Medical Benefits

In-Network Benefits	Standard	Wellness	Savers
Copays			
ACA Preventive Office Visit	$0	$0	$0
Office Visit Copay	$0 - Iowa Clinic	$0 - Iowa Clinic	Deductible
	$10 - All Other Providers	$20 - All Other Providers	
Prescription Drugs	Script Sourcing - $0	Script Sourcing- $0	
Standard and Wellness Plans:	Tier 1 - $10	Tier 1 - $10	
	Tier 2 - $20	Tier 2 - $25	
	Other - $30	Other- $40	
Copays reduced by $5 at Hy-Vee pharmacies	Specialty - same as cost-share above depending on drug category	Specialty - same as cost-share above depending on drug category	
Other Services			
Deductible	$250 individual $500 family maximum Medical services only	$500 individual $1,000 family maximum Medical services only	$3,400 individual $5,000 family maximum Medical and Rx combined
Coinsurance	You pay 10%	You pay 20%	You pay 0%
Out of Pocket Maximum – medical and Rx combined	$750 individual $750 family maximum	$1,500 individual $3,000 family maximum	$3,400 individual $5,000 family maximum

Doctor on Demand

Doctor on Demand **FREE** For anyone enrolled in one of the medical plans!

Wellmark Blue Cross Blue Shield
www.wellmark.com
800-524-9242

Monthly	Standard	Wellness	Savers
Employee Only	$69.41	$57.12	$48.61
Employee & Spouse	$243.20	$179.71	$152.78
Employee & Child(ren)	$231.05	$170.74	$145.15
Family	$369.06	$272.72	$231.85

Vivid Clear Rx
www.vividclearrx.com
877-848-4379

Dental Benefits

	PPO Dentist	Premier/Non-Par Dentist
Preventive Services	Covered in full	Covered in full
Deductible	$15 individual/$45 family	$25 individual/$75 family
Basic Services	You pay 10%	You pay 20%
Major Services	You pay 50%	You pay 50%
Annual Maximum	$1,000 per person	
Orthodontia	For dependent children up to age 19 $50 deductible You pay 50% Lifetime maximum - $2,000	

Rate based on Medical Plan Chosen

Monthly	Standard	Wellness	Savers
Employee Only	$0.00	$0.00	$36.15
Employee & Spouse	$80.32	$36.13	$72.28
Employee & Child(ren)	$80.32	$32.57	$68.72
Family	$80.32	$96.10	$132.25

Delta Dental of Iowa
www.deltadentalia.com
800-544-0718

Vision Benefits

	In-Network	Out-of-Network
Exam	$10 copay	Up to $40
Contacts	Up to $120	Up to $105
Frames (every 24 mos.)	Up to $120	Up to $70
Lenses (based on type)	$25-$160 copay	Up to $40-$80

Rate and availability based on Medical Plan Chosen

Monthly	Standard	Wellness	Savers
Employee Only	N/A	$0.00	$9.48
Employee & Spouse	N/A	$0.00	$18.96
Employee & Child(ren)	N/A	$0.00	$16.59
Family	N/A	$0.00	$21.33

VSP
www.vsp.com
800-877-7195

Spending Accounts

Health Care FSA, Limited Purpose FSA, Dependent Care FSA, and Health Savings Account
For employees who choose the Wellness or Savers plans, the City will contribute towards these accounts if you participate in the wellness screening.

Voya
www.voya.com
855-663-8692

Life Insurance

The City provides you with 1x your annual earnings for non-union employees, and half your annual earnings for union employees, and $2,500 for your spouse and children.
You can purchase additional life insurance and Accidental Death coverage for you, your spouse and your children.

The Standard
www.standard.com
800-552-2137

One Time Voluntary Life Open Enrollment

For 2026 you can elect up to the voluntary life guaranteed issue amount, for yourself, your spouse and children, without having to answer medical questions. The rates depend on age, and election amount.
**Not eligible if employee or spouse has previously applied for an increase and been denied

Long Term Disability Insurance

You can purchase Long Term Disability for yourself. This coverage pays 60% up to a $15,000 monthly benefit. Benefits begin after you have been disabled for 90 days.

EFR
www.efr.org/myeap
800-327-4692

Employee Assistance Program

Available at no cost for you and all members of your household. The EAP can help with daily challenges like finances, stress, anxiety, family matters and much more.

Benefit Assistance

Alight can help you navigate the complexities of healthcare and better understand your medical benefits.

Alight
www.member.alight.com
800-513-1667
myhealthpro.@alight.com

Other City Benefits

Holidays and Casual Days

Vacation

Sick Time

Parental Leave

FMLA

Longevity Pay

Service Awards

Tuition Assistance

Public Service Loan Forgiveness Program

Retirement

Deferred Compensation

Wellness Program

Fitness Membership Reimbursement

2026-2027 Benefits Guide



We strive to provide you and your family with a comprehensive and valuable benefits package that enables you to have a better life. That means we want to make sure you're getting the most out of your benefits. This guide will help you navigate the process and make the decisions easier for you.

Open enrollment is a short period each year when you can make changes to your benefits (health, dental, vision, medical flex spending, health savings) for the following plan year. This year, open enrollment is from May 18 – May 29, 2026. Elections made during this enrollment period will become effective on July 1, 2026.

The decisions you make now will be in effect until the next open enrollment for July 1, 2027. However, if you have a qualifying event, you may have the opportunity to make changes to your elections if you complete the HR Action in UKG within 30 days of the event.

The plan information outlined in this guide is intended to be a snapshot of the benefits and does not provide full plan details. For complete plan information and any policy restrictions refer to your plan document. If any discrepancy exists between the summary displayed in this guide and the policy, the policy will govern.

If you have questions about any of the benefits mentioned in this guide, feel free to reach out to your HR team at humanresources@wdm.iowa.gov. And remember, all the details can be found on the City's benefit page or at www.mycitybenefits.com.

THE CITY OF West Des Moines