

## **COLORADO**

# Summary of El Paso County

# RETIREE HEALTH BENEFITS

## 2026 Plan Year

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### Human Resources Employee Benefits Division

2880 International Circle, Suite N040 Colorado Springs, CO 80910 Phone: (719) 520-7486 | Fax: (719) 520-7497

E-mail: employeebenefits@elpasoco.com

## **Pre-Medicare Eligible**

## RETIREE/RETIREE SPOUSE 2026 OPEN ENROLLMENT

### **★New in 2026**★

- Increase to Medical Plan rates and adjusted subsidies. (See Plan Costs and Medical Subsidies on pages 10-11)
- Vision Plan benefit frequency has been updated to align with the calendar year. This change brings the Vision Plan in line with all other health plans, creating a consistent calendar year cycle. Previously, benefits were based on a rolling 12-month period from the date of last use.

Dear El Paso County Retiree Benefit Plan Participant:

Please review the following pages for a summary of benefits, adjusted plan rates, and medical plan subsidy amounts.

An Open Enrollment presentation, documents, and forms can be found online at <a href="mailto:admin.elpasoco.com/retirees">admin.elpasoco.com/retirees</a>.

#### **Meeting Notice**

Join us for a live retiree open enrollment presentation.

Date & Time: Friday, October 24, 2025 at 1:00 p.m. (MDT)

Location: Regional Development Center, 2880 International Circle

HR Training Room #N050 (Lower Level)

On-demand presentation can be found online at admin.elpasoco.com/retirees.

If you wish to make Open Enrollment changes to your benefits or dependents or need to update your information:

Please complete the Retiree Benefit Election Form found at <a href="mailto:admin.elpasoco.com/retirees">admin.elpasoco.com/retirees</a> and return it to the El Paso County Employee Benefits Division via e-mail to <a href="mailto:employeebenefits@elpasoco.com">employeebenefits@elpasoco.com</a>, fax to (719) 520-7497, or mail to 2880 International Circle, Suite N040, Colorado Springs, CO 80910, keeping a copy for your records. **Election change forms should be submitted no later than Wednesday, November 5, 2025.** 

Changes made during this Open Enrollment period will be effective January 1, 2026.

#### If you do not want to make any changes to your enrollment:

Do <u>not</u> complete an election form. Your current health insurance elections will automatically continue in 2026. Outside of Open Enrollment changes may only be made with a qualifying life event (see FAQ on <u>page 9</u> for more information).

#### **Reach Your Peak**

Please see the enclosed leaflet for Reach Your Peak (RYP) enrollment information. The 2026 RYP+ enrollment period begins October 22, 2025 and ends November 5, 2025.

Note for returning RYP+ participants: You must re-enroll each year; you are not automatically enrolled in the new year.

#### **Ouestions**

If you have any questions regarding El Paso County retiree health insurance benefits, you are encouraged to contact the Employee Benefits Division at (719) 520-7486 or <a href="mailto:employeebenefits@elpasoco.com">employeebenefits@elpasoco.com</a>. For questions regarding your retirement benefits, please contact the Retirement Office at (719) 520-7490 or <a href="mailto:eperpsupport@elpasoco.com">eperpsupport@elpasoco.com</a>.

Retiree Open Enrollment closes on November 5, 2025

## **Medicare Eligible**

## RETIREE/RETIREE SPOUSE 2026 OPEN ENROLLMENT

### **★New in 2026**★

- Increase to Medical Plan rates and adjusted subsidies. (See Plan Costs and Medical Subsidies on pages 10-11)
- Vision Plan benefit frequency has been updated to align with the calendar year. This change brings the Vision Plan in line with all other health plans, creating a consistent calendar year cycle. Previously, benefits were based on a rolling 12-month period from the date of last use.

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Please complete the Retiree Benefit Election Form found at <a href="mailto:admin.elpasoco.com/retirees">admin.elpasoco.com/retirees</a> and return it to the El Paso County Employee Benefits Division via e-mail to <a href="mailto:employeebenefits@elpasoco.com">employeebenefits@elpasoco.com</a>, fax to (719) 520-7497, or mail to 2880 International Circle, Suite N040, Colorado Springs, CO 80910, keeping a copy for your records. **Election change forms should be submitted no later than Wednesday, November 5, 2025.** 

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### If you do not want to make any changes to your enrollment:

Do <u>not</u> complete an election form. Your current health insurance elections will automatically continue in 2026. Outside of Open Enrollment changes may only be made with a qualifying life event (see FAQ on <u>page 9</u> for more information).

#### **Ouestions**

If you have any questions regarding your medical or prescription plan benefits, you are encouraged to contact RetireeFirst at (719) 249-7788 (TTY 711) or toll free at (855) 531-8844 (TTY 711). For questions regarding your dental or vision benefits, contact the Employee Benefits Division at (719) 520-7486 or <a href="mailto:employeebenefits@elpasoco.com">employeebenefits@elpasoco.com</a>. For questions regarding your retirement benefits, please contact the Retirement Office at (719) 520-7490 or <a href="mailto:employeebenefits@elpasoco.com">employeebenefits@elpasoco.com</a>.

Retiree Open Enrollment closes on November 5, 2025

## SUMMARY OF EL PASO COUNTY MEDICAL BENEFITS

### Pre-Medicare Eligible EPO Medical Plan

UMR is the administrator of El Paso County's self-funded Retiree Pre-Medicare Eligible Medical Plan.

UnitedHealthcare Choice Plus is the network of providers utilized by this Exclusive Provider Organization (EPO) plan.

**Quantum Health** is here to simplify your healthcare experience by explaining your benefits, giving you access to or replacing your ID cards, finding in-network providers, and so much more. *Find contact information at the bottom of this page.* 

Benefits	In-Network Benefits Only
Coinsurance	75% Plan Pays / 25% Member Pays
Annual Out-Of-Pocket Maximum* - Individual / Family	\$3,000 / \$6,000
Annual Limit / Deductible	Unlimited / \$0 Deductible
Premise Health Centers - Office Visit	\$10 Copay for Physician, Nurse Practitioner, Psychologist Visit \$0 Copay for Preventive Care Visit \$0 Copay for Condition Management Nurse Visit \$0 Copay for RYP program related follow-up Visits
Primary Care Physician (PCP) Office Visit	\$50 Copay
Specialist Office Visit	\$50 Copay
Preventive Care Visit	\$0 Copay
Chiropractic Services	\$20 Copay (24 visit maximum per calendar year)
Outpatient Short-Term Rehabilitation Therapy Services	\$20 Copay (60 days combined maximum per calendar year)
Outpatient Mental Disorders or Substance Abuse Treatment	\$10 Copay
Advanced Radiology (ex. MRI, CT Scan, CAT, PET, etc.)	Plan Pays 75% Plan Pays 100% for Diagnostic Tests with Employee Health Center Referral (Diagnostic Referral Benefit)
Ambulance	Plan Pays 75%
Urgent Care / Emergency Room	\$50 Copay / \$200 Copay
Outpatient Facility Services - Per Admission**	\$400 Copay then Plan Pays 75%
Hospital Inpatient - Per Admission**	\$800 Copay then Plan Pays 75%

<sup>\*</sup> Copayments and amounts over the allowable charge do not apply toward the out-of-pocket maximum

## Express Scripts Prescription Plan Prescription Plan included with Medical Plan enrollment

Formulary and Provider Directory: express-scripts.com<sup>†</sup>

Prescription Plan Tiers	Retail 30 Day Supply	Retail or Mail Order Up to 90 Day Supply	Accredo Specialty 30 Day Supply
First Tier (Generic)	\$6.00	\$15.00	
Second Tier (Preferred Brand)	\$30.00	\$75.00	
Third Tier (Non-Preferred Brand)	\$50.00	\$125.00	
Fourth Tier (Preferred Specialty)††			\$150.00
Fifth Tier (Non-Preferred Specialty)††			\$250.00

This link may include standard information about the network and formulary provided by Express Scripts. It may not account for any El Paso County plan specific inclusions, exclusions, step therapy requirements, prior authorization, etc.

Reach Your Peak (RYP) Wellness Program: RYP Wellness Program enrollment and RYP+ Health Reimbursement Account (HRA) will terminate and HRA funds will be forfeited effective the date the retiree is Medicare eligible. Retirees with HRA balances remaining at the time they become Medicare eligible have a 3-month runout period after the HRA termination date to submit claims to Employee Benefits Corporation (EBC) for services received prior to the termination date.

For questions on the RYP program, e-mail reachyourpeakepc@elpasoco.com or call (719) 520-7486.

<sup>\*\*</sup> Lantern Surgical Care offers waived costs for approved, non-emergent surgical procedures (see page 7 for more details)

<sup>†† \$2,500</sup> Out-of-Pocket Maximum

## SUMMARY OF EL PASO COUNTY MEDICAL BENEFITS

### Medicare Eligible Anthem Medicare Advantage Plan

The Medicare Advantage Plan can be used anywhere Medicare is accepted Member must be enrolled in Medicare Part A and Part B

Anthem is the insurer reviewing, processing, and paying claims.

RetireeFirst is the administrator of the El Paso County Retiree *Medicare Eligible* Medical and Prescription Plan. RetireeFirst is a full-service retiree benefit manager. Their team of dedicated member advocates are available to help you with Medicare or prescription needs, from ordering cards to assisting with medical claims and prescription billing issues and offering advocacy and support. *Find contact information at the bottom of this page.* 

#### Anthem will act as your primary insurance for Medical. (You will no longer need your Medicare card; please put this somewhere safe.)

The Pre-Medicare Eligible Plan will terminate effective the date the retiree or spouse is Medicare eligible. The retiree may elect to continue coverage for the retiree or spouse through the Medicare Eligible Plan. Enrollees of the Medicare Eligible Plan must be enrolled in and maintain enrollment in Medicare Part A and Part B. Enrollees of the Medicare Eligible Plan cannot be enrolled in another Individual Medicare Advantage (MA), Medicare Advantage Prescription Drug Plan (MAPD) or Individual Part D Prescription Drug Plan (PDP) at the same time as the MAPD group plan through El Paso County. Failure to enroll by/with the required effective date, any lapse in Medicare Part A and Part B coverage, or enrollment in another Medicare plan will forfeit/terminate your Medical Insurance.

Benefits	Medicare Providers
Annual Plan Deductible, Part A	\$250 combined in-network and out-of-network
Coinsurance, Part B	96% Plan Pays / 4% Member Pays
Annual Out-Of-Pocket Maximum*, Part B	\$2,250 combined in-network and out-of-network
Premise Health Centers - Office Visit	\$10 Copay for Physician, Nurse Practitioner, Psychologist Visit \$0 Copay for Preventive Care Visit \$0 Copay for Condition Management Nurse Visit
Annual Wellness Visit	
Preventive Services	Covered 100%
Clinical/Diagnostic Lab Test	Covered 100%
Emergency Care	
Primary Care Physician (PCP) Office Visit	
Specialist Office Visit	
Advanced Imaging (MRI, CT, PET)	96% Plan Pays / 4% Member Pays
Mental Health or Substance Abuse Therapy Visit	90% Flatt Fays / 4% Welliber Fays
Rehabilitation Therapies (Occupational, Physical, Speech)	
Outpatient Services	
Ambulance Services	96% Plan Pays / 4% Member Pays per one-way trip Limited to Medicare-covered transportation
Urgent Care	\$65 Copay (Waived if admitted to hospital for same condition within 72 hours)
Inpatient Services	Covered 100% after combined Annual Deductible per admission

<sup>\*</sup> Part D Pharmacy, Extra Services, and the Plan Premium do not apply toward the out-of-pocket maximum

Anthem Medicare Part D Prescription Plan Prescription Plan included with Medical Plan enrollment							
Annual Out-Of-Pocket Maximum \$2,100							
Prescription Plan Tiers	Retail Retail or Mail Order Specialty Mail Order 30 Day Supply Up to 90 Day Supply 30 Day Supply						
First Tier (Generic)	\$6.00	\$15.00					
Second Tier (Preferred Brand)	\$30.00	\$75.00					
Third Tier (Non-Preferred Brand)	Tier (Non-Preferred Brand) \$50.00 \$125.00						
Specialty Drugs	\$100.00		\$100.00				

### Reach Your Peak (RYP) Wellness Program: Medicare-eligible retirees and their spouses are not eligible for RYP enrollment.

Note: RYP enrollment and RYP+ Health Reimbursement Account (HRA) will terminate and HRA funds will be forfeited effective the date the retiree is Medicare eligible. Retirees with HRA balances remaining at the time they become Medicare eligible have a 3-month runout period after the HRA termination date to submit claims to Employee Benefits Corporation (EBC) for services received prior to the termination date.

## EL PASO COUNTY HEALTH CENTERS

El Paso County Employee Health Centers are available to all enrolled El Paso County Medical Plan participants. The Employee Health Centers offer quality, convenient and affordable medical care, along with a full range of preventive health and wellness services.

**Employee Health Center Locations, Hours, and Contact Information:** 

Regional Development Center (RDC) Health Center 2880 International Circle, Lower Level, Suite N010 Phone: (719) 520-7080

Citizens Service Center (CSC) Health Center 1675 West Garden of the Gods Road, Suite 1053

Phone: (719) 520-7600

Health Center Hours: Monday through Friday, 8:00 a.m. to 5:00 p.m.

\$10 Copay per Visit/Virtual Visit with Physician, Nurse Practitioner, or Clinical Psychologist - No Copay for Nurse or Lab Visit

Premise Health Patient Portal: mypremisehealth.com | 24/7 Telehealth: (877) 272-0813

#### Services include:

- · Comprehensive Individual/Family Primary Care
- Urgent and Acute Care (e.g., flu, fever, viral infections, nausea, cuts, sprains/strains, headaches, rashes, etc.)
- · Preventive Health (e.g., annual physicals)
- Mental/Behavioral Health

- Disease Management and Health Coaching
- Wellness Education/Support/Counseling
- Referrals to Specialists
- · Vaccinations, Injections, and Laboratory Services

Services available to members ages 6 months through adult

**24/7 National Virtual Visits (also known as "telehealth"):** Medical plan participants have 24/7 access to visit with a Board-Certified provider using a telephone, tablet, or computer on the My Premise Health app (available on Apple Store and Google Play) or at <a href="maypremisehealth.com">mypremisehealth.com</a>. Premise Health National Virtual Health visits are available anywhere in the United States and no appointment is needed. Telehealth visits are ideal for after-hours, non-emergent medical issues and conditions such as cold, cough, flu, earache, sore throat, fever, headache, backache, allergies, and nausea. In addition to Virtual Primary/Acute Care services, you can schedule Virtual Behavioral Health visits via the My Premise Health app, website, or by scheduling a Virtual Behavioral Health appointment by phone.

## PRE-MEDICARE ELIGIBLE EPO MEDICAL PLAN PROGRAMS

### Lyra Health Employee Assistance Program

Lyra provides confidential mental health support to El Paso County EPO Medical Plan participants, at no cost.

No matter what you're going through, Lyra can help. Get matched to confidential mental health support today.

- Parent and Caregiver Stress
- Anxiety and Depression
- · Work Stress and Burnout

Anger Management

· Alcohol Use

Relationship Challenges

You get 8 free sessions per year, per eligible participant. If more than 8 sessions are needed, Lyra integrates with the El Paso County Pre-Medicare Medical Plan to cover additional visits; plan copays will apply.

Lyra also offers additional work life services. Receive expert advice to help you stay on top of your busy life, including legal (mediation, document preparation such as deeds, living trusts, wills), financial (tax planning, financial planning and consultation), identity theft, and dependent care services (child care, elder care, pet care).

Website: epc.lyrahealth.com | Phone: (877) 207-9553 | E-mail: care@lyrahealth.com

### Galleri Multi-Cancer Early Detection Test

Galleri is a proactive blood test that can be done annually, screening for many deadly cancers before symptoms appear. With a single blood draw, the Galleri test screens for a "fingerprint" of 50+ cancers, including many without recommended screening available today (like pancreatic, ovarian, liver, and more).\*

The Galleri test is available at no cost to retirees and dependents enrolled on the El Paso County EPO Medical Plan ages 50 years or older, or 40-49 with elevated risk factors.

\*This test does not replace other available or recommended screenings.

Check your eligibility and request the test at the link below.

Website: galleri.com/epc | Phone: (833) 694-2553 | E-mail: customerservice@grail.com

### Hinge Health

Hinge Health virtual physical therapy provides members with exercise therapy plans to help you overcome pain, recover from an injury, and more – with no copays! This program provides:

- A personalized care plan designed for your everyday activities and long-term goals
- Access exercise therapy sessions you can do in as little as 15 minutes anytime, anywhere with the Hinge Health app
- 1-on-1 support from a physical therapist or health coach to tailor your sessions, as needed

Website: hinge.health/elpasoco | Phone: (855) 902-2777 | E-mail: help@hingehealth.com

## PRE-MEDICARE ELIGIBLE EPO MEDICAL PLAN PROGRAMS

### Lantern Surgical Care

Lantern (previously known as SurgeryPlus) offers higher quality, a great experience, and waived copays and coinsurance for non-emergent surgical procedures. Here's what's covered through Lantern:

- Dedicated Support: Your personal Care Advocate will support you through every step of the experience
- Personalized matching with the best surgeon for your unique needs
- · Consults and appointments with your Lantern surgeon
- · Anesthesia, procedure, and facility (hospital) fees

Hundreds of procedures are covered. Main categories listed below; however, call Lantern to inquire about a specific procedure.

- Orthopedics
- Cardiac

- Ear, Nose, & Throat (ENT)
- Pain Management

• Spine

- General Surgery
- GYN

Call Lantern to get connected with a Care Advocate and get started! To access this benefit, you must go through Lantern.

Website: my.lanterncare.com | Phone: (833) 814-5702

## SleepCharge

The SleepCharge program for sleep apnea\* and sleep health provides the following benefits:

- Medical experts who will help you assess your sleep health
- · Personalized treatment plan for sleep apnea, including all equipment and supplies
- Dedicated Care Managers, always available to support you
- · The latest sleep health education and advice
- Testing, diagnosis, and treatment for insomnias, circadian-related disorders, sleep-related movement disorders, and hypersomnia

\*SleepCharge must be used for sleep apnea equipment and supplies of retirees and/or their adult dependents enrolled on the El Paso County EPO Medical Plan that are under age 64. All costs for the program are covered by the El Paso County EPO Medical Plan.

Website: sleepcharge.com/epcmed | Phone: (877) 615-7257 | E-mail: sleep@noxhealth.com

### One Pass Select

One Pass Select is a subscription-based program that provides access to gyms, boutique fitness studios, thousands of online workouts, and perks services with one monthly membership. Choose a membership tier that fits your lifestyle:

- Choose from a large, nationwide network of gyms and fitness studios. Use any gym in the network and create a routine just for you.
- · Work out at home with live or on-demand online fitness classes.
- Get groceries and household essentials delivered to your home.

To register, you may use one of the following options: Health Plan (UMR) Member ID or Social Security Number.

Website: onepassselect.com | Phone: (877) 515-9364

### UnitedHealthcare Hearing

UnitedHealthcare Hearing is a discount program that gives you options, care, and convenience so you can start hearing the sounds you've been missing.

- Name-brand and private-label hearing aids at significant savings: Choose from hundreds of name-brand and private-label hearing aids from major manufacturers at savings of up to 80% off industry prices.
- More than 5,000 credentialed hearing provider locations: Access the largest nationwide network of credentialed hearing professionals that provide hearing tests, hearing aid evaluations and follow-up support.
- Convenient ordering: Order hearing aids in person through a hearing provider or delivered right to your home in 5-10 business days.
- Personal support, every step of the way: You'll receive access to professional, nationwide support, online tutorials, hearing health tips and more, so you can stay connected and get the most out of your hearing aids.

Website: uhchearing.com | Phone: 1-855-523-9355, TTY 711

### **Health Care Reform Notice**

Grandfathered Health Plan: El Paso County believes this EPO Medical Health Plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your Plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits. Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the plan administrator at El Paso County Employee Benefits Division (719) 520-7486. You may also contact the U.S. Department of Health and Human Services at healthcare.gov.

## SUMMARY OF EL PASO COUNTY DENTAL BENEFITS

El Paso County offers two dental plan options through Delta Dental of Colorado.

Delta Dental LOW OPTION PPO Plan					
Maximum Benefit Calendar Year Maximum	\$1,000 per person, per calendar year	\$1,000 per person, per calendar year			
Calendar Year Deductible Applies to Basic and Major	Individual Deductible - \$50 per person Family Deductible - \$150 maximum				
Benefits		PPO Dentist	Premier Dentist*	Out-of-Network Dentist**	
Diagnostic and Preventive Services	Oral Exams and Cleanings, Sealants, Fluoride (for children) and X-rays	100%	80%	80%	
Basic Services	Fillings, Simple Extraction, Oral Surgery	80%	60%	60%	
Major Services	Endodontics/Periodontics, Crowns, Dentures, Bridges	50%	30%	30%	
Orthodontic Services	Not Covered				

This is a Maximum Allowable Charge (MAC) PPO plan. The MAC plan is a feature of Delta Dental that will help you save on out-of-pocket costs. While you may visit any licensed dentist you will receive the greatest savings when you choose a PPO dentist.

<sup>\*\*</sup> Out-of-Network Dentist-The member will be responsible for the difference between the PPO dentist's Allowable Fee and the full fee charged by the dentist

Delta Dental HIGH OPTION PPO Plus Premier Plan					
Maximum Benefit Calendar Year Maximum	\$1,500 per person, per calendar year	\$1,500 per person, per calendar year			
Calendar Year Deductible Applies to Basic and Major	The state of the s	Individual Deductible - \$25 per person PPO Network / \$50 per person Premier/Out-of-Network Family Deductible - \$75 PPO Network maximum / \$150 Premier/Out-of-Network maximum			
Benefits	PPO Dentist <sup>†</sup> Premier Dentist <sup>††</sup> Out-of-Network				
Diagnostic and Preventive Services	Oral Exams and Cleanings, Sealants, Fluoride (for children) and X-rays	100%	100%	100%	
Basic Services	Fillings, Simple Extraction, Oral Surgery, Endodontics/Periodontics	90%	70%	70%	
Major Services	Crowns, Dentures, Bridges	60%	30%	30%	
Orthodontic Services	Covered regardless of age \$1,500 lifetime maximum	50%	50%	50%	

This is a Delta Dental PPO Plus Premier plan. You and your family members may visit any licensed dentist, but will enjoy the greatest out-of-pocket savings if you see a Delta Dental PPO dentist.

Website: deltadentalco.com | Phone: (800) 610-0201

## SUMMARY OF EL PASO COUNTY VISION BENEFITS

EyeMed "Access" Vision Plan				
Benefits	Frequency	In-Network	Out-of-Network (Reimbursement)	
Exam	Once Per Calendar Year	\$10 Copay	Up to \$35	
Standard Plastic Lenses Single Vision Bifocal Trifocal Lenticular Standard Progressive Lens Premium Progressive Lens	Once Per Calendar Year	\$25 Copay \$25 Copay \$25 Copay \$25 Copay \$25 Copay \$25 Copay, 80% of Charge less \$120 Allowance	Up to \$40 Up to \$60 Up to \$80 Up to \$80 Up to \$60 Up to \$60	
Contact Lenses Conventional Disposable Medically Necessary	Once Per Calendar Year	\$0 Copay, \$150 Allowance, 15% off balance over \$150 \$0 Copay, \$150 Allowance \$0 Copay, Paid in Full	Up to \$105 Up to \$105 Up to \$200	
Frames	Once Every Other Calendar Year	\$0 Copay, \$150 Allowance, 20% off balance over \$150	Up to \$45	

Website: eyemed.com | Phone: (866) 723-0596

<sup>\*</sup> Premier Dentist-The member will be responsible for the difference between the PPO dentist's Allowable Fee and the fee from the Premier Maximum Plan Allowance (MPA)

<sup>†</sup> PPO Dentist-Payment is based on the PPO dentist's Allowable Fee, or the actual fee charged, whichever is less

<sup>††</sup> Premier Dentist-Payment is based on the Premier Maximum Plan Allowance (MPA), or the fee actually charged, whichever is less

ttt Out-of-Network Dentist-Payment is based on the Out-of-Network Maximum Plan Allowance (MPA); members are responsible for the difference between the out-of-network MPA and the full fee charged by the dentist

## GENERAL INFORMATION & FREQUENTLY ASKED QUESTIONS

#### **Eligible Dependents**

The retiree's legal spouse and child(ren) up to age 26 (or older if disabled with continued coverage). Proof of relationship must be submitted to the El Paso County Employee Benefits Division when adding dependents (marriage license, birth certificates, etc.).

#### **Summary Plan Documents**

Summary Plan Documents (SPD) are detailed documents providing plan coverage and exclusion information. For a copy of an SPD go to <a href="mailto:elpasoco.com">elpasoco.com</a> under Departments: Human Resources - Employee Benefits or contact the Employee Benefits Division at (719) 520-7486 or <a href="mailto:employeebenefits@elpasoco.com">employeebenefits@elpasoco.com</a>.

### If I am not making any changes during Open Enrollment, do I need to submit an enrollment form?

No. You should only complete the enrollment form if you wish to make changes to your benefits or dependents or need to update your information.

#### How do I enroll/re-enroll in the Reach Your Peak (RYP) Wellness Program?

RYP enrollment is available to Pre-Medicare Eligible retirees and their spouses enrolled in the El Paso County EPO Medical Plan. RYP+ enrollment is held annually in conjunction with Open Enrollment. The 2026 RYP+ enrollment period begins October 22, 2025 and ends November 5, 2025. During that period, register at join.personifyhealth.com/reachyourpeakepc or log on to app.personifyhealth.com from any computer or mobile device and then follow on-screen instructions to schedule a 2026 Health Consultation at an El Paso County Employee Health Center. Health Consultation appointments must be scheduled during the enrollment period. A confirmation e-mail will be sent to you with your appointment details within minutes of completing the RYP+ enrollment process. See the enclosed RYP leaflet for more information.

#### What if I experience a Qualifying Life Event in 2026?

If you have a qualifying life event as defined by the IRS (i.e., marriage, divorce, gain/loss of group coverage or Medicaid, etc.) you can make changes to your existing El Paso County health plan benefits by submitting a Retiree Benefit Election Form to the El Paso County Employee Benefits Division within 31 days of the life event effective date. Documentation will be required for the life event and, if adding a dependent, proof of relationship. If there is no qualifying life event, changes can only be made at annual open enrollment.

If you become Medicare eligible due to disability and are enrolled on the El Paso County Medical Plan, you **must notify** the Employee Benefits Division of your Medicare-eligibility and submit a Retiree Benefit Election Form **within 31** days of the effective date of Medicare coverage. See below "I am (or my dependent spouse is) turning 65 this year. What do I need to do?" for more information about Medicare eligibility.

#### I am (or my dependent spouse is) turning 65 this year. What do I need to do?

The Pre-Medicare Eligible Medical and Prescription Plans will terminate effective the date the retiree or spouse is Medicare eligible.

Medicare enrollment starts three (3) months before you turn 65. You should review materials from the Social Security Administration and enroll in the appropriate plan coverage. Around this time, you will also receive a Retiree Benefit Election Form with a letter from El Paso County providing instructions for continuing or waiving medical plan coverage on the Medicare Eligible Medical and Prescription Plans. If you do not receive the letter/packet 45 days prior to your 65<sup>th</sup> birthday, you must contact the Employee Benefits Division prior to turning 65.

Medicare eligibility does not allow for changes to dental or vision coverage - these benefit changes can be made during open enrollment.

If you wish to waive medical plan coverage due to Medicare eligibility: You must complete a Retiree Benefit Election Form and provide proof of Medicare coverage and submit to the Employee Benefits Division by the end of the month prior to you turning 65.

If you wish to continue your medical plan coverage with El Paso County:\* You will have the opportunity to enroll in the County's Medicare eligible plan, the Anthem Medicare Advantage Prescription Drug (MAPD) Plan administered by RetireeFirst. You must enroll in Medicare Part A and Part B in order to enroll in the Anthem MAPD Plan. You must (1) complete an El Paso County Retiree Benefit Election Form and elect the Medicare Eligible RetireeFirst/Anthem MAPD Plan, (2) complete a RetireeFirst Medicare Advantage Prescription Drug Plan Individual Enrollment Form (Medicare Eligible Enrollment Form), and (3) provide proof of Medicare Part A and Part B coverage. The forms must be submitted to the Employee Benefits Division no later than the end of the month prior to you turning 65. Failure to enroll timely may result in disqualification for eligibility to enroll in the County's Medicare-eligible plan.

When this coverage is effective, you will only need your Anthem MAPD ID Card for Medical and Prescription coverage. Anthem will act as your primary insurance for medical and you will not need to use your Medicare ID card. Keep your Medicare ID card somewhere safe.

RetireeFirst will reach out to you with a "Welcome" call and will send you additional plan information.

\*Enrollment onto the Anthem MAPD plan is dependent on the receipt of your Retiree Benefit Election Form, RetireeFirst Enrollment Form, and Medicare Part A and Part B enrollment. Enrollees of the Medicare Eligible Plan must be enrolled in and maintain enrollment in Medicare Part A and Part B. Medicare Part A and Part B premiums are the enrollee's responsibility and are typically deducted from Social Security benefits. Any lapse in Medicare Part A and Part B coverage will forfeit/terminate your Medical Insurance. Enrollees of the Medicare Eligible Plan cannot be enrolled in another Individual Medicare Advantage (MA), Medicare Advantage Prescription Drug Plan (MAPD) or Individual Part D Prescription Drug Plan (PDP) at the same time as the MAPD group plan through El Paso County. Other coverage will forfeit/terminate your Medical Insurance.

#### If I waive a benefit, can I pick it back up in the future?

If at any point you waive a benefit, you will not have the option of electing to have that benefit in the future.

#### Who do I contact if I did not get or cannot find my insurance card(s)?

Please refer to the Contact List on page 12 and call the member services number for the plan which you are seeking an insurance card.

## 2026 MONTHLY BENEFIT PLAN COSTS

Plan	Retiree Only or Spouse Only	Retiree + Spouse	Retiree + Children	Retiree + Family
Pre-Medicare UMR EPO Medical Plan	\$1,117.85*	\$ 2,148.81*	\$ 2,045.48*	\$ 3,020.17*
Medicare Eligible RetireeFirst/Anthem MAPD Plan**	\$ 300.20*	N/A	N/A	N/A
Delta Dental PPO Dental Plan Low Option	\$ 23.69	\$ 39.81	\$ 61.57	\$ 90.03
Delta Dental PPO Dental Plan High Option	\$ 49.77	\$ 83.63	\$ 129.41	\$ 189.15
EyeMed Vision Plan	\$ 7.60	\$ 14.44	\$ 15.19	\$ 22.33

<sup>\*</sup>Medical Plan costs do not include subsidy amounts - see below and page 11 for subsidy schedules

## 2026 RETIREE MEDICAL PLAN SUBSIDY SCHEDULES

Retirement	2004 through 2026 Pre-Me	edicare Eligible UMR EPO	Medical Plan
Years of Service	Monthly Plan Cost	County Subsidy	Retiree Contribution
Retiree Only	\$ 1,117.85		
Less than 8 Years		\$ 0.00	\$ 1,117.85
8-14 Years		\$ 614.81	\$ 503.04
15-19 Years		\$ 838.38	\$ 279.47
20+ Years		\$ 1,117.85	\$ 0.00
Retiree + Spouse	\$ 2,148.81		
Less than 8 Years		\$ 0.00	\$ 2,148.81
8-14 Years		\$ 614.81	\$ 1,534.00
15-19 Years		\$ 838.38	\$ 1,310.43
20+ Years		\$ 1,117.85	\$ 1,030.96
Retiree + Child(ren)	\$ 2,045.48		
Less than 8 Years		\$ 0.00	\$ 2,045.48
8-14 Years		\$ 614.81	\$ 1,430.67
15-19 Years		\$ 838.38	\$ 1,207.10
20+ Years		\$ 1,117.85	\$ 927.63
Retiree + Family	\$ 3,020.17		
Less than 8 Years		\$ 0.00	\$ 3,020.17
8-14 Years		\$ 614.81	\$ 2,405.36
15-19 Years		\$ 838.38	\$ 2,181.79
20+ Years		\$ 1,117.85	\$ 1,902.32

Medicare-Eligible RetireeFirst/Anthem MAPD Plan					
Years of Service Monthly Plan Cost County Subsidy Retiree Contribution					
Retiree Only	\$ 300.20				
Less than 8 Years		\$	0.00	\$	300.20
8-14 Years		\$	165.11	\$	135.09
15-19 Years		\$	225.15	\$	75.05
20+ Years		\$	300.20	\$	0.00

<sup>\*\*</sup>Medicare eligible retirees/spouses enrolled in the RetireeFirst/Anthem MAPD Plan must also be enrolled in Medicare Part A and Part B

## 2026 RETIREE MEDICAL PLAN SUBSIDY SCHEDULES

Elected and Appointed Officials Pre-Medicare Eligible UMR EPO Medical Plan			
Years of Service	Monthly Plan Cost	County Subsidy	Retiree Contribution
Retiree Only	\$ 1,117.85		
Less than 4 Years		\$ 0.00	\$ 1,117.85
4-7 Years		\$ 558.93	\$ 558.92
8+ Years		\$ 1,117.85	\$ 0.00
Retiree + Spouse	\$ 2,148.81		
Less than 4 Years		\$ 0.00	\$ 2,148.81
4-7 Years		\$ 558.93	\$ 1,589.88
8+ Years		\$ 1,117.85	\$ 1,030.96
Retiree + Child(ren)	\$ 2,045.48		
Less than 4 Years		\$ 0.00	\$ 2,045.48
4-7 Years		\$ 558.93	\$ 1,486.55
8+ Years		\$ 1,117.85	\$ 927.63
Retiree + Family	\$ 3,020.17		
Less than 4 Years		\$ 0.00	\$ 3,020.17
4-7 Years		\$ 558.93	\$ 2,461.24
8+ Years		\$ 1,117.85	\$ 1,902.32

Elected and Appointed Officials  Medicare-Eligible RetireeFirst/Anthem MAPD Plan			
Years of Service	Monthly Plan Cost	County Subsidy	Retiree Contribution
Retiree Only	\$ 300.20		
Less than 4 Years		\$ 0.00	\$ 300.20
4-7 Years		\$ 150.10	\$ 150.10
8+ Years		\$ 300.20	\$ 0.00

## **NOTES ~ NOTES ~ NOTES**

## CONTACTLIST

CONTACT LIST		
Human Resources - Employee Benefits Division		
	(719) 520-7486	
	employeebenefits@elpasoco.com	
Employee Benefits Website	admin.elpasoco.com/human-resources/employeebenefits	
niraa compilance	(119) 320-1460	
El Paso County Retirement Plan		
	(719) 520-7490	
	epcrpsupport@elpasoco.com	
Retirement Plan Website	retirement.elpasoco.com	
El Paso County Health Centers		
. ,	(719) 520-7080	
	(719) 520-7600	
•	(877) 272-0813 mypremisehealth.com	
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Pre-Medicare Eligible	Medicare Eligible	
Medical Plan / UMR (Administrator) / UnitedHealthcare Choice Plus (Network)	Medical Plan & Prescription Plan / RetireeFirst (Administrator)/ Anthem Medicare Advantage Prescription Drug Plan (Insurer)	
(Group #76-414547) <b>Quantum Health</b> will assist with your benefit questions, replacing ID cards,	Use the RetireeFirst Member Services Number for Plan Questions, Claims, and	
finding in-network providers, and more!	ID Cards.	
Quantum Health Phone(866) 885-1484	RetireeFirst Member Services (Local)(719) 249-7788, TTY 711	
Quantum Health Websiteelpasocobenefits.com	RetireeFirst Member Services (Toll Free)(855) 531-8844, TTY 711	
Additional Medical Plan Programs:	Find a Provider:	
Lyra Website   Phoneepc.lyrahealth.com   (877) 207-9553	Use anywhere Medicare is accepted. For assistance in finding a provider contact RetireeFirst.	
Galleri Website Phonegalleri.com/epc (833) 694-2553  Lantern Surgical Care Website Phone . my.lanterncare.com (833) 814-5702		
SleepCharge Website Phonesleepcharge.com/epcmed (877) 615-7257	Please refer to your RetireeFirst or Anthem literature for policy numbers and further information.	
Hinge Health Website   Phonehinge.health/elpasoco   (855) 902-2777		
One Pass Select Website   Phone onepassselect.com   (877) 515-9364	Dental Plans / Delta Dental of Colorado	
UHC Hearing Website   Phone uhchearing.com   (855) 523-9355, TTY 711	(Group #12104)	
	Delta Dental Member Services(800) 610-0201	
Prescription Plan / Express Scripts	Delta Dental Websitedeltadentalco.com	
(RxBIN #003858 / RxPCN #A4 / RxGRP #ELPAS016)  Express Scripts Member Services(855) 738-1153		
Express Scripts Website express-scripts.com	Vision Plan / EyeMed	
Accredo Specialty Rx(800) 803-2523	(Access Plan H / Group #9728999)	
Accredo Specialty Rx Websiteaccredo.com	EyeMed Member Services(866) 723-0596	
· · ·	EyeMed Websiteeyemed.com	
Dental Plans / Delta Dental of Colorado		
(Group #12104)		
Delta Dental Member Services(800) 610-0201		
Delta Dental Websitedeltadentalco.com		
Vision Plan / EyeMed		
(Access Plan H / Group #9728999)		
EyeMed Member Services(866) 723-0596		
EyeMed Websiteeyemed.com		
Wellness Program / Reach Your Peak (RYP)		
RYP Phone(719) 520-7486		
RYP E-Mailreachyourpeakepc@elpasoco.com		
RYP Website app.personifyhealth.com		
Employee Benefits Corporation (EBC) Health Reimbursement Account (HRA)		

This is only a summary of benefits. For further plan details, refer to the Summary Plan Descriptions (SPDs) found on elpasoco.com. Should there be differences between this summary and the plan documents, contracts, or policies, the plan documents, contract, and/or policies will govern. We make every effort to make sure that the textual information provided is accurate and correct but occasionally an error can occur. El Paso County reserves the right to correct any typographical errors and/or inaccuracies contained in printed materials at any time without prior notification.

EBC Customer Service ......(800) 346-2126 EBC Website...... ebcflex.com EBC Claims Fax Number.....(608) 831-4790