Non-Union Benefits Guide 2021

Introduction

The City of Boulder recognizes the importance of providing an encompassing benefits program to our eligible employees. These benefits help provide you and your family members opportunities to maintain your health and welfare. We encourage you to evaluate and select benefits that best suit the needs of you and your eligible dependents.

This Benefit Guide provides you with:

- A description of the benefit options
- Rules on eligibility and Qualified Life Events
- Important phone numbers and websites to help you manage your 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 Boulder Human Resources Benefits page.

For Assistance

- **Call the Benefits Call Center at 1-877-282-0808 or visit online at Benefits.BoulderColorado.gov**
- **HUB Advocacy** – If you or your covered dependents need assistance with escalated claims issues or questions around any of the plans mentioned in this guide, please reach out to our Insurance Broker, HUB International.

  Phone: 888-795-0300

  Email: **boulderadvocacy@hubinternational.com**
- **Prescriptions** – The prescription drug program will continue to be provided by Cigna.

  Phone: 888-806-5042

  Web: **www.mycigna.com**

  For a full Cigna drug list, visit **benefits.bouldercolorado.gov**
- **Employee Assistance Program** – As a reminder, you and your family are eligible for free services through Magellan EAP. Magellan can help with managing stress, finding child or adult care, work through grief issues and much more. More details on this program can be found on page 27.

Annual Open Enrollment for 2021 Benefits:
October 2020

Benefits Website: benefits.bouldercolorado.gov
Phone: 303-441-3070
Benefits Email: hrbenefitsforms@bouldercolorado.gov

"Active Enrollment"

- **If you do not elect any benefits during your initial enrollment, your next opportunity will be Open Enrollment in October.**
- **During Open Enrollment, you must enroll in and/or decline all coverage for the coming year. The effective date of the benefits you enroll into is January 1st of the following year.**

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Eligibility

Employees in a standard position that work 20 hours or more per week are eligible for all city benefits listed in this guide.

- Full-Time Hours: 30 – 40 hours per week
- Part-Time Hours: 20 – 29 hours per week

Temporary employees and any employee who works an average of 30 or more hours per week during the measurement period (variable full-time) are eligible for medical, HSA, 401k, 457, all voluntary supplemental benefits, and all wellness benefits listed in this guide.

Temporary employees may also be eligible to:

- Attend CPR/AED classes for free, participate in City sponsored Well-Being Challenges and events and attend the annual October Well-Being Fair
- Non-Parks and Recreation Seasonal employees can purchase a recreation annual pass or punch card at a 25% discount
- Part-Time Interns and Temporary employees for Parks and Recreation may be eligible for a $15.00 pass.

For more information, please refer to page 20 in this guide.

Enrollment

For newly hired employees and for employees making changes due to qualifying life event, benefit enrollment must be completed by calling the benefits call center at 1-877-282-0808 within 31 days from your date of hire.

For existing employees making elections during open enrollment, login to **benefits.bouldercolorado.gov** to complete your enrollment.

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) (affidavit is required)
- Your common-law spouse if you live in a state that recognizes such marriages (affidavit is required)
- Colorado Civil Union partner
- Your children, stepchildren, and/or adopted children from birth to age 26
- Your adult child who depends solely on you for support because of a mental or physical handicap (documentation may be required)

When Do My Benefits Begin?

With the exception of Aflac, benefits offered to City of Boulder employees within this guide are effective on the 1st of the month following your date of hire. Aflac coverage is effective on the 1st of the month following completion of your application for coverage.

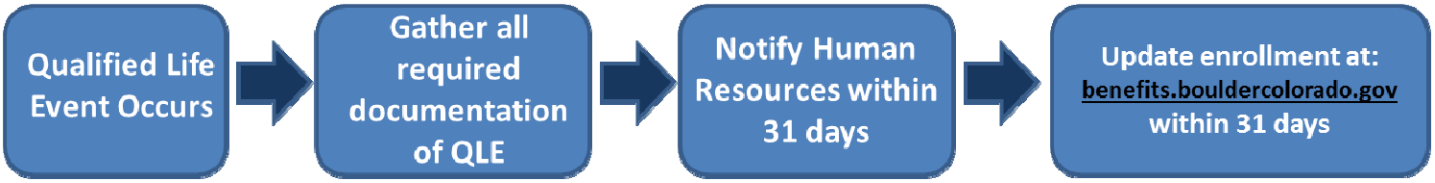
Qualified Life Event

Must be made within 31 days of the event

Due to IRS regulations, you can not change your benefit until the next Open Enrollment, unless you have a Qualified Life Event (QLE). You have 31 days to notify Human Resource Benefits personnel and update the enrollment online at **benefits.bouldercolorado.gov** if one of the below QLE's occur:

- Marriage or divorce
- Birth or death of dependent
- Adoption
- Loss of eligibility for insurance
- Change in residence that affects eligibility
- Change in spouse's/partner's employment or termination of employment
- Unpaid leave of absence of employee or spouse or partner
- Change in the cost or coverage of your spouse's/partner's benefits
- Reduction or increase in hours worked
- Change in the cost of dependent care

To make changes to your benefit elections, you must contact Human Resources within 31 days of the qualified life event (including newborns). Be prepared to provide documentation of the event such as a marriage license, birth certificate or a divorce decree. **If changes are not submitted on time, you must wait until the next Open Enrollment period to make election changes.**



Benefits Taxation

Internal Revenue Service (IRS) rules allow employees to use pre-tax dollars to pay for eligible benefit plans. The City of Boulder automatically processes medical, dental and vision premiums on a pre-tax basis for you. Pre-tax premiums are deducted from your paycheck prior to the calculation and deduction of taxes, resulting in a reduced taxable income. For more information on regulations, contact the IRS or visit **http://www.irs.gov/**.

Employees who were PERA members prior to 7/1/19 who are trying to **maximize their PERA pension contributions and are within 4 years of a PERA retirement** may want to have their benefits deducted on a post-tax basis. Please contact Human Resources benefits staff for the appropriate paperwork for **post-tax benefits**.

Employees who were not PERA members prior to 7/1/19 may still elect to post-tax eligible plans, however this will not impact your PERA contributions.

Benefit taxation can only be changed from pre-tax to post-tax at initial election or during Open Enrollment; it cannot be changed mid-year.

Domestic Partner Imputed Income

The IRS requires employers to report and withhold taxes on the fair market value (FMV) of a domestic partner's health coverage to the extent the coverage is paid for by the employer. Following IRS regulations, the difference in the total monthly premium for domestic partnership coverage is taxable to the employee, and the employer portion of the premium will be reflected on the employee's W-2. This is referred to as Imputed Income.

A Domestic or Civil Union Partner affidavit can be requested from Human Resources. Please consult a tax advisor regarding details of the tax implications of adding a Domestic or Civil Union Partner.

Example: How To Calculate Imputed Income Tax

- $150 monthly premium for Employee Only Health Plan
- $250 monthly premium for Employee +1 Health Plan, with coverage for a Domestic Partner
- $250 - $150 = $100 difference between health plans
- Employee will pay taxes on the $100 difference

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: **www.connectforhealthco.com**

2021 Medical OAP (Open Access Plus) Premium Contributions								
	Coverage	Total Monthly Premium	Monthly City Cost	Monthly Employee Cost	PP Employee Cost	Wellness Credit***	HSA Incentive**	Final Monthly Employee Cost
*Full-Time Employees: Benefits eligible employees that work 30-40 hours per week								
HDHP / HSA	Employee:	$517.39	$413.91	$103.48	$51.74	$30	$500	$73.48
	Two Person:	$1,114.30	$891.44	$222.86	$111.43	$30	$1,000	$192.86
	Family:	$1,556.24	$1244.99	$311.25	$155.63	$30	$1,000	$281.25
OAP PPO	Employee:	$612.93	$490.34	$122.59	$61.30	$30	N/A	$92.59
	Two Person:	$1320.06	$1056.05	$264.01	$132.01	$30	N/A	$234.01
	Family:	$1843.62	$1474.9	$368.72	$184.36	$30	N/A	$338.72
Part-Time Employees: Benefits eligible employees that work 20-29 hours per week								
HDHP / HSA	Employee:	$517.39	$206.96	$310.43	$155.22	$30	$500	$280.43
	Two Person:	$1,114.30	$445.72	$668.58	$334.29	$30	$1,000	$638.58
	Family:	$1,556.24	$622.50	$933.74	$466.87	$30	$1,000	$903.74
OAP PPO	Employee:	$612.93	$245.17	$367.76	$183.88	$30	N/A	$337.76
	Two Person:	$1320.06	$528.02	$792.04	$396.02	$30	N/A	$762.04
	Family:	$1843.62	$737.45	$1,106.17	$553.09	$30	N/A	$1,076.17

*Full-Time Premiums:

Employees that work an average of 30 or more hours per week over the measurement period qualify for full-time premium rates .

**HSA Incentive:

Employees who enroll in the HDHP / HSA-Eligible plan for 2021 are eligible for a contribution into their Health Savings Account (HSA) by the City. In order to receive the incentive of $500 for Employee-only coverage or $1,000 for Employee plus One or Family coverage, you must be eligible to open an HSA and are required to provide proof of an open, active HSA account.

***Wellness Premium Credit:

Employees are eligible for a Wellness Credit if they complete a Health Screening, either onsite, through their physician, or at a Quest Diagnostic facility with screening results submitted by 11/1/20. The incentive amount is a $30 credit per month. Employees who do not enroll in City healthcare coverage are not eligible for a premium discount. More information about this credit can be found on page 18.

2021 Dental Premium Contributions

	Coverage	Total Monthly Premium	Monthly City Cost	Monthly Employee Cost	PP Employee Cost
Full-Time Employees					
Low PPO Plan	**Employee:**	$25.38	$20.30	$5.08	$2.54
	Two Person:	$50.77	$40.63	$10.14	$5.07
	Family:	$87.14	$69.72	$17.42	$8.71
High PPO Plan	**Employee:**	$43.18	$34.54	$8.64	$4.32
	Two Person:	$87.42	$69.94	$17.48	$8.74
	Family:	$149.57	$119.67	$29.90	$14.95
Part-Time Employees					
Low PPO Plan	**Employee:**	$25.38	$10.14	$15.24	$7.61
	Two Person:	$50.77	$20.31	$30.46	$15.23
	Family:	$87.14	$34.86	$52.28	$26.14
High PPO Plan	**Employee:**	$43.18	$17.26	$25.92	$12.95
	Two Person:	$87.42	$34.96	$52.46	$26.23
	Family:	$149.57	$59.83	$89.74	$44.87

2021 Vision Premium Contributions

	Coverage	Total Monthly Premium	Monthly City Cost	Monthly Employee Cost	PP Employee Cost
All Employees					
Base Plan	**Employee:**	$8.14	$0.00	**$8.14**	**$4.07**
	Two Person:	$11.58	$0.00	**$11.58**	**$5.79**
	Family:	$20.78	$0.00	**$20.78**	**$10.39**
Buy-Up Plan	**Employee:**	$17.16	$0.00	**$17.16**	**$8.58**
	Two Person:	$24.44	$0.00	**$24.44**	**$12.22**
	Family:	$43.84	$0.00	**$43.84**	**$21.92**

Benefit Terms

The 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.

EMBEDDED DEDUCTIBLE

There are individual deductibles in addition to an overall family deductible. If a member reaches their individual deductible before the family deductible is reached, his or her services will be paid out by the insurance carrier.

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.

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.

NON-EMBEDDED DEDUCTIBLE

There is no individual deductible. This means that the overall family deductible must be reached, either by an individual or by the family, in order for the insurance carrier to begin paying benefits.

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.

Cigna Medical Benefits

The City of Boulder provides two medical plan options through Cigna, utilizing the Open Access Plus Network. Both plans are Open Access Plus plans. This means that you have the flexibility to choose your provider and you are offered both in and out-of-network benefits. However, you will see the greatest discount and have the highest out-of-pocket savings if you receive services within the Open Access Plus network.

Transition-related health care benefits are covered, including gender confirmation surgery, hormone therapy, and mental health counseling, among other transition-related procedures, as it relates to treating gender dysphoria according to the World Professional Association for Transgender Health Standards of Care (2011).

Register through the Cigna website at **www.mycigna.com** to get access to your ID cards, claim details and to find an in-network doctor or hospital.

The following tables summarize the benefits of each medical plan. For a comprehensive description of a plan, view the Summary Plan Description (SPD) located on the City of Boulder Benefits website.

Cigna Medical Plans *Open Access Plus Network*	OAP PPO Plan		HDHP/HSA Plan	
NETWORK:	**In Network**	**Out-of-Network**	**In Network**	**Out-of-Network**
Calendar Year Deductible	$1,250 Individual $2,500 Family	$2,500 Individual $5,000 Family	$2,000 Individual $4,000 Family	$4,000 Individual $8,000 Family
Deductible Basis	Each covered individual is subject to individual deductible limit		Full family deductible must be met before any individual coinsurance applies	
Coinsurance Split (after deductible - Plan Pays/You Pay)	80% / 20%	60% / 40%	80% / 20%	60% / 40%
Calendar Year Out-of-Pocket Max	$4,500 Individual $9,000 Family	$10,000 Individual $20,000 Family	$5,000 Individual $10,000 Family	$10,000 Individual $20,000 Family
Out-of-Pocket Basis	Each covered individual is subject to individual out-of-pocket limit		Full family out-of-pocket must be met for anyone covering dependents	
Physician Office Visit	$25 Copay/$50 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Preventive Visit	100% Covered	40% Coinsurance	100% Covered	40% Coinsurance
Inpatient Hospital	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Emergency Room	20% Coinsurance		20% Coinsurance	
Urgent Care	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Ambulance	20% Coinsurance		20% Coinsurance	
X-Ray	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Laboratory	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Maternity	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Outpatient Physical Therapy	$25 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Speech, Hearing, and Occupational Therapy	$25 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Durable medical equipment	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Home health care	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Hospice	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Skilled nursing	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Hearing aids (testing & fitting)	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Chiropractic care (20 Days)	$25 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Mental health/substance (inpatient)	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Mental health/substance (outpatient)	$25 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Prescription Drugs Administered by Cigna				
Generic Brand/Tier 1	$15 Copay	Not Covered	20% Coinsurance	Not Covered
Formulary Brand/Tier 2	$45 Copay		20% Coinsurance	
Non-Formulary Brand/Tier 3	$60 Copay		20% Coinsurance	
Mail Order (90 day supply)	$37 / $112 / $150		20% Coinsurance	
Preventive Maintenance Medication	$0		$0	

Health Savings Account (HSA)

Health Savings Accounts (HSA's) allow employees to set aside pre-tax money from their paychecks to pay for eligible out-of-pocket expenses for healthcare. By setting funds aside pre-tax into an HSA, you are better prepared if you do have medical expenses now, but are also able to roll these funds over for use in the future. HSA's are portable, allowing you to take them with you if you retire or change a job. Ideally, a Health Savings Account is a savings vessel for your retirement.

Eligibility

- You must be enrolled in the City's High Deductible Health Plan (HDHP)
- You cannot have any other first-dollar coverage
  - Military, Medicare, or Tricare coverage
  - A spouse's or parent's PPO plan
- You cannot be claimed as a dependent on someone else's tax return

Contributions

Per IRS regulations, the maximum amount you can contribute for 2021 is as follows:

- $3,600 if you are enrolled in Employee Only (Single) coverage
- $7,200 if you are enrolled in Family (Two Person, Family) coverage
- Catch-up: Employees who turn 55 during the plan year may contribute an additional $1,000 per year until enrollment into Medicare

City of Boulder Contribution

The City of Boulder will also contribute funds into your Health Savings Account. Initial deposits from the City will be made after the first pay period in which you have met all the requirements listed in this section. Please note, if you and a spouse are both employed by the City, you are only eligible for an HSA contribution from the City up to $1,000 annually or prorated if applicable.

Contribution Schedule

Health Savings Account contributions will be made monthly throughout the plan year. Once your medical coverage begins and your HSA account has been opened and verified, you will begin receiving monthly employer HSA contributions.

- Employee Only (Single) Coverage: up to $500 deposit per year
- Family Coverage (Two Person, Family): up to $1,000 deposit per year

To receive the City contribution you must:

- Be enrolled in the City's High Deductible Health Plan
- Open and maintain an HSA account with a financial institution of your choice
- If you are enrolling into the HSA for the first time in 2021, you must spend all your 2020 Healthcare Flexible Spending dollars by December 19, 2020 in order to receive the City's HSA incentive contribution in the first pay period of 2021. If you intend to use the FSA grace period, your 2020 Healthcare FSA dollars must be spent by March 15, 2021.

Examples of Eligible Expenses

- Doctor's visits
- Prescriptions
- Dental Treatments
- Physical therapy
- Eyeglasses, contact lenses and exams

You can find a complete list of eligible expenses at: **https://www.irs.gov/pub/irs-pdf/p502.pdf**

Banking

You may open an HSA at the financial institution of your choice. The City will administer pre-tax contributions via payroll deductions once you have confirmed you have an open and eligible Health Savings Account with Human Resources. The following information is required:

- Account Routing Number
- Account Number
- Name, Address and Phone number of the financial institution
- Confirmation of whether the account is a checking or savings account

NOTE: Failure to provide all requested information will cause delays in the receipt of the City's contribution to your HSA.

For more information refer to the HSA Guide found on Boulder@Work

Employees who are trying to maximize their PERA pension contributions and are within 4 years of a PERA retirement need not be concerned with having an HSA. It has no impact on your pensionable wages.

24HourFlex Flexible Spending Accounts (FSA)

Flexible Spending Accounts (FSA's) 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.

Healthcare Flexible Spending Account

Contribute up to $2,750 per employee (per calendar year) for reimbursement of health-related expenses you may need to pay for out-of-pocket. Expenses can be incurred from January 1, 2021 to March 15, 2022 as long as you are an active participant in the plan. You have access to your full plan year election amount of Health Care FSA funds immediately. This plan is use it or lose it. Any funds not used in the plan year will be forfeited. There is a grace period to submit for reimbursement through March 31, 2022.

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: **https://www.irs.gov/pub/irs-pdf/p969.pdf**

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, 2021 to December 31, 2021, 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)*

***Must provide a SSN or TaxID**

You can find a complete list of eligible expenses at: **https://www.irs.gov/pub/irs-pdf/p969.pdf**

Debit Card

All new members will receive a debit card from 24HourFlex in the mail. Take note, this card will arrive in an unmarked envelope. If you are enrolled in both the Healthcare and Dependent Care FSA you will only receive one debit card. The card can only be used to pay for Healthcare FSA expenses. You will use your debit card for the life of your Flexible Spending Account. If you throw your debit card away you will need to contact 24HourFlex at 800-837-4817 to be issued a new card.

Managing Flexible Spending Account Claims

You will be required to have an email address on file with 24HourFlex so they can communicate with you when they need to verify a claim (receipt or invoice). Your City email address will be provided to 24HourFlex for this purpose. You can change your preferred email online at **www.24HourFlex.com**.

If a claim has been unverified for 90 days, your debit card will be suspended. Within 48 hours after your claim verification has been submitted and approved, card privileges will be reinstated.

How to be reimbursed during the grace period:

You can use your plan year funds and be reimbursed for services rendered through March 15th of the following plan year (the grace period), claims must be submitted by March 31st to be considered for reimbursement. However, you CANNOT use your current plan year funds to pay for any services rendered in the previous year.

24HourFlex Mobile Application

The 24HourFlex benefits secure mobile app makes it easy to manage your FSA accounts on the go.

- Free app is available for any Apple or Android smartphone or tablet
- Gain instant access by using the same username and password created on your online account
- View balances and transaction history
- Attach receipts by taking a photo

Employees trying to maximize their PERA pension contributions and are within 4 years of a PERA retirement may not want to participate in a Flexible Spending Account, as it will reduce your pensionable wages. Please contact the Human Resources Benefits staff for more information.

TeleHealth

The City of Boulder has selected MDLive to provide you with 24/7/365 access to board-certified primary care doctors and pediatricians by secure video, phone or e-mail if you are enrolled in one of the City's medical plans. MDLive is easy and convenient to use. If you are enrolled in the OAP PPO Plan you will only pay your copay. If you are enrolled in the HDHP/HSA Plan, you will pay a consult fee.

When to use MDLive?

If you are considering going to the Emergency Room or Urgent Care for a non-emergency medical issue because your primary care doctor is unavailable, if you have sick kids at home, are traveling or are at work and cannot make it to the doctors office, MDLive is very useful.

What can be treated through MDLive?

- Allergies
- Asthma
- Bronchitis
- Colds and Flu
- Ear infections
- Sinus/Respiratory infections
- Joint Aches and Pains
- More

How to use MDLive?

Signing Up is Easy! Set up and create an account at www.MDLive.com/cob or by calling 888-726-3171

- Enter your name, gender, date of birth and your Cigna ID (from your ID card)
- Complete your medical history using the MDLive "virtual clipboard"
- Download the MDLive app to your smartphone/mobile device

Behavioral Health

If you are enrolled in one of the City's medical plans you can participate in additional behavioral telehealth services. Learn more online at: https://work.bouldercolorado.gov/wellbeing/behavioral-health.

Dispatch Health

DispatchHealth is an in-network provider for Cigna customers and offers on demand healthcare in the convenience and comfort of your own home.

What can you use DispatchHealth for?

- Cough/cold/sore throat/fever
- Diarrhea
- Headaches
- Rashes
- Pinkeye
- Lacerations, sprains
- Asthma and more

A team of EMT's and a Nurse Practitioner will be dispatched to your location and they are virtually supervised by a doctor. They will triage your situation and can also administer IV fluids, test for infectious diseases and order lab work.

How to use it?

DispatchHealth is available 7 days a week from 8am to 10pm. Download the DispatchHealth app on your mobile device, or reach Dispatch by phone at 303-500-1518. You can also request services online at **www.dispatchhealth.com**.

How much does it cost?

If you are on the OAP Copay Plan, the cost is the equivalent to your Urgent Care copay. If you are on one of the High Deductible Health Plans, you will pay the full cost of services until you reach your deductible. This cost is typically between $150 and $300, depending on the services you need.

Well-Being@Work

The City of Boulder cares about you and your overall health. With Well-Being@Work, you can take advantage of a wide-range platform of benefits and wellness initiatives to help you maintain or achieve your optimal health.

Since the introduction of our enhanced program in 2009, our aggregate health screening data reflects the great strides in improving employees overall health. Good health is vital to the success of our organization and we encourage you to take advantage of all the programs and benefits Well-Being@Work has to offer!

Visit Well-Being@Work online for more information: **https://work.bouldercolorado.gov/wellbeing**

Well-Being Perk

All benefits eligible employees can earn up to $150 in Visa Debit Cards each year by participating in City-wide wellness programs, meeting and achieving personal health goals, and more.

How?

- Earn incentives by completing Well-Being@Work challenges and programs via the Wellness Portal at **https://mywell.site/active/CityofBoulder**.
- Visit **www.mycigna.com** to enroll or sign-in, click on the "Wellness" tab, then click on "incentive awards" to view award options.

When?

- All goals (except for preventive screening goals) must be earned between 1/1/21 - 12/31/21 to receive the Visa Debit Card
- Preventive exam goals must be completed with Cigna and submitted to MyCigna.com by 11/1/21
- Click the "Redeem Your Dollars" link on the "incentive awards" page at MyCigna.com. Complete the required information to receive your Visa Debit Card.

Well-Being@Work Premium Credit

You are eligible to receive a premium credit if you are an existing employee during Open Enrollment or a new hire with the City.

The premium credit is:

- $30 credit per month ($360 per year) if you are enrolled in the OAP PPO or HDHP HSA medical plans.

You can receive the healthcare premium credit if you:

- Are enrolled in a medical plan through the City of Boulder
- Complete a the Health Risk Assessment on MyCigna.com and complete a Health Screening with your results being submitted to Cigna no later than 11/1 of that year.
- New employees need to only complete the Health Assessment on **MyCigna.com** to receive the premium credit

Fitness

Well-Being@Work offers many ways to help you increase your physical activity level.

- **Free Recreation Pass**
  - You are eligible to receive a taxable recreation pass (a $552 value) if you are an existing employee, or a new employee who was hired after 10/26/19 and complete the required eligibility steps. The value of the of the recreation center pass is taxable, approximately $16.40 a year, depending on your tax bracket.
  - You also have the option to purchase recreation center passes for your immediate family members at a discounted fee of $100 per family member. Family member passes are not taxed on your paycheck and will be prorated if needed.

- **One Free Rec Class** is available to employees (must be a Well-Being@Work Rec Pass holder). Additional classes can be taken once per quarter with a 10% discount.
  - Choose a class listed in the Parks and Recreation Guide
    - To view all the classes go to **www.BPRfitness.org**
    - Register THREE days prior to the class start date, in person, at any recreation center or over the phone at 303-413-7270
    - **Exclusions include:** Contractual programs (tennis, dance, pottery), special interest (drama, art, guitar classes), competitive programs (teams/leagues) and private/semiprivate lessons

- **One Free Consultation** with a dietitian, personal trainer, physical therapist, or health coach every year (Must be a Well-Being@Work Rec Pass holder)
  - Contact the recreation department to schedule your session with your specialist
  - Go to **www.BPRfitness.org** to select your preferred specialist
- **Other Perks**
  - Visit **www.BoulderParks-Rec.org** or the **Wellness Portal** for more information on pool schedule, classes, and much more
  - Free onsite fitness classes at various locations across the City, visit **https://mywell.site/archieve/CityofBoulder** to find a full schedule
  - Summer Camp discounts available to all benefits-eligible employees and their child(ren)

Well-Being Challenges

Participate in City-wide Well-Being@Work challenges, programs, events, screenings and more and earn additional prizes. View all upcoming events, challenges and programs by visiting **https://mywell.site/active/CityofBoulder**.

Classes

Well-Being@Work offers additional opportunities to expand your knowledge through certification classes.

- **Free CPR/AED/First Aid certification classes** offered through Risk Management and Parks and Recreation for all employees including part-time employees once per year.
  - Classes offered by Risk Management can be found on Boulder@Work: click on “employee tools”, then ”training and development”, then “safety training”.
  - Classes offered by Parks and Recreation can be found under fitness classes on the Parks and Recreation web page, **www.BPRfitness.org**: Under the “Classes” heading, click on “online registration” then “register for programs”. From the dropdown list chose “fitness” and click on “First Aid/CPR” to see available dates and times.
- **Wellbeing-Wednesday Classes**
  - Financial Education Classes
  - Stress Management Classes
  - Worksite Wellness Classes
  - Onsite classes, seminars, and special events
  - Register for classes at **https://mywell.site/active/CityofBoulder**

Discounts

The City offers money-saving opportunities for you to buy products and services you use every day at discounted prices.

- Visit Boulder@Work and search employee discounts

Wellness Perks for employees who did not enroll in Well-Being@Work

If you did not enroll into the Well-Being@Work program or if you are a part-time employee or intern you are still eligible for the following perks provided by the City of Boulder:

- Part-time temporary employees and interns can attend CPR/AED classes offered by Risk Management and Parks and Recreation at no cost.
- All employees can participate in City sponsored Well-Being@Work challenges, workshops and events.
- Non-Parks and Recreation part-time employees can receive a 25% discount on a recreation annual pass or punch card from the main administration office at 3198 Broadway next to the North Recreation Center. The request form can be found on the Well-Being website.
- Part-time temporary employees and interns of the Department of Parks and Recreation that work one scheduled shift per week are eligible for a 4-month, $15.00 recreation center pass.
- Part-time employees can purchase the Chamber annual pass or punch cards and receive the Chamber discount of 10%. The discount is applied to the participants’ regular fee based on their address and residency. These can be purchased at any recreation center. If you have a family, the family pass sold through Parks and Recreation is the most economical option.

Magellan Healthcare Employee Assistance Program (EAP)

Paid for by the City of Boulder

No matter where you are on your journey, there are times when a little help can go a long way. An Employee Assistance Program offers you and your family members assistance with anything from checking off daily tasks to working on more complex issues.

Key Features

- Provided at no cost to you and your family members
- Includes up to 6 counseling sessions per issue, per year
- Confidential service provided by a third party
- Available 24/7/365

Well-Being Services

- Coaching: When you have a goal to achieve, coaches help you create a plan of action and stay on track.
- Counseling: For more difficult issues like grief or stress, counselors can provide support tailored to your unique situation.
- Web-based care: Online, interactive programs help improve your emotional well-being for issues like depression and anxiety.

Wellness Program

Want to eat better, move more, be happier? Use this program to bring healthy habits into your busy life. Get help from health coaches and motivation from peers. Browse the content library, set daily goals, track your progress and have fun getting fit.

Legal Assistance & Financial Coaching

Expert consultation to help you with your legal and financial needs. Free 60-minute sessions with legal and financial experts and an online library with resources for identity theft, budgeting, debt management, family law, estate planning and other areas of concern.

How To Get Started

Getting the help you need, when you need it, can result in you leading a happier, more productive life.

- Give Magellan Healthcare a call at the number provided below and they will connect you with the right resource or professional
- Learn more about all the services available at: **www.MagellanHealth.com/member**

Employee Assistance Program
Call 800-523-5668
For TTY (hearing and speech impaired) Users: 800-456-4006

Supplemental Insurance Plans

These plans can be elected at the time of hire or during open enrollment.

Aflac Critical Illness Insurance

Critical Illness insurance can help you and your family prepare for the financial stress that a critical illness can cause. Provided through Aflac, Critical Illness Insurance is designed to help offset costs associated with the initial occurrence of a heart attack, stroke, cancer or other serious illness as outlined in the policy.

If you experience one of the illnesses covered in the policy, you will receive a payout, equal to the amount you elect multiplied by the applicable percentage as outlined in the Schedule of Benefits, that can be used to pay for whatever you may need. These funds can help your family to cover medical bills, mortgage, or even savings for the future. Critical Illness Insurance is not medical insurance, but is meant to help offset any costs from experiencing a serious illness. If you choose to elect into this plan, your premium will be paid through convenient payroll deductions on a pre-tax or post-tax basis. Your cost is based on your tier of enrollment, your elected amount of coverage and your age. To view rates, please visit the City of Boulder Benefit website. This plan is completely portable, meaning you can take it with you if you retire or change careers.

Health Screening Benefit (Employee and Spouse Only): Aflac will pay a $50 benefit once per calendar year for health screening tests performed as the result of preventive care, including tests and diagnostic procedures ordered in connection with routine examinations.

Eligibility

You, your spouse and your eligible children from birth through age 26 can be covered by the Critical Illness benefit.
For additional details on Critical Illness, visit the Supplemental Benefits section of the City of Boulder Benefit website, **https://bouldercolorado.gov/human-resources/benefits-guide**.

Aflac Accident Insurance

Similar to the Critical Illness benefit, Accident Insurance can help prepare you and your family for the financial hardship that can be encountered when you experience an accident. Accident Insurance will pay out, directly to you, money based on a Schedule of Benefits. Whether you experience an accident at home or at work, this benefit allows you to receive funds to help pay for medical bills, replace income while you may be away from work, or help cover the mortgage or energy bill. Accident Insurance is not medical insurance, but is meant to help offset any costs associated with an accident. If you choose to elect into this plan, your premium will be paid through convenient payroll deductions on a pre-tax or post-tax basis. This plan is completely portable, meaning you can take it with you if you retire or change careers.

Health Screening Benefit (Employee, Spouse and Child(ren)): Aflac will pay a $50 benefit once per calendar year for health screening tests performed as the result of preventive care, including tests and diagnostic procedures ordered in connection with routine examinations.

Eligibility

You, your spouse and eligible children up to age 26 can be covered by the Accident Insurance benefit.
To view the Schedule of Benefit and learn more about this program, visit the Supplemental Benefits section of the City of Boulder website, **https://bouldercolorado.gov/human-resources/benefits-guide**.

Semi-Monthly Cost	
Employee	**$7.23**
Employee plus Spouse	**$10.60**
Employee plus Child(ren)	**$12.56**
Family	**$15.93**

Aflac Hospital Indemnity Insurance

If you are in the hospital due to an illness or accident, you and your family can experience financial hardship due to you being out of work. Aflac Hospital Indemnity plan benefits include, Hospital Confinement, Hospital Admission, Hospital Intensive Care and Intermediate Intensive Care Step-Down Unit. This benefit is paid directly to you so you can choose how you would like to use those funds. The Hospital Indemnity benefit can help with copays, deductible, or and other costs you may have like your car payment or rent. Hospital Indemnity Insurance is meant to help offset any costs associated with a hospital stay. If you elect this plan, premium will be paid through convenient payroll deductions on a post-tax basis. This plan is completely portable, meaning you can take it with you if you retire or change careers.

Health Screening Benefit (Employee, Spouse and Child(ren): Aflac will pay a $50 benefit once per calendar year for health screening tests performed as the result of preventive care, including tests and diagnostic procedures ordered in connection with routine examinations.

Eligibility

You, your spouse and your eligible children up to age 26 can be covered by the Hospital Indemnity benefit.

To view the Schedule of Benefit and learn more about this program, visit the Supplemental Benefits section of the City of Boulder website, **https://bouldercolorado.gov/human-resources/benefits-guide**.

Semi-Monthly Cost	
Employee	**$5.38**
Employee plus Spouse	**$10.77**
Employee plus Child(ren)	**$8.67**
Family	**$14.06**

IDShield

City of Boulder employees have the opportunity to purchase identity theft protection through IDShield. The coverage will be provided through payroll deductions at monthly rates of **$6.96** for single and **$12.95** for family.

- ***Monitor More of What Matters:*** IDShield will monitor your identity from every angle, not just your Social Security number, credit cards and bank accounts. If any change in your status occurs, you receive an email update immediately.
- ***Counsel When You Need It:*** IDShield identity specialists are focused on protecting you. They are available 24 hours a day, every day, to provide you with a complete picture of identity theft, walk you through the steps you can take to protect yourself and answer any questions.
- ***Restore Your Identity Completely:*** If a compromise occurs, contact your Licensed Private Investigator who will immediately begin restoring your identity to exactly the way it was prior to the theft.

LegalShield

LegalShield provides legal advice and representation in the event you have need of an attorney. Services include: Name Changes, Bankruptcy, Affidavits, Foreclosure, Landlord/Tenant Issues, Driver's License Restoration, Traffic Ticket Violations, Living Wills, Power of Attorney, and much more. Members can get ahold of attorneys 24/7 by web, phone or app. For more information, please visit **benefits.legalshield.com/cob**.

All benefits are available to you and your dependents for **$15.75** a month.

If you elect both IDShield and LegalShield benefits, you are eligible for a discounted bundle rate of **$21.70** a month for individual coverage, or **$26.80** a month for family coverage.

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 considered in-network 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 and Non-Network providers percentage of benefits are lower and will be paid at the Maximum Plan Allowance (reasonable and customary). You may have additional out-of-pocket costs by using a non-network provider.

To find a provider visit **www.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 the City of Boulder Benefits website.

Delta Dental Benefits

Delta PPO plus Delta Premier Network

	Low Plan		High Plan	
NETWORK:	**PPO Provider**	**Premier or Non-Network Provider**	**PPO Provider**	**Premier or Non-Network Provider**
Calendar Year Deductible:	$50/Individual $150/Family	$50/Individual $150/Family	$50/Individual $150/Family	
Calendar Year Maximum Benefit:	$1,000 Per Individual		$2,000 per individual	
Diagnostic/Preventive Care: (X-ray/Oral Exams/Cleanings)	100% Covered, no deductible	80% Covered after deductible	100% Covered, no deductible	100% Covered, no deductible
Restorative Services: (Filings/Extractions)	80% Covered after deductible	50% Covered after deductible	80% Covered after deductible	80% Covered after deductible
Endodontics: (Root Canal Therapy)	80% Covered after deductible	50% Covered after deductible	80% Covered after deductible	80% Covered after deductible
Periodontics: (Treatment of the gums)	80% Covered after deductible	50% Covered after deductible	80% Covered after deductible	80% Covered after deductible
Oral Surgery: (Extracts)	80% Covered after deductible	50% Covered after deductible	80% Covered after deductible	80% Covered after deductible
Major Services: (Dentures, Partials, Crowns)	50% Covered after deductible	50% Covered after deductible	50% Covered after deductible	50% Covered after deductible
Orthodontic Treatment: (Dependents up to age 19)	Not Covered	Not Covered	50% Coinsurance	50% Coinsurance
Orthodontic Lifetime Maximum:	Not Covered		$2,000 per Individual Age 19 or Younger	

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.

Included in your VSP Vision coverage is a discount on hearing aids through TruHearing. This benefit includes three provider visits for fittings, adjustments and cleanings, additional warranty, batteries and money back guarantees. For more information call TruHearing at 877-396-7194. You must mention your VSP coverage to receive this benefit.

To find a network provider visit **www.vsp.com**, or call 800-877-7195.

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

VISION SERVICE PLAN (VSP) VISION BENEFITS

VSP Choice Network

	Base Plan		Buy-Up Plan	
NETWORK:	In Network	Out-of-Network	In Network	Out-of-Network
Eye Exam:	$20	Up to $45 reimbursement	$20	Up to $45 reimbursement
Lenses: Single Vision Bifocal Trifocal	100% after $20 Copay	Reimbursement: Up to $30 Up to $50 Up to $65	100% after $20 Copay	Reimbursement: Up to $30 Up to $50 Up to $65
Frames:	100% up to $130 allowance for wide selection of frames 100% up to $150 allowance for featured frames 20% discount on the amount over the allowance	Up to $70 reimbursement	100% up to $150 allowance for wide selection of frames 100% up to $170 allowance for featured frames 20% discount on the amount over the allowance	Up to $70 reimbursement
Contact Lenses: (instead of glasses)	$130 allowance; copay does not apply	Up to $105 reimbursement	$150 allowance; copay does not apply	Up to $105 reimbursement
Diabetic Eyecare Plus Program	$20 Copay	N/A	$20 Copay	N/A
Additional Glasses and Sunglasses	Extra $20 to spend on featured frames 20% savings on additional glasses and sunglasses, including lens enhancements	N/A	Extra $20 to spend on featured frames 20% savings on additional glasses and sunglasses, including lens enhancements	N/A
Retinal Screening	No more than a $39 copay on routine screening as an enhancement to a WellVision Exam	N/A	No more than a $39 copay on routine screening as an enhancement to a WellVision Exam	N/A
Laser Vision Correction	15% off the regular price or 5% off the promotional price	N/A	15% off the regular price or 5% off the promotional price	N/A
Benefit Frequency Examinations/ eyeglass lenses/ contacts Frames	Once every 12 months Once every 24 months		Once every 12 months Once every 12 months	

Disability Insurance

Disability insurance provides loss of income protection to you in the event of a serious injury or illness.

Public Employee's Retirement Association (PERA):

City of Boulder Employees who have achieved vesting (5 years of service credit) with PERA are automatically eligible for their short-term disability coverage and/or disability retirement.

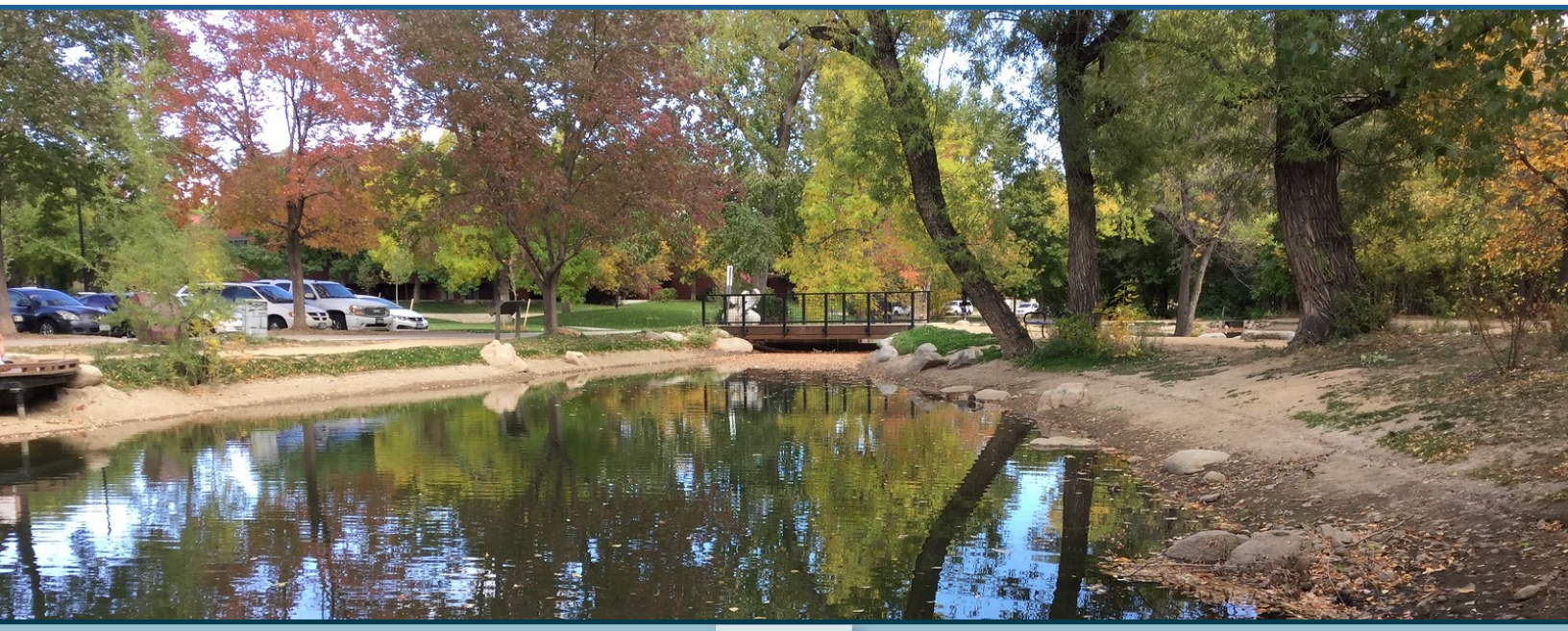
Please review the Colorado PERA Disability Program brochure: **https://www.copera.org/PDF/5/5-12.pdf**

City-Paid Short Term and Long Term Disability Benefits (STD and LTD):

This coverage can provide security while working toward PERA vesting. The employee is required to exhaust all accrued unused sick time before the City coverage provides a benefit for (60% of an employee's wages for STD), (50% for LTD). Additional information for your work group can be found on the Boulder@Work website.

Please review the Standard Insurance Company Certificates of Coverage for more detailed information on the City's STD and LTD benefits.

For Employees who meet the City-paid eligibility requirements, employees will be required to pay any taxes due on the benefits they receive. Benefit recipients will receive a 1099 to file with their taxes.



The Standard Basic Life and AD&D Insurance

Life insurance is a very important part of good financial planning. It provides a tax-free sum to your designated beneficiary upon your death. Accidental Death & Dismemberment insurance provides coverage for major bodily function losses and will double the Life insurance benefit if your death is the result of an accident.

The City of Boulder provides, at no cost to you, Basic Life and AD&D insurance to all City of Boulder employees working 20 hours or more at 1.5 times your annual salary.*

All Basic Life and Accidental Death & Dismemberment benefits will reduce to 50% at the age of 70.

You can change your beneficiary for your Basic Life and AD&D benefit at any time by completing a change form and submitting it to Human Resources.

***If your salary results in an amount of Life insurance over $50,000, the City is required to charge taxes on the value of your benefit over $50,000.**

Voluntary Life Insurance

City of Boulder employees may elect to purchase additional Life insurance at an additional cost. You can elect up to $300,000 in additional Life Insurance coverage. You are guaranteed coverage up to $120,000 for yourself and $20,000 for a spouse or partner. You may choose up to 100% of your own coverage amount for your spouse and up to $10,000 for your children.

New employees may enroll into the Voluntary Life insurance within 31 days of their hire date to receive the guaranteed issue amount without submitting additional medical underwriting. You may also enroll anytime throughout the year or during Open Enrollment, but you will be required to complete an Evidence of Insurability (EOI) medical underwriting form to be approved for additional insurance coverage. Deductions will begin upon notification from the Standard Insurance Company that the application has been approved.

Premium is determined by your age including spouse coverage as of January 1st of the plan year.

Please visit https://bouldercolorado.gov/benefits for more information.

Leave Benefits

The City of Boulder provides all Federal and State mandated leaves along with many additional leave types. Leave types available to you include:

- Vacation Leave
- Sick Leave
- Emergency Leave
- Unpaid Leave
- Floating Holidays
- Paid Holidays
- Family & Medical Leave
- Paid Parental Leave
- Military Leave

Please visit the Policies section of the City of Boulder's website for additional details.

Pet Insurance

City of Boulder recognizes that pets are family too and are now pleased to offer discounted rates for Pet Insurance.

What is Pet Insurance?

Pet insurance reimburses you on your veterinary bills when your dog or cat gets sick or injured. Pet insurance helps you afford the best course of treatment, protects against major financial setbacks, and can give you peace of mind as a pet parent. Having a pet insurance plan allows you to focus on getting the best care for your pet without worrying about the financial burden.

How to get Pet Insurance

Visit Pet's Best at **www.petsbest.com/COBPETS** and begin with the "Get a Quote" feature on the website. After entering all the information on all of your pets you wish to cover, you will receive your individualized quote. From there, you will continue with your application on the Pet's Best website. Once submitted, the premium amount will be submitted to City of Boulder to then be deducted from your bi-weekly paycheck.

RTD EcoPass Program

Paid for by the City of Boulder

The EcoPass is a tax-free benefit that entitles the holder to free or reduced-fare use of the RTD mass transit system throughout the Denver Metro area. Reduced fare systems include Local, Express or Regional buses, SkyRide bus service to/from Denver International Airport (DIA), light rail and Call-n-Ride services.

If you need to return home from work because of illness or an emergency, or you need to work late without prior notice, Guaranteed Ride Home (GRH) can get you there. Call the Guaranteed Ride Home service line at 866-970-7480 to request transportation home and to receive your authorization number. When the taxi arrives, provide the driver with the authorization number and show the driver a photo ID, such as your EcoPass, driver's license or state ID. For more information on this program call DRCOG Way to Go at 303-480-6745.

To access services call 866-970-7480 to obtain an authorization number.

RETIREMENT OPTIONS

Pension & Retirement Plans

All employees must participate in one of the following retirement plans appropriate to their employee group. The City contributes to all of these plans.

- Public Employees' Retirement Association (PERA) Defined Benefit Pension
  - For City of Boulder Part-Time, Part-Time Variable and Temporary
- International City Managers' Association (ICMA) Defined Contribution Retirement Plan
  - For City of Boulder employees satisfying PERA exemption criteria. (This includes Directors who report directly to the City Manager, Council Appointees and Council Members.)

Investment Plans

The City also encourages employees to participate in a voluntary retirement savings plans. The City offers two types of plans for employees to participate in.

As part of retirement planning, eligible employees can choose to participate in one or both of these investments options. Under either plan, you contribute to the Plan by agreeing to defer a dollar amount or percentage of your salary. Your deferrals are made on a pre-tax basis unless you have elected a Roth post-tax program, and all earnings are tax deferred until benefits are distributed to you.

- 457 Plan- Administered by ICMA
  - Available to all employees
- 401(k) Plan- administered by PERA
  - Available to PERA retirement plan participants

2021 Contribution Limits		
	Yearly Limit	**Catch Up Amount (age > 50)**
401(k)	$19,500	$6,500
457(b)	$19,500	$6,500

PERA offers a 401(k) Plan with an array of high quality and low-cost investment options, including a Roth option, which can be used to supplement the PERA defined benefit plan for income in retirement.

The 457(b) Deferred Compensation Plan is one piece of your retirement program designed to supplement your retirement savings. The 457(b) also offers a wide variety of investment options, including a Roth option. While a pension may go a long way, it may not be enough. Saving to your 457(b) plan can help you maintain your desired standard of living.

For more detailed information and resources, visit the Retirement Resources page on Boulder@Work:
https://work.bouldercolorado.gov/human-resources/retirement

Directory

For Questions About...	Contact	Phone #	Web/E-Mail
Medical & Prescription Plan Group # 3338899	Cigna	800-244-6224	www.mycigna.com
TeleHealth	MDLive	888-726-3171	www.mdlive.com/COB
DispatchHealth		303-500-1518	www.dispatchhealth.com
Healthcare Exchange	Connect for Health Colorado	855-752-6749	www.ConnectforHealthCO.com
Medicaid	Colorado Medicaid	800-221-3943	www.colorado.gov/peak
Employee Assistance Program (EAP)	Magellan Health	800-523-5668	www.magellanassist.com
Dental Plan Group #W2274	Delta Dental	800-610-0201	www.deltadentalco.com
Vision Plan Group #12106494	Vision Service Plan (VSP)	800-877-7195	www.vsp.com
Flexible Spending Accounts (Health/Dependent)	24HourFlex	800-837-4817	www.24HourFlex.com
Life / AD&D and Supplemental Life Insurance Plan Group #645601-A	The Standard	877-276-6616	www.standard.com
Short Term Disability Group #645601-C **Long Term Disability** Group #645601-B	The Standard	877-276-6616	www.standard.com
Retirement	PERA Defined Benefit– City of Boulder	303-832-9550	www.copera.org
	Supplemental 401(k)	303-832-9550	www.copera.org
	Supplemental ICMA 457	Kristalin Kingsley 866-620-6069	kkingsley@icmarc.org
EcoPass **Guaranteed Ride Home**	RTD GRH	303-299-6000 866-970-7480	ww.rtd-denver.com
Identity Theft Protection Group # 203798	IDShield	888-807-0407	www.benefits.legalshield.com/cob
Accident / Critical Illness / Hospital Indemnity Group # 24628	Aflac	720-207-2347	keanu.vela@hubinternational.com
Legal Services Group # 203798	LegalShield	888-807-0407	www.benefits.legalshield.com/cob
Pet Insurance Group # 7874715	Pet's Best	888-984-8700	customercare@petsbest.com
Human Resources		303-441-3070	hrbenefitsforms@bouldercolorado.gov
Additional Questions or Escalated Claims Issues	HUB Advocacy	888-795-0300	boulderadvocacy@hubinternational.com

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.