly enabled glucometer, free unlimited strips and lancets shipped directly to you, and personalized coaching and trends management.
- Your smart glucometer seamlessly shares your health summary report to a care team. The care team is available 24/7/365 to intervene in case of emergency.
- Clinical data analytics provide insights and educational content.

If you or a covered dependent have diabetes, join today at join.livongo.com/bluekc/register or call 800.945.4355. Use registration code: **Blue KC**

Diabetes Prevention Program

Blue KC partners with Solera Health to provide a Diabetes Prevention Program (DPP) at no cost to all members who qualify (excluding Medicare Advantage and JAA groups). It's a 16-week program, followed by monthly sessions that can help you lose weight, adopt healthy habits, and significantly reduce your risk of developing diabetes. And it's available at no cost to members who qualify. Through this benefit, you may be able to participate in a national weight loss program such as Weight Watchers®, Retrofit, or HealthSlate.



Most Programs Include:

- Access to a personal health coach.
- Weekly lessons.
- A small group for support.
- Tools such as a wireless scale or activity tracker.

Learn More and See If You Qualify:

For those enrolled in the Medical plan, you can find more information and take the one-minute quiz to see if you qualify by visiting solera4me.com/en/bluekc.

Pharmacy Benefits

City of Mission offers pharmacy coverage through Optum Rx and Blue KC's Select formulary. Together, Blue KC and Optum Rx provides safe, easy, and cost-effective ways for you to get the medication you need. You have several ways to fill prescriptions. Each option offers convenient services to help you make the most of your pharmacy plan.

Here's what you need to know about each:

Retail Network	Home Delivery	Specialty Pharmacy
You have access to fill your prescriptions at thousands of retail pharmacies and many national drugstores, supermarkets, and large retailers.	Our home delivery program can save you time and money by delivering maintenance medications directly to your home.	Our specialty pharmacy can help you manage your chronic conditions and specialty therapies.

Get Started

- Log in to mybluekc.com.
- Click Plan Benefits on the left and then select Pharmacy Plan Info.
- From that screen click the View Your Pharmacy Benefits button to be redirected to the Optum Rx site.
- Once you're redirected to the Optum Rx homepage, you can enroll in home delivery, find a network pharmacy, check medication coverage, and much more.

Home Delivery

Follow the instructions above to enroll in our home delivery program and have a three-month supply of maintenance medication (those you take regularly) delivered directly to your home. Here's what else this program can offer:

- Cost Savings — You may pay less for your medication with a three-month supply through home delivery.
- Convenience — Get free standard shipping on medications delivered to your mailbox.
- 24/7 Access and Reminders — Speak to a pharmacist who can answer your questions any time, any day.

Specialty Pharmacy

Specialty medications can be important to maintaining or improving your health and quality of life. If you take a specialty medication, our specialty pharmacy can help by providing resources and personalized, therapy-specific support. Here are just a few of the support services available to you:

- Access to your medications at the lowest cost.
- 24/7 access to personalized patient care from knowledgeable pharmacists and nurses who specialize in your condition.
- Proactive refill reminders with timely delivery and shipping in confidential packaging.

GENERAL QUESTIONS OR ASSISTANCE: Call Blue KC Customer Service at the number listed on your member ID card, Monday through Friday, from 8 a.m. to 8 p.m. Central Time with any questions.

- **HOME DELIVERY ASSISTANCE:** 844.579.7774
- **SPECIALTY MEDICATION ASSISTANCE:** 855.427.4682

Rx Savings Solutions

Blue KC partners with Rx Savings Solutions to offer a user-friendly pharmacy savings tool. Based on real prescription pricing, the tool uses claims data, your actual plan benefits and accumulators to determine how you can save at the pharmacy. You will receive text and/or email notifications of savings opportunities on their prescriptions.

Ways You Can Save

SAME DRUG, DIFFERENT FORM

Believe it or not, a capsule might cost more than a tablet or liquid form - or vice versa. You never know, but now you will.

DIFFERENT DRUG, SAME TREATMENT

There is usually more than one medication available to treat a medical condition. We show you all of them, along with their costs.

SAME INGREDIENTS, DIFFERENT PILLS

If a drug has two active ingredients, the price can skyrocket! Take the active ingredients seperately at the same time for the same treatment at a lower cost.

SAME ACTIVE INGREDIENT, LOWER PRICE

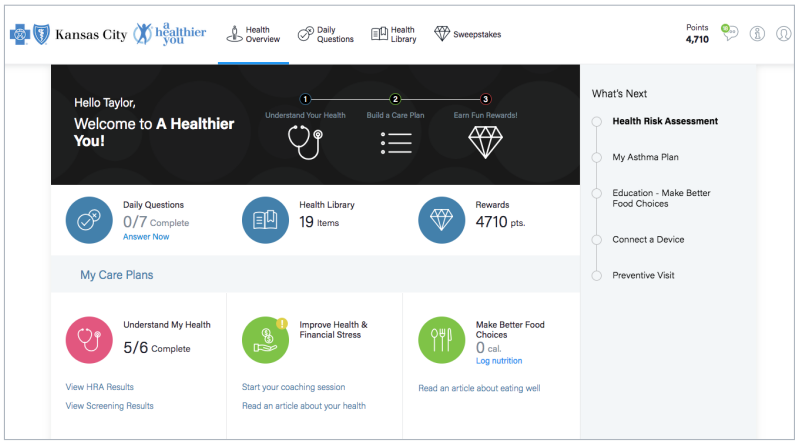
If a generic is available, we'll find it. If there is more than one option, you'll know exactly what each one costs.

You may access the Rx Savings Solutions tool throughout the Blue KC member portal, mybluekc.com. In order to receive text message or email alerts, you must log in to the portal and reach the Rx Savings Solutions page to verify preferred mobile phone numbers and email addresses. You may opt out of notifications at any time.

Wellness

Proactive and preventive healthcare is the first step you can take to ensure the best outcomes and least cost for you and City of Mission. You can maintain or achieve better health, manage chronic conditions, and develop personal care plans using the A Healthier You™ online portal and mobile app.

The City of Mission also offers a wellness program with a $400 incentive for those who accumulate enough wellness points.



Dental

Delta Dental will continue to administer the Dental plan and The City received a 6% increase in rates for 2026. The dental plan design is listed below. Keep in mind that since The City of Mission uses a PPO network, benefits differ between in-network and out-of-network providers. Utilizing providers in-network keeps your cost and plan's cost down. This helps prevent future premium increases. Check the website if you have questions about a specific provider.

Dental Summary

	Delta Dental of Kansas	
Plan features	In-network	Out-of-network
Annual deductible		
Individual	$50	
Family	$150	
Annual maximum	$1,500	
Preventive services	100%	80%
Basic services	80%	60%
Major services	50%	40%
Orthodontia	50%	
	$1,000 lifetime benefit maximum	
Balance billing*	Not allowed	Allowed

*Based on the procedure, the insurance company "allows" in-network providers to charge a certain dollar amount. The benefit percentages are based on the allowed charges. If you go to a provider who is not in the network, the insurance company will base payment on what dentists charge on average. If that particular provider charges more than this amount, that provider reserves the right to charge you the difference. This would be in addition to the "allowed" amount.

To locate Delta Dental providers:

- Visit the website at deltadentalks.com.
- Contact customer service at 800.234.3375.

- Unlimited cleanings.
- Right Start 4 Kids program: Provides children 12 and under 100% coverage, with no deductible for all services covered under the plan, excluding orthodontics, when an in-network dentist is seen.

Dental Premium Rates

Tier Level	Total Monthly Premium	Employer Contribution	Monthly Employee Contribution	Per Payroll (24)
Employee only	36.47	$29.18	$7.29	$3.65
Employee + family	$106.66	$85.33	$21.33	$10.67

Vision

The City will continue to offer Vision coverage through EyeMed at no cost to you and your family.

Vision Summary

	In-network member cost	Out-of-network reimbursement
Exam (once every 12 months)		
Exam with dilation as necessary	$10 co-pay	Up to $40
Retinal Imaging	Up to $39	N/A
Standard contact lens fitting and follow-up	Up to $55	N/A
Premium contact lens fitting and follow-up	10% off retail	N/A
Frames (once every 24 months)		
Retail frame allowance	$150 allowance, then 20% off balance	Up to $105
Standard plastic lenses (once every 12 months)		
Single vision	$10 co-pay	Up to $30
Bifocal	$10 co-pay	Up to $50
Trifocal	$10 co-pay	Up to $70
Standard progressive lens	$75 co-pay	Up to $50
Premium progressive lens	$95-$120 co-pay	Up to $50-$70
Lenticular	$10 co-pay	Up to $70
Lens options		
UV treatment	$15	N/A
Tint (solid or gradient)	$15	N/A
Standard plastic scratch coating	$15	N/A
Standard polycarbonate	$40	N/A
Standard anti-reflective coating	$45	N/A
Premium anti-reflective coating	$57-$68	N/A
Other add-ons and services	20% off retail price	N/A
Contact lenses (once every 12 months)		
Conventional	$150 allowance, then 15% off balance	Up to $150
Disposable	$150 allowance, plus balance	Up to $150
Medically necessary	Paid in full	Up to $210

Laser Vision Correction: 15% off the retail price or 5% off the promotion price.
Hearing Care: 40% off hearing exams and a low-price guarantee on discounted hearing aids.
Additional Discounts (in-network providers):

- 40% off complete pair of prescription sunglasses.
- 20% off non-prescription sunglasses.
- 20% off remaining balance beyond plan coverage.

To locate EyeMed providers:

- Visit the website eyemed.com.
- Contact 866.804.0982.
- For Lasik providers, call 877.5LASER6.

Life and Disability

The Standard will continue to administer these important income protection benefits. As a reminder, beneficiary designations may be changed at any time throughout the year; however, Open Enrollment is a great time to ensure this information is up to date and reflects your current wishes.

Basic Life and Accidental Death & Dismemberment (AD&D)

As an employee of The City of Mission, in addition to the life insurance/death benefit offered through KPERS and KP&F, The City of Mission provides all employees with Basic Life/AD&D insurance.

In 2026, you will receive $40,000* in Basic Life/AD&D coverage provided by The City at no cost to you.

*The benefit coverage amount reduces by 35% at age 65, 50% at age 70, and 65% at age 75.

Voluntary Term Life Insurance

You also have the option to select additional benefits for you and your dependents. If you choose to elect additional coverage for yourself, you may then elect spouse and/or child coverage. If you are electing coverage for the first time or increasing coverage amounts, you will be required to complete a medical history questionnaire.

Employee Coverage

- Available in increments of $10,000, up to 5x your annual salary, not to exceed a maximum of $300,000.
- Age-based rates are in five-year increments — based on your age each calendar year. Premiums adjust as you reach new age brackets.

Spouse Coverage

- Available in $5,000 increments, up to $150,000 in coverage, or 50% of the amount you purchase for yourself.
- Rates for spouse coverage are based on the employee's age.

Child Coverage

- $10,000 in life insurance for your dependent children.
- Includes unmarried child(ren) through age 20, or through age 24 if full-time student.
- $1.00 per month for $10,000 in coverage, regardless of the number of children you cover.

PAS Employee Assistance Program (EAP)

PAS | paseap.com | 800.356.0845

In 2026, City of Mission will provide access to an Employee Assistance Program (EAP) through a partnership with Personal Assistance Services (PAS) for all employees and their families. Personal problems can impact our daily lives, both at home and at work. PAS can give you the support you need, whether you sense that a life challenge is just ahead or you're already knee-deep in it. PAS provides confidential assistance for a variety of problems and is offered to you and your household members at no cost. The program includes up to six face-to-face confidential counseling sessions per incident and unlimited telephone assessments.

PAS offers a 24-hour live helpline as well as digital communication via secure chat and messaging. In-person or digital counseling sessions are delivered through PAS' employed staff and national network of 60,000 master's-level licensed behavioral health professionals who can help participants improve their quality of life. Visit paseap.com and follow the instructions to get started.

PAS is here to help with top-notch providers, experts and offerings in these areas and more:

- Marital/relationship strengthening
- Thriving as a parent or grandparent
- Depression
- Anxiety
- Work and life transitions
- Life balance and revitalization
- Addiction
- Anger
- Trauma
- Domestic safety
- Grief and loss
- Job stress management
- Resilience building and emotional fitness
- Overcoming loneliness
- Achieving well-being
- Parenting and child development
- Organization and time management
- Diet, health and well-being
- Education planning
- Money, budgeting, and financial planning
- Legal questions
- Elder and child care resources
- Career and retirement
- Tobacco cessation

For more information, please visit paseap.com or call 800.356.0845.

	PAS EAP
Employee sessions	Unlimited sessions
Eligibility	All employees and their household members
Additional services	■ Text ■ Chat ■ Telephonic ■ Video ■ Online resources

Flexible Spending Accounts (FSAs)

The Section 125/Flexible Spending plan will continue to be administered by BASIC. The FSAs (Medical Reimbursement and Dependent Care) provide additional tax benefits by allowing you to set aside a certain amount of your paycheck on a pre-tax basis to pay for eligible expenses.

Medical Reimbursement Account

- Used to pay for eligible expenses not covered under Medical, Dental, and Vision plans.
- Examples include co-pays, deductibles, orthodontia expenses, prescription drug co-pays, and LASIK/laser eye surgery.
- The 2026 household contribution maximum is $3,400. The maximum increased from $3,300 in 2025.
- Option to use debit card or submit claims via fax, mail, or online.
- You have until March 15, 2026, to incur and submit claims in order to use funds left over from the 2025 plan year. You can avoid forfeitures if you plan carefully, conservatively, and only for predictable expenses.

Manage your account online via the website (www.basiconline.com) or on the BASIC benefits app[1]

Dependent Care Account

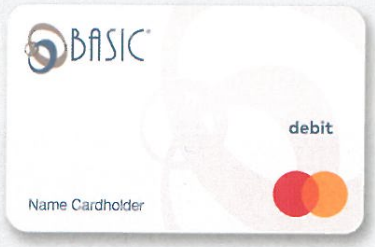
- Used to pay for day care for eligible dependents (including disabled adult children or legal spouse) that permit you to be "gainfully employed."
- The 2026 household contribution maximum is $7,500.
- Reimbursement by fax, mail, or online.

The IRS requires that you make your election decision before the new plan year begins each year or before your effective date, if you are newly eligible. The election decision remains in effect for the plan year, unless you have a qualifying life event.

*If you have funds left at the end of the plan year, you may continue to incur claims for expenses during the "grace period." The grace period extends 2 1/2 months after the end of the plan year, during which time you can continue to incur claims and use up all amounts remaining in your Health FSA or Dependent Care FSA.

INTRODUCING THE BASIC CARD MYWALLET

Easily organize and manage your BASIC card via the secure benefits app[1] or web portal with features like:



- Request a dependent card
- Report a lost or stolen card
- Suspend use for a misplaced card
- Request a PIN (for ATM use)[2]
- Store other important cards

Aflac

To speak with an Aflac representative about the details of their plans, contact Kathy Stratman at 913.676.8354 or kstratman@missionks.org. The following programs are available for you to consider:

- Accident
- Cancer
- Specified Health (heart attack/stroke)
- Hospital
- Juvenile Life
- Short-Term Disability

As a reminder, the Short-Term Disability (STD) policy is guarantee issue, which means you do not have to undergo a medical underwriting process to purchase. If you are interested in Short-Term Disability protection, Aflac is your only source for this benefit.

457 Plans

All full-time employees of The City participate in either KPERS (general employees) or KP&F (sworn police employees). In addition, The City offers all employees the opportunity to participate in voluntary 457 Deferred Compensation plans provided by Empower or MissionSquare Retirement.

Starting January 1, 2026, contributions can be either pre-tax 457 contributions or after-tax Roth contributions. You can elect to participate or change your contribution amount at any time throughout the year. If you would like more information on these plans or want to change or begin your contributions for 2026 please contact Kathy Stratman.

Contribution limits for 2026 are as follows:

	2026 limit
Pre-tax employee elective deferrals to 401(k), 403(b), and 457(b) plans (without regard to “catch-up” contributions):	$24,500
Pre-tax employee catch-up contributions to 401(k), 403(b), and 457(b) plans:	$8,000
Special “catch-up” rules may apply to 457(b) plans	$11,250
Maximum annual contribution to defined contribution plans:	$72,000

Open Enrollment is also a good time to review and update your plan beneficiaries, if necessary.

Kansas Money Purchase Plan

After the first year of full-time employment, all full-time non-police officer employees are automatically enrolled in a money purchase plan administered by The Principal with The City contributing 2% of your gross earnings. Like the 457 Deferred Compensation plans, you may elect to participate or change your contribution at any time through the year once you have become eligible.

All full-time general employees (not sworn police officers) who meet the plan requirements will receive an employer contribution and are eligible to voluntary deferrals. The requirements are:

- At least age 21
- 1 year of service in which you worked at least 1,000 hours
- You will enter the plan on the first day if the month on or after you meet the eligibility requirements

If you want more information on this plan, please contact Kathy Stratman.

The descriptions of the benefits are not guarantees of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official documents will govern.

FS: 5676399