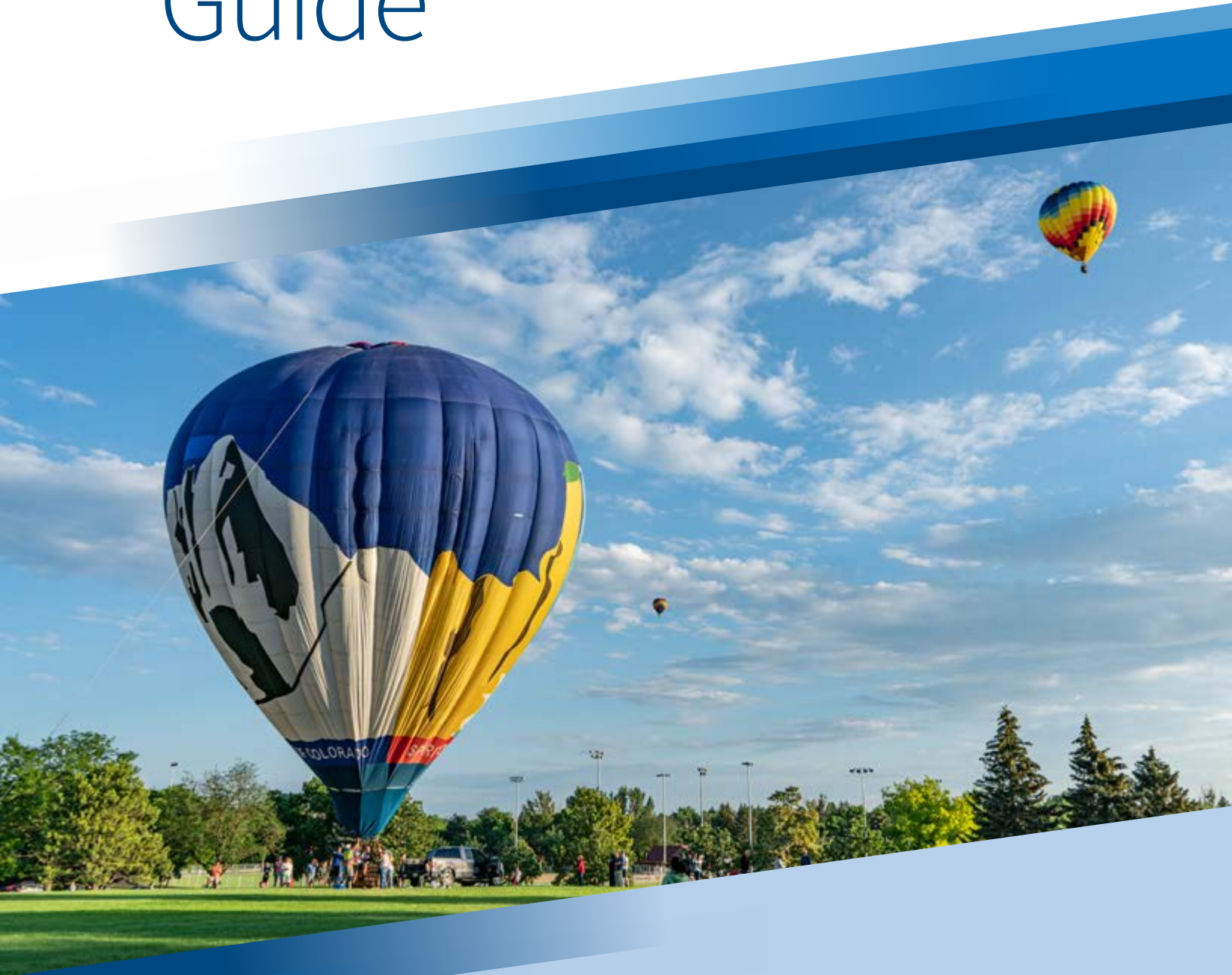


# 2022 **Benefits** Guide





## Introduction

The City of Fort Collins offers meaningful, competitive benefits as part of our overall culture of wellbeing. We collaborate with colleagues, City Council, and strategic partners to continually evaluate and improve employee benefits while responsibly stewarding City resources.

This Benefit Guide provides employees with:

- A description of the benefit options
- Rules on eligibility and Qualified Life Events
- Important contact information to help employees manage their benefits

For complete details of each benefit and benefit related forms, refer to the full text of the official Summary Plan descriptions available on the City of Fort Collins [Human Resources Benefit page](#).

## Key Updates for 2022 Benefits

### What's Changing? Effective January 1, 2022:

- The HDHP Plan will be transitioning to the national "Choice Plus" network; this will result in a broader, more expansive network. Those enrolled in the HDHP plan for 2022 will receive a new ID Card
- **New!** Addition of SaveOnSP for prescription program (only applicable to PPO plan); certain specialty medications are eligible for the SaveOnSP program. If you're filling an eligible medication, a representative from SaveOnSP will call you to talk about enrolling in the program. If you choose to participate, you'll pay \$0 for your medication. If you do not participate in the SaveOnSP program, you will be responsible for a 30% coinsurance for your eligible medication
- The HSA contribution limits for 2022 are: \$3,650 (Employee Only) and \$7,300 (Family)

### Benefits Philosophy

Our benefits program reflects those who work for us and supports them by being "life-friendly." This means looking at employees holistically, and offering high-quality, relevant programs for every stage of life in a convenient and accessible way.

**Benefits Website:** [Benefits Connect](#)

**Phone:** 970-221-6535 **Benefits Email:** [hrbenefits@fcgov.com](mailto:hrbenefits@fcgov.com)

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## Eligibility

Employees that work in one of the following categories of employment: Classified, Unclassified Management, CBU, Contractual, or work on average over thirty hours per week in a calendar year are eligible for benefits.

## Who Can Enroll?

If you are eligible to elect coverage for yourself, you may also elect coverage for your eligible dependents.

### Eligibility includes:

- Your legal spouse
- Your domestic partner (same-sex or opposite sex)
- Your common-law spouse if you live in a state that recognizes such marriages (an affidavit is required)
- Your children and stepchildren from birth to age 26
- Your adult child who depends solely on you for support because of a mental or physical handicap (documentation is required)

## When Do My Benefits Begin?

Your benefits begin the 1st of the month following your date of hire or following a qualified life event (QLE) (with the exception of a birth of a child; wherein benefits will be effective the date of the child's birth).

## Qualified Life Event

Can only be made within the first 31 days

All benefit selections are binding except in the event you have a "qualified life event." If one of these situations, listed below, occurs, you have 31 days to notify Human Resources Benefits at [hrbenefits@fcgov.com](mailto:hrbenefits@fcgov.com) and complete the appropriate paperwork found on [HR Connect Human Resources Forms](#). If you do not make the change within the 31 days following the event, your next opportunity to make a change will occur during the plan's open enrollment period.

- Marriage or divorce
- Birth or death of dependent
- Adoption
- Loss of eligibility for insurance
- Change in residence that affects eligibility
- Change in spouse's employment or termination of employment
- Unpaid leave of absence of employee or spouse
- Reduction or increase in hours worked from part-time to full-time

## Dependent Verification

The City conducts a review of the dependents you add through your benefit elections. Please know it is the employee's responsibility to only include dependents that are eligible for coverage (see definition above). If through this review we find employees have included ineligible dependents for coverage under the City's medical, dental, and vision plans, the dependent will be removed. For a dependent to be re-enrolled, proof of eligibility is required. Examples of acceptable documentation include a marriage certificate or birth certificate.

For a full list, contact the Benefits team at [HRBenefits@fcgov.com](mailto:HRBenefits@fcgov.com).

## Health Care Reform

Information regarding Colorado's Marketplace for healthcare, Connect for Health Colorado, is available online at the website and phone number below:

**Phone:** 855-752-6749  
**Website:** [connectforhealthco.com](http://connectforhealthco.com)



2022 Rates			
Bi-Weekly Paycheck Contribution (based on 26 pay periods)			
		Full-Time	Part-Time
<b>Medical UMR PPO</b>	Employee Only	\$43.14	\$71.89
	Employee plus Spouse	\$208.06	\$277.40
	Employee plus Child(ren)	\$170.23	\$226.97
	Family	\$264.79	\$353.05
<b>Medical – UMR HDHP</b>	Employee Only	\$33.65	\$56.08
	Employee plus Spouse	\$162.28	\$216.37
	Employee plus Child(ren)	\$132.78	\$177.04
	Family	\$206.54	\$275.39
<b>Delta Dental</b>	Employee Only	\$5.23	\$6.98
	Employee plus Spouse	\$12.55	\$15.70
	Employee plus Child(ren)	\$15.70	\$19.62
	Family	\$20.93	\$26.16
<b>VSP Vision</b>	Employee Only	\$3.59	\$3.59
	Employee plus Spouse	\$7.18	\$7.18
	Employee plus Child(ren)	\$7.18	\$7.18
	Family	\$11.29	\$11.29

## Reliance Standard Supplemental Life and AD&D Rates

The 2022 monthly rates for these benefits are:

Supplemental Life Insurance Employee and Spouse Rates	
Age	Rate / \$1,000
18-24	\$0.028
25-29	\$0.044
30-34	\$0.053
35-39	\$0.068
40-44	\$0.100
45-49	\$0.150
50-54	\$0.230
55-59	\$0.430
60-64	\$0.637
65-69	\$0.875
70-74	\$1.784
75+	\$2.060

Full-Time = 30+ hours/weekly (.75 FTE thru 1.00 FTE)  
Part-Time = 20-29 hours/weekly (.50 FTE thru .74 FTE)

Supplemental AD&D Rates	
Coverage	Rate/\$1,000
Employee	\$0.025
Spouse	\$0.025
Child(ren)	\$0.025

Supplemental Life Insurance Rates	
Dependant Rates	Rate/\$1,000
Child Per \$5K	\$0.600
Child Per \$10K	\$1.200

AD&D Schedule	
For Accidental Loss of	Amount Payable
Life	100%
Two or More Members*	100%
Speech and Hearing	100%
One Member*	50%
Speech or Hearing	50%
Thumb and Index Finger of Same Hand	25%

\* "Member" refers to a hand, foot, or eye

## UMR Medical Benefits

The City's medical plan is administered on a self-funded basis, meaning the City pays for the claims that are incurred by covered plan members throughout the year. The City engages UMR, a third-party administrator (TPA), to pay the claims and help manage the plan. UMR helps ensure that your claims are paid correctly so your health care costs can be kept to a minimum and you can focus on wellbeing. You can contact [UMR](#), anytime day or night, if you have questions regarding the plan.

### United Healthcare Network

The City's plan utilizes the **United Healthcare SelectColorado Network (PPO)**, which includes both the Select National Network and the SelectColorado Network specific to Colorado, and **Choice Plus Network (HDHP)**. This means, that while UMR administers your plan, the doctors, hospitals and other facilities are contracted under the UnitedHealthcare network.

Register through the UMR website at [umr.com](http://umr.com) for access to your ID cards, claim details, and to find a doctor or hospital.

The table below summarizes the benefits of the medical plan. For a comprehensive description of the plan, view the Summary Plan Description (SPD) located on [Benefits Connect](#).

<b>UMR Medical Benefits</b> <i>A Division of United Healthcare</i>				
	PPO Plan (SelectColorado Network)		HDHP Plan (Choice Plus Network)	
<b>NETWORK:</b>	<b>Tier 1</b>	<b>Tier 2</b>	<b>In Network</b>	<b>Out of Network</b>
<b>Calendar Year Deductible:</b>	\$350 Individual \$700 Family	\$2,500 Individual \$5,000 Family	\$3,000 Individual \$6,000 Family	\$6,000 Individual \$12,000 Family
<b>Coinsurance Split:</b> (Plan Pays/You Pay)	80%/20%	60%/40%	90%/10%	60%/40%
<b>Calendar Year Out-of-Pocket Max:</b>	\$5,000 Individual \$10,000 Family	\$8,550 Individual \$17,100 Family	\$4,000 Individual \$8,000 Family	\$12,000 Individual \$24,000 Family
<b>Primary Care Visit:</b>	\$0 Copay	40% After Deductible	10% After Deductible	40% After Deductible
<b>Specialist Office Visit:</b>	\$40 Copay	40% After Deductible	10% After Deductible	40% After Deductible
<b>Preventive Visit</b>	100% Covered	100% Covered	100% Covered	40% After Deductible
<b>Inpatient Hospital:</b>	20% After Deductible	40% After Deductible	10% After Deductible	40% After Deductible
<b>Outpatient Hospital:</b>	20% After Deductible	40% After Deductible	10% After Deductible	40% After Deductible
<b>Emergency Room:</b>	20% after Tier 1 Deductible	20% after Tier 1 Deductible	10% After In-Network Deductible	10% After In-Network Deductible
<b>Urgent Care:</b>	\$0 Copay	\$0 Copay	10% After Deductible	40% After Deductible
<b>Ambulance:</b>	20% After Tier 1 Deductible	20% After Tier 2 Deductible	10% After In-Network Deductible	10% After In-Network Deductible
<b>Major Diagnostic &amp; Imaging</b> (Including CT/PET scans, MRIs)	\$250 Copay (Prior Authorization is Required for CT/PET Scans)	40% After Deductible (Prior Authorization is Required for CT/PET Scans)	10% After Deductible (Prior Authorization is Required for CT/PET Scans)	40% After Deductible (Prior Authorization is Required for CT/PET Scans)
<b>Minor Lab &amp; X-ray</b>	\$25 Office/ \$25 Outpatient	40% After Deductible	10% After Deductible	40% After Deductible
<b>Maternity:</b> Prenatal Postnatal care/Delivery	100% Covered 20% after Deductible	100% Covered 40% after Deductible	10% After Deductible	40% After Deductible

## Medical Benefits Continued

	PPO Plan (SelectColorado Network)		HDHP Plan (Choice Plus Network)	
NETWORK:	Tier 1	Tier 2	In Network	Out of Network
Outpatient Physical Therapy:	\$40 Copay Per Visit	\$40 Copay Per Visit	10% After Deductible	40% After Deductible
Speech, Hearing, and Occupational Therapy:	\$40 Copay Per Visit	\$40 Copay Per Visit	10% After Deductible	40% After Deductible
Durable Medical Equipment:	20% After Tier 1 Deductible	20% After Tier 1 Deductible	10% After Deductible	40% After Deductible
Human Organ Transplant:	100% Covered At Optum COE Facility (Includes \$10,000 For Housing); 20% After Deductible For Non-Designated Facility	100% Covered At Optum COE Facility (Includes \$10,000 For Housing); 40% After Deductible For Non-Designated Facility	100% Covered At Optum COE Facility (Includes \$10,000 For Housing); 20% After Deductible For Non-Designated Facility	No Out-of-Network Benefit
Home Health Care:	20% After Tier 1 Deductible	40% After Deductible	10% After Deductible	40% After Deductible
Hospice:	20% After Tier 1 Deductible	40% After Deductible	10% After Deductible	40% After Deductible
Rehabilitation Services:	\$40 Copay; Deductible Waived	\$40 Copay; Deductible Waived	10% After Deductible	40% After Deductible
Skilled Nursing Care:	20% After Tier 1 Deductible 120 Visits Per Year	20% After Tier 1 Deductible 120 Visits Per Year	10% After Deductible	40% After Deductible
Hearing Aids:	20% After Tier 1 Deductible	20% After Tier 1 Deductible	10% After Deductible	40% After Deductible
Allergy Injections:	100% Covered	40% After Deductible	10% After Deductible	40% After Deductible
Chiropractic Care:	\$20 Copay Per Visit	\$20 Copay Per Visit	10% After Deductible	40% After Deductible
Mental Health/ Substance Abuse: (Inpatient)	20% After Tier 1 Deductible	20% After Tier 1 Deductible	10% After Deductible	40% After Deductible
Mental Health/ Substance Abuse: (Outpatient/Office Visits)	\$0 Copay	\$0 Copay	10% After Deductible	40% After Deductible
Prescription Drugs administered by Express Scripts				
<b>Rx Copay</b> (Generic / Tier 1; Formulary / Tier 2; Non-Formulary / Tier 3; Specialty / Tier 4)				
Retail Pharmacy (30-day supply)	\$10 / \$30 / \$50 / \$100	Not Covered	\$10 / \$30 / \$50 / \$100 After Deductible	Not Covered
Mail Order (90-day supply):	\$25 / \$75 / \$125 Specialty: N/A for Mail Order		\$25/\$75/\$125 After Deductible Specialty: N/A for Mail Order	

# Behavioral Health Care Benefits

- 1. SelectColorado PPO Plan
  - a. If a behavioral health care provider is in the UHC/Optum Behavioral Health network, they are considered a Tier 1 provider
  - b. If a provider is not in the network, there will be no benefit for the SelectColorado PPO plan
  - c. If you currently see an out of network provider, you will want to discuss ongoing treatment with this provider. Many times, a provider will work with you on a no insurance or cash only financial arrangement. This is something you will need to discuss with them as UMR is not involved with those arrangements.
- 2. HDHP Plan
  - a. Nothing is changing with regards to the HDHP plan
- 3. You will continue to use the [Live and Work Well](#) website to search for providers

Find therapists, psychiatrists, or other clinics in your network.

 Enter provider name, keyword or leave blank

 Fort Collins, CO

Search

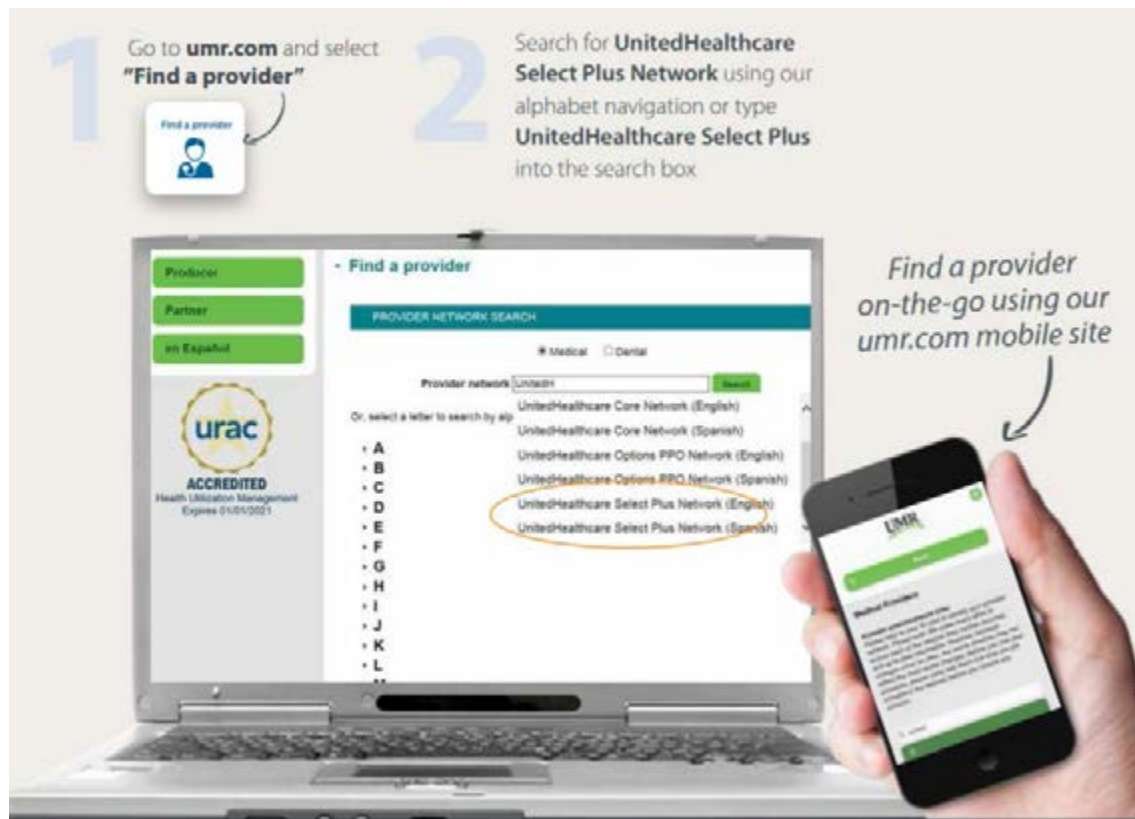
- If you see your provider in this site, the following benefits will apply:

UMR Medical Benefits				
	Select CO PPO		HDHP	
	Tier-1	Tier 2	In-Network	Out-of-Network
Mental Health, Substance Use and Chemical Dependency				
Inpatient Services	20% after Tier-1 Deductible		10% after Deductible	40% after Deductible
Residential Treatment	20% after Tier-1 Deductible			
Outpatient Services	\$0 copay			
Office Visits	\$0 copay			



## Searching for Providers

1. SelectColorado PPO Plan
  - a. If you are looking for a provider in the following counties: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Jefferson, Larimer, Mesa, Pueblo, Routt, Teller, Weld; please use the Select Colorado search on UMR.com and/or your UMR.com portal.
  - b. All providers in Colorado are classified as either Tier-1 or Tier-2, utilizing a Tier-1 provider will yield the highest benefit level. Outside of Colorado, a national network, called the "UHC Select Plus Network," is available where all in-network providers are classified as Tier-1
  - c. If you are looking for a provider in any other area outside of Colorado, they are also located in the Select Colorado provider search and will offer the highest benefit level of Tier-1:



## SelectColorado Network Overview

1. SelectColorado is a partnership with the state's leading doctors, including those from UHealth/SCL Health and Medical Center of the Rockies, all working together to coordinate care. This is a newer and innovative health plan that's built around strengthening the relationship between you and your primary care physician (PCP) – with the goal of meaningful engagement and more complete preventive care.
2. The network is comprised of 2 tiers: Tier 1 and Tier 2. Any doctors outside of these two tiers are out of network and there is no coverage.
3. Tier 1 Colorado providers can be found in 14 counties at this time: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Jefferson, Larimer, Mesa, Pueblo, Routt, Teller, and Weld
4. Providers outside of these counties are treated at Tier 1 if they are in the Select Plus network, as described above.



## Alight | Healthcare Advocate

Alight is your champion for simpler, smarter healthcare. Health benefits can be confusing, medical costs are rising, and finding the right care for you and your family can be frustrating and time consuming. Alight is here to simplify your healthcare experience and help you take control of healthcare costs. Your personal Health Pro® consultant will take care of you, so you can spend more time on what matters most.



### Alight Can Help You...

- **Understand Insurance Benefits**

Receive guidance in understanding your benefits throughout the year.

- **Find a Great Doctor & Schedule Appointments**

Find the best doctors, dentists, and eye care professionals in your area who meet your personal preferences and healthcare needs; Alight can also schedule appointments at times most convenient for you.

- **Save Money on Healthcare**

Get price comparisons before receiving care. Depending on the doctor, hospital or facility, costs can vary by hundreds or thousands of dollars, even in-network.

- **Pay Less for Prescriptions**

Let Alight compare medication prices and explore lower-cost options for you.

- **Get Help with Medical Bills**

Have your medical bills reviewed to make sure you are not overcharged.

### Get Started with Alight Today

**Member Portal:**

[member.alight.com](https://member.alight.com)

**Health pro:**

myhealthpro@alight.com

800-513-1667

**Jessica Carter**

Jessica.Carter@alight.com

800-513-1667 x1091



## Delta Dental Benefits

The City's dental plan allows you to use an extensive network of providers and offers flexibility based upon where you choose to access care. You are covered at the highest level if you select dental care through this network, but have the option to obtain care outside the network at a higher cost to you.

**PPO providers** are preferred providers where you will receive your highest benefits paid. The PPO percentage of benefits is based on the PPO Schedule of Allowance. **Premier providers** are contracted Delta Dental providers with a lower percentage of benefits based on the Premier Schedule of Allowance. **Non-network providers** also have a lower percentage of benefits and will be paid at the Maximum Plan Allowance. You may have additional out-of-pocket costs by using a non-network provider.

The City made several improvements to the dental plan in 2022, including

- Increasing the annual maximum benefit to \$2,000
- Coverage for night guards
- Increasing the orthodontia lifetime maximum benefit to \$2,000 and expanding coverage to adults

To find a provider visit [deltadentalco.com](https://deltadentalco.com), or call 800-610-0201.

The table below summarizes the benefits of the dental plan. For a comprehensive description of the plan, view the Summary Plan Description (SPD) located on [Benefits Connect](#).



<b>Delta Dental Benefits</b> <i>Delta PPO plus Delta Premier Network</i>			
	PPO Provider	Premier Provider	Non-Network Provider
<b>Calendar Year Deductible:</b>	\$50/Individual \$100/Family	\$50/Individual \$100/Family	\$50/Individual \$100/Family
<b>Calendar Year Maximum Benefit:</b>	\$2,000/Individual	\$2,000/Individual	\$2,000/Individual
<b>Diagnostic/Preventive Care:</b> (X-ray/Oral Exams/Cleanings)	100%, no deductible	100%, no deductible	100%, no deductible
<b>Restorative Services:</b> (Fillings/Stainless Steel Crowns)	80%	60%	60%
<b>Endodontics:</b> (Root Canal Therapy)	80%	80%	80%
<b>Periodontics:</b> (Treatment of the gums)	80%	60%	60%
<b>Oral Surgery:</b> (Extractions) (Implant/Crown/Bridge)	80% 50%	80% 50%	80% 50%
<b>Prosthodontics:</b> (dentures, partials)	50%	50%	50%
<b>Orthodontic Treatment:</b>	50%, no deductible	50%, no deductible	50%, no deductible
<b>Orthodontic Lifetime Maximum:</b> (Adults & Children up to age 26)	\$2,000	\$2,000	\$2,000

## VSP 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. The Vision plan operates much like a PPO—see any vision care provider, and receive the greatest benefits if you choose a provider within the network.

*The VSP KidsCare program provides additional benefits for children covered under the plan, including a second WellVision exam each year, additional lenses with a minimum prescription change and new frames every 12 months.*

The vision plan will now include the LightCare program where plan members without a need for prescription eyewear can use this benefit to purchase ready-made non-prescription blue light filtering glasses or ready-made non-prescription sunglasses.

In addition, Walmart will now be an in-network provider.

To find a network provider visit [vsp.com](http://vsp.com), or call 800-877-7195.

The table below summarizes the benefits of the vision plan. For a comprehensive description of the plan, view the Summary Plan Description (SPD) located on Benefits Connect.

<b>VISION SERVICE PLAN (VSP) VISION BENEFITS</b>		
<i>VSP Choice Network</i>		
<b>NETWORK:</b>	<b>In Network</b>	<b>Out of Network</b>
<b>Eye Exam:</b>	\$15 Copay	Up to \$45 Copay
<b>Lenses:</b> Single Vision Bifocal (Lined) Trifocal (Lined)	100% Covered	Up to \$30 Allowance Up to \$50 Allowance Up to \$65 Allowance
<b>Lens Enhancements</b> Standard Progressive Premium Progressive Custom Progressive	\$0 \$95 - \$105 \$150 - \$175	
<b>Frames:</b>	\$205 Featured Frame Allowance; \$185 Frame Allowance; 20% discount on the amount over the allowance; \$100 Costco Frame Allowance	Up to \$70 Allowance
<b>Contact Lenses:</b> (instead of glasses)	\$185 Allowance; Copay does not apply	Up to \$105 Allowance
<b>Primary Eyecare Program</b>	\$20 Copay	N/A
<b>Additional Glasses and Sunglasses</b>	Extra \$20 to spend on featured frames 20% savings on additional glasses and sunglasses, including lens enhancements	N/A
<b>LightCare</b> (instead of glasses or contacts)	\$185 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses	
<b>Retinal Screening</b>	No more than a \$39 copay on routine screening as an enhancement to a WellVision Exam	N/A
<b>Laser Vision Correction</b>	15% off the regular price or 5% off the promotional price	N/A
<b>Benefit Frequency</b> Examinations/eyeglass lenses/contacts Frames	Once every 12 months  Once every 24 months	
<b>Primary Eyecare Program</b>	<ul style="list-style-type: none"> <li>Retinal screening for members with diabetes</li> <li>Additional exams and services for member with diabetes, glaucoma, or age-related macular degeneration</li> <li>Treatment and diagnoses of eye conditions, including pink eye, vision loss, and cataracts available for all members</li> <li>Limitations and coordination with your medical coverage may apply. Ask your VSP doctor for details.</li> </ul>	

# High Deductible Health Plan (HDHP) & Health Savings Account (HSA)

## What is a HDHP HSA?

**A High Deductible Health Plan (HDHP) offers comprehensive health care coverage at a lower premium and higher deductible than traditional health care plans. A**

HDHP also features a Health Savings Account (HSA) that enables you to pay for current, qualified health care expenses and save for future expenses on a tax-free basis. You have the opportunity to set aside funds in your HSA before taxes through convenient payroll deductions. The City also contributes funds to your HSA to help your account grow.

## How the plan works

The HDHP, along with your HSA, puts health care spending in your hands, allowing you to choose how to spend your health care dollars. You can either pay for eligible services by using funds in your HSA, or you can pay for them out of your own pocket. When you enroll into the HDHP, you will automatically have an HSA opened with Alerus. You will receive a debit card in the mail that will store your funds and can be used to pay for eligible expenses.

**Note:** You can only use HSA funds that are available in your account. You can always reimburse yourself later once you have accumulated funds in your account.

## HSA Funding

### Your Contributions

There are several ways to contribute money into your HSA:

- Pre-tax contributions through payroll deductions
- Catch-up contributions up to \$1,000 per year if you are over age 55 (until you enroll in Medicare)

### Company Contribution

The City contributes \$700 annually for individuals and \$1,400 for all other tiers to supplement your own contributions as you work to make the account grow. (Contributions are bi-weekly and pro-rated based on eligibility).

## Annual Contribution Limits

It is important to note that your contributions, when combined with those contributed by The City, may not exceed the IRS annual maximum:

Tiers	2022
Employee Only	\$3,650
Employee + 1 or more	\$7,300
Catch-up (age 55+)*	\$1,000

## Eligibility

To be eligible for contributions to the HSA bank account, the IRS requires that you:

- Must be enrolled in a qualified High Deductible Health Plan (HDHP) (our UMR HDHP with HSA is a qualified medical plan)
- Do not have any other health coverage that is not a HDHP or permitted insurance
- Are not covered:
  - By a spouse's medical or pharmacy plan that is not a HDHP
  - Through Medicare Parts A, B, C and/or D, or TRICARE programs
  - Through a general purpose Flexible Spending Account (FSA) plan (such as your spouse's plan)
- Are not active military
- Cannot be claimed as a dependent on another person's tax return

## Questions

For more information, visit:

<http://www.irs.gov/pub/irs-pdf/p502.pdf>

### Alerus Health Savings Account

[www.alerus.com](http://www.alerus.com)

877-661-4727



## Transition from General Purpose Healthcare FSA to HSA

The City's Healthcare FSA includes a carry over amount of \$570. If you have a carryover amount in the Healthcare FSA plan that is effect on the last day of the Plan Year, you cannot elect HSA benefits or otherwise make contributions to an HSA until your FSA funds are completely spent. You may enroll into the City's HDHP effective January 1st but due to IRS guidelines you would not be eligible to establish an HSA until all your FSA funds are used.

## Qualified Expenses

HSAs enable you to pay for the following qualified health care expenses on a tax-free basis:

- Qualified expenses not covered by insurance, as defined by the IRS, online at: <http://www.irs.gov/pub/irs-pdf/p502.pdf>
- COBRA premiums
- Qualified long-term care insurance and expenses
- Health insurance premiums when receiving unemployment compensation
- Medicare/retiree health insurance premiums (excluding Medicare Supplement/Medigap insurance premiums)

## HSA Advantages

### Triple Tax Advantage

1. You contribute pre-tax funds through payroll deductions, meaning the money comes out of your paycheck before federal income tax is calculated. This, in turn, reduces the amount of taxable income, so less tax is withheld from your paycheck.
2. Funds grow tax-free, and unused funds roll over year to year.
3. You can withdraw funds tax-free to pay for qualified health care expenses now and in the future—even in retirement.

### Control

You own and control the money in your HSA. You decide how or if you want to spend it. You can use it to pay for doctor's visits, prescriptions, braces, glasses—even laser vision correction surgery.

### Investment Opportunities

Once you reach and maintain a minimum threshold (\$2,000), you can make investments to help your money grow tax-free.

### Savings Potential

There is no "use it or lose it" rule. Your account grows over time as you continue to roll over unused dollars from year to year.

### Portability

Your HSA is yours for life. The money is yours to spend or save, regardless of whether you change health plans,\* retire or leave the organization.

*\*You must be enrolled in a qualified health plan to contribute to an HSA.*





## Flexible Spending Accounts (FSA)

Flexible Spending Accounts (FSA) allow employees to set aside pre-tax money from their paychecks to pay for eligible out of pocket expenses for healthcare and dependent care. Because the money put into these accounts is not considered taxable, employees save by paying less Federal, State and FICA taxes. Depending on personal circumstances, these plans can mean a significant tax savings. The FSA does require re-enrollment each year.



### Healthcare Flexible Spending Account

Contribute up to \$2,850 per household (per calendar year) for reimbursement of eligible health-related expenses incurred by you, your spouse, and your children up to the age of 26 that you may need to pay for out of pocket. Expenses can be incurred from January 1, 2022 to December 31, 2022 as long as you are an active participant in the plan. You have access to your full plan year election amount of Healthcare FSA funds immediately. While this plan is use or lose it, you can carry over \$570 every year of unused funds.

#### Examples of Eligible Expenses

- Copays, coinsurance and deductibles
- Dental and orthodontia expenses
- Contact lenses, eyeglasses, vision surgery
- Hearing aids
- Chiropractic care
- Over the counter medications, with a prescription

You can find a complete list of eligible expenses at: [irs.gov/pub/irs-pdf/p969.pdf](https://www.irs.gov/pub/irs-pdf/p969.pdf) or [alerus.com](https://www.alerus.com)

### Dependent Care Flexible Spending Account

Contribute up to \$5,000 per household (per calendar year) towards out of pocket dependent care expenses for children under age 13 and disabled dependents of any age. Expenses can be incurred from January 1, 2022 to December 31, 2022, as long as you are an active participant in the plan. Dependent care expenses are only reimbursable up to what has been deducted from payroll and deposited to your account.

#### Examples of Eligible Expenses

- Licensed day care centers for children and disabled dependents\*
- Costs for family or adult day care facilities\*
- Babysitters outside or inside your home while you are working\*
- Day camp expenses (but not overnight camp)\*

You can find a complete list of eligible expenses at: [irs.gov/pub/irs-pdf/p969.pdf](https://www.irs.gov/pub/irs-pdf/p969.pdf) or [alerus.com](https://www.alerus.com)

**\*Must provide a SSN or TaxID**

### Limited Purpose Flexible Spending Account

If you or your spouse is enrolled in an HSA (Health Savings Account), you have the option of electing a Limited Purpose Healthcare FSA. Under the Limited Purpose Healthcare FSA you can be reimbursed for dental and vision expenses you may need to pay for out of pocket. You may contribute up to \$2,850 per year. Expenses can be incurred from January 1, 2022 to December 31, 2022 and you are allowed \$570 carry over each year.



## Critical Illness Insurance

The Aflac Critical Illness plan can help with the treatment costs of covered critical illnesses, such as a heart attack or stroke. More importantly, the plan helps you focus on recuperation instead of the distractions of out-of-pocket costs. With the Critical Illness plan, you receive cash benefits directly (unless otherwise assigned)—giving you the flexibility to help pay bills related to treatment or to help with everyday living expenses.



### The Aflac Group Critical Illness plan benefits include:

- Critical Illness Benefit payable for:
  - Cancer
  - Heart Attack (Myocardial Infarction)
  - Stroke
  - Kidney Failure (End-Stage Renal Failure)
  - Major Organ Transplant
  - Bone Marrow Transplant (Stem Cell Transplant)
  - Sudden Cardiac Arrest
  - Coronary Artery Bypass Surgery
  - Non-Invasive Cancer
  - Skin Cancer
  - Severe Burn
  - Coma
  - Paralysis
  - Loss of Sight/Hearing/Speech
- \$50 Health Screening Benefit

### Features:

- Coverage is available for you, your spouse, and dependent children.
- Fast claims payment. Most claims are processed in about four days.

For a comprehensive description of the plan, view the Plan Summary located on [Benefits Connect](#).

Employee - Non-Tobacco (Biweekly - 26 pay periods/year)			
Issue Age	\$10,000	\$20,000	\$30,000
18-30	\$2.46	\$4.27	\$6.09
31-40	\$3.73	\$6.82	\$9.92
41-50	\$6.59	\$12.53	\$18.48
51-60	\$11.79	\$22.94	\$34.09
61+	\$21.59	\$42.55	\$63.50

Spouse - Non-Tobacco (Biweekly - 26 pay periods/year)			
Issue Age	\$10,000	\$20,000	\$30,000
18-30	\$2.46	\$4.27	\$6.09
31-40	\$3.73	\$6.82	\$9.92
41-50	\$6.59	\$12.53	\$18.48
51-60	\$11.79	\$22.94	\$34.09
61+	\$21.59	\$42.55	\$63.50

Employee - Tobacco (Biweekly - 26 pay periods/year)			
Issue Age	\$10,000	\$20,000	\$30,000
18-30	\$3.23	\$5.82	\$8.42
31-40	\$5.49	\$10.33	\$15.18
41-50	\$9.99	\$19.33	\$28.68
51-60	\$18.69	\$36.73	\$54.78
61+	\$33.26	\$65.89	\$98.51

Spouse - Tobacco (Biweekly - 26 pay periods/year)			
Issue Age	\$10,000	\$20,000	\$30,000
18-30	\$3.23	\$5.82	\$8.42
31-40	\$5.49	\$10.33	\$15.18
41-50	\$9.99	\$19.33	\$28.68
51-60	\$18.69	\$36.73	\$54.78
61+	\$33.26	\$65.89	\$98.51

## Accident Insurance

In the event of a covered accident, this plan will pay a cash benefit directly to you to help with the costs associated with out-of-pocket expenses and bills—expenses major medical insurance may not take care of, including:

- Ambulance rides
- Wheelchairs, crutches, and other medical appliances
- Emergency room visits
- Surgery and anesthesia
- Bandages, stitches, and casts

**The Accident Insurance plan also offers additional financial resources to help with the cost of follow-up care, including:**

- A \$50 Wellness Benefit for covered preventive screenings
- Transportation and Lodging benefits
- An Emergency Room Treatment Benefit
- Coverage for certain serious conditions, such as coma and paralysis
- An Accidental-Death Benefit
- A Dismemberment Benefit

### Features:

- Coverage is guaranteed-issue (which means you may qualify for coverage without having to answer health questions)
- Benefits are paid directly to you unless otherwise assigned
- Coverage is available for you, your spouse, and dependent children
- Coverage is portable (with certain stipulations). That means you can take it with you if you change jobs or retire.
- Fast claims payment. Most claims are processed in about four business days.

For a comprehensive description of the plan, view the Plan Summary located on [Benefits Connect](#).

High Option – 24 Hour Plan	Biweekly (26 pay periods/year)
Employee	\$6.67
Employee and Spouse	\$9.78
Employee and Dependent Children	\$11.58
Family	\$14.70

## How to File a Claim

If you're sick or hurt, the last thing you need is an insurer that drags its feet when it's time to pay your claims. Aflac prides itself on being an insurer with a difference: Our goal is to process and pay, not deny and delay. That's why we make it easy to file your claims online. Here's how:

1. Visit [www.aflacgroupinsurance.com](http://www.aflacgroupinsurance.com) and click on "Customer Service" and then "File a claim."
2. Choose from accident, hospital, critical illness or wellness and follow the instructions.
3. Complete and upload your HIPAA authorization, claim details and documents, and direct deposit information.
4. Feel secure in the knowledge that claims on group coverage like yours are processed in an average of two days.

### \* IMPORTANT INFO: \*

- Employer Name: City of Fort Collins
- Group/Policy #: 24228 (for both Accident and Critical Illness)
- If you prefer not to complete the direct deposit information, they will mail you a physical check

Visit Aflac's Group Insurance page at [www.aflacgroupinsurance.com](http://www.aflacgroupinsurance.com) to get started or call 1-800-433-3036 for additional assistance.



## Matrix Family and Medical Leave Administration

The Family and Medical Leave Act (FMLA) may grant an employee an unpaid leave of absence of up to 12 weeks per year for certain events.

These events may include, but are not limited to:

- Your own serious medical condition
- Caring for a qualified family member with a serious medical condition
- Birth, adoption or foster care of a child

**If you need to apply for a Family Medical Leave, please contact  
Matrix Absence Management at [matrixabsence.com](https://matrixabsence.com) or 877-202-0055.**

## Matrix Short Term Disability

The City offers eligible employees a Short Term Disability (STD) benefit to replace all or part of your income when you're unable to work for a period of time due to illness or injury. The City pays the full cost of the premiums for your short term disability insurance and you are automatically enrolled in this benefit which is effective upon hire. After 14 consecutive calendar days (the elimination period), the benefit pays at 100% of your salary for the next 6 weeks of your approved disability period. If your illness/injury continues and additional recovery time is approved, a reduced benefit of 75% of your salary will be paid up to a maximum of 90 calendar days per cause. If you are still ill or injured after 90 calendar days, your claim will be reviewed for Long Term Disability benefits.

**If you are in need of STD, please contact  
Matrix Absence Management at [matrixabsence.com](https://matrixabsence.com) or 877-202-0055.**

## Reliance Standard Term Disability

The City offers eligible employees a Long Term Disability (LTD) benefit to help protect your income in the event of an extended illness or injury that prevents you from performing your essential job duties. The City pays the full cost of the premiums for your long term disability insurance and you are automatically enrolled in this benefit which is effective upon hire. After 90 calendar days (the elimination period), the benefit pays monthly up to a maximum of 66.67% of your monthly income or \$7,500. If you're a fire fighter, police officer, or emergency services dispatcher that is age 55 or older and has 25 years of service or more, the benefit pays monthly up to a maximum of 60% of your monthly income or \$7,500. If partially disabled, the long term disability benefit allows you to supplement your work earnings with LTD pay up to 100% of your monthly salary.

LTD benefits are offset (reduced) by income you receive from other sources, such as Social Security Disability or Retirement benefits, Workers' Compensation benefits or other retirement benefits. Any LTD benefits you receive are taxed as ordinary income.

Firefighters, police officers and emergency dispatchers, under age 55 and less than 25 years of service are covered by an alternate benefit provided by the Fire & Police Pension Association of Colorado (FPPA).

Reliance Standard Disability		
	Short Term Disability	Long Term Disability
<b>Benefit Waiting Period:</b>	14 Calendar Days	90 Calendar Days
<b>Benefit Amount:</b>	Next 6 weeks at 100% of weekly earnings; Following 4+ weeks at 75% of weekly earnings	66.67% of monthly salary  60% of monthly base salary for Firefighters, Police Officers, and Emergency Dispatchers
<b>Maximum Benefit:</b>	90 Calendar Days Per Incident	Social Security normal retirement age

## Reliance Standard Basic Life and AD&D Insurance

The City provides, at no cost to you, Basic Life and AD&D insurance to all eligible employees in the amount of 1x your annual salary up to \$500,000.

## Additional Life Insurance

As an added benefit to you and your family, you may elect additional life and accidental death and dismemberment policies.

## Reliance Standard Supplemental Life Insurance

You can select additional life insurance coverage in increments of \$10,000 up to a maximum of \$1,000,000 (guarantee coverage up to \$300,000 for new hires and for those with a qualified life event throughout the year). The minimum benefit is \$10,000. If Supplemental Life coverage is elected, Supplemental AD&D coverage may be elected in the same amount.

You may choose coverage for either your spouse, your children, or for both. Coverage is portable, so upon termination of employment, you may continue your policy.

### Benefit Amounts for Spouse

You can select additional life insurance coverage for your spouse. Coverage can be elected in increments of \$5,000, to a maximum of \$250,000

The guaranteed coverage amount for your spouse is \$30,000, offered only to new hires and for those with a qualified life event throughout the year as guaranteed.

### Benefit Amounts for Children

You can select additional life insurance for your dependent children. Coverage can be elected in increments of \$2,000, to a maximum of \$10,000

## Reliance Standard Supplemental Accident Insurance

You can select additional AD&D insurance coverage in increments of \$10,000, up to 10 times your annual salary with a maximum of \$550,000. Your benefit amount can equal the amount of life insurance benefit elected under the Reliance Standard Supplemental Life plan. You can elect coverage for your spouse in increments of \$5,000, to a maximum of \$250,000, and coverage for your child(ren) in increments of \$2,000, to a maximum of \$10,000.

**Note:** If you elect Voluntary Coverage for yourself and/or your dependents when you are initially eligible you will be allowed to elect coverage up to the Guaranteed Issue amount with no Evidence of Insurability. If you elect more than the Guaranteed Issue amount, please complete the DocuSign form on HR Connect.

## Wellness



The City of Fort Collins Employee Wellness Program is a comprehensive program designed to improve health and wellbeing, reduce medical claims costs, and increase employee engagement. The vision of the Wellness Program is “To be the healthiest workplace in America.” The mission of the program is “To provide City of Fort Collins employees, and their families, with exceptional wellness programming that motivates them toward healthy lifestyle choices and more productive lives.”

The Wellness Program is open to all employees, incentives vary depending on classification.

Visit Wellness Connect or contact our [Wellness Team](#) for more information.

### Award-Winning Wellness Program includes:

- Well Days Incentive Program
- Group and On Demand Exercise Classes
- On-site Workout Facilities and Maternity Care
- Lifestyle Management
- Recreation Facility Passes
- Wellness Coaching
- Health Fair
- Health and Risk Assessment
- Flu Shots
- Financial Wellbeing Program
- Special offers from Elevations Credit Union
- Behavioral Health Resources
- Tobacco Cessation Programs
- Mindfulness Resources
- Parenting Support
- Weight Management Program
- Employee Assistance Programs for legal, financial, referral, and counseling services

## Well Days Incentive Program

*Earn up to 3 days of vacation time!*

The Well Days Incentive Program is offered to educate, guide and empower you to make lifestyle choices that reduce the risk of illness and injury. This points-based program offers an abundance of options across the spectrum of health and wellness, allowing you to chart your personal path to optimal wellbeing. You can begin anytime by visiting the [Well Days Point Portal](#) on Wellness Connect to start earning your points.

## Fitness

The Wellness Program offers many ways to help you increase your physical activity level.

### On-Site Exercise Centers

Prior to using the fitness centers, each employee is required to attend a fitness center orientation and sign an exercise room waiver. Register for a Fitness Room Orientation on FC Career Connect.

#### Locations:

215 N. Mason Fitness Center  
Utility Service Center Fitness Center  
Streets Department Fitness Center  
Wellness Annex

### Recreation Facility Passes:

Passes for use at City Recreation Facilities are available for employees to purchase at a discounted rate. Employees may purchase a 25-Admission Multiple Facility Pass for \$25. The pass is valid for one year from the date of purchase. Once a pass is purchased, the employee will receive the following perks:

- 70% off all qualifying fitness classes. Must register for the entire class.
- Pass may be used by the employee, spouse, same-sex domestic partner, and dependent children up to the age of 26.
- Employee must show City ID at time of purchase. Library District employees show a pay statement and picture ID at the time of purchase.
- Pass allows admission to Northside Aztlan Community Center, Edora Pool Ice Center, Foothills Recreation Center, Mulberry Pool, Fort Collins Senior Center, and The Farm. Passes can be purchased from the front desk of any of these locations.

### Recreation Fitness Classes

With the purchase of a discounted Recreation Pass, City employees and their immediate family members receive a 70% discount on qualifying fitness classes through the Recreator. You must register for the entire class — not valid for drop-in use.





## Exercise Classes

### On-Site Exercise Classes:

Examples of classes offered: Yoga, Boot Camp, & Core. Register for these classes in FC Career Connect. Classes are held in the Wellness Annex at 214 Howes Street. Classes are available for spouses when space is available. Some classes may have an additional fee.

### Off-Site Exercise Classes:

Register for these classes in FC Career Connect. Registration closes one week prior to the class start date. These classes are offered at the Northside Aztlan Community Center. Spouses may register for these same classes through The Recreator.

## Personal Enrichment Classes

Classes on various wellbeing topics such as nutrition, healthy cooking, stress management, financial wellness, and more are offered both virtually and in-person throughout the year. Register on FC Career Connect.

## Lifestyle Management Program

The Benefits and Wellness staff are pleased to announce additional preventative care services covered through UMR. The following services are being offered to employees and their family members participating on the City's medical plan:

### Preventative Services Covered:

- Registered Dieticians
- Therapeutic Massage Therapy
- Acupuncture
- Biofeedback

### How they are covered:

- **OPEN NETWORK** - can go to any Registered Dietician, Licensed/certified Therapeutic Massage Therapist or Acupuncturist, or Biofeedback professional
- No referrals needed

### What's the cost?:

- Premier Plan \$20 copay
- HDHP no reimbursement, applies to the deductible
- \$500 maximum allowable benefit per service per member per year

These services support the City's commitment to offer employees and their families Wellness coverage that helps to prevent injuries and illness.

### All Services to be paid in full up front to provider

Visit the Benefits webpage on [Benefits Connect](#) for more details about the program.





# The best place to receive healthcare

At CityCare we're reserved for members only, like you.

Get started today at [marathon-health.com/welcome](https://marathon-health.com/welcome) or text WELCOME to 77239.

*Services are at no cost, HDHP has a \$45 copay for non-preventive services.*

## CityCare is your health center



### **Our healthcare is personalized.**

Our team will spend as long as it takes to understand your health and provide the care you need.



### **Our services are affordable.**

We offer comprehensive healthcare at little or no cost to you.

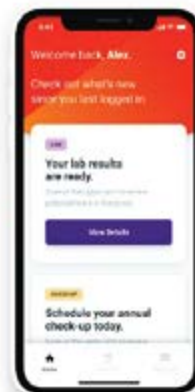


### **Our location is convenient.**

Being centrally located in Fort Collins, we offer you the services you need, when you need them.

Appointments by video and phone are available. To schedule an appointment, call 970-672-4331 or visit [marathon-health.com/welcome](https://marathon-health.com/welcome).

Take advantage of this benefit from the City of Fort Collins! Set up your account today at [marathon-health.com/welcome](https://marathon-health.com/welcome) or text WELCOME to 77239.



## Free services to spark your healthcare journey:

HDHP plans pay \$45 for sick visits



### Prevention

#### Health Screenings

- Annual Exams
- Blood pressure
- Body mass index
- Cholesterol
- Glucose
- InBody Scan
- School, camp, and sports physicals

#### Health Coaching

- Nutrition
- Physical activity
- Tobacco cessation
- Stress management
- Weight loss

#### Chronic Condition Coaching

- Arthritis
- Asthma
- COPD
- Depression
- Diabetes
- Heart health
- Low back pain
- Sleep apnea
- Educational offerings



### Sick Visits

- Bronchitis
- Common Cold
- Constipation
- Cough
- Diarrhea
- Eye infections
- Headache
- Joint pain
- Nausea and vomiting
- Nosebleed
- Sinus infections
- Skin infections
- Strep throat
- Commonly-prescribed medications available



### Lab Services

Blood work and lab tests processed at the center include hemoglobin A1C, lipid panel, glucose, rapid strep, mono, urinalysis, oxygen saturation, and pregnancy. Additional lab tests can also be drawn and sent to an outside lab for processing.

### Privacy

The care you receive by Marathon Health is confidential and protected by state and federal law.

### Eligibility

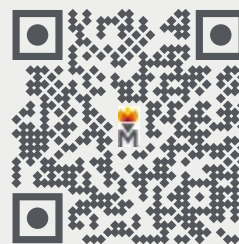
Services are available to all employees, spouses, and dependents age two and older covered by a City medical plan.

### Location and Hours

#### CityCare

214 N. Howes Street  
Fort Collins, CO 80521  
South side of building - look for green awning.  
970-672-4331  
Monday - Friday: 8am - 5pm  
Closed 1pm - 2pm

**To schedule an appointment, call CityCare or scan the QR code below.**



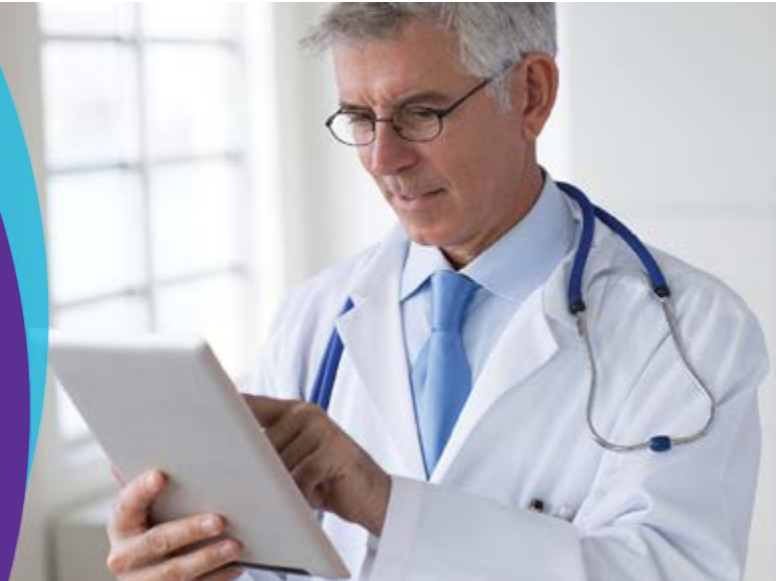
**CityCare can augment the care you receive from your Primary Care Provider, or help you establish a relationship with one.**

# Access to a doctor anytime, anywhere

GENERAL MEDICAL

**HDHP: \$0 (applies to deductible)**

**PPO Plan: \$0**



**Teladoc® gives you 24/7/365 access to U.S. board-certified doctors** through convenience of phone, video or mobile app visits. It's an affordable alternative to costly urgent care and ER visits when you need care now.

## MEET OUR DOCTORS

Teladoc is simply a new way to access qualified doctors. All Teladoc doctors:

- Are practicing PCPs, pediatricians, and family medicine physicians
- Average 20 years experience
- Are U.S. board-certified and licensed in your state
- Are credentialed every three years, meeting NCQA standards

## GET THE CARE YOU NEED

Teladoc doctors can treat many medical conditions, including:

- Cold & flu symptoms
- Allergies
- Sinus problems
- Sore throat
- Respiratory infection
- Skin problems
- And more!

## WHY TELADOC?

It is a convenient and affordable option for quality care.

- When you need care now
- If you're considering the ER or urgent care for a non-emergency issue
- On vacation, on a business trip, or away from home
- For short term prescription refills

## Talk to a doctor anytime!



Teladoc.com



1-800-Teladoc





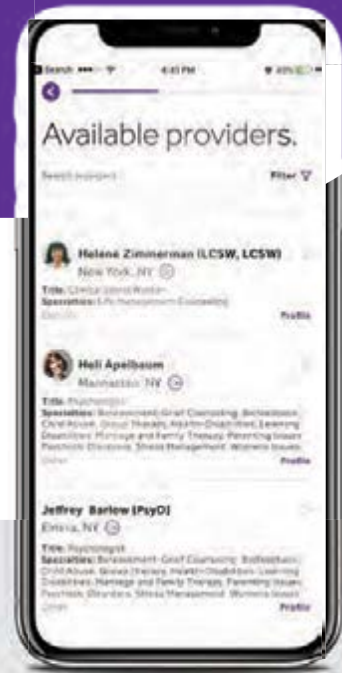
# Mental Health

## How to request a visit

Scheduling a phone or video visit with a therapist is easy and convenient. You can make an appointment seven days a week, from 7 a.m. to 9 p.m. local time. Appointments are confirmed within 72 hours.

Please schedule your appointment online or via the Teladoc app. Although call center reps cannot schedule appointments for you, they can answer your questions.

	HDHP Plan	PPO Plan
<b>Psychiatrist</b> (initial visit)	\$0	\$0
<b>Psychiatrist</b> (ongoing visit)	\$0	\$0
<b>Psychologist, licensed clinical social worker, counselor, or therapist</b>	\$0	\$0



### How to schedule a visit

- 1 Register your Teladoc account via web or app or log in to your account if you're already registered
- 2 Request a visit
- 3 Answer a few questions
- 4 Select your therapist
- 5 Request a time for your appointment

## Confidential therapy on your terms

 Teladoc.com   Download the app





*Live well, live balanced, live life*



## Counseling

**Free and confidential counseling services** for everyday life situations including stress, anxiety, depression, family situations, drug and alcohol abuse, relationships, death and grief, and work-related topics.



## Legal & Financial

Practical legal and financial assistance that includes:

- **Free 30-minute consult** per legal/financial matter.
- **25% discount** on select services after the initial consult.
- Use your **EAP sessions** for financial/Medicare coaching.



## Work/Life

**Unlimited work/life services** to help find the right service for your needs such as childcare, eldercare, and convenience services including everything from nutrition classes to finding the perfect dog walker.



## Wellness

No matter your wellness goals, MINES can help. You have:

- **4 professional wellness sessions** with a personal coach.
- **4 sessions** of parental coaching & lactation consults.
- **6 week** Virtual Reality smoking cessation program.



## Online

Sign on to **PersonalAdvantage** to access:

- **Online Resource Library** full of articles, assessments, training, and financial tools designed to beat stress and improve work/life balance.
- **eM Life mindfulness service** for live sessions, community support, and expert instructors that can help you live a healthier, more balanced life.



## Your info

As an employee of  
**City of Fort Collins,**

you and each member of your household have up to **8 counseling sessions per life situation\*, per contract year.**

Digital message-based, telephonic, video, and face-to-face counseling available.

### To Access services:

**Call MINES at 1-800-873-7138**

Or visit:  
**[minesandassociates.com](http://minesandassociates.com)**

**Company Code: fortcollins**

Your company code is used to register for online services as well as complete online requests for service. Log on today to access your services and mindfulness app.

**Contract Year: 1/1-12/31**

**Free & Confidential  
Support 24/7**

\*Per Life Situation: A distinct, separate and new life event. A MINES case manager will review requests for additional sets of sessions. Continuation of counseling is not a separate, distinct and new life event. This guide is for informational purposes only. Call MINES for details.



# RETIREMENT OPTIONS



## 401(a) Defined Contribution Plan

### Who is Nationwide?

Considered the Record Keeper for the City Retirement Plan, an independent financial services corporation focused on providing retirement plans and related services. All retirement programs, administrative services, and educational tools have been developed specifically for public sector retirement plan administrators and participants. For more information, visit [www.fortcollinsrp.com](http://www.fortcollinsrp.com).

### Eligibility and Entry

Enrollment is mandatory for classified and unclassified employees after six months of employment. Employees will be auto enrolled into the appropriate plan. All contributions are pre-taxed, and contribution amounts are set by the Plan document. We provide Nationwide personal information via a secure electronic file feed. Nationwide will setup your account based on the information we provide. Once enrolled, you will receive a welcome letter to your home address on file. Your welcome letter will provide you details on how to complete your online enrollment.

### Vesting

You are always 100% vested in your mandatory contributions, and you cannot forfeit these contributions. You are 100% vested in the City of Fort Collins contributions after completing six months from the date of hire.

### Investments

Your retirement plans intend to qualify as an ERISA §404(c) plan. This means that the Plan Fiduciary has transferred some responsibility for investing the retirement account balance by choosing among several fund options.

In order for you to make informed decisions, it is important that you attend the periodic educational meetings scheduled for your benefit and read the material available from the City.

If you don't choose any investment options, contributions will be automatically directed to the specific Milestone Target Date Fund, which automatically handles asset allocation investment decisions for you. As with all mutual funds, the principle value in these funds is not guaranteed. Also, please note that the target date is an approximate date when investors may plan for you to begin withdrawing from the fund.

You may invest your contributions and your employer contributions in any of the options offered by this plan.

Transferring existing balances from prior employer(s) can be completed after you have become eligible to participate in the plan. Beware that redemption fees or restrictions on transfer frequency may apply.

### Account Information

You may obtain account information through: [www.ftcollinsrp.com](http://www.ftcollinsrp.com)

– Investor Services **1-800-669-7400** from 8:30 a.m. – 9:00 p.m. ET

### Beneficiary Designations

To make your appropriate designations, to [www.ftcollinsrp.com](http://www.ftcollinsrp.com)

**DO YOU HAVE  
QUESTIONS ABOUT  
RETIREMENT?**

**I'M  
HERE  
TO  
HELP**



You don't have to be an expert on deferred compensation to get the most out of your plan. Whether you've been enrolled for years or are just getting started, I'll answer your questions and help you:

- Identify your retirement goals
- Enroll in your employer's plan
- Determine your contribution level
- Determine your investor profile
- Keep track of your plan over time

Remember, it's your plan. Don't hesitate to call me if you have any questions. I'll help you every step of the way.

Investing involves market risk, including possible loss of principal. Actual results will vary depending on your investment and market experience.

Nationwide representatives cannot offer investment, tax or legal advice. Consult your own counsel before making retirement plan decisions.

**Contact me — I'd be happy  
to answer your questions.**

**Rochelle M. Davis**  
**937-903-3781**  
**davir19@nationwide.com**

NRM-0128AO.6 (01/15)

The Nationwide Group Retirement Series includes unregistered group fixed and variable annuities and trust programs. The unregistered group fixed and variable annuities are issued by Nationwide Life Insurance Company. Trust programs and trust services are offered by Nationwide Trust Company, FSB, a division of Nationwide Bank. Nationwide Investment Services Corporation, member FINRA. Nationwide Mutual Insurance Company and Affiliated Companies, Home Office: Columbus, OH 43215-2220.

Nationwide and the Nationwide N and Eagle are service marks of Nationwide Mutual Insurance Company. © 2014



**Nationwide®**

## 457(b) Deferred Compensation Plan

### City of Fort Collins 457(b) Deferred Compensation Plan

This plan allows you to save and invest additional money to help prepare for the retirement of your dreams.

#### Eligibility and Entry

Enrollment is voluntary for classified and unclassified employees upon employment. Saving through your plan is easy. Your contributions are automatically deducted from your paycheck and deposited into your account.

Visit [www.ftcollinsrp.com](http://www.ftcollinsrp.com) for online enrollment.

#### Flexible Contributions

You decide how much to contribute based on the lesser of the annual IRS limits (see below) and any limits set by your employer. While it's generally recommended that you contribute the maximum amount, you should select a contribution rate that will help you stay on track to reach your retirement goals and leave enough take-home pay to cover living expenses and other obligations. Keep in mind—even small amounts can make a difference over time.

The IRS contribution limit is 100% of your gross income, not to exceed \$20,500. If you are age 50 and older, you may be eligible to contribute an additional \$6,500 as a catch-up contribution. An additional catch-up option may also be available.

Plan	Normal Limit	Age 50 Catch-up Limit
457(b)	\$20,500	\$6,500

#### Vesting

You are always 100% vested in your voluntary contributions; there are no employer contributions.

#### Save with pre-tax dollars

Your contributions have the pretax advantage; they are deducted from your pay before taxes. This means every dollar you invest in the plan reduces your current taxable income. In addition, you will not pay any taxes on these contributions or your investments earnings until you begin taking withdrawals from the plan.

#### Consider the Roth option

You have the option to make Roth contributions, any investment earnings will accumulate tax-free, provided you take withdrawals after age 59½ and you have held the account for at least five years. Consider this option if you:

- Think you might be in a higher tax bracket during retirement
- Would like to leave assets to your heirs
- May want to retrieve your original contributions before retirement
- Are age 70½ or older and want to continue making tax-advantaged retirement investments

#### Investment options

Based on your retirement goals, you can allocate your contributions among the different investment options that are offered under the plan. For detailed investment options, including current performance and fees, visit:

- [www.ftcollinsrp.com](http://www.ftcollinsrp.com)
- Customer Services **1-877-677-3678** from 8:00 a.m. – 11:00 p.m. ET

#### Beneficiary Designations

To make your appropriate designations, go to [www.ftcollinsrp.com](http://www.ftcollinsrp.com).

## Post Employment Health Plan (PEHP)

The Post Employment Health Plan (PEHP) is designed to help you and your loved ones meet a critical expense—retiree health care—through a tax-advantaged savings vehicle. Your PEHP Program is sponsored by your employer and administered by Nationwide. All contributions to your account are set aside exclusively for qualifying medical expenses.

### Participation

Participating in the program is mandatory for Collective Bargaining employees. Eligibility and contribution amount is defined by years of credited services.

### PEHP Program Tax Benefits

- Pre-tax contributions, if applicable, reduce your taxable income
- Tax-deferred earnings
- Tax-free distributions for qualifying medical expenses

### Investments

At enrollment, a target-date fund based on your age or another default investment option is selected for you.

### Benefit Reimbursements

To request reimbursements, you must:

- Be eligible for benefits. Eligibility is defined by your employer and may generally apply at retirement, upon separation from service, or if you become disabled.
- Have medical expenses that qualify. (Refer to your program summary for a list of eligible expenses.)

### Survivor Benefits

In the event of your death, your account will be transferred to your surviving spouse and/or eligible dependents, who can continue to use benefits for reimbursement of their qualifying medical expenses.

### How to get started?

- View account at [www.forttcollinsrp.com](http://www.forttcollinsrp.com)
- Participant Help Center **1-877-677-3678** from 5:00am – 8:00pm MST Monday – Friday and 6:00am – 3:00pm MST Saturday





## Retired Public Safety Officer Notice

A new, optional provision of the Pension Protection Act of 2006, allows qualified public safety officers the option of subtracting a total of \$3,000 annually from their gross income from retirement plan distributions to pay for accident, health or long-term care insurance premiums. These distributions may be excluded from gross income if they come from an eligible governmental requirement plan such as a 401(a), 403(b), or 457(b) plan that offers this option. Distributions must be paid directly to an insurance company. Qualified health insurance premiums are premiums paid for coverage by an accident, health plan or qualified long-term care insurance contract for the participant, spouse or dependent(s). Distributions to surviving spouses and dependents are not eligible for this tax exclusion.

### Who is an eligible Public Safety Officer?

For the purpose of this provision, a public safety officer is defined by federal not state-law. A public safety officer is defined in federal laws as an individual serving in a public agency in an official capacity, with or without compensation including:

- Professional firefighters
- Individuals involved in crime and juvenile delinquency control or reduction, or enforcement of the criminal laws (including juvenile delinquency), including but not limited to police, corrections, probation, parole, and judicial officers
- Officially recognized or designated public employee members of a rescue squad or ambulance crew
- Officially recognized or designated members of a legally organized volunteer fire department
- Officially recognized or designated chaplains of volunteer fire departments, fire departments, and police departments.

Eligibility is also determined by employment status. To receive the tax benefit, a public safety officer must be severed from employment due to disability or attainment of the normal retirement age of 55. Further, the participant must have been serving as a public safety officer to qualify at the time of retirement or disability. Benefits attributable to service, other than as a public safety officer, qualifies for favorable tax treatment, provided the participant severs from employment as a public safety officer because of retirement or disability with the employer maintaining the eligible government plan.

### Who is not eligible?

- Dispatchers, 911 Operators, and administrative personnel are not eligible
- Public safety officers who retire before the normal retirement age of 55 and who are not disabled are not eligible

### How can eligible Public Safety Officers get started?

- [www.ftcollinsrp.com](http://www.ftcollinsrp.com)
- Customer Services **1-877-677-3678** from 8:00 a.m. – 11:00 p.m. ET



## Vacation

Years of Service	Vacation Hours Accrued* (Per Pay Period)	Days Accrued Per Year
0-3 Years	4.62 Hours	15 Days
4-5 Years	4.92 Hours	16 Days
6-7 Years	5.23 Hours	17 Days
8-9 Years	5.54 Hours	18 Days
10-12 Years	6.15 Hours	20 Days
13-14 Years	6.46 Hours	21 Days
15-16 Years	6.77 Hours	22 Days
17-18 Years	7.08 Hours	23 Days
19-20 Years	7.38 Hours	24 Days
Over 20 Years	7.69 Hours	25 Days

\*Hours are based on full-time employment and are pro-rated for employees in part-time positions based on their FTE. The leave accruals above are not necessarily reflective of intergovernmental agencies. For all other members, additional leave information can be found on City Hub.

## Holidays

There are 11 designated holidays each year.

- New Years Day
- Martin Luther King Day
- President's Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Veterans' Day
- Thanksgiving Day
- Day After Thanksgiving
- Christmas Day



All designated holiday time not used during a calendar year will be forfeited at the end of the final pay period of the calendar year.

## Sick Leave

Full-time eligible employees receive 120 hours of sick leave at the beginning of each year for use in that calendar year. This amount is pro-rated for part-time employees AND is pro-rated for those employees starting employment after January 1 of the calendar year.

Unused Sick Leave will not be carried over to the following calendar year.

## Other Leave Benefits

- Injury Leave
- Jury Duty and Witness Appearance Leave
- Voting Time
- Military Leave
- Bereavement Leave
- Domestic Violence Leave



## Benefit Terms

Following are definitions of terms commonly used when discussing benefits.

### Coinsurance

The percentage the plan or you pay for a covered service or supply. For example, the plan may pay 80 percent while you pay 20 percent.

### Copayment (copay)

A copay is a flat-dollar amount you pay for specific covered services upon each visit to the provider. It is not impacted by the plan deductible, coinsurance or out-of-pocket maximum.

### Deductible

The amount you pay each year before the plan begins to pay insurance.

### Evidence of Insurability (EOI)

The documentation of the good health condition of the insurance beneficiary and his/her dependent's health in order to be approved for coverage. It is only required in certain circumstances.

### EXPLANATION OF BENEFITS (EOB)

After you receive medical services, your insurance will provide you with an EOB. It will outline details regarding how your insurance processed your medical claim, including what portion of the charges your insurance paid and what portion, if any, you are responsible for paying.

### FLEXIBLE SPENDING ACCOUNT (FSA)

An FSA is a tax-advantaged account that lets you put money aside on a pre-tax basis to pay for a wide range of health and/or dependent care expenses (as defined by the IRS) not covered by your plan that you incur during the plan year. Unlike the HSA, any unused funds remaining after the plan year ends will be forfeited.

### FORMULARY

A medical plan's formulary is a preferred brand-name drug list of the most cost-effective outcome-based drugs. You pay less when using a drug on the plan's formulary list.

### HIGH-DEDUCTIBLE HEALTH PLAN

A plan that provides competitive health insurance along with a tax-advantaged health savings account (HSA) that lets you decide how to spend your health care dollars. Essentially, you pay a lower premium in exchange for a higher deductible, much like car insurance.

### HEALTH SAVINGS ACCOUNT (HSA)

An HSA is a tax-advantaged savings account for high-deductible health plan (HDHP) participants that lets you put money aside on a pre-tax basis to pay for a wide range of health care expenses (as defined by the IRS) not covered by your plan. Unused money remaining in the account at the end of the plan year rolls over to be used the next year. Please refer to IRS Publications 502 and 969 for complete details on eligible expenses.

### IN-AND OUT-OF-NETWORK PROVIDERS

Benefit plans develop networks by contracting with doctors, hospitals, labs, etc., who have agreed to provide health care services to members at negotiated rates. You generally pay less out of pocket when you use in-network providers.

### OUT-OF-POCKET MAXIMUM

The maximum amount you will pay out of pocket for covered medical expenses per calendar year, including your deductible. After your share of covered expenses reaches this annual limit, the plan pays 100 percent for eligible network services and supplies for the remainder of the calendar year.

### PRESCRIPTION DRUG OUT-OF-POCKET MAXIMUM

The maximum amount you will pay out of pocket for covered prescription drug expenses per calendar year. After your share of covered prescription drug expenses reaches this annual limit, the plan pays 100 percent for eligible prescription drugs for the remainder of the calendar year. The prescription drug out-of-pocket maximum is separate from the medical out-of-pocket maximum.

### REASONABLE AND CUSTOMARY (R&C) CHARGES

The amount paid for a medical service in a geographic area based on what providers in the area usually charge for the same or similar medical service. The R&C amount sometimes is used to determine the allowed amount.

### SUMMARY PLAN DESCRIPTION (SPD)

An important document that tells plan participants what the plan provides and how it works.

## Directory

For Questions About...	Contact	Phone #	Web/E-Mail
<b>Medical</b> Group # 76-411027	UMR	800-826-9781	<a href="http://umr.com">umr.com</a>
<b>Prescriptions</b>	Express Scripts	800-334-8134	<a href="http://express-scripts.com">express-scripts.com</a>
<b>Alight</b>	Health Pro Jessica Carter	800-513-1667 800-513-1667 x1091	<a href="mailto:myhealthpro@alight.com">myhealthpro@alight.com</a> <a href="mailto:Jessica.Carter@alight.com">Jessica.Carter@alight.com</a>
<b>Dental</b> Group # 1857	Delta Dental	800-610-0201	<a href="http://deltadentalco.com">deltadentalco.com</a>
<b>Vision</b> Group # 12-293596	VSP	800-877-7195	<a href="http://vsp.com">vsp.com</a>
<b>Short Term Disability</b> <b>Family Medical Leave (FMLA)</b>	Matrix eServices	877-202-0055	<a href="http://matrixabsence.com">matrixabsence.com</a>
<b>Long Term Disability</b> Group # 133294	Reliance Standard	800-351-7500	<a href="http://reliancestandard.com">reliancestandard.com</a>
<b>Supplemental Life/AD&amp;D</b> Group # 164843	Reliance Standard	800-351-7500	<a href="http://reliancestandard.com">reliancestandard.com</a>
<b>Voluntary Life/AD&amp;D</b> Group # 006518	Anthem	866-594-0516	<a href="http://anthem.com">anthem.com</a>
<b>Critical Illness</b> Group # 24228	Keanu Vela Aflac	720-207-2347	<a href="mailto:keanu.vela@hubinternational.com">keanu.vela@hubinternational.com</a>
<b>Accident Insurance</b> Group # 24228	Keanu Vela Aflac	720-207-2347	<a href="mailto:keanu.vela@hubinternational.com">keanu.vela@hubinternational.com</a>
<b>Flexible Spending (FSA) &amp; Health Savings Accounts (HSA)</b>	Alerus	877-661-4727	<a href="http://alerus.com">alerus.com</a>
<b>Employee Assistance Program</b>	Mines & Associates	800-873-7138	<a href="http://MINESandAssociates.com">MINESandAssociates.com</a> Company Code: fortcollins
<b>401(a) &amp; 457 (PEHP)</b>	Nationwide	1-877-677-3678	<a href="http://ftcollinsrp.com">ftcollinsrp.com</a>
<b>Human Resources</b>	City of Fort Collins	970-221-6535	<a href="mailto:hrbenefits@fcgov.com">hrbenefits@fcgov.com</a> <a href="#">Benefits Connect</a>

Your Employee Benefits... at a Glance was created by HUB International Insurance Services

### About This Brochure

This is a custom brochure that provides only a highlight of the plans offered to you by your employer and in no way serves as the actual plan description or plan document for the plans. The plan documents will always govern the offered benefits that your employer provides for you. We reserve the right to modify any or all of these plans at anytime.

