

2027 Benefits Guide



EL PASO COUNTY

Human Resources
Employee Benefits Division

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Summary of El Paso County
Benefit Plans for the 2027 Plan Year

Getting to Know Your Employee Benefits

Your benefits are a key part of your total rewards package, providing valuable resources to support your health, strengthening your financial well-being, and making everyday life a little easier.

Whether you're making enrollment decisions, exploring your options, or looking for ways to squeeze more value from your benefits, this guide is here to help.

Explore Your Benefits: Learn about the plans and programs available to you and your family.

Understand Your Options: Review coverage details, costs, and important enrollment information.

Find Support: Know where to turn when you have questions or need assistance.



Visit the Employee Benefits Website at www.elpasoco.com/benefits for the latest benefit information, resources, and events.



WHO IS ELIGIBLE?

Eligible Employees

Employees classified as full-time are eligible to participate in El Paso County's health insurance benefit plans.

Eligible Dependents

- ▶ Your lawful spouse (marriage, civil union, or common-law)
- ▶ Your children who are less than 26 years old (natural-born, adopted, step-children, and legal guardianship)
- ▶ Your dependent children that are age 26 or more years old that are primarily supported by you and incapable of self-sustaining employment by reason of mental or physical handicap that are enrolled on the plan before age 26 – You may be required to provide proof of the child's dependent status to the plan carrier or to the Employee Benefits Division

Proof of relationship for enrolled dependents must be provided to the Employee Benefits Division within 30 days of enrollment. E.g., spouse: marriage certificate, civil union certificate, or common law affidavit; child: birth certificate or court documents. Failure to provide supporting documentation may result in loss of coverage.

WHEN TO ENROLL

You can only sign up for benefits or change your benefits at the following times:

- ▶ **Within 31 days of your full-time start date** – effective on the 1st of the month following full-time start date
- ▶ **During the annual benefits open enrollment period** – effective on January 1 of the following year
- ▶ **Within 31 days of a qualifying life event** – effective dates vary by life event

The choices you make will remain in place through the calendar year, unless you experience a qualifying life event, as described in the Benefits Enrollment section.

See *Benefits Enrollment* on page 3 and *Reach Your Peak Enrollment* on page 4 for enrollment instructions.

BENEFIT NOTICES

Find important notices and disclosures regarding your benefit rights, coverage options, and protections under applicable laws and regulations on the [Employee Benefits Website](#) under Benefit Notices.

BENEFITS ENROLLMENT

Before starting the Benefits Enrollment Process, you will need the following information:

- Decisions on the benefit elections you want to make for the plan year
- Flexible Spending Account annual amounts
- Dependents' names, dates of birth, addresses, and Social Security numbers
- Life insurance beneficiaries' names, dates of birth, addresses, phone numbers, and decisions on percentage of benefit
- Proof of relationship documentation - spouse: marriage/civil union certificate or common law affidavit; child: birth certificate or court documents

Benefits Enrollment Process

Go to the Employee Benefits Portal from OnlinEnroll: umr.workterra.net. You may need to turn off your pop-up blocker or add this site to your allowed pop-ups. OnlinEnroll can be accessed from any computer or mobile device.

Enter the information below and click LOGIN:

USERNAME - Your six (6) digit employee/user ID*

PASSWORD - First four (4) digits of your Social Security number (default)

COMPANY - El Paso County (must enter spaces)

*If you do not know your employee ID, access NeoGov via MyApps, click on your name at the top-right, then click "My Profile."

If you begin the enrollment process, any selections you make will finalize even if you do not select "Finish." Therefore, please make sure selections are what you intend. We recommend completing the process to the Confirmation Statement and selecting "**Finish**" to confirm accuracy.

Welcome	Read the information and accept agreements.
Demographics	Review your personal data for accuracy. If updates are needed, please submit through the proper applications in My Apps, myapps.microsoft.com . Employee name changes must be submitted through Employee Virtual Assistant (EVA). Address, phone number, and other personal information updates must be submitted through the Employee Self Service (ESS). ESS can only be accessed on the County's network or VPN (GlobalProtect).
Dependents	Add new or update dependent information. Social Security numbers are required.
Enroll Now	Each benefit requires an action to elect, waive, or keep the current election.
Upload Document	Add proof of relationship documentation for dependents. For a qualifying life event, you may also upload other required supporting documentation.
Beneficiaries	You must enter life insurance beneficiary designations in order to move to the Confirmation Statement.
Confirmation Statement	Review the Confirmation Statement and, if accurate, save or print a copy of the Confirmation Statement for your records. Click the " Finish " button at the bottom of the page to complete the enrollment process.

Revisions to Benefit Elections

If you are within the **new hire enrollment** or **open enrollment** window and wish to update your previously submitted elections, on the Employee Benefits Portal homepage, you can click on the "Update New Hire Elections" or "Update Open Enrollment Elections" button and make the changes. **If you go back into the enrollment process, any changes you select will finalize even if you do not select "Finish."** Therefore, please make sure selections are what you intend. We recommend completing the process to the Confirmation Statement and selecting "Finish" to confirm accuracy. Be sure to save/print your new Confirmation Statement.

Qualifying Life Event Changes

If you have a **qualifying life event** (QLE) as defined by the IRS, such as birth, adoption, marriage, divorce, gaining or losing other group coverage or Medicaid/CHIP, etc., you can make changes to your benefits by submitting your change in the Employee Benefits Portal **within 31 days** (60 days for birth of a child or change to Medicaid eligibility) of the event effective date. Supporting documentation will be required. *QLE instructions can be found on the Employee Benefits Website.*

OnlinEnroll Customer Service

OnlinEnroll Customer Service is available Monday through Friday from 9:00 a.m. to 6:00 p.m. Mountain Time to assist you with the enrollment process by phone or email.

REACH YOUR PEAK ENROLLMENT

The Reach Your Peak (RYP) wellness program's goal is to provide you with the resources, options, and support you need to reach and maintain optimal health. Wellness is paramount at El Paso County and we encourage you to take advantage of the benefits of RYP by enrolling during this enrollment period.



EL PASO COUNTY
Reach Your Peak Wellness Program

All full-time employees are eligible to participate! Spouses enrolled in the El Paso County EPO Medical Plan can also participate.*

RYP and RYP+ Benefits

Challenge your wellbeing for a chance to win prizes! RYP and RYP+ participants can earn points by participating in program activities and making healthy decisions. By achieving quarterly levels, you can earn prize drawing entries!

RYP+ Perks include:

Medical Plan Subscribers Only

- ▶ **Premium Reduction:** Medical plan contribution savings of \$20/month.
- ▶ **Health Reimbursement Account (HRA):**** For reaching quarterly levels, you can earn up to \$600 per year into an HRA which can be used for out-of-pocket Health Care FSA-eligible expenses! Continued RYP+ participation allows you to roll over up to \$2,000. See RYP HRA on page 14 for more information.

Enrollment Periods

Eligible employees and spouses can enroll in RYP (standard) anytime throughout the year.

RYP+ enrollment is only offered to medical plan participants during the following enrollment periods:

- **New hire:** Complete the RYP+ enrollment steps under “Enrollment Process” no later than 31 days from your full-time start date. If enrolled, RYP+ Perks are effective the 1st of the month following your benefits effective date.
- **Qualifying life event (QLE), new plan enrollee (subscriber):** Complete the RYP+ enrollment steps under “Enrollment Process” no later than 31 days from your medical plan effective date. If enrolled, RYP+ Perks are effective the 1st of the month following your medical plan effective date.
- **Open enrollment:** During the open enrollment period, complete the enrollment steps under “Enrollment Process” no later than the last day of open enrollment. Review open enrollment materials for deadlines or changes. If enrolled, RYP+ Perks are effective on January 1 of the following year.

*RYP+ enrollment must be completed each year; you are not automatically re-enrolled in the new year.***

Enrollment Process

1. **Register on the RYP Portal** at join.personifyhealth.com/reachyourpeakepc or log on at app.personifyhealth.com.
2. **Medical Plan Participants:** To access RYP+ Perks for the plan year, you must complete the appropriate step below during the applicable enrollment period.
 - **New Hire or QLE New Medical Plan Enrollment: Complete the Health Check survey**
Complete the Health Check survey in the RYP Portal no later than 31 days from your full-time start date or qualifying life event EPC Medical Plan enrollment effective date.
 - **Open Enrollment: Schedule your Health Consultation**
During the open enrollment period, while in the RYP Portal, follow the on-screen instructions to schedule your RYP+ Health Consultation for the next plan year. RYP Health Consultation cannot be scheduled after the open enrollment period has ended.



* Spouse enrolled in the EPC EPO Medical Plan can register for an account for chances to win prizes. Spouse must wait two weeks from employee's benefit enrollment completion to register for a RYP Portal account.

**HRA funds will be forfeited on January 1 if you do not re-enroll in the RYP+ program during the annual (open) enrollment period.

BENEFIT RESOURCE CENTER

USI's Benefits Resource Center (BRC) is available to all employees and their covered dependents. The BRC is your toll-free one-call benefits information hotline and is staffed with experienced Benefit Specialists who have specific knowledge of your plans. BRC's specialists will be able to:

- Answer benefit plan questions
- Assist with eligibility and claim problems with carriers
- Provide claim appeals information and explain the process
- Explain allowable family status election changes (adding newborns, marriage, divorce, etc.)
- Provide carrier plan contact information
- Help you understand your Explanation of Benefits
- Assistance with finding a Primary Care Physician

Benefits can be confusing. You don't have to feel overwhelmed. Let the BRC help you get the most value from your plans.

The BRC is available Monday through Friday, 8:00 a.m. through 5:00 p.m. Mountain Time.

Phone: (866) 468-7272 | Email: brcwest@usi.com

EMPLOYEE ASSISTANCE PROGRAM

Lyra, our Employee Assistance Program (EAP), offers a variety of resources to support your mental health, emotional well-being, and everyday life. From managing stress and navigating personal challenges to accessing professional guidance and practical work-life resources, Lyra is here to help you and your family when you need it most.

Full-time and part-time employees and your dependents have access to Lyra's services at no cost, regardless of enrollment in the County health plan.

Mental Health

Lyra provides confidential mental health support to you and your eligible dependents. With highly-trained coaches, therapists, and easy-to-use digital lessons and tools, you and your dependents can tap into support right away.

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 and the participant is enrolled in the County Medical Plan, Lyra integrates with the plan to cover additional visits; plan copays will apply.

Getting started is easy. Share what you're dealing with, get care recommendations, and book an appointment. Lyra members waste less time looking for care and spend more time feeling better. Lyra's providers are ready to meet you where you are – via live video, live messaging, or in-person.

Work-Life Services

Lyra also offers work and life services through Carelon at worklife.carelonwellbeing.com. Receive expert advice to help you stay on top of your busy life, including:

- Legal: Mediation, document preparation such as deeds, living trusts, and will
- Financial: Tax planning, financial planning, and consultation
- Dependent care services: Childcare, elder care, and pet care

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

MEDICAL PLAN

El Paso County UMR EPO Medical Plan

UMR is the administrator of El Paso County's self-funded medical plan.

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

Medical Plan Tiers	Per Pay Period Rate (Twice Monthly)	Monthly Rate
Employee Only	\$58.88	\$117.76
Employee + Spouse	\$174.43	\$348.86
Employee + Child(ren)	\$166.03	\$332.06
Employee + Family	\$245.17	\$490.34

Reach Your Peak (RYP) Wellness Program: El Paso County employees that have met the RYP+ requirements by the established deadlines will receive \$20 off their monthly medical plan contributions. [See RYP Enrollment on page 4.](#)



Summary of 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
Employee Health Centers - Office Visit	\$10 Copay for Physician or Nurse Practitioner \$0 Copay for Preventive Care \$0 Copay for Condition Management Nurse \$0 Copay for Virtual Care
Primary Care Physician (PCP) Office Visit	\$50 Copay
Specialist Office Visit	\$50 Copay
Preventive Care	\$0 Copay
Outpatient Mental Disorders and Substance Abuse Treatment	\$10 Copay
Outpatient Short-Term Rehabilitation Therapy Services	\$20 Copay (60 days combined maximum per calendar year)
Chiropractic Services	\$20 Copay (24 visit maximum per calendar year)
Urgent Care	\$50 Copay
Emergency Room	\$200 Copay
Ambulance	Plan Pays 75%
Advanced Radiology (ex. MRI, CT Scan, CAT, PET, etc.)	Plan Pays 100%
Outpatient Facility Services - Per Admission**	\$400 Copay then Plan Pays 75%
Hospital Inpatient - Per Admission**	\$800 Copay then Plan Pays 75%

* Copayments and amounts over the allowable charge do not apply toward the out-of-pocket maximum.

** **Lantern Surgical Care** offers waived costs for approved, non-emergent surgical procedures. ([See page 7 for more details.](#))

Express Scripts Prescription Plan

Express Scripts prescription plan is included with medical plan enrollment.

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

† \$2,500 Out-of-Pocket Maximum

Website: umr.com | Phone: (800) 207-3172

MEDICAL PLAN (CONTINUED)

Employee 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.

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 with Physician or Nurse Practitioner – No Copay for Nurse, Lab, or Virtual Visit

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

Services

- 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
 - Stress Management Counseling
 - Smoking Cessation Counseling
 - Wellness Education/Support
 - Vaccinations, Injections, and Laboratory Services
 - 24/7 National Virtual Visits
- Services available to members ages 6 months through adult*

24/7 National Virtual Visits (Telehealth)

Medical plan participants have 24/7 access to visit with a board-certified provider using a phone, tablet, or computer on the My Premise Health app or patient portal. Telehealth visits are available anywhere in the United States and no appointment is needed. These 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.

Website: members.premisehealth.com/el-paso-county

Lantern Programs

Lantern helps you get care for surgery, infusion therapy, and cancer support. Lantern helps you find great doctors, get care faster, save money, and feel less stressed with support from a care team every step of the way.

Call Lantern if you:

- Need planned, non-emergent surgery
- Need infusion therapy
- You or a covered dependent has been diagnosed with cancer
- Want a second opinion

Surgical Care

Lantern Surgical Care offers higher quality, a great experience, and waived copays and coinsurance for certain non-emergent surgical procedures. Lantern will provide personalized matching with the best surgeon for your unique needs. When using the Lantern Surgical Care benefit, consultations with your Lantern surgeon, anesthesia, procedure, and facility (hospital) fees are covered.

Infusion Therapy

Lantern Infusion Therapy aims to get you infusion care at home or at an infusion center near you, find safe, high-quality providers, and give you access to guidance from a care expert.

Cancer Care

Lantern Cancer Care connects you with experienced cancer specialists in the El Paso County EPO Medical Plan network and provides personalized guidance and dedicated support throughout your cancer care journey. Lantern can help with second opinions from top specialists, coordinating care, travel and lodging support, and guidance through treatment, remission, and survivorship.

Cancer support services through Lantern are available at no cost. Cancer care medical treatment and provider services will be billed through your medical insurance plan and are not provided through Lantern Surgical Care.

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

MEDICAL PLAN (CONTINUED)

UMR CARE Programs

UMR provides programs to help you and your family's health every day. These programs include Maternity CARE, NurseLine CARE, Family Advocate Support CARE, Emerging CARE, and Enhanced Behavioral Health CARE.

Maternity CARE

Enroll in UMR Maternity CARE to learn how healthy lifestyle choices and proper medical care before and during your pregnancy can boost your odds of having a healthy, full-term baby. In addition to the education and support, El Paso County provides a maternity benefit to **members that enroll in UMR Maternity CARE no later than their second trimester**. Qualifying members will receive the following benefits: \$800 in-patient hospital copay is waived, and Emergency Room copay is waived if the visit is due to maternity-related complications (primary diagnosis code of "Pregnancy").

NurseLine CARE

Through UMR's NurseLine service, you have convenient access to health care advice from a team of highly trained registered nurses. Members can call any time, night or day, to learn about a wide variety of medical conditions and treatment options.

Family Advocate Support CARE

The Family Advocate Support CARE program is designed to assist eligible dependents and families who are navigating complex health challenges by providing comprehensive and personalized support. UMR uses medical and pharmacy claims data and program referrals to identify members for this program.

Emerging CARE

The Emerging CARE program provides personalized support to help members manage health concerns and reduce the risk of more serious conditions. Experienced nurses and social workers offer guidance with ongoing health needs, specialty medications, behavioral health services, surgery preparation, and recovery after hospitalization.

Enhanced Behavioral Health CARE

The Enhanced Behavioral Health CARE program provides personalized support for members managing mental health conditions or substance use challenges. Individuals with one or more conditions may be invited to work with a CARE nurse one-on-one, or you can self-enroll. CARE nurses offer guidance to help members better understand and follow treatment plans, learn selfcare skills and ways to overcome contributing lifestyle factors.

Website: umr.com | Phone: (800) 207-3172

Nox Sleep Care Programs

The Nox Sleep Care (formerly SleepCharge) programs for sleep health provide assessment, testing, diagnosis, and treatment for sleep conditions such as insomnia, restless leg syndrome, and sleep apnea, as well as sleep apnea equipment and supplies.

Start with the Sleep Checkup to get your personalized sleep report which includes analysis of your Duration, Timing, and Quality (DTQ). Use your report to lay the foundation for sleep improvement, then access Nox's clinical services for additional care.

Nox Sleep Care must be used for sleep apnea testing, equipment, and supplies of employees and their adult dependents enrolled on the EPC Medical Plan. All costs for the program are covered by plan.

Website: sleepcharge.com/epcmcd | Phone: (877) 615-7257 | Email: sleep@noxhealth.com

Galleri Multi-Cancer Early Detection Test

Galleri is a proactive blood test that 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 EPC Medical Plan enrollees ages 50 years or older, or 40-49 with elevated risk factors. Eligible participants may obtain the Galleri test annually, 12 months from the last date of service. Check your eligibility and request the test at the link below!

This test does not replace other available or recommended screenings.

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

MEDICAL PLAN (CONTINUED)

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 | Email: help@hingehealth.com

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: (855) 523-9355, TTY 711

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; Employee Assigned ID is not an available option for our members.

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

Health Care Reform Notice

Grandfathered Health Plan: El Paso County believes the Medical 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.

DENTAL PLANS

El Paso County employees have two dental options to choose from through Delta Dental of Colorado.

Prevention First is included on both plans: With this program, covered Diagnostic and Preventive Services do not count toward your calendar year maximum.

You may visit any licensed dentist on either plan, but you will receive the greatest savings when you choose a **PPO dentist**.

Delta Dental “Low Option” PPO Plan

Low Option Plan Tiers	Per Pay Period Rate (Twice Monthly)	Monthly Rate
Employee Only	\$8.18	\$16.36
Employee + Spouse	\$13.73	\$27.46
Employee + Child(ren)	\$21.23	\$42.46
Employee + Family	\$31.06	\$62.12

Benefits		PPO Dentist	Premier Dentist*	Out-of-Network Dentist**
Maximum Benefit Calendar Year Maximum		\$1,000 per person, per calendar year		
Calendar Year Deductible (Individual; Per Person/Family Maximum) Applies to Basic and Major		Individual - \$50 Family - \$150		
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		

* 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)

** 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

High Option Plan Tiers	Per Pay Period Rate (Twice Monthly)	Monthly Rate
Employee Only	\$21.21	\$42.42
Employee + Spouse	\$35.64	\$71.28
Employee + Child(ren)	\$55.16	\$110.32
Employee + Family	\$80.62	\$161.24

Benefits		PPO Dentist	Premier Dentist†	Out-of-Network Dentist††
Maximum Benefit Calendar Year Maximum		\$1,500 per person, per calendar year		
Calendar Year Deductible (Individual; Per Person/Family Maximum) Applies to Basic and Major		Individual - \$25 Family - \$75	Individual - \$50 Family - \$150	
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%

† Premier Dentist: Payment is based on the Premier MPA, or the fee actually charged, whichever is less

†† Out-of-Network Dentist: Payment is based on the Out-of-Network MPA; members are responsible for the difference between the out-of-network MPA and the full fee charged by the dentist

VISION PLAN

EyeMed Vision Plan

Utilize **Access** providers for in-network benefits.

Enjoy benefits for both glasses and contact lenses in the same calendar year – no need to choose one or the other.

Vision Plan Tiers	Per Pay Period Rate (Twice Monthly)	Monthly Rate
Employee Only	\$3.80	\$7.60
Employee + Spouse	\$7.22	\$14.44
Employee + Child(ren)	\$7.60	\$15.20
Employee + Family	\$11.17	\$22.34

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

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

DISABILITY INSURANCE

These disability insurance plans provide a financial benefit that pays a percentage of an employee's salary for a specified amount of time if they are ill or injured and cannot perform the duties of their job. Plan policies can be found on the Employee Benefits Website.

Short Term Disability Insurance

Short Term Disability Insurance provides partial income replacement if a covered illness or injury keeps you from working. The plan coverage is 60% of your weekly income, up to \$1,500 per week, for a maximum of 26 weeks. Benefit payments may begin following 14 continuous days of disability.

Plan premiums are paid by the employee through payroll contributions of **\$6.50 per pay period** (twice monthly).

Enrollment Periods

New hire: New full-time employees are auto-enrolled in Short Term Disability insurance, but may choose to opt out during their initial enrollment period. Outside of the initial enrollment period, Short Term Disability enrollment may only be changed during open Enrollment. Please see the plan policy for Pre-existing Condition Clause and other information.

Open enrollment: Open enrollment is the only time that you may change your enrollment to opt in or out of this plan. If changing your election during the open enrollment period, please review the plan policy for Pre-existing Condition Clause and other information.

Long Term Disability Insurance

Long Term Disability Insurance helps protect your income if a covered illness or injury prevents you from working for an extended period. The plan provides 60% of your monthly income, up to \$6,500 per month. Benefit payments may begin following 180 continuous days of disability.

Full-time employees are automatically enrolled in Long Term Disability insurance. Plan premiums are paid in full by the County.

LIFE INSURANCE

The **Life Insurance** plans provide term life coverage. Term life insurance can provide financial protection for the designated beneficiary upon the death of the insured.

Accidental Death and Dismemberment (AD&D) Insurance provides specified benefits for a covered accidental bodily injury that directly causes dismemberment (e.g., the loss of a hand, foot, or eye). In the event that death occurs from a covered accident, both the Life and the AD&D benefits would be payable.

Beneficiary Designation Notice

Please enter, review, or update your life insurance beneficiary designations in the enrollment process.



Plan policies can be found on the Employee Benefits Website.

Basic Life and AD&D Insurance

El Paso County provides Basic Life Insurance for all full-time employees valued at \$40,000 in Life and AD&D coverage and \$2,000 in Life coverage for their dependents at no cost to the employee.

Voluntary Life and AD&D Insurance

Employees interested in electing additional life insurance can enroll in the Voluntary Life and/or AD&D Insurance. You can elect coverage up to the lesser of 7 times your salary or \$500,000, for your spouse up to the lesser of 100% of your coverage or \$250,000, for your children a flat amount of \$10,000. Elections will be in increments of \$10,000. Employee and spouse costs are based on age, tobacco usage, and coverage amounts.

Guarantee Issue (GI)

GI is amount of life insurance coverage that you can obtain without providing Evidence of Insurability (EOI) or answering health questions. GI for an employee is \$200,000 and for a spouse is \$30,000.

Enrollment Periods

Employees may elect new coverage or increase amounts during the enrollment periods below. Employees may decrease or waive coverage during open enrollment or at any time during the year without a qualifying life event.

- **New hire:** If you **enroll** within 31 days of becoming eligible, Voluntary Life coverage up to the GI can be obtained without medical underwriting. For coverage above the GI, you will be required to complete EOI. If you **waive** coverage in your initial enrollment period and later enroll during an open enrollment period, EOI will be required for any amount of coverage elected.
- **Open enrollment:** Open enrollment is the only time that you can increase coverage or enroll if you previously declined coverage. Employees **increasing** their life insurance can elect coverage up to the GI and are guaranteed this coverage. If you select coverage above the GI, you will be required to complete EOI. Employees **enrolling** in coverage during open enrollment (if enrolled after their initial eligibility period – 31 days from date of hire) will be required to complete EOI for any amount of coverage.

Evidence of Insurability (EOI)

If EOI is required, please complete the questionnaire at the website below **within 31 days** of completing the enrollment process. If EOI is not completed by the deadline, your pending coverage requiring EOI will be denied.

Website: securehealth.unum.com/eoiaccess | Access Code: 3JW6WUS

Life Insurance Age Bands	Non-Tobacco Per Pay Period Rate Per \$10,000	Tobacco Per Pay Period Rate Per \$10,000	Life Insurance Age Bands	Non-Tobacco Per Pay Period Rate Per \$10,000	Tobacco Per Pay Period Rate Per \$10,000
<25	\$0.22	\$0.31	50-54	\$1.59	\$3.39
25-29	\$0.22	\$0.31	55-59	\$2.47	\$5.70
30-34	\$0.27	\$0.40	60-64	\$3.87	\$8.85
35-39	\$0.31	\$0.53	65-69	\$6.70	\$15.95
40-44	\$0.57	\$1.28	70-74	\$12.50	\$28.50
45-49	\$0.93	\$2.16	75+	\$12.50	\$28.50

Child Life Per Pay Period Rate: \$10,000 = \$1.00

AD&D Per Pay Period Rate: Employee/Spouse/Child per \$10,000 = \$0.10

Voluntary Life rate increases apply on January 1 following birthday in which you age into a new band

SUPPLEMENTAL BENEFITS

Supplemental benefits provide financial support when you experience a covered illness, injury, or hospital stay. These plans, including Critical Illness, Accident, and Hospital Indemnity, complement your medical coverage by helping with out-of-pocket costs and other expenses.

Critical Illness Insurance

This plan is designed to help you offset the financial effects of a catastrophic illness with a benefit payment if an insured is diagnosed with a covered critical illness. The Critical Illness benefit is based on the amount of coverage in effect on the date of diagnosis of a critical illness or the date treatment is received according to the terms and provisions of the policy. You may choose \$10,000 or \$20,000 of coverage for yourself and 50% of your coverage, \$5,000 or \$10,000, for your spouse. Dependent children are automatically covered at 50% of employee coverage at no additional cost. Employee and spouse costs are based on age and coverage amounts.

This plan includes the **Be Well Benefit**: Every year, each family member who has Critical Illness coverage can receive \$50 for getting a health screening test.

Critical Illness Age Bands	\$5,000 Coverage Per Pay Period Rate	\$10,000 Coverage Per Pay Period Rate	\$20,000 Coverage Per Pay Period Rate	Critical Illness Age Bands	\$5,000 Coverage Per Pay Period Rate	\$10,000 Coverage Per Pay Period Rate	\$20,000 Coverage Per Pay Period Rate
<25	\$1.11	\$1.46	\$2.16	55-59	\$4.91	\$9.06	\$17.36
25-29	\$1.26	\$1.76	\$2.76	60-64	\$6.76	\$12.76	\$24.76
30-34	\$1.46	\$2.16	\$3.56	65-69	\$9.66	\$18.56	\$36.36
35-39	\$1.79	\$2.81	\$4.86	70-74	\$14.49	\$28.21	\$55.66
40-44	\$2.24	\$3.71	\$6.66	75-79	\$20.66	\$40.56	\$80.36
45-49	\$2.86	\$4.96	\$9.16	80-84	\$29.16	\$57.56	\$114.36
50-54	\$3.69	\$6.61	\$12.46	85+	\$46.21	\$91.66	\$182.56

Critical Illness plan rate increases apply on January 1 following the birthday in which you age into a new band

Accident Insurance

Accident insurance helps you manage out-of-pocket costs and unexpected expenses following a covered accidental injury, from minor injuries to more serious events. Benefits are paid directly to you in the amounts outlined in the plan's schedule of benefits.

Accident Insurance Tiers	Per Pay Period Rate (Twice Monthly)	Monthly Rate
Employee Only	\$3.92	\$7.84
Employee + Spouse	\$6.73	\$13.46
Employee + Child(ren)	\$8.04	\$16.08
Employee + Family	\$10.85	\$21.70

Hospital Indemnity Insurance

This plan is designed to help provide financial protection for covered individuals by paying a benefit due to a hospitalization and in some cases, for treatment received for an accident or sickness, even if that treatment occurs outside the hospital. You can use the benefits to meet the out-of-pocket expenses and extra bills that can occur. Indemnity benefits are paid directly to you based on the amount of coverage listed, regardless of the actual cost of treatment.

This plan includes the **Be Well Benefit**: Every year, each family member who has Hospital Indemnity coverage can receive \$50 for getting a health screening test.

Hospital Indemnity Insurance Tiers	Per Pay Period Rate (Twice Monthly)	Monthly Rate
Employee Only	\$9.17	\$18.34
Employee + Spouse	\$17.34	\$34.68
Employee + Child(ren)	\$12.76	\$25.52
Employee + Family	\$20.93	\$41.86

This is a fixed indemnity policy, not health insurance.

FLEXIBLE SPENDING ACCOUNTS

Employee Benefits Corporation (EBC) is the administrator of El Paso County's Flexible Spending Accounts (FSA).

FSAs are authorized by the IRS and available through your employer. There are two types of FSAs available: a Health Care account and a Dependent Care account. Both accounts allow you to set aside money for eligible expenses on a pre-tax basis. To view a listing of eligible Health Care or Dependent Care expenses, visit the EBC website.

Important FSA Information

- Contributions will be deducted twice monthly, beginning on the first paycheck of the month your benefits are effective.
- You must actively enroll in an FSA during open enrollment for each plan year you wish to participate.
- The **runout period** is the timeframe after the end of the plan year in which you can submit claims for the previous plan year – **2027 claims until March 31, 2028**. For terminations, you will have 3 months from your date of separation to submit claims for expenses incurred up to your date of separation.
- You are allowed to **roll over** a minimum of \$50 up to \$680 of unused Health Care FSA dollars to the following year. Money left in your account at the end of the year under \$50 or in excess of \$680 is forfeited.
- No roll over is allowed for the Dependent Care FSA.
- You do not need to be on the El Paso County Medical Plan to participate.



Health Care FSA

The Health Care FSA is used for **out-of-pocket health care expenses** (medical, prescription, dental, and vision) that are not covered by another health plan and that are incurred by you, your spouse, or your children who is not age 27 as of the end of the calendar year.

Your Health Care FSA election is available on an EBC Benefits Card, which can be used just like a debit card for eligible expenses in the plan year.

In 2027, the maximum that you can contribute to the **Health Care FSA is \$3,400**.

Dependent Care FSA

The Dependent Care FSA is used for **day care expenses** incurred for the care of a child under age 13 or for the care of a dependent who is physically or mentally incapable of taking care of themselves.

In 2027, the maximum that you can contribute to the **Dependent Care FSA is \$7,500** (\$3,750 if married, filing separate income tax returns).

Reach Your Peak+ (RYP+) Health Reimbursement Account (HRA)

RYP+ HRA earnings are deposited into an EBC HRA in the month following the end of a quarter. For new participants, an EBC Benefits Card will be issued upon your first HRA earnings deposit. The EBC Benefits Card can be used just like a debit card and HRA earnings can be used for FSA-eligible health care expenses. See [RYP Enrollment](#) on page 4 for more information.

Continued RYP+ participation allows you to roll over up to \$2,000. If you do not re-enroll in the RYP+ program during the annual open enrollment period, HRA funds will be forfeited on January 1.

Health Care FSA amount must be exhausted before HRA funds can be accessed. If a claim is submitted for the HRA while there is still an FSA amount available, EBC may automatically process the claim through the FSA.

EXTRAS

Employee Fitness Center

The El Paso County Citizens Service Center (CSC) Fitness Center is conveniently located on the 1st floor of the CSC at 1675 West Garden of the Gods Road, Suite 1011. Memberships are available to full-time and part-time El Paso County employees at no cost. The CSC Fitness Center is managed by nationally certified staff who instruct exercise classes including, but not limited to, Boot Camp, HIIT, Yoga, and Core. Confidential fitness assessments and equipment orientations are available. The CSC Fitness Center is equipped with full locker rooms, cardiovascular equipment, strength machines, and free weights. Virtual and on-demand exercise classes are also available.

Website: epcfitnesshub.com | **Phone:** (719) 520-7619 | **Email:** epcfitness@elpasoco.com

Discount Program

Working Advantage is your one-stop shop for unbeatable savings on the things you love! All El Paso County employees can access deals and limited-time offers on products, services, and experiences. Check out the amazing offers at the website below.

Website: elpasoco.savings.workingadvantage.com

Tuition Reimbursement Program

The El Paso County Tuition Reimbursement Program is coordinated by the Employee Benefits Division. Regular, full-time El Paso County employees may be eligible to participate in the program. Distribution of funds is not guaranteed and expressly subject to availability, so early submission is recommended. Employees on a corrective action plan or who have received discipline in the previous 12 months, as defined in Chapter 7 of the Personnel Policies Manual, are not eligible for this benefit.

Website: admin.elpasoco.com/human-resources/employeebenefits/tuition

Public Service Loan Forgiveness

As an El Paso County employee, you may be eligible for student loan forgiveness through the Public Service Loan Forgiveness (PSLF) program. The PSLF program offers loan forgiveness for qualifying federal student loans after 120 qualifying monthly payments while working full-time for a qualifying public service employer, such as El Paso County.

Check your eligibility on the PSLF program website, studentaid.gov/pslf, then complete the PSLF Help Tool process. To submit your employment verification, contact Experian Verify via website, phone, or email listed below.

Employer Access Code for El Paso County: E90D44A3

Website: experianverify.com | **Phone:** (404) 382-5400 | **Email:** verifysupport@experian.com

Nox Sleep Care Programs for Sleep Health

All El Paso County full-time employees are eligible for the following Nox Sleep Care programs for sleep health.

Complete the Sleep Checkup to get your personalized sleep report, which includes an analysis of your Duration, Timing, and Quality (DTQ). Use your report to lay the foundation for sleep improvement. Then, explore the Sleep Life Learning Center for a virtual, self-guided library of sleep education and guided bedtime mindfulness, to help you achieve a healthier sleep lifestyle.

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

Empower Retirement 457 Deferred Compensation

All El Paso County employees (full-time, part-time, and temporary) are eligible for the 457 Deferred Compensation Plan from Empower Retirement. The 457 Plan can help you achieve the retirement you want – a future focused on what you want to do instead of what you must do. Section 457(b) of the Internal Revenue Code is designed as a supplemental retirement account, because Social Security and your defined benefit plan might not be enough.

Get started today and use the tools to help you invest for the retirement income you may need. This is an optional retirement plan; El Paso County does not match 457 plan contributions. Find the Empower 457 Plan summary and registration on the Employee Benefits Website.

Website: empower-retirement.com | **Phone:** (800) 701-8255

FREQUENTLY ASKED QUESTIONS (FAQ)

What is the deadline to complete new hire enrollment?

You have **31 days** from your full-time start date to enroll in benefits.

How do I enroll in the Reach Your Peak Wellness Program?

All full-time employees are eligible for Reach Your Peak (RYP). See [RYP Enrollment](#) on page 4 for enrollment instructions and RYP+ deadlines.

What if I don't want to elect any County benefits?

You should still complete the enrollment process to waive any benefits you do not want and to add beneficiaries for your County-paid Basic Life Insurance.

Can I make a change to my benefits at any time?

If you have a qualifying life event (QLE) as defined by the IRS (e.g., birth, adoption, marriage, divorce, gaining or losing other group coverage or Medicaid/CHIP, etc.), you can submit changes to your benefits in the Employee Benefits Portal **within 31 days** (60 days for birth of a child or change to Medicaid eligibility) of the life event effective date. See [Benefits Enrollment](#) on page 3 for more information. If there is no QLE, changes can be made during open enrollment.

What is open enrollment?

Open enrollment is the only time of year when you can make changes to your benefits plan *without* a qualifying life event.

Open enrollment is held annually, typically in the month of October. Changes made at open enrollment are effective January 1st of the following year.

When will premiums be deducted from my paycheck?

Premium contributions will apply to the first two paychecks of each month and will begin on the first paycheck of the month that your benefits become effective. For new hires and QLEs, if you have not completed your enrollment prior to that pay period, your "missed" premium contributions will be added to your next paycheck.

When will ID cards be received?

ID cards will arrive in your mail approximately 2-3 weeks after the completion of your enrollment. You may register on the carrier websites (see [Contact List](#) on page 17) at least one week after your enrollment has been completed to view your ID cards or member information. Medical ID cards will list the employee and covered dependents' names, all other ID cards will list only the employee's name.

Why doesn't the County participate in Colorado's Family and Medical Leave Insurance (FAMLI) program?

The County offers [Short Term Disability](#) insurance, which provides partial income replacement if a covered illness or injury keeps you from working. Because of this, the County has opted out of participation in Colorado's FAMLI program. However, County employees may voluntarily opt in as individuals through the State of Colorado.

Note: Participation in FAMLI does not independently provide job protection or authorization for time away from work. Leave must be approved separately by the County under applicable leave laws, including the Family and Medical Leave Act (FMLA), or County leave policies. For assistance with FMLA, visit the El Paso County [Leave and Accommodations Webpage](#).

For more information about CO FAMLI individual participation and how to opt in, visit famli.colorado.gov/individuals-and-families/opting-in-to-famli.

Where can I update my mailing address and other personal information?

In My Apps, click the Employee Self Service (ESS) app, then click the "Update My Personal Data" button to enter and submit changes for your address, phone number(s), personal email address, marital status, or veteran status. ESS can only be accessed on the County's network or VPN (GlobalProtect).

My spouse is also a full-time employee with El Paso County and is eligible for benefits. How should we enroll?

You should carefully review the contribution rates, deductibles, and out-of-pocket maximums and select the options that best meet your needs. You and your dependents cannot be covered twice on the County's plans. If your elections affect your spouse's or other dependent's enrollment, they must submit changes for a QLE (see [Benefits Enrollment](#) on page 3).

What if I plan to retire next year?

Contact the Employee Benefits Division at least one month, or preferably two months, before you retire to set up a meeting to discuss available retiree health plan benefits. A retirement checklist and FAQ can be found on the [Employee Benefits Website](#).

Note: For the retiree to be eligible for continuation of health benefits (medical, dental, and vision), the retiring employee must be currently enrolled and elect to continue the coverage at the time of retirement.

This is only a summary of benefits. For further plan details, refer to the Summary Plan Descriptions (SPDs) found on the Employee Benefits Website. 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 or electronic materials at any time without prior notification.

CONTACT LIST

Benefits Resource Center (BRC)

BRC Email | Phone *Available beginning January 1st* brcwest@usi.com | (866) 468-7272

Reach Your Peak (RYP) Wellness Program / Personify Health

RYP Website | Phone app.personifyhealth.com | (719) 520-7486

RYP Email reachyourpeakepc@elpasoco.com

Personify Health Support Email | Phone support@personifyhealth.com | (888)-671-9395

Medical Plan: UMR – UnitedHealthcare Choice Plus Network / Group #76-414547

UMR Website | Phone *Available beginning January 1st* umr.com | (800) 207-3172

UMR NurseLine *Available beginning January 1st* (877) 950-5083

Medical Plan: El Paso County Health Centers

Regional Development Center (RDC) Website | Phone mypremisehealth.com | (719) 520-7080

Citizens Service Center (CSC) Website | Phone mypremisehealth.com | (719) 520-7600

24/7 Telehealth Website | Phone mypremisehealth.com | (877) 272-0813

Medical Plan Programs

Lantern Website | Phone my.lanternhealth.com | (833) 814-5702

Nox Sleep Care Website | Phone sleepcharge.com/epcm | (877) 615-7257

Galleri Website | Phone galleri.com/epc | (833) 694-2553

Hinge Health Website | Phone hinge.health/elpasoco | (855) 902-2777

UHC Hearing Website | Phone uhchearing.com | (855) 523-9355, TTY 711

One Pass Select Website | Phone onepassselect.com | (877) 515-9364

Prescription Plan: Express Scripts – RxBIN #003858 / RxPCN #A4 / RxGRP #ELPASO16

Express Scripts Website | Phone express-scripts.com | (855) 738-1153

Accredo Specialty Rx Website | Phone accredo.com | (800) 803-2523

Dental Plans: Delta Dental of Colorado – Group #12104

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

Vision Plan: EyeMed – Access Network / Group #9728999

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

Flexible Spending and Health Reimbursement Accounts: Employee Benefits Corporation (EBC)

EBC Website | Phone ebcflex.com | (800) 346-2126

Disability, Life, and Supplemental Plans: Unum – STD Policy #907374 / Basic Life Policy #907338 / Voluntary Life Policy #907339

Accident Policy #946480 / Critical Illness Policy #946481 / Hospital Indemnity Policy # 946482

Disability Plans Website | Phone unum.com | (888) 673-9940

Life Plans Website | Phone unum.com | (800) 421-0344

Supplemental Plans Website | Phone unum.com | (800) 635-5597

Mental Health and Employee Assistance Program

Lyra Website | Phone epc.lyrahealth.com | (877) 207-9553

Work-Life: Caelon Website worklife.caelonwellbeing.com/epc

Retirement Plan: Empower 457b Plan (optional)

Empower Retirement Website | Phone empower-retirement.com | (800) 701-8255

El Paso County Retirement Plan

El Paso County Retirement Office Website | Phone retirement.elpasoco.com | (719) 520-7490

Retirement Plan Email epcrpssupport@elpasoco.com

El Paso County Human Resources – Employee Benefits Division

Employee Benefits Division Website | Phone www.elpasoco.com/benefits | (719) 520-7486 Option 2

Employee Benefits Division Email employeebenefits@elpasoco.com

HIPAA Compliance (719) 520-7486