October 18 – November 19, 2021



2022

Benefits Open Enrollment



AGENDA

- Welcome
- What's Changing?
- What's Not Changing?
- Eligibility & Enrollment
- Review of 2022 Medical Benefits
- How to Enroll
- Questions?



WHAT'S CHANGING?

Medical

- The City will continue to offer two insurance plans:
 - a Copay Plan
 - a High Deductible Health Plan (HDHP)
- Medical plans will still be through Cigna and use the Open Access Plus (OAP) network

Plan enhancements:

- Varicose Vein treatment
- Breast Reduction
- Cigna MDLIVE virtual care replacing Telehealth
 - Only available for those enrolled on the Cigna plan

WHAT'S CHANGING?

- Earn wellness credits to offset any potential increases to premiums. The City will provide two options for the Wellness Incentive Program.
 - Option 1: \$25 Savings Each Month by completing:
 - Biometric Screening
 - Health History and Risk Assessment (HHRA) **located on the Marathon Health ePortal
 - Follow Up Appointment/Comprehensive Health Review (CHR) at Sage Health & Wellness or with your PCP
 - Option 2: \$45 Savings Each Month by completing:
 - Option ONE activities
 - Biometric Screening
 - Health History and Risk Assessment
 - Follow Up Appointment/Comprehensive Health Review (CHR) at Sage Health & Wellness of with your PCP
 - Mix and match well-being activities from the choices provided through the program to complete the requirement
- The Wellness Incentive Program runs from March 1st, 2022 November 30th, 2022. Maximum discount is \$45/month. All program requirements must be completed by November 30th, 2022.

WHAT'S CHANGING?

- Health Savings account maximum deferral limits for 2022 will increase \$50 for self-only to \$3,650 (net \$2,900) and \$100 for family to \$7,300 (net \$5,800)
 - The net amount reflects the IRS maximum allowed reduced by the \$750 or \$1,500 matching City's contribution

WHAT'S NOT CHANGING?

- Sage Health and Wellness Clinic Great news! The Sage Health and Wellness Clinic brought to you by the City of Grand Junction is not going anywhere. Cigna is partnering with the center to continue convenient easy access to care.
- **Delta Dental** No change to the dental plan
- Vision Services Plan (VSP) No change to the vision plan
- Voya Basic Life/AD&D and Voluntary Life No changes to these plans
- Short-Term and Long-Term Disability No change to these plans
- Trustmark Life with Long-Term Care No change to this plan
- LifeLock No change to this plan
- Aflac Accident & Critical Illness No change to these plans

ELIGIBILITY



• Who can enroll?

- Eligible full-time employees and dependents below
 - Legal spouse or registered domestic partner
 - Children under the age of 26

• When can you enroll?

- For new employees, most coverages are effective on the first day of the month coincident with or following the hire date.
- During annual open enrollment
- Within 30 days of a Qualifying Event
 - Marriage, Birth, Divorce, Death of a dependent
- Involuntary loss of coverage

MEDICAL COVERAGE

DIRECTIONS:

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Medical Plan Comparison



Key Medical Benefits	Open Access Plus (OAP) Copay Plan		
	In-Network	Out-of-Network ¹	
Deductible (per calendar year)			
Individual / Family	\$750 / \$1,500	\$4,000 / \$8,000	
Out-of-Pocket Maximum (per calendar year)			
Individual / Family	\$3,500 / \$7,000	\$12,000 / \$24,000	
Covered Services			
Office Visits (physician/specialist)	\$15 / \$30 copay	50% after deductible	
Routine Preventive Care	No charge	50% after deductible	
Outpatient Diagnostic (lab/X-ray)	\$15 / \$30 copay	50% after deductible	
Chiropractic (20 Visits)	\$15 copay	50% after deductible	
Ambulance	20% after deductible	20% after deductible	
Emergency Room	\$150 copay	\$150 copay	
Urgent Care Facility	\$50 copay	50% after deductible	
Inpatient Mental Health	20% after deductible	50% after deductible	
Outpatient Mental Health	\$15 copay	60% after deductible	
Inpatient Hospital Stay	20% after deductible	50% after deductible	
Outpatient Surgery	20% after deductible	50% after deductible	
Prescription Drugs (Tier 1/ Tier 2/ Tier 3/ Tier 4)			
Retail Pharmacy (30-day supply)	\$15 / \$40 / \$55 / 20% to max \$150	Not Covered	
Mail Order (90-day supply)	\$38 / \$100 / \$138 / Not Covered	Not Covered	

Medical Plan Comparison



Key Medical Benefits	Open Access Plus (OAP) High Deductible Health Plan		
	In-Network	Out-of-Network ¹	
Deductible (per calendar year)			
Individual / Family	\$4,000 / \$8,000	\$9,000 / \$18,000	
Out-of-Pocket Maximum (per calendar year)			
Individual / Family	\$6,650 / \$13,300	\$12,000 / \$24,000	
City Contribution to your Health Savings Account (I	HSA)		
Individual / Family	\$750 / \$1,500		
Covered Services			
Office Visits (physician/specialist)	0% after deductible	50% after deductible	
Routine Preventive Care	No charge	Birth - 12: No Charge; 13+: Not Covered	
Outpatient Diagnostic (lab/X-ray)	0% after deductible	50% after deductible	
Chiropractic (20 Visits)	0% after deductible	50% after deductible	
Ambulance	0% after deductible	0% after deductible	
Emergency Room	0% after deductible	0% after deductible	
Urgent Care Facility	0% after deductible	50% after deductible	
Inpatient Mental Health	0% after deductible	50% after deductible	
Outpatient Mental Health	0% after deductible	50% after deductible	
Inpatient Hospital Stay	0% after deductible	50% after deductible	
Outpatient Surgery	0% after deductible	50% after deductible	
Prescription Drugs (Tier 1/ Tier 2/ Tier 3/ Tier 4)			
Retail Pharmacy (30-day supply)	20% after deductible	Not covered	
Mail Order (90-day supply)	20% after deductible (Tier 4 Not covered)	Not covered	

Sage Health and Wellness Center

The Sage Health and Wellness Center provides employees and their families convenient access to:

- Primary healthcare services (treatment for illnesses and injuries, preventive care, routine physicals, health coaching, chronic condition management)
- Mental health counseling (behavioral health support)

NO CHANGES TO THE SAGE HEALTH CENTER

The Health Center is <u>no</u> <u>cost</u> to those members and covered dependents on the OAP Copay Plan, but there will be a \$25 fee for those enrolled in the OAP HDHP Plan.

Schedule an appointment online at <u>my.marathon-health.com</u> or call the center directly at **970-628-0012**.

Visit the Center:

2525 N 8th Street Suite 102 Grand Junction, CO 81501

Health/Medical Hours

Monday: Closed

Tuesday: 8:30 a.m. - 5:00 p.m. Wednesday: 7:00 a.m. - 3:30 p.m. Thursday: 8:30 a.m. - 5:00 p.m. Friday: 7:00 a.m. - 1:00 p.m.

Behavioral Health Hours Monday: Closed

Tuesday: 7:00 a.m. - 5:30 p.m. Wednesday: Closed Thursday: 9:00 a.m. - 7:30 p.m. Friday: Closed



Health and Wellness C E N T E R

HSA Eligibility

Because the HSA banking features have certain tax advantages, the IRS defines specific rules for participation in the bank account.

To be eligible, you:

- Must be enrolled in an IRS-qualified high-deductible medical plan (high-deductible medical plans that Grand Junction offers meets IRS requirements)
- Cannot have any other health coverage which is not also a qualified high-deductible plan
- Cannot be claimed as a dependent on another person's tax return
- Must not be enrolled in Medicare (A, B or D), TRICARE, or a Full Purpose FSA (including a spouse's Full Purpose FSA)
- If you had an FSA in 2021 and are moving to the HDHP, you need to "spend down" your full FSA account to \$0 by 12/31/2021 in order to make HSA contributions (or receive City contributions) in the 2022 plan year. If you do not "spend down" the entire amount, you will need to wait until 3/31/2022 to make any HSA contributions and will not receive the City contributions.

Your HSA maximum contribution

The IRS has set the following limits for 2021:



Under age 55 and not enrolled in Medicare (based on a 12-month period):

- Up to \$3,650 individual coverage*
- Up to \$7,300 family coverage*

Age 55 or older:

- Maximum contribution increases by \$1,000 (considered a "catch-up" contribution)
- Up to \$4,650 individual coverage*
- Up to \$8,300 family coverage*

To make the maximum contribution in a calendar year, you must:

- Meet all requirements to be eligible for HSA contributions on January 1
- Remain qualified through December 1
- If these criteria are not met, maximum contribution is prorated if 1/12 maximum contribution for each month then individual is qualified
- Contributions to your HSA that you receive from your employer and incentives count toward your maximum.
- The City also contributes to your HSA. If you are enrolled in individual coverage, you will receive a contribution of \$750. For employees enrolled in any other tier, the City contribution will be \$1,500.

myCigna.com



Your online home for assessment tools, plan management, medical updates and much more

- Find in-network doctors specific to your plan
- View ID card information
- Review your coverage
- Manage and track claims
- Order refills or talk with a pharmacist at Cigna Home Delivery Pharmacy^{SM]}
- Use our Prescription Drug Price Quote tool to compare realtime drug pricing specific to your plan
- Compare cost and quality information for doctors and hospitals
- Access a variety of health and wellness tools and resources
- Sign up to receive alerts when new plan documents are available
- Track your account balances and deductibles



Download the myCigna[®] App and access your account with just a fingerprint on any compatible device.**

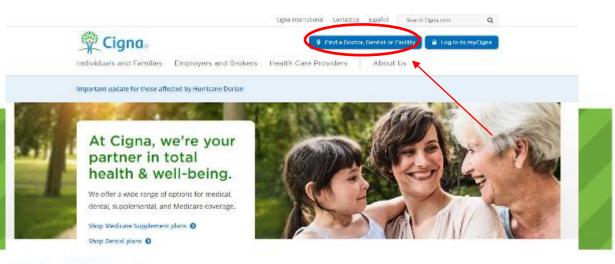


Is your doctor in Cigna's network?

Before you become a Cigna member, you'll want to be sure that your current provider is in the network. Follow these simple steps to search your provider. If your provider is not in the Cigna network, you can find a new doctor by using the same steps.

Step 1 – Go to www.Cigna.com

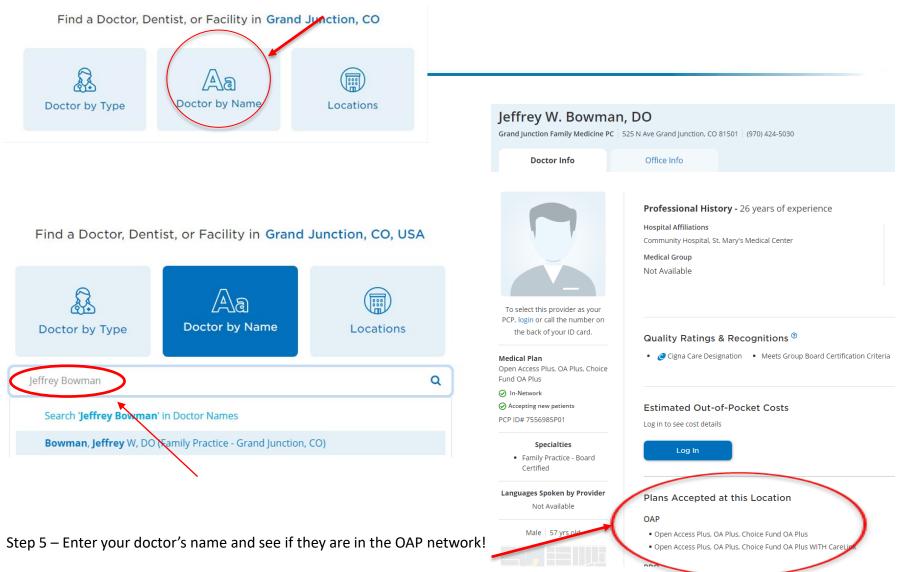
Step 2 - Click on "Find a Doctor, Dentist or Facility" button in the upper right hand corner of the page



Step 3 – In the middle of the page (if you are not a Cigna member yet), please click on "Plans through your employer or school"



Step 4 – Enter your location in the box and then click on "Doctor by Name".



MDLIVE Virtual Care

Life is demanding. It's hard to find time to take care of yourself and your family members as it is, never mind when one of you isn't feeling well. That's why your health plan through Cigna includes access to minor medical and behavioral/mental health virtual care.

Whether it's late at night and your doctor or therapist isn't available or you just don't have the time or energy to leave the house, you can:

- > Access care from anywhere via video or phone.
- Get minor medical virtual care 24/7/365 even on weekends and holidays.
- Schedule a behavioral/mental health virtual care appointment online in minutes.
- Connect with quality board-certified doctors and pediatricians as well as licensed counselors and psychiatrists.
- Have a prescription sent directly to your local pharmacy, if appropriate.

Connect with virtual care your way.

- > Contact your in-network provider or counselor
- Talk to an MDLIVE medical provider on demand on myCigna.com
- Schedule an appointment with an MDLIVE provider or licensed therapist on myCigna.com
- > Call MDLIVE 24/7 at 888.726.3171

*Available only to those enrolled in Cigna medical plan

Type of Service	Copay Plan Cost	HDHP Cost
Medical	\$15 copay	Up to \$55
Behavioral Health	\$30 copay	Varies- cost will be disclosed ahead of purchase

DENTAL COVERAGE



Dental Plan



Delta Dental of Colorado			
	PPO plus Premier Network		
	In Network	Non Network (You will be responsible for all non- standard rates)	
Calendar Year Deductible:	\$25 Individual \$75 Family \$5,000 Per Member		
Calendar Year Maximum:			
Covered Services:			
Diagnostic and Preventive• Oral Evaluation - 2 evaluations in a 12 month period• X-Rays - (bitewings - 2 in 12 month period, full - 1 in a 36 month period)• Fluoride Treatments - 1 treatment in a 12 month period to age 16• Space Maintainers - For premature loss of baby teeth to age 14• Sealants - 1 per tooth in 36 months to age 15	100%	100%	
 Basic Services Fillings - Once per tooth in a 12-month period Oral Surgery - General Anesthesia is a benefit only when covered oral surgery Endodontics/Periodontics - Surgical Periodontal covered once in a 36-month period Occlusal Guards/ Night Guards - Once in a 60-month period 	80%	80%	
Major Services • Crowns - Once per tooth in a 36-month period, not a benefit under age 12 • Implants - Once per tooth in a 60-month period, not a benefit under age 16 • Dentures, Partials, Bridges - Once in a 60-month period	50%	50%	
TMJ \$1,000 lifetime maximum	50%	50%	
Orthodontics Per Eligible Dependent - \$5,000 Lifetime Max For covered children to age 26	50%	50%	



VISION COVERAGE



Vision Plan



Vision Service Providers (VSP)

	VSP Choice	VSP Choice Network	
	In Network	Non Network	
Eye Exam: • Every 12 months	\$10 copay	Up to \$45 reimbursement	
Prescription Glass Lenses: (Single vision, lined bifocal, and lined trifocal lenses) • Every 12 months	\$25	Varies	
Frames: • Every 12 months	 \$130 allowance for a wide selection of frames \$150 allowance for featured frame brands 20% savings on the amount over your allowance 	Up to \$70 reimbursement	
Contact Lenses (in lieu of complete pair of prescription eyeglasses): • Every 12 months	 \$130 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) 	Up to \$105 reimbursement	



Additional Benefits

- Flexible Spending Accounts (FSA)
 - Healthcare FSA
 - Limited Purpose FSA
 - Dependent Care FSA

Additional Benefits Continued

- Life and AD&D Insurance
 - Employee and Dependent Basic Life and AD&D
 - Supplemental Life and Supplemental AD&D
- Disability Insurance
 - Short Term Disability
 - Long Term Disability
- Employee Assistance Program (EAP)
 - <u>www.triadeap.com</u>; Username: gj Password: eap

Additional Benefits Continued

- Voluntary Aflac Benefits
 - Accident
 - Critical Illness
- Trustmark Life with Long-Term Care
- Identity Theft

Important Information

If you want to make changes to any of your plans, you will need to complete the online open enrollment process through the HR portal (where you go to view your paychecks).

If you decide to stay in the plan you are in today, you still need to complete the online open enrollment process. Otherwise you will not have benefits.

QUESTIONS

Human Resources Email: hr@gjcity.org Phone: 970-244-1512

Kelsee Heller, HUB International Email: Kelsee.Heller@hubinternational.com Phone: 720-207-2419