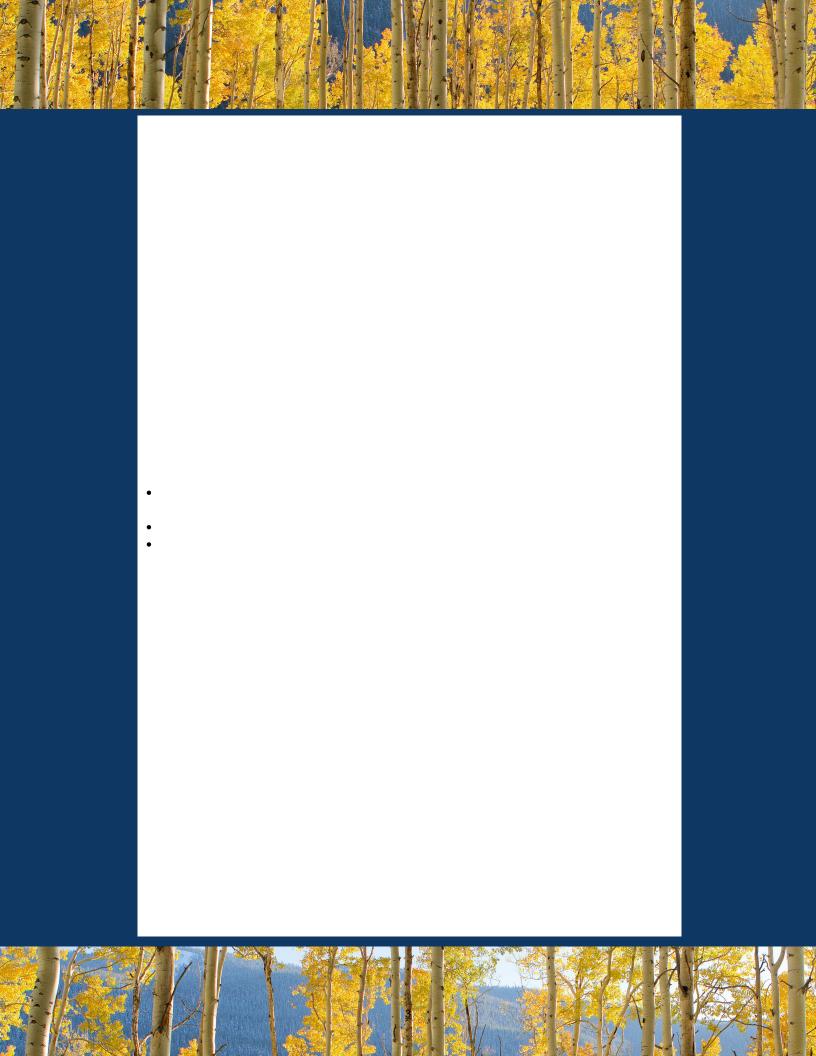


Table of Contents

BENEFITS ELIGIBILITY & ENROLLMENT	4
HOW TO ENROLL IN YOUR BENEFITS	5
WHEN ARE MY BENEFITS EFFECTIVE AND WHO PAYS THE COST?	5
MEDICAL AND PHARMACY PLANS	6
EMPLOYEE CONTRIBUTIONS FOR BENEFITS	8
DENTAL PLAN – CEBT DENTAL PLAN A	9
VISION PLAN – CEBT VISION PLANS A & C	10
LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE	11
DISABILITY INSURANCE	12
SUPPLEMENTAL ACCIDENT & CRITICAL ILLNESS INSURANCE	12
FLEXIBLE SPENDING ACCOUNTS	
HEALTH SAVINGS ACCOUNT (HSA)	14
RETIREMENT BENEFITS - 401A AND 457B PLANS	
EMPLOYEE ASSISTANCE PROGRAM (EAP)	15
WORKERS COMPENSATION INSURANCE	
SOCIAL SECURITY & MEDICARE	15
MARATHON HEALTH & WELLNESS CENTERS	16
WELLNESS PROGRAM	17
GARFIELD COUNTY GYM ACCESS	17
BENEFITHUB	17
OBSERVED HOLIDAYS	17
VACATION TIME	17
SICK TIME	
CONTACT INFORMATION	18
BENEFITS GLOSSARY	18

The employee benefit programs described in the Benefit Guide are for the 2023 Plan Year from January 1, 2023, through December 31, 2023. The information in this Guide is a summary of the Garfield County benefits, and every attempt has been made to ensure its accuracy. It does not include all the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request. If there is any inconsistency between the information in this Guide and the County's formal plans, programs, policies or contracts, or any subsequent change in such plan, programs, policies or contracts, the actual Plan Documents of each benefit program will govern. If you wish to review the plan documents or have questions regarding specific issues or plan provisions, you should consult www.cebt.org and the Garfield County Intranet for other plan documents.



Benefits Eligibility & Enrollment

Eligibility

Your eligibility for benefits is determined by your employment status and the hours per week that you work. Many of the benefit coverages begin on the first of the month following your date of hire. Elections made now will remain until the next open enrollment unless you or your family members experience a qualifying event.

	Benefits Eligibility								
Hours Scheduled to work	Medical, Dental, & Vision	Spending Accounts:	Life & AD&D	Disability	Employee Assistance Program	Voluntary Accident & Critical Illness	401a/457b	Vacation (prorated for less than full- time)	Sick Time (prorated for less than full- time)
Full-Time 30+ hrs. per week	X	Х	x	X	X	х	X	X	Х
Part-Time 20-29 hrs. per week									
Elected Officials	X	Х	х		X	Х	X	Х	Х

Eligible dependents may be added to your coverage

(Documentation must be provided)

- Your legal spouse (documentation of marriage, civil union, common-law or other legal union).
- Your children up to the age of 26 (this includes children in your legal custody, adoption, and stepchildren).
- Your children over the age of 26 who are considered disabled and are unmarried.

Benefits Enrollment

Opportunities to elect or change benefits

It is important to choose your benefits carefully because there are limited opportunities to change your benefits once you have elected them. If you do need to change them, these are the opportunities you have:

- Within the first 30 days of full-time employment with the County as a new hire or re-hire. Most benefit elections are effective the first of the month following your date of hire or upon full-time eligibility.
- During the Annual Open Enrollment period. During this time, any newly elected benefits or changes made to existing benefits are effective on January 1st of the following year.
- During the year if you have a Qualifying Life Event. Due to IRS regulations, you must make changes within 30 days of the event and provide the required supporting documentation within 45 days from the date of the event.

Examples of a qualifying life event

✓ Legal Marriage	,	Divorce	✓	Death	✓	Birth or Adoption
✓ Child Support Order	,	Enrollment into Medicare	✓	Work Status Change for Spouse	✓	Change in Child's Eligibility

How to enroll in your benefits

During annual open enrollment, as a new hire, or as an employee with a qualifying life event, many of your benefits can be selected online. You can elect or make changes to your Medical Plan, Vision & Dental Plan, and Voluntary Life Insurance online at https://cebt.org/online-community. Enrollment in additional voluntary benefits and the County's retirement program require paper-based enrollments and are available upon request. Enrollment forms are also available on the County's intranet Human Resources page.

We are here to help!

Contact Human Resources to help you enroll and make the benefit selections that are right for you and your family. All new hires will participate in a new hire benefits orientation on their first day of employment to learn more about the benefits and to receive enrollment support. If you need assistance getting access to the CEBT portal, or just want to learn more about your options, Human Resources is here to help you.

When are my benefits effective and who pays the cost?

Many of your benefits will begin upon your date of hire, others begin the first of the month following your date of hire. The below chart illustrates the effective date of the benefit and the who is responsible for paying the premium for the benefit. Garfield County pays the cost of many of your benefits, you will share in the costs of other benefits.

	Effective Date	Enrollment Responsibility	Cost
Benefit Plan	H = Hire date 1 st = 1 st of the month following hire date	E = Enrollment required A = Automatic enrollment	C = County paid S = Shared expense EE = Employee paid
Medical	1 st	Е	С
Medical Buy-up	1 st	Е	S
Dental	1 st	Е	С
Vision	1 st	E	С
Vision Buy-up	1 st	E	S
Life	1 st	А	С
Additional Life	1 st	Е	EE
Flexible & Dependent Care	н	Е	EE
Spending Account			
Health Savings Account	1 st	E	EE
Optional Critical Illness &	1 st	Е	EE
Accident Coverage			
CRA Retirement 401a	Н	Α	S
Deferred Compensation 457b	Н	E	EE
Short- & Long-Term Disability	1 st	А	С
Employee assistance Program (EAP)	н	А	С



Medical and Pharmacy Plans

Administered by Colorado Employer Benefit Trust (CEBT)

Garfield County offers you a choice of two PPO (PPO4 & PPO5) medical plans and a High Deductible Health Plan (HDHP3) through CEBT. Colorado Employer Benefit Trust (CEBT) is a multiple employer trust for public institutions providing employee benefits. To learn more visit www.cebt.org. The medical network for the medical plans is the UMR/United Healthcare Network. All of the medical options include coverage for prescription drug coverage through the CVS Caremark Pharmacy Benefit Network. To select the plan that best suits you (and your family), you should consider the key differences between the plans and how the plan covers services throughout the year.

Understanding how the Medical Plans work

1: Your Co-pay 3: Your coverage 4: Your Out-of-Pocket You pay a co-pay for office visits and Once your deductible is Maximum met, you and the plan When you reach your outpharmacy. **PPO Medical Plan** share the cost of covered of-pocket maximum, the 2: Your deductible medical and pharmacy plan pays 100% of covered medical and You pay out-of-pocket for other medical expenses with services until you reach your deductible coinsurance. The plan will pharmacy expenses for pay a percentage of each the rest of the plan year. eligible expense, and you Your deductible and will pay the rest. coinsurance apply toward the out-of-pocket maximum. 1: Your deductible 2: Your coverage 3: Your Out-of-Pocket You pay out-of-pocket for most medical Once your deductible is Maximum **HDHP Medical Plan with** Health Savings Account and pharmacy expenses until you reach met, you and the plan When you reach your outthe deductible. You can pay for these share the cost of covered of-pocket maximum, the expenses from your Health Savings medical and pharmacy plan pays 100% of Account (HSA). expenses with covered medical and pharmacy expenses for coinsurance. The plan will pay a percentage of each the rest of the plan year. eligible expense, and you Your deductible and will pay the rest. coinsurance apply toward the out-of-pocket maximum. All medical plans for 2023 have embedded deductibles: **Embedded Deductible** Under an embedded approach, each person only needs to meet the individual deductible and out-of-pocket maximum before the plan begins paying its share for that individual. (And, once two or more family members meet the family limits, the plan begins paying its share for all covered family members.)

Making the most out of your Medical & Pharmacy Plan

Use In-Network
Providers & preventive care is covered at 100%

Pharmacies

In-Network
Providers & preventive care is covered at 100%

Sacing Generic drugs and mail order pharmacy can save you money

Medical & Pharmacy Coverage

For full Summary of Coverage and Benefits Visit: https://cebt.org/resources/benefit-booklets In-network pricing shown below. You will receive a Medical Insurance card from UMR and Prescription Benefit card from CVS Caremark.

Medical Plan Provisions	PPO 4	PPO 5	HDHP3
Wedical Plan Provisions	In-Network	In-Network	In-Network
Company contribution to HRA/HSA (Individual/Family)	\$0	\$0	\$1,200/ \$1,200
Annual Deductible (Individual/Family)	\$1,500/ \$3,000	\$2,500/ \$5,000	\$3,000/ \$6,000
Out-of-Pocket Maximum (Includes Deductible)	\$4,000/ \$8,000	\$4,500/ \$9,000	\$5,000/ \$10,000
Preventive Care	Covered at 100%	Covered at 100%	Covered at 100%
Coinsurance	20% in network	20% in network	20% in network
Primary Care Provider Office Visit	\$40 Co-Pay	\$45 Co-Pay	Deductible +20% to OOP Max
Specialist Office Visit	\$40 Co-Pay	\$40 Co-Pay	Deductible +20% to OOP Max
X-Ray	\$40 Copay office setting Outpatient setting Deductible +20% to OOP Max	\$40 Copay office setting Outpatient setting Deductible +20% to OOP Max	Deductible +20% to OOP Max
Lab	\$40 Copay	\$45 Copay	Deductible +20% to OOP Max
Inpatient Hospital Services	Deductible +20% to OOP Max	Deductible +20% to OOP Max	Deductible +20% to OOP Max
Outpatient Hospital Services	Deductible +20% to OOP Max	Deductible +20% to OOP Max	Deductible +20% to OOP Max
Urgent Care	\$75 Copay	\$75 Copay	Deductible +20% to OOP Max
Emergency Room	Deductible +20% to OOP Max	Deductible +20% to OOP Max	Deductible +20% to OOP Max
Rx Retail	Generic \$20 Preferred \$40 non-Preferred \$60	Generic \$20 Preferred \$40 non-Preferred \$60	Deductible then: Generic \$20 Preferred \$40 non-Preferred \$60
Rx Mail Order	2x Copay	2x Copay	Deductible then: 2x Copay

NOTE: Mail order provides a 90-day supply. Retail provides a 30-day supply.

Family Deductible: Combines individual and family deductible. When a family member has a health care expense, the money paid toward the individual deductible is also credited toward the family deductible.

^{*}Embedded – Under this deductible definition, any single member of a family doesn't have to meet the full family deductible for the after-deductible benefits to kick in. Once they meet the individual deductible, plan benefits will start to pay.



Employee Contributions for Benefits

Your **total compensation** is more than just base pay. Your health benefits, retirement options, paid time off, and other county paid fringe benefits are a significant part of your total compensation package. To support our employees and their families, Garfield County is paying 100% of the premiums for employees and their dependents who enroll in the PPO5 & HDHP3 Medical Plans. Employees who require a lower out of pocket costs for medical expenses may choose the PPO4 Buy-Up option with a biweekly contribution.

The premium for the PPO4, the amount that you pay for your coverage, is deducted from your paycheck on a pre-tax basis. Premium deductions are taken 24 pay periods annually, from the first two paychecks each month.

Benefit Plan	Biweekly Contribution	
	Employee	County
PPO 4		
Employee	\$28.00	\$526.50
Employee + Spouse	\$65.00	\$1,232.50
Employee + Child(ren)	\$60.50	\$1,159.00
Family	\$72.00	\$1,369.50
PPO 5	'	1
Employee	\$0.00	\$526.50
Employee + Spouse	\$0.00	\$1,232.50
Employee + Child(ren)	\$0.00	\$1,159.00
Family	\$0.00	\$1,369.50
HDHP3	·	
Employee	\$0.00	\$487.50
Employee + Spouse	\$0.00	\$1,142.50
Employee + Child(ren)	\$0.00	\$1,074.00
Family	\$0.00	\$1,269.50

Tax Disclaimer

For federal income tax purposes for non-tax dependents, the employee's share of the medical and vision buy-up premiums related to a non-tax dependent must be deducted from an employee's pay on an after-tax basis. The difference between employee only coverage rates and the rate with the non-tax dependent is added to the employee's gross income and taxed as imputed income. Please contact your financial/tax advisor about your tax implications.

Dental Plan - CEBT Dental Plan A

Administered by Colorado Employer Benefit Trust (CEBT) through Delta Dental

Proper dental care is an investment in your overall wellness. All employees and covered dependents are automatically enrolled in the county dental plan through CEBT & Delta Dental.

In-Network and Out-of-Network PPO		
Annual Deductible	\$50 Single/ \$150 Family	
Annual Benefit Maximum (Tiers I, II, III)	\$2,000 per member	
Preventive Dental Services (cleanings, exams, x-rays, fluoride treatment) *deductible waived	Covered	
Basic Dental Services (fillings, root canal therapy, oral surgery)	20%	
Major Dental Services (extractions, crowns, inlays, onlays, bridges,dentures, repairs)	50%	
Orthodontia Services Dependent children and adults	50% (\$2,000 lifetime maximum)	

Covers children up to their 13th birthday at 100% with no deductible (for the same services outlined in the plan, up to the annual maximum, and subject to limitations and exclusions). The child must see a Delta Dental PPO or Premier provider to receive the 100% coinsurance. If an out-of-network provider is seen, the adult coinsurance levels will apply. Orthodontics, if selected as part of the group's plan, is not covered at 100% but at the plan's listed coinsurance.

NOTE: All covered employees will receive a Dental Insurance Card from Delta Dental.

Delta Dental PPO Network	Delta Dental Premier® Network	Out-of-Network
Delta Dental PPO network dentists have agreed to charge the least amount for their services. For example, a \$1200 service might be billed at \$850 (a savings of \$350). Delta Dental covers 50 percent of the cost. After the deductible, Delta Dental would pay \$425, and you would pay \$425.	Premier network dentists have agreed to charge less but not as much less as the PPO dentists. In the same \$1200 procedure, they might charge \$975 a savings of \$225. After the deductible, Delta Dental covers 50 percent of that \$975, paying \$487.50. You'll also pay \$487.50. This would be \$62.50 more than a PPO dentist, but still a good savings.	These dentists have not agreed to charge any less. In our example, if Delta Dental set a limit of \$1,100 on the procedure, they would only pay 50 percent of that amount, or \$550. You are responsible for the difference, leaving you with a bill of \$650, which includes \$100 to balance-the bill between what Delta Dental paid and what the dentist charged.

Employee Contributions for Dental Benefits

Benefit Plan	Per Paycheck Contribution	Per Paycheck Contribution		
	Employee	County		
Dental				
Employee	\$0.00	\$21.00		
Employee + Spouse	\$0.00	\$42.00		
Employee + Child(ren)	\$0.00	\$47.00		
Family	\$0.00	\$62.00		

Vision Plan - CEBT Vision Plans A & C Administered by Colorado Employer Benefit Trust (CEBT) through UMR & VSP

Eye exams can lead to the early detection of serious eye conditions including glaucoma and cataracts, as well as other health issues such as diabetes, high blood pressure and high cholesterol. Early detection is key for treatment.

Garfield County offers a choice of two vision plans: Vision A, the Base Plan through UMR, and Vision C, the Buy-up Plan through VSP. Employees and their covered dependents who are on medical insurance are enrolled in the base plan vision insurance. Employees who choose to buy up will have the premium deducted on a pretax basis. Vision insurance cards are NOT issued. Providers will look you up through your UMR Card for the Base Plan and your SSN for the VSP Buy-up.

Your coverage options

	CEBT Plan A through UMR (Base Plan)	CEBT Plan C through VSP (Buy-Up Plan)
Network	No Network	VSP
Eye Exam	Up to \$75 per calendar year	\$10 copay
Lenses	Once every two calendar years	Once every 12 months \$10 copay
Single Vision	Up to a \$75 benefit	Included
Bifocal	Up to a \$100 benefit	Included
• Progressive	Up to a \$100 benefit	Standard Included Premium up to \$105 copay
Trifocal	Up to a \$150 benefit	30% savings
Lenticular	Up to a \$125 benefit	30% savings
Frames	Once every two calendar years \$150 allowance	Once every 12 months Up to \$195 allowance
Contact Lenses	Once every two calendar years \$150 allowance	Once every 12 months \$175 allowance

Note: To take advantage of the Plan C VSP vision benefit, let your in-network provider know you have VSP coverage—they should handle the paperwork for you. You will <u>not</u> receive a card for the Vision C Plan. For more details on the specific plans, see the Summary Plan Descriptions on the CEBT website or County Intranet.

Employee Contributions for Vision Benefits

Benefit Plan	Monthly				
	Employee	County			
Vision – Base Plan					
Employee	\$0.00	\$5.00			
Employee + Spouse	\$0.00	\$10.00			
Employee + Child(ren)	\$0.00	\$11.00			
Family	\$0.00	\$14.00			
Vision – Buy-up Plan	Vision – Buy-up Plan				
Employee	\$5.00	\$5.00			
Employee + Spouse	\$4.00	\$10.00			
Employee + Child(ren)	\$2.00	\$11.00			
Family	\$9.00	\$14.00			

Life and Accidental Death & Dismemberment Insurance

Insured through The Standard/CEBT

Basic Life Insurance

Life insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump sum payment if you die while employed by Garfield County. The county provides basic term life insurance of \$50,000 at no cost to you. Employees are automatically enrolled.

As your age increases, the amount of life insurance coverage is reduced as follows: age 65/40%, age 70/65%, age 75/75%, age 80/80%.

Basic Accidental Death & Dismemberment (AD&D) Insurance

Accidental Death & Dismemberment (AD&D) insurance provides payment to you or your beneficiaries if you lose a limb or die in an accident. Garfield County provides AD&D coverage of up to \$50,000 at no cost to you (at the same level of your basic life insurance). This coverage is in addition to your county paid life insurance.

Voluntary Additional and Dependent life Insurance and AD&D Insurance Insured through The Standard/CEBT

In addition to basic life insurance, employees may elect to purchase additional life insurance coverage. Employees may buy additional life insurance from a minimum of \$10,000 up to a maximum of \$500,000 in increments of \$10,000. If purchased within 30 days of hire, employees can elect additional life insurance up to \$150,000 guaranteed issue, without providing a Medical History Statement (also called an EOI, or evidence of insurability). Completion of a Medical History Statement and physical exam are required if enrolling more than 30 days from date of hire. If employees elect any amount of additional life insurance, then they can also elect additional life coverage for a spouse in the amount of 50% of the employee coverage (up to \$30,000 is guaranteed issue), or for eligible children in the amount of \$20,000 per child.

During open enrollment, if you are currently enrolled in an amount under the guaranteed issue amount, you can increase your policy up to \$20,000 without the having to submit EOI, if you don't exceed the guaranteed issue

Additional life insurance coverage policies for employees and dependents are paid for entirely by the employee in after-tax deductions. The premium rates are based on age and tobacco use (except for the dependent children policies mentioned above). For detailed information and premium rates please refer to the CEBT Voluntary Life Booklet https://cebt.org/application/files/6116/4631/7619/New Vol Life Booklet.pdf.



Disability Insurance

Insured by VOYA

The County covers 100% of the costs of the Short-Term & Long-Term Disability Insurance programs. This important benefit can help provide income protection should you become disabled due to an injury or illness. You are automatically enrolled in these benefits, and they are effective on the first of the month after your hire date.

Short -Term Disability

Short-Term Disability provides partial wage replacement if you are unable to work due to injury or illness. After 14 consecutive calendar days of disability (called the "waiting period"), your short-term disability payments will begin. The benefit pays 60% of your weekly pre-disability earnings to a weekly maximum of \$1,500. Benefit length is determined based on diagnosis with the maximum benefit period being 26 weeks. Once Voya has determined your disability status, the County will pay the benefit amount in your paycheck.

Long-Term Disability

If you are partially or totally disabled for more than 180 days, the benefit pays 60% of your monthly pre-disability earnings up to a monthly maximum of \$6,000. The Long-Term Disability plan is insured by VOYA and benefits are paid to you directly from VOYA.

Supplemental Accident & Critical Illness Insurance

Insured through Allstate

Supplemental accident and critical illness insurance policies offer cash benefits for specific covered accidents or covered critical illness. These optional policies are offered to full time employees and are effective the first of the month following hire through Allstate. Additionally, this coverage is transferable if you change jobs. Accident and Critical Illness brochures with coverage, limitations & exclusions are available during new hire orientation, at any time on the Garfield County Intranet Human Resources pages, or upon request.

Supplemental Allstate Policies Employee Cost

Accident (GVAPS)			
Total Semi-monthly Premium			
Employee	\$8.90		
Employee + Spouse	\$15.39		
Employee + Child(ren)	\$19.33		
Family	\$24.12		

Critical Illness (GVCIP4) Basic								
Age	18-29	30-39	40-49	50-59	60-64	65+		
Semi-monthly Premiums \$10,000 Basic Benefit								
Non-Tobacco								
Employee + Child(ren)	\$1.81	\$3.71	\$7.37	\$12.90	\$17.50	\$27.09		
Family	\$3.01	\$5.90	\$11.50	\$19.94	\$26.92	\$41.46		
Tobacco								
Employee + Child(ren)	\$2.21	\$5.01	\$10.98	\$19.78	\$26.90	\$41.12		
Family	\$3.61	\$7.88	\$16.92	\$30.26	\$41.04	\$62.52		
Semi-monthly Premiums \$20,000 Basic Benefit								
Non-Tobacco								
Employee + Child(ren)	\$3.04	\$6.71	\$13.83	\$24.66	\$33.65	\$52.52		
Family	\$4.84	\$10.42	\$21.20	\$37.55	\$51.14	\$79.60		
Tobacco								
Employee + Child(ren)	\$3.83	\$9.33	\$21.06	\$38.41	\$52.48	\$80.58		
Family	\$6.02	\$14.35	\$32.03	\$58.18	\$79.38	\$121.70		



Administered by Rocky Mountain Reserve (RMR)

Pre-Tax Dollars for Medical, Dental, Vision or Dependent Care **Expenses**

With a Flexible Spending Account (FSA, LPFSA, & DCA), employees can set aside money on a pretax basis to pay for out-of-pocket medical, dental, vision, or dependent care expenses. Money will go farther as taxes are not paid on these dollars; participants in FSAs or DCAs typically save 25% to 40% in taxes. Garfield County offers flexible spending accounts through Rocky Mountain Reserve (RMR).

Use it or lose it

It's a good idea to be conservative when electing to contribute to an FSA. The IRS only allows \$610 of unclaimed funds in 2023 to carryover to 2024. Unclaimed funds not carried over are forfeited after March 31st. There is no carryover for DCA Accounts in 2023.

Types of Flexible Spending Accounts

- Health (Medical) Flexible Spending Account (FSA). Enrolling in the Health Care FSA allows you to have your entire pledge amount for the plan year available for use on qualified expenses on the day your plan starts even though your contributions towards the pledge are spread out over the Calendar year. This account is available for employees who are enrolled in a PPO plan.
- Limited Purpose Flexible Spending Account (LPFSA). Enrolling in the LPFSA allows you to have your entire pledge amount available in the same manner as the Health FSA. This account is available for employees who are enrolled in the HDHP3 plan and who are contributing to a Health Savings Account. You may rollover unused funds up to \$570 from a Health FSA to your Limited Purpose FSA to be eligible for a Health Savings Account.
- Dependent Care Account (DCA). Enrolling in a DCA allows you to contribute a portion of your paycheck towards qualified dependent care expenses. Unlike the FSA only the amount contributed year-to-date is available for reimbursement; funds grow with contributions throughout the year. Dependent care expenses reimbursed by the DCA may not be used to claim the day care credit.

Examples of Covered Expenses

- Health Flexible Spending Account (FSA), FSA dollars may be used to pay for eligible health care expenses, including medical, dental, and pharmacy.
- Limited Purpose Flexible Spending Account
- (LPFSA), LPFSA dollars may be used for vision and dental expenses only.
- Dependent Care FSA (DCA), DCA dollars may be used for day care, babysitter fees, day camps, and more. A dependent receiving care must be a child under the age of 13, or a tax dependent unable to provide for their own care, who resides

The IRS determines eligible expenses. For a more complete list of eligible expenses visit https://www.rockymountainreserve.com/whats-covered,

Debit Card, Reimbursements, & Receipts

Pay for expenses with a FSA, LPFSA, or DCA Debit Card. By using the Debit Card feature you do not have to wait for reimbursement. There are restrictions on which merchant codes are accepted. You must save all of your receipts, which should include the date of service, name of provider, dollar amount, and a description of the purchased service or product. You can also submit claims through the mobile application (search RMR Benefits in your app store) or submit claims through a web portal.

Health FSA/LPFSA Max: \$3,050

Dependent Care (unless married filing separately) Max: \$5,000 Dependent Care (if married filing separately) Max: \$2,500

Dependent Care Minimum Contribution: \$10.00



Health Savings Account (HSA)

Administered by Rocky Mountain Reserves (RMR)

A Health Savings Account (HSA) is a savings account that belongs to you that is paired with the HDHP3 medical plan. It allows you to make tax-free contributions to a savings account to pay for current and future medical expenses for you and your dependents. The participant is responsible for all HSA IRS rule compliance and eligibility.

Start it:

Contributions to the HSA are tax-free for you – whether they come from you or Garfield County. For 2023, the County will contribute \$1,200 to your HSA. This contribution is the same regardless of your enrollment tier, and is provided to help you start an HSA and begin saving money for future medical expenses.

IRS 2023 Contribution Limits:

Self only coverage: \$3,850 Family coverage: \$7,750 Age 55+: Additional \$1,000

Build & Grow it:

- All of the money in your HSA is yours (including the County contribution) even if you leave your job, change plans, or retire.
- Your HSA is an individually owned account, and you determine how much you would like to contribute per pay period, and when to use the money to pay for out-of-pocket medical expenses.
- Money in your HSA can grow over time. Money rolls over from year to year, and there is no forfeiture (use it or lose it) of your funds. Additionally, you can invest your HSA dollars once you have enough funds in your account. HSA funds may earn interest and can be invested in mutual funds. Earnings in the account are tax free.
- You can change your paycheck contribution amount monthly without a qualifying life event.

Use it:

- HSAs may be used to pay for eligible medical expenses of the participant, spouse or dependents.
- Eligible expenses include doctor's office visits, prescription drugs, eyecare, eyeglasses and over the counter items.
- Only eligible medical expenses can be reimbursed under the plan. Eligible expenses are defined by the IRS. For a more information on eligible expenses go to https://rockymountainreserve.com.

Debit Card, Reimbursements, & Receipts

Pay for expenses with an HSA Debit Card. By using the Debit Card

Must be enrolled in the County's HDHP3 health plan

HSA Eligibility

- NOT covered by any other health plan including a general health FSA. You must have a zero balance in your FSA or carryover up to \$570 into a LPFSA.
- NOT enrolled in Medicare
- Cannot be claimed as a dependent on someone else's tax return.

feature you do not have to wait for reimbursement. There are restrictions on which merchant codes are accepted. You should save all of your receipts in case of IRS audit. You can also submit claims through the mobile application (search RMR Benefits in your app store) or submit claims through a web portal

Retirement Benefits - 401a and 457b Plans

Administered by Colorado Retirement Association (CRA)

The County contracts with the Colorado Retirement Association (CRA) to manage retirement dollars. CRA is a non-profit association that is not owned or controlled by any bank, insurance company, mutual fund company, or any other financial institution. The CRA Retirement Plan (401(a)) and the CRA Deferred Compensation Plans (457(b)) are Self-Directed savings plans. You may choose how your retirement savings are invested. For more information, please see www.cra-online.org or speak with the CRA representative.

401(a) Plan

All regular full-time employees are <u>required</u> to participate in the county's retirement program. Employees initially contribute 5% of their gross earnings pretax to the 401(a)-retirement account and Garfield County matches this amount. After 10 years of service, the employee contribution and the County's matched amount increases to 6%. The County contributions are fully vested at five years of credited service.

457(b) – Deferred Compensation Plan

The Deferred Compensation Plan 457(b) is a voluntary retirement savings program offered by the County that allows employees to make additional retirement contributions on a pretax or post-tax (Roth option) basis. Contributions to a 457(b) plan are not matched by the County. The plan is designed to supplement the County's 401(a) plan and provide additional financial and retirement planning options. You may enroll, increase, or decrease your contributions to this plan at any time.



Employee Assistance Program (EAP)

Provided through TRIAD

EAPs help employees cope with critical issues. TRIAD EAP offers counseling and educational services on a wide variety of topics. The EAP is a FREE, confidential service for all County employees and eligible family members. This benefit is available 24/7/365.

Employees and covered family members have access to 6 free counseling session per incident annually. TRIAD EAP counselors can help with a wide variety of personal issues including:

- ✓ Relationship Difficulties
- ✓ Family & parenting issues
- ✓ Drug / Alcohol misuse
- √ Job-related problems
- ✓ Depression or anxiety
- ✓ Workplace conflicts
- ✓ Financial problems
- ✓ Adoption and childcare

✓ Legal problems

For more information or to schedule an appointment, call TRIAD toll free at 877-697-1100. You can also login to their website by going to www.triadeap.com (username: CEBT; password: eap).

Workers Compensation Insurance

Worker's Compensation is a state-mandated insurance program that covers lost wages and medical treatment resulting from an employee's work-related injury or illness. It also covers services needed to help an employee recover and return to work. The County pays your Workers Compensation Insurance premiums in accordance with the law. Garfield County contracts with CTSI (County Technical Services, Inc.) to provide Worker's Compensation insurance.

Social Security & Medicare

The County pays your Social Security & Medicare (FICA) taxes in accordance with the law. In 2022, the Social Security tax rate is 12.4% and the Medicare tax rate is 2.9% of gross earnings. Half of the total tax of 15.3%, or 7.65%, is paid by the county, and you as the employee are responsible for paying the other 7.65%.

Marathon Health & Wellness Centers

In partnership with CEBT

Marathon Health is a CEBT partner who offers onsite health and wellness centers for employees. Marathon Health Center provides primary care and wellness services at a waived or reduced member copay which aids in better overall health and lower health care costs for employees.



Services

Employees and their covered dependents can access health care, health coaching, wellness programming, chronic condition management, occupational health, and pharmacy services for through the CEBT/Marathon Health and Wellness Centers. If you are on a PPO plan, services provided at Marathon Health are FREE. If you are on the HDHP3 plan you will pay a \$45 dollar copay for Marathon Health Services.

Locations

There are several centers located throughout the state of Colorado and CEBT members are able to utilize any of the centers at any time. In Garfield County, we have two CEBT/Marathon Health and Wellness Centers. There is a center in Glenwood Springs in the US Bank building on Grand Avenue and a center in Rifle on the second floor of the Rib City building. There is also a center located in Gypsum.

Contact information

To schedule an appointment and learn more about what the Marathon Health Centers have to offer, call the following numbers:

- ▶ Glenwood Springs 970-440-8087 1901 Grand Avenue, Suite #200
- ▶ Rifle 970-440-8085 707 Wapiti Court, Suite #201
- Gypsum 970-431-2871 35 Lindbergh Drive, Suite #110

Other available centers are in Greeley, Colorado Springs, and Loveland. These may be helpful if you are traveling or have children in college on the front-range and need medical assistance.

eHealth Portal

The eHealth Portal has a comprehensive array of services, resources and appointment scheduling opportunities. The Marathon eHealth portal is a secure and convenient tool to help you be active in your health.

- ✓ Make Appointments
- Send messages to your providers
- Complete your health questionnaires
- ✓ Track your health status and results
- ✓ Be active in your own health and healthcare

https://my.marathon-healh.com/sign_in



Wellness Program

Garfield County is committed to helping employees and their families live healthier lives. The County provides a Wellness Program through which employees can get rewarded for activities like attending lunch and learns or other educational meetings, exercising, seeing a physician for wellness checks, and eating nutritious foods. For more details on the Wellness Program, please see the County intranet or ask your Wellness Champion.

Garfield County Gym Access

Garfield County has two gym facilities in the Rifle area and County employees have access to both gyms for free. One is at the County Airport and the other is in the basement of the Rifle County Administration building. County gyms are available to employees only. For access to the gym facilities, please complete the necessary waivers on the County intranet and send to the HR Benefits Administrator.

BenefitHub

BenefitHub is a discount program with discounts procured specifically for County employees and their families. The Garfield County BenefitHub comes preloaded with thousands of offers from brands you already buy. We have discounts on movie tickets, hotels, cell phone plans, electronics, cars, and more. Check out . . . and let your HR Benefits Administrator know if you have questions or suggestions.

Observed Holidays

The County observes specific holidays of one day or eight hours each for regular full-time employees and a pro-rated amount for part-time employees working 20 hours per week or more. Those holidays generally are:

New Year's Day

Thanksgiving Day Day after Thanksgiving Day

President's Day

Memorial Day

 Christmas Eve, or the day after Christmas Day

Independence Day

Labor Day

Christmas Day

Veteran's Day

A list of days that are designated as County holidays will be established by the Board of County Commissioners and distributed to employees annually.

Vacation Time

Regular full-time and part-time employees (20+ hours/week) currently accrue vacation time after completing continuous service as described below:

Anniversary Dates	Hours Accrued Per Pay Period	Maximum Hours Allowed at 100% Value
Hire Date	4 hours (for a 40 hours/week schedule)	160 hours
2nd Anniversary	5.54 hours (for a 40 hours/week schedule)	200 hours
5th Anniversary	6.77 hours (for a 40 hours/week schedule)	280 hours
10th Anniversary	8.61 hours (for a 40 hours/week schedule)	360 hours

NOTE: Unused time can be rolled over to the max number of hours allowed. Regular, part-time employees (20+ hours/week), or employees who are not paid their full-time rate of pay in a particular pay period, will accrue vacation time on a prorated basis.

Sick Time

Regular full-time employees accrue 3.69 hours of sick time each pay period. Part-time employees working 20 hours per week or more will accrue sick time on a prorated basis. These hours accrue indefinitely and roll over year to year. Sick time is to provide a source of income in the event of an accident, illness, or disability, if needed.

Temporary and part-time employees working less than 20 hours per week on average, will accrue 1 hour of paid sick time for every 30 hours of work time up to 48 hours.

NOTE: Regular, part-time employees working 20 hours per week or more, or employees who are not paid their full-time rate of pay in a particular pay period will accrue sick time on a prorated basis.

Contact Information

If you have specific questions about a benefit plan, please contact the administrator listed below, or your local Human Resources

department.

Benefit	Administrator	Phone	Website/Email
Medical	Colorado Employer Benefit Trust (CEBT)	800.332.1168	www.cebt.org
Flexible Spending Account	Rocky Mountain Reserve	888.722.1223	www.rockymountainreserve.com
Dental	Colorado Employer Benefit Trust (CEBT)	800.332.1168	www.cebt.org
Vision	Colorado Employer Benefit Trust	800.332.1168	www.cebt.org
Life and AD&D Insurance	Colorado Employer Benefit Trust (CEBT)	800.332.1168	www.cebt.org
Voluntary Life and AD&D Insurance	Colorado Employer Benefit Trust (CEBT)	800.332.1168	www.cebt.org
Short-Term Disability (STD)	Voya Financial	800.955.7736	www.voya.com
Long-Term Disability (LTD)	Voya Financial	800.955.7736	www.voya.com
Employee Assistance Program (EAP)	TRIAD	877.679.1100	www.triadeap.com
County Retirement Plan	Colorado Retirement Association (CRA)	800.352.0313	www.cra-online.org

Benefits Glossary

What is a premium?

The premium is the cost of maintaining your enrollment in the plan of your choice. For the County's plans, the PPO5 premium is paid entirely by the county, so there is no premium cost to the employee or the employee's family for this plan. If an employee chooses to buy-up to one of the other plans, the additional premium for those plans is the responsibility of the employee.

What are copays?

Copayments or copays are fixed amounts you are expected to pay for covered health care services such as office visits, labs, prescription drugs, and other predetermined procedures as defined by the insurance plan. Once a copay has been paid, the insurance company pays the remaining costs. All copays count toward out-of-pocket maximums; however, copays do not go toward the deductible amount.

What is a Deductible?

The deductible is the specified amount you pay out-ofpocket before your health insurance plan begins paying for their portion of medical expenses. In other words, it's what you pay before the coinsurance kicks in.

What is coinsurance?

Coinsurance is the amount that you pay for covered medical services after you've satisfied any deductible required by your health insurance plan and before you hit the max out-of-pocket. For Garfield County plans, the

coinsurance pays 80% of the charge for a service rendered by a healthcare provider (you are responsible for the remaining 20%). The coinsurance on all medical insurance plans is 80/20. If you go out-of-network, the coinsurance on all medical plans is 60/40.

What is the Maximum Out-of-Pocket?

The Max Out-of-Pocket (or Out-of-Pocket Maximum) is the highest amount of medical expenses that you would be responsible for on your own in a calendar year. This amount includes deductibles, copays, prescription drugs and coinsurance amounts. The annual caps are set for individuals and for a family. The amounts differ for in and out of network expenses and heavily favor in-network care. Once the out-of-pocket maximum is met, the insurance covers additional costs at 100%.

What is Reasonable and Customary (R&C)?

Reasonable and Customary (R&C or Customary, Usual and Reasonable) is the maximum allowable fee as determined by the plan. The maximum allowable fee is set by comparing the service to a national database of fees. The database is adjusted to the locality where the service was performed. Benefits are payable up to any plan maximums on a customary, usual and reasonable basis. If a provider charges more than R&C, the insurance covers up to the customary amount and the employee is responsible for the amount over that set point.

Notes