

# Table of Contents

WELCOME LETTER	2
BENEFITS ELIGIBILITY	3
BENEFITS ENROLLMENT	4
HEALTH CARE BASICS	5
MEDICAL PLANS	6
BENEFIT PLAN PREMIUMS	12
BUDGETING FOR YOUR HEALTH CARE	13
DENTAL PLANS	16
VISION PLAN	17
EMPLOYEE HEALTH AND WELL-BEING	18
LIFE INSURANCE	20
DISABILITY INSURANCE	21
LEGAL SERVICES	22
ADDITIONAL BENEFITS	23
RETIREMENT PLANNING	24
BENEFICIARY DESIGNATION	25
Dependent Eligibility Verification	26
WORK-LIFE BALANCE	27
PART-TIME BENEFIT PLAN PREMIUMS & ACCRUALS	28

This is a summary of benefits drafted in plain language to assist you in understanding what benefits are offered and does not constitute a policy. Detailed provisions are contained in each provider's plan document. If there is a discrepancy between what is presented here and the official plan documents, the plan documents will govern.

### A MESSAGE FROM THE OFFICE OF HUMAN RESOURCES

Dear City Colleague,

Recent times have brought with it many unique challenges. You, Denver's distinctive employees, have faced these challenges head on—despite a rapidly evolving workforce. The residents of Denver continue to benefit from the services and programs you provide. Ultimately, it's you who brings shape to the city you love. As we look forward to a more optimistic year ahead, we ask that you take some time to consider your needs and the needs of your family. Benefits Open Enrollment is the annual chance to evaluate all the benefit plans



Denver offers—some voluntary (like health care plans, wellness); some automatic (like employee assistance, life, disability); and some a combination of both (like health-care spending, retirement planning).

October is that time of year to reassess the benefit plans you will have in the coming year, 2023. Be sure to navigate through your entire Workday Benefits Open Enrollment action ensuring you are choosing the correct plans and dependents, designating your beneficiaries, setting up your health-care savings/spending accounts for 2023 and so on. This year's annual Open Enrollment period is:

### Monday, October 10, 2022 - Friday, October 28, 2022, by 11:59 p.m.

Submit your 2023 benefit selections in Workday by Friday, October 28, 2022. Changes to most benefit plans throughout the new year will require a qualified life event—so choose wisely during benefits open enrollment.

#### What's new in 2023?

- » Denver Health Medical Plan will no longer be offered.
  - » Current 2022 Denver Health Medical Plan enrollees will be automatically enrolled in UnitedHealthcare's high-deductible health plan (HDHP) effective January 1, 2023, if no other election is made during open enrollment.
  - » Current 2022 Denver Health Medical Plan enrollees can actively choose to enroll in one of the other three medical plans or choose to waive medical coverage for 2023.
- » Medical plan premiums rates will increase in 2023.
- » The IRS has increased the Health Savings Account (HSA) annual contribution limits:
  - » Employee only HDHP limit is \$3,850
  - » Family HDHP limit is \$7,750
  - » Age 55 and up catch-up contributions remains \$1,000
- » The IRS has increased the high-deductible health plan (HDHP) minimum annual deductibles:
  - » Employee only HDHP coverage is \$1,500
  - » Family HDHP coverage is \$3,000
- » The IRS has increased the HDHP minimum out-of-pocket maximums:
  - » Employee only HDHP coverage is \$3,000
  - » Family HDHP coverage is \$6,000

Log into Workday to access your 2023 Open Enrollment action—found in your Workday inbox or through the "Enroll" link found on the new Workday Benefits and Pay Hub Overview page.

Your OHR Benefits team is ready to assist you with any questions. Contact us at benefits@denvergov.org or 720-913-5697.

Sincerely,

**OHR Benefits & Wellness** 

### Benefits Eligibility

### WHO IS ELIGIBLE FOR BENEFITS?

As a full-time (30-40 hours per week) or part-time (20-29 hours per week) unlimited, limited or Sheriff employee, you are eligible for City and County of Denver employee benefits. If you are an on-call/seasonal employee, you may become eligible for medical coverage under the Affordable Care Act. You will be notified by the OHR Benefits & Wellness team when you become eligible.

### WHAT IF I'M MARRIED TO, OR A PARENT/CHILD OF, ANOTHER CITY AND COUNTY OF DENVER EMPLOYEE?

You can enroll in medical and dental coverage as an employee or as a dependent only. You and your dependents cannot have dual coverage as both an employee and a dependent under the City and County of Denver's employee benefit plans.

### WHAT DEPENDENTS ARE ELIGIBLE FOR HEALTH CARE COVERAGE?

Your eligible dependents include:

- » Your spouse (including legally married and common-law) or your Colorado State Civil Union spouse (premiums are paid on an after-tax basis)
- » Your children to age 26 (including a stepchild and adopted child)
- » Your dependent children of any age who are physically or mentally unable to care for themselves

When adding dependents, supporting documents must be provided. A list of acceptable dependent documents can be found on page 26.

#### WHEN ARE MY BENEFITS EFFECTIVE, WHO PAYS FOR MY COVERAGE AND WHEN CAN I CHANGE MY ELECTION?

BENEFIT TYPE	EFFECTIVE DATE	ENROLLMENT RESPONSIBILITY	COST	CHANGES WHEN?
	H = Hire Date  1st = 1st of the Month Following Your Hire Date	E = Enrollment Required A = Auto Enrollment	C = City Paid S = Shared Expense EE = Employee	A = Auto Enrollment OE = Open Enrollment QLE = Qualified Life Event
Medical	1st	E	S	OE & QLE
Dental	1st	E	S	OE & QLE
Vision	1st	E	EE	OE & QLE
Flexible Spending Accounts (FSA)	1st	E	EE	OE & QLE
Health Savings Account (HSA)	lst	E	S <sup>2</sup>	Anytime & OE
Short-Term Disability: Sick and Vacation Paid Time Off (PTO)	lst lst	E A	EE³ C	OE A
Additional Life Insurance	lst	E	EE	Anytime
ARAG Legal	1st	E	EE	OE & QLE
Summit Savings Plan	1st	E	EE	Anytime
RTD EcoPass	Н	E	S	Monthly
Basic Life Insurance	Н	A	С	A
Long-Term Disability	1st	A	С	A
Employee Assistance	Н	A	С	A
DERP Pension Benefit	Н	A	S	A
Paid Time Off (PTO)	Н	A	С	A

<sup>(1)</sup> Includes spouse life, dependent children life and accidental death and dismemberment.

<sup>(2)</sup> If you enroll in the high-deductible health plan (HDHP), the city will match contributions to your health savings account up to \$300 for individual coverage, and \$900 for all other coverage tiers.

<sup>(3)</sup> Employees hired prior to January 1, 2010, who remained on the sick and vacation leave plan can elect short-term disability and pay the entire cost.

# When can I enroll or change my benefit elections?

### Benefits Enrollment

### AT OPEN ENROLLMENT

### AS A NEW HIRE OR REHIRE

### **DURING THE YEAR**

During Benefits Open Enrollment you are choosing your plans for the upcoming calendar year (January 1-December 31). When newly hired into a benefit-eligible position you will have 30 days from your hire date to choose your plans for the remainder of the calendar year in which you are hired.

During the calendar year you may experience a qualified life event. You will have 30 days from the event date to submit your plan changes in Workday.

All your benefit plan elections/changes are processed through Workday. For Benefits Open Enrollment, the benefit election event is automatically generated and waiting in your Workday inbox ready for you to take action by choosing plans and submitting your elections. You can find the link for Workday on denverhub.org.

If you do not have Workday access contact OHR Benefits & Wellness prior to the October 28, 2022 Benefits Open Enrollment deadline.

All your benefit plan elections/changes are processed through Workday. For new hire or rehire, the benefit election event is automatically generated and waiting in your Workday inbox ready for you to take action by choosing plans and submitting your elections. You can find the link for Workday on denverhub.org.

When adding dependents, supporting documents must be provided. A list of acceptable dependent documents can be found on page 26.

For qualified life events, you will have to create your own benefit election event in Workday, applicable to the type of event: marriage/divorce, gain/loss of other coverage, etc. Supporting documentation of the event will be required prior to approval of changes.

WE ARE HERE TO HELP YOU ENROLL AND MAKE THE BENEFIT SELECTIONS THAT ARE RIGHT FOR YOU. web: denverhub.org

phone: 720-913-5697

email: benefits@denvergov.org

text: **720-515-6457** 

### Health Care Basics

### MEDICAL PLAN TYPES

The city offers two types of medical plans from two providers: a deductible HMO (DHMO) and high-deductible health plan (HDHP).

A **DHMO** option offers you a wide array of health care services, all within a select network of local Colorado doctors and hospitals depending on the plan provider. It also offers set copays for some services, but can require an annual deductible be met and coinsurance payments after deductible for other services. The higher annual paycheck premium costs and higher out-of-pocket maximums make the DHMO options the costliest for you and your family.

An **HDHP** option offers you the same wide array of health care services as the DHMO plan, but within a select network of local or national doctors and hospitals depending on the plan provider. And UnitedHealthcare can even offer out-of-network coverage. HDHP enrollment also allows for health savings account (HSA) contributions. The lowest paycheck premium costs and lowest out-of-pocket maximums make HDHP less costly for you and your family. You can lower these costs even further by taking advantage of a generous HSA contribution from the city through HSA matching.

### **NETWORK**

Your network is where you can go for covered services and insurance discounts.

- » In-network includes doctors, hospitals and pharmacies you can visit to receive your insurance discount.
- » Closed network means a limited and specific list of doctors, hospitals and pharmacies you can visit for

### Understand your options.

covered services and insurance discounts. Kaiser Permanente offers a closed network with limited exceptions.

» Out-of-network typically includes doctors, hospitals and pharmacies you might not be able to go to for covered service or insurance discounts. UnitedHealthcare's HDHP offers this coverage at higher costs to you.

To minimize your costs, try to utilize innetwork services.

#### COSTS

Costs include what you are paying for your insurance and any services throughout the year.

- » Premiums are what you (and the city) pay for your health care plans. Premiums are what you see deducted from your paychecks for your benefit plans.
- » Copayment or copay is a fixed dollar amount that you pay for a covered health service. In a DHMO, some copays are set for certain services. And in an HDHP, copays aren't set until the annual deductible is met.
- » Coinsurance is your share of service costs after the annual deductible is met, typically a percentage.
- » A deductible is the amount you must pay each calendar year for covered health services before the insurance plan will begin to pay.
- » The out-of-pocket maximum is the most you will pay for covered health services during the calendar year. All copay, deductible and coinsurance payments count toward the outof-pocket maximum. Once you've met your out-of-pocket maximum

your insurance plan will pay 100% of remaining covered health services.

### TAX ADVANTAGES

The type of medical plan you choose also comes with different tax-advantaged spending accounts.

- » A health savings account (HSA) is a bank account that you can use to pay your HDHP out-of-pocket health care costs with pre-tax dollars from your paycheck or with employer contributions. Money deposited in an HSA stays with you, regardless of employer or health plan, and unused balances roll over year to year.
- » A health flexible spending account (FSA) is a spending account that you can use to pay for health care costs (medical, dental and vision) with pre-tax dollars. Funds deposited into a health FSA will be forfeited if you do not use them by the IRS deadline. If you fund an HSA, you are not eligible to contribute to a traditional health FSA; however, you can fund a limited use FSA, which can only be used to pay for qualified dental and vision expense. Medical expenses are excluded.

### Choose the right plan.

The city offers four medical plan options through two carriers: Kaiser Permanente and UnitedHealthcare. Both carriers offer a high-deductible health plan (HDHP) and a deductible HMO (DHMO) plan, with UnitedHealthcare's DHMO called the Colorado Doctors Plan.

### Medical Plans

### HIGH-DEDUCTIBLE HEALTH PLAN

- » Lowest premium paycheck cost
- » Generally, you pay the full cost of all care until the annual deductible is reached
- » Highest deductible
- » After the annual deductible is reached, you will pay coinsurance or copay until the annual out-ofpocket maximum is reached
- » Lowest out-of-pocket maximum
- » You can budget for your out-of-pocket expenses by funding a health savings account (HSA) through Optum Bank®
- » The city contributes to your HSA
- » For every \$1 you deposit into your HSA, the city will match \$2 up to \$300¹ per year for individual coverage, or up to \$900¹ per year for all other coverage tiers

### **DEDUCTIBLE HMO (DHMO) PLAN**

- » Highest premium paycheck cost
- » You will pay for some services in the form of a copay and the full cost of other services until the annual deductible is reached
- » Lowest deductible
- » After the annual deductible is reached, you will pay either copay or coinsurance until the annual out-of-pocket maximum is reached
- » Highest out-of-pocket maximum
- » You can budget for your out-of-pocket expenses by funding a health flexible spending account (FSA) through Alerus
- » No city contribution to your FSA
- » If you contribute to an FSA, your whole pledge amount for the plan year is available for use on qualified expenses on the day your plan starts

### **DEDUCTIBLE**

VS.

#### **HDHP** in-network deductible:

Individual deductible: \$1,500<sup>2</sup> Family deductible: \$3,000<sup>2</sup>

#### **DHMO in-network deductible:**

Individual deductible: \$500 Family deductible: \$500 per member up to \$1,000

### OUT-OF-POCKET MAXIMUM

### HDHP in-network out-of-pocket maximum:

Individual out-of-pocket max: \$3,000<sup>2</sup> Family out-of-pocket max: \$6,000<sup>2</sup>

### DHMO in-network out-of-pocket maximum:

Individual out-of-pocket max: \$4,500 Family out-of-pocket max: \$4,500 per member up to \$9,000

### **COINSURANCE**

**HDHP in-network coinsurance:** 20% UnitedHealthcare out-of-network:

50%

DHMO in-network coinsurance: 20%

### **CONTRIBUTION LIMITS**

### **HSA** contributions limits:

Individual coverage: \$3,850 per year (employer + employee contributions)

Family limits: \$7,750 per year

(employer + employee contributions)

Age 55+: Additional \$1,000 per year

### **Health FSA contribution limits:**

Up to \$2,850 per year



# 2023 Kaiser Permanente medical plan comparisons

	KAISER DHMO	KAISER HDHP		
Summary of Covered Services	In Nahwadi Only	In-Netw	ork Only	
	In-Network Only	Single	Family	
Deductible	\$500 per individual/ \$1,000 family	\$1,500	\$3,000	
Out-of-Pocket Max Single/Family	\$4,500 per individual/\$9,000 family	\$3,000	\$6,000	
Office Visits Primary Care Physician/Specialist	\$0 copay <sup>1</sup> / \$75 copay <sup>1</sup>	20% after	deductible	
Alternative Visits Phone/Video/Chat with Doctor	No charge		ible - phone/video \$0 after deductible	
Network	Kaiser Permanente facilities or affiliated providers	Kaiser Permanente facil	ities or affiliated providers	
Preventive	\$0	;	50	
Prescription Drugs Generic/Formulary/Non-formulary	30-day retail \$10/\$35/\$60 copay (\$100 Specialty) 90-day mail \$20/\$70/\$120 copay	30-day retail \$10/\$35/\$60 copay after deduct 90-day mail \$20/\$70/\$120 copay after deduct		
Inpatient Hospital (per admission, including birth)	20% after deductible	20% after deductible		
Outpatient Hospital	20% after deductible	20% after	deductible	
Ambulatory Surgery Center	\$500 copay	10% after	deductible	
Lab and X-Ray	\$25 copay	20% after	deductible	
MRI/CAT/High Tech Radiology	\$250 copay	20% after	deductible	
Emergency Care	20% after deductible	20% after	deductible	
Urgent Care	\$0 copay <sup>1</sup>	20% after	deductible	
Mental Health Inpatient/Outpatient	20% affer deductible/\$0 copay <sup>1</sup>	20% after deductible		
Alcohol/Substance Abuse				
Inpatient/Outpatient	20% after deductible/\$0 copay <sup>1</sup>	20% after	deductible	
Phys/Occ/Speech Therapy	20% after deductible (max 20 visits/year)	20% after deductible (max 20 visits/year)		
Vision Exam	\$0 copay	20% after	deductible	
Chiropractic	\$30 copay (max 20 visits/year)	20% after deductible	e (max 20 visits/year)	

<sup>(1)</sup> The annual deductible and the 20% coinsurance apply for procedures performed during office, urgent care and outpatient visits.

#### **ABOUT KAISER PERMANENTE**

With Kaiser Permanente you get a personalized, smart, convenient experience, without the guesswork. That means easy access to world-class care, anytime, virtually anywhere. And tools to manage your care and coverage, all at your fingertips.

### **ACCESS TO WORLD-CLASS CARE**

- » Choose from more than 1,100 doctors in 46 specialties. You can change at any time (referrals not needed in most cases).
- » Stop by one of Kaiser Permanente's medical offices to see a doctor, fill prescriptions, and get labs and X-rays done all under one roof.

### CONVENIENT AND PERSONALIZED OPTIONS FOR A MORE SEAMLESS EXPERIENCE

» Use the mobile app to schedule appointments, view medical records, pay medical bills, email your doctor's office and more.

Need help choosing a plan? Visit kp.org/ccd-dpd-benefits/co or call 1-800-324-9208.



- » Visit with a clinician on-demand, 24/7 by video or phone.
- » Skip the trip to the pharmacy with same-day or next-day delivery of medication (shipping fee and some restrictions apply).
- » Take advantage of cost estimator tools to help you keep an eye on your budget and plan for the cost of care.

# 2023 UnitedHealthcare medical plan comparisons

	UNITEDHEALTHCARE DHMO	UNITEDHEALTHCARE HDHP					
Summary of Covered Services	In-Network Only	In-Network (	Nationwide)	Out-of-Network (Nationwide)			
	Colorado Doctors Plan (CDP)	Single	Family	Single	Family		
Deductible	\$500 per individual/ \$1,000 family	In- and out-of-n \$1,500	In- and out-of-network ded. and out \$1,500 \$3,000		n do not cross apply \$6,000 <sup>1</sup>		
Out-of-Pocket Max Single/Family	\$4,500 per individual/ \$9,000 family	\$3,000	\$6,000	\$6,000¹	\$12,000¹		
Office Visits Primary Care Physician Specialist	\$0 copay² \$75 copay²	20% after o			deductible deductible		
Alternative Visits Phone/Email/Virtual Visit	No charge	20% after o	deductible	50% after o	deductible		
Network	Colorado Doctors Plan (CDP)	Choic	e Plus	Out-of-I	Network		
Preventive	\$0	\$	0	Not covered			
Prescription Drugs Tier 1/Tier 2/Tier 3/Tier 4	\$10/\$35/\$60/\$100 copay		\$10/\$35/\$60 copay after deductible		\$10/\$35/\$60 copay after deductible		
Inpatient Hospital (per admission, including birth)	20% after deductible	20% after o	20% after deductible		leductible <sup>3</sup>		
Outpatient Hospital	20% after deductible	20% after o	deductible	50% after deductible <sup>3</sup>			
Lab and X-Ray	\$25 copay	20% after o	deductible	50% after deductible <sup>3</sup>			
MRI/CAT/etc.	\$250 copay	20% after o	deductible	50% after deductible <sup>3</sup>			
Emergency Care	20% after deductible	20% after o	deductible	20% after deductible			
Urgent Care	\$0 copay <sup>2</sup>	20% after o	deductible	50% after o	deductible		
Mental Health Inpatient Outpatient	20% after deductible \$0 copay <sup>2</sup>	20% after deductible 20% after deductible			leductible³ leductible³		
Alcohol/Substance Abuse Inpatient Outpatient	20% after deductible \$0 copay	20% after deductible 20% after deductible				50% after deductible <sup>3</sup> 50% after deductible <sup>3</sup>	
Phys/Occ/Speech Therapy	\$75 copay (max 20 visits/year)	20% after deductible (max 20 visits/year)		50% after deductible <sup>3</sup> (max 20 visits/year)			
Vision Exam	\$50 copay (one exam every 24 months)	20% after deductible (one exam every 24 months)		50% after deductible			
Chiropractic	\$75 copay (max 20 visits/year)	20% after deductible (max 20 visits/year)		50% after deductible			

<sup>(1)</sup> Out-of-network services reimbursed at the Centers for Medicare and Medicaid Services (CMS) rates and CMS rate applies to deductible and out-of-pocket max, not billed cost. (2) The annual deductible and the 20% coinsurance apply for procedures performed during office, urgent care and outpatient visits. (3) Prior authorization required for certain services.

### UNITEDHEALTHCARE COLORADO DOCTORS PLAN DHMO (CDP)

If you enroll in the UnitedHealthcare CDP, you must:

- $\ensuremath{\text{\tiny{N}}}$  See Centura Health or New West Physicians doctors, specialists and hospitals.
- » Choose a PCP within Centura Health or New West Physicians network.
- » Go to whyuhc.com/denver to select a PCP. Click Benefits, then Find a Doctor or Facility and then Colorado Doctors Plan. Once you find a PCP, email their 14-digit Physician ID number to

CCDenrollment@uhc.com. You do not need a referral before seeing another network PCP or specialist.

### UNITEDHEALTHCARE HDHP

The UnitedHealthcare HDHP provides in- and out-of-network coverage, allowing you the freedom to choose any provider nationwide. However, you will pay less out of your pocket when you choose a UnitedHealthcare in-network provider.

To learn more about UnitedHealthcare, visit whyuhc.com/denver or call 855-828-7715 (CDP members) or 800-842-5520 (HDHP members).

### Comparing your medical plan options

To determine the cost of each plan, you must consider the monthly premium, out-of-pocket expenses and the possible city contribution to a health savings account (HSA). For most employees, the HDHP will result in lower out-of-pocket expenses than the corresponding DHMO plan. See page 12 for monthly premiums.

### **EMPLOYEE-ONLY COVERAGE**

	KP DHMO	KP HDHP	UHC CDP	UHC HDHP
Annual premium	\$1,320.24	\$379.68	\$1,511.28	\$500.76
Out-of-Pocket Maximum, annual	\$4,500.00	\$3,000.00	\$4,500.00	\$3,000.00
Maximum Liability	\$5,820.24	\$3,379.68	\$6,011.28	\$3,500.76
City HSA Matching, annual	\$0.00	\$300.00	\$0.00	\$300.00
Maximum Liability Minus City HSA	\$5,820.24	\$3,079.68	\$6,011.28	\$3,200.76
Wellness Incentive (premium discount or HSA contribution)	\$600.00	\$600.00	\$600.00	\$600.00
Maximum Liability Minus Wellness Incentive	\$5,220.24	\$2,479.68	\$5,411.28	\$2,600.76

### **FAMILY COVERAGE**

	KP DHMO	KP HDHP	UHC CDP	UHC HDHP
Annual premium	\$6,865.20	\$3,423.36	\$7,858.56	\$4,516.44
Out-of-Pocket Maximum, annual	\$9,000.00	\$6,000.00	\$9,000.00	\$6,000.00
Maximum Liability	\$15,865.20	\$9,423.36	\$16,858.56	\$10,516.44
City HSA Matching, annual	\$0.00	\$900.00	\$0.00	\$900.00
Maximum Liability Minus City HSA	\$15,865.20	\$8,523.36	\$16,858.56	\$9,616.44
Wellness Incentive (premium discount or HSA contribution)	\$600.00	\$600.00	\$600.00	\$600.00
Maximum Liability Minus Wellness Incentive	\$15,265.20	\$7,923.36	\$16,258.56	\$9,016.44

### **EMPLOYEE + SPOUSE COVERAGE**

KP DHMO	KP HDHP	UHC CDP	UHC HDHP
\$4,266.00	\$1,974.24	\$4,883.28	\$2,604.24
\$9,000.00	\$6,000.00	\$9,000.00	\$6,000.00
\$13,266.00	\$7,974.24	\$13,883.28	\$8,604.24
\$0.00	\$900.00	\$0.00	\$900.00
\$13,266.00	\$7,074.24	\$13,883.28	\$7,704.24
\$600.00	\$600.00	\$600.00	\$600.00
\$12,666.00	\$6,474.24	\$13,283.28	\$7,104.24
	\$4,266.00 \$9,000.00 \$13,266.00 \$0.00 \$13,266.00 \$600.00	\$4,266.00 \$1,974.24 \$9,000.00 \$6,000.00 \$13,266.00 \$7,974.24 \$0.00 \$900.00 \$13,266.00 \$7,074.24 \$600.00 \$600.00	\$4,266.00 \$1,974.24 \$4,883.28 \$9,000.00 \$6,000.00 \$9,000.00 \$13,266.00 \$7,974.24 \$13,883.28 \$0.00 \$900.00 \$0.00 \$13,266.00 \$7,074.24 \$13,883.28 \$600.00 \$600.00 \$600.00

### EMPLOYEE + CHILD(REN) COVERAGE

	KP DHMO	KP HDHP	UHC CDP	UHC HDHP
Annual premium	\$3,465.60	\$1,449.60	\$3,967.08	\$1,912.20
Out-of-Pocket Maximum, annual	\$9,000.00	\$6,000.00	\$9,000.00	\$6,000.00
Maximum Liability	\$12,465.60	\$7,449.60	\$12,967.08	\$7,912.20
City HSA Matching, annual	\$0.00	\$900.00	\$0.00	\$900.00
Maximum Liability Minus City HSA	\$12,465.60	\$6,549.60	\$12,967.08	\$7,012.20
Wellness Incentive (premium discount or HSA contribution)	\$600.00	\$600.00	\$600.00	\$600.00
Maximum Liability Minus Wellness Incentive	\$11,865.60	\$5,949.60	\$12,367.08	\$6,412.20



### Mental health benefits

The city has a variety of resources to help employees and their dependents deal with a wide range of mental health issues.

#### BY MEDICAL PROVIDER

Our medical carriers provide exceptional mental health care benefits. Copays, deductibles and coinsurance will apply.

#### **Kaiser Permanente**

Kaiser Permanente offers mental health and addiction services, no referral needed. And they've expanded access, so you can more easily get the mental and emotional support you need:

- » Use the new Ginger app to text with an emotional support coach for challenges such as anxiety, stress, grief, relationships, and more.
- » Enjoy no-cost access to the Calm and myStrength self-care apps for help with sleep, stress, anxiety, depression, meditation, resilience, and more.
- » Schedule an in-person visit with a Kaiser Permanente mental health therapist or psychiatrist or choose from an extensive network of more than 5,000 affiliated providers.
- » Use convenient virtual options to visit with a mental health provider, such as online chat, video visits, phone appointments, email, and more.

Visit kp.org/mentalhealth to learn more. Tap into the power of self-care apps (at no cost to you) at kp.org/coachingapps/co.

### UnitedHealthcare

UnitedHealthcare offers its members multiple options to access mental health care. Members can access a self-directed therapy app, Sanvello, with guided tools for reducing stress, anxiety and depression. Members also have access to tele-mental health through Talkspace Online Therapy or may set up appointments with an in-person in-network mental health specialist by calling customer service at 800-842-5520 or going online to myUHC.com and looking for a health provider. UnitedHealthcare also offers its members a substance use disorder helpline at 855-780-5955.



The city's Employee Assistance
Program (EAP) is administered through
GuidanceResources EAP. Guidance
Resources offers free confidential
counseling and resources for work-life
needs to employees and members of
their household. Go to page 19 for more
information.

### ONSITE EMPLOYEE ASSISTANCE PROGRAM CONSULTANTS

The city's Onsite Employee Assistance Program (EAP) Consultants are free and available to employees for counseling, career coaching and management consultations. See page 19 for more details.







Employees may use their health savings account (HSA) or flexible spending account (FSA) to cover expenses. More on HSAs and FSAs starting on page 13.

### DispatchHealth

Employees and dependents in any of the city medical plans can avoid unnecessary expenses and trips to the ER by using DispatchHealth.

### **URGENT CARE AT HOME**

DispatchHealth is covered as an urgent care visit and can treat pains, sprains, cuts, wounds, high fevers, upper respiratory infections and much more. Their medical teams are equipped with all the tools to provide advanced medical care in the comfort of your home, workplace or location of need.

### AVAILABLE HOLIDAYS AND WEEKENDS

DispatchHealth is open seven days a week, 8:00 a.m.-10:00 p.m., including holidays. Service areas include Castle Rock to Boulder/Longmont, Denver and Colorado Springs.

### **EVERY HOUSE CALL INCLUDES**

For every house call, DispatchHealth sends a physician assistant or nurse practitioner along with a medical technician. An on-call physician is also available at all times via phone to treat:

#### **Common Ailments**

- » Fever Flu Nausea
- » Headaches Migraines
- » Urinary tract infection

### Skin

- » Hives Allergic reactions
- » Skin abscess (boil)
- » Cuts that need stitches
- » Rashes

#### Eye

- » Eye infection
- » Object in the eye

#### **Gastrointestinal**

- » Diarrhea
- » Heartburn
- » Constipation
- » Nausea and vomiting

#### Respiratory

- » Asthma attacks
- » Bronchitis

#### Ear, Nose and Throat

- » Sore throat
- » Ear infection or pain
- » Sinus infection
- » Nosebleeds

### Neurological

- » Vertigo (dizziness)
- » Weakness

#### Musculoskeletal

- » Joint or back pain
- » Strains or sprains
- » Minor bone breaks

### **Additional Procedures**

- » IV placement
- » IV fluids
- » Stitches
- » Splinting
- » Advanced on-site blood testing
- » Urinary catheter insertion
- » Infectious disease testing (flu, strep)

These services and more are available from DispatchHealth with just a call or click.

- » Call 303.500.1518
- » Go online to dispatchhealth.com

## Benefit Plan Premiums

Listed below are the **monthly premiums** for medical insurance for full-time employees. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis. Deductions are taken from the first two paychecks each month. For the monthly premiums for part-time employees, see page 28.

MEDICAL	Employ	ee only	Employee	+ spouse	Employee ·	+ child(ren)	Far	mily
	City	Employee	City	Employee	City	Employee	City	Employee
Kaiser DHMO	\$577.59	\$110.02	\$1,157.25	\$355.50	\$1,086.43	\$288.80	\$1,628.27	\$572.10
Kaiser HDHP	\$543.62	\$31.64	\$1,101.05	\$164.52	\$1,029.72	\$120.80	\$1,555.21	\$285.28
United DHMO (CDP)	\$661.18	\$125.94	\$1,324.72	\$406.94	\$1,243.64	\$330.59	\$1,836.90	\$654.88
United HDHP	\$717.07	\$41.73	\$1,452.35	\$217.02	\$1,358.26	\$159.35	\$2,051.80	\$376.37

Listed below are the **monthly premiums** for dental insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis. Deductions are taken from the first two paychecks each month. For the monthly premiums for part-time employees, see page 28.

DENTAL	Employ	ee only	Employee + spouse		Employee + child(ren)		Family	
	City	Employee	City	Employee	City	Employee	City	Employee
Delta PPO Low Plan	\$25.24	\$4.25	\$51.07	\$14.39	\$47.50	\$11.46	\$79.26	\$25.70
Delta PPO High Plan	\$25.24	\$15.05	\$51.07	\$38.39	\$47.50	\$33.08	\$79.26	\$64.18
Delta EPO Plan	\$25.24	\$5.40	\$51.07	\$16.95	\$47.50	\$13.78	\$79.26	\$29.82

Listed below are the **monthly premiums** for vision insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis. The monthly premium is deducted from the first paycheck each month.

VISION	Employee only	Employee + spouse	Employee + child(ren)	Family
VSP	\$5.72	\$11.64	\$10.73	\$19.61

### Budgeting for Your Health Care

# Health savings account vs. health flexible spending account.

#### **HEALTH SAVINGS ACCOUNT**

A health savings account (HSA) is an individually-owned bank account that allows you to pay for eligible medical, dental and vision expenses with pre-tax dollars. You own your HSA, and there are no "use it or lose it" restrictions like with flexible spending accounts. Your contributions to this account (including the City and County of Denver contributions) cannot exceed the IRS annual contribution limits. In order to open and fund an HSA in 2023, you must have depleted your previous year's health FSA by December 31, 2022.

**IRS 2023 ANNUAL MAXIMUM HSA CONTRIBUTIONS:** 

Individual: \$3,850 All other tiers: \$7,750

Catch-up contribution (if age 55+): \$1,000

The City and County of Denver will help you by matching your contributions up to the following amounts to your HSA in 2023:

Individual coverage: \$300 All other coverage tiers: \$900



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### HEALTH FLEXIBLE SPENDING ACCOUNT

A health flexible spending account (FSA) is an account that allows you to pay for eligible health care expenses with pre-tax dollars. If you fund an HSA, you cannot fund a health FSA.

2023 PLAN YEAR MAXIMUM FSA CONTRIBUTION: \$3,050 (REGARDLESS OF COVERAGE LEVEL)

HSA VS. HEALTH FSA	HSA	FSA
Funds available in January of the plan year	No, your contributions and the city match are available as deposited per paycheck.	Yes
Annual IRS maximum different depending on coverage level	Yes	X No
You must re-enroll annually to continue payroll deduction	Yes	Yes
You can change your election throughout the year	Yes	No, unless for a qualifying life event.
Balance rolls over from one year to the next	Yes	No, qualifying expenses must occur by March 15 and submitted for reimbursement by March 30 of the following year or forfeit any unreimbursed funds.

If you fund an HSA, you cannot contribute pre-tax dollars to the health FSA.

However, you can fund a limited use FSA. See page 15 for limited use FSA details.

An HSA is a **personal bank account** that you can use to pay out-of-pocket health care expenses with pre-tax dollars. Money deposited in the account stays with you regardless of employer or health plan, and unused balances roll over from year to year.

#### **HSA ELIGIBILITY**

You are eligible to open and fund an HSA if:

- » You are not enrolled in Medicare, Medicaid, TRICARE for Life, or a non-HDHP
- » You are enrolled in a city HDHP
- » You have not contributed to a health FSA or health reimbursement arrangement in 2023
- » Your 2022 health FSA has a zero balance as of December 31, 2022
- » You and/or your dependents are not eligible to be claimed as a dependent on someone else's tax return

### YOUR HSA IS AN INDIVIDUALLY OWNED ACCOUNT

- » You own and administer your HSA
- » You determine how much you will contribute to your account and when to use the money to pay for eligible health care expenses
- » You can change your contribution at any time during the plan year without a qualifying life event
- » Like a bank account, you must have a balance in order to pay for eligible health care expenses
- » There is a \$1 monthly fee if balance drops below \$500
- » Keep all receipts for tax documentation
- » An HSA allows you to save and roll over money from year to year, without any forfeiture of HSA funds
- » The money in the account is always yours, even if you change health plans or employers

### Health savings account (HSA)

### YOUR HSA THROUGH OPTUM BANK

If you enroll in a city high-deductible health plan (HDHP), you may be eligible to open and fund an HSA. You must open your HSA through Optum Bank® at optumbank.com in order to begin contributing to your HSA. If you have an Optum Bank® HSA, contact OHR Benefits & Wellness to have your HSA set up for city payroll contributions.

In 2023, you must make HSA contributions through payroll deductions to receive city HSA funds. For every \$1 you contribute to your HSA, the city will contribute \$2, up to the following amounts:

City HSA Match	Maximum city HSA contribution	Required employee HSA contribution for full city match		
Individual	\$12.50 per paycheck (up to \$300 in 2023)	\$6.25 per paycheck (at least \$150 in 2023)		
Family	\$37.50 per paycheck (up to \$900 in 2023)	\$18.75 per paycheck (at least \$450 in 2023)		

Total contributions to an HSA cannot exceed the annual IRS contribution maximums (below).

### **2023 IRS HSA contribution maximums**

» Individual coverage: \$3,850

» All other tiers: \$7,750

» Catch-up contribution (if age 55+): \$1,000

You are allowed to contribute the difference between the city contributions (city match and Wellness Incentive) and the IRS maximum.

### MAXIMIZE YOUR TAX SAVINGS

- » Contributions to an HSA are tax free and can be made through payroll deduction on a pre-tax basis when you open an HSA through Optum Bank®
- » The money in your HSA (including interest and investment earnings) grows tax free
- » As long as you use the funds to pay for qualified expenses, the money is spent tax free

### USE YOUR HSA TO PAY FOR YOUR QUALIFIED HEALTH EXPENSES

- » Use your HSA money to pay for eligible expenses now or in the future
- » Funds in your HSA can be used for your expenses and those of your spouse and eligible dependents, even if they are not covered by the city HDHP
- » Eligible expenses include deductibles, doctor's office visits, dental expenses, eye exams, prescription expenses and LASIK eye surgery
- » Refer to IRS Publication at irs.gov/ publications/p969#en\_US\_2020\_ publink1000204083 for a complete list of eligible expenses

### THREE WAYS TO ACCESS YOUR HSA MONEY

- » Debit card—Draws directly from your HSA and can be used to pay for eligible expenses at your
- doctor's office, pharmacy or other locations where you purchase healthrelated items or services
- » Pay bills online—Send payments directly to your health care providers, pharmacy or other payees for eligible expenses
- » Reimburse yourself—Request a check or schedule an electronic account transfer to pay yourself back for eligible expenses you paid out of your pocket

### **Important!**

You must have qualifying coverage as defined by the IRS in order to contribute to an HSA or risk adverse tax consequences. If you are enrolled in another plan that is not considered qualifying under IRS guidelines, you are not eligible. This includes, but is not limited to, Medicare, Medicaid, TRICARE for Life or any non high-deductible health plan. For additional information, refer to IRS Publication 969 at irs.gov/uac/About-Publication-969.

### Flexible spending accounts (FSA)

With a flexible spending account (FSA), you can set aside money on a pre-tax basis from your paycheck to cover health care (medical, dental and vision), dependent day care and/or qualified parking expenses.

The city offers these flexible spending accounts through Alerus Retirement and Benefits, whose services include:

- » Client service center at 800-433-1685
- » Access to account info at Alerusrb.com
- » Online claim submission
- » Automatic direct deposit in your bank or savings account
- » Complimentary debit card to all participants, with immediate access to certain locations such as King Soopers, Safeway, Walgreens, Walmart, etc.

#### **HEALTH FSA**

If you enroll in the health FSA, you can use the FSA to pay for eligible health care expenses, including medical, dental and vision expenses with pre-tax dollars.

### 2023 health FSA minimum and maximum contributions:

- » Minimum of \$120 annually
- » Maximum of \$3,050 annually

Another advantage of enrolling in the health FSA is that your whole pledge amount for the plan year is available for use on qualified expenses on the day your plan starts, even though your contributions towards the pledge are spread over the calendar year.

You can submit claims for your qualifying 2023 expenses through March 30, 2024. Your expenses must be incurred no later than March 15, 2024, to be reimbursed from your FSA. Due to IRS rules, you'll forfeit any unused funds.

If you are funding an HSA in 2023, all 2022 health FSA dollars must be spent by December 31, 2022.

#### LIMITED USE FSA

» If you fund an HSA, you are not eligible to fund a health FSA. However, you can fund a

limited use FSA. A limited use FSA can only be used to reimburse dental and vision expenses.

### 2023 limited use FSA minimum and maximum contributions:

- » Minimum of \$120 annually
- » Maximum of \$3,050 annually

You can submit claims for your qualifying 2023 expenses through March 30, 2024. Your expenses must be incurred no later than March 15, 2024, to be reimbursed from your FSA. Due to IRS rules, you'll forfeit any unused funds.

### **DEPENDENT DAY CARE FSA**

If you have childcare expenses for a child aged 12 and under, consider taking advantage of the dependent day care FSA. In the same way that the health FSA lets you set aside pre-tax dollars for eligible health care expenses, you can set aside pre-tax dollars for dependent day care while you work.

### 2023 dependent day care FSA minimum and maximum contributions:

- » Minimum of \$120 annually
- » Maximum of \$5,000 annually, per household

Examples of eligible dependent care expenses include:

- » Day care and babysitter costs
- » Nursery school
- » Before- and after-school programs
- » Summer day camps

The dependent day care FSA is subject to the same reimbursement rules as the health FSA, including the "use it or lose it" rule. Important tax rules also apply to the dependent day care FSA. You can't be reimbursed from your FSA for any expense that is also covered by

With easy payroll deductions and convenient debit cards, FSAs provide a flexible and easy way to cover expenses.

a tax credit on your federal tax return. Unlike the health FSA, your whole pledge amount for the plan year is not available on the day your plan starts. For the dependent day care FSA, you can only be reimbursed for qualified expenses up to the amount you have contributed to your FSA up to that point in time. As your contributions accrue, claims for reimbursement can be processed.

### **QUALIFIED PARKING FSA**

The qualified parking FSA allows you to claim up to \$270 per month of pre-tax dollars to pay for parking expenses while you are at work. To qualify, the parking expenses cannot be associated with a city-owned facility.

### 2023 qualified parking FSA minimum and maximum contributions:

- » Minimum of \$60 annually
- » Maximum of \$3,600 annually

Like the dependent day care FSA, claims for reimbursement can be processed as your contributions accrue. Submit claims within 180 days of date of expense.

Claims submitted after 180 days will not be reimbursed.

### **Important!**

You must "use it or lose it." If you choose to use a health FSA and/or a limited use FSA, remember to plan your contributions carefully. You can submit claims for your qualifying 2023 expenses through March 30, 2024. Your expenses must be incurred no later than March 15, 2024 to be reimbursed from your FSA. Due to IRS rules, you'll forfeit any unused funds.

### Dental Plans

### Oral Health and Overall Health

Because Delta Dental believes so strongly in the association between oral and overall health, they are enhancing our dental plans to include additional preventive services for patients with certain health conditions. Learn more.

Proper dental care is important and taking care of your oral health is an investment in your overall well-being. The city offers three dental plans through Delta Dental of Colorado: EPO plan, PPO Low and PPO High plans.

#### PPO LOW AND PPO HIGH PLANS

The Delta Dental PPO Low and PPO High plans cover a broad range of services with a deductible and coinsurance approach. You and covered members may visit any licensed dentist but get the greatest out-of-pocket savings with a PPO dentist. Review the coinsurance rates for PPO High and PPO Low. Ask your provider for a pre-determination estimate. Delta Dental will review and let your provider know your out-of-pocket cost prior to treatment.

#### **EPO PLAN**

The EPO plan only offers a benefit when you and covered members see an in-network **Delta Dental PPO dentist**. There is no

benefit for out-of-network services. See the EPO plan summary. Only services listed in the copayment schedule are covered. You are responsible for copayment at time of service.

#### **FIND A DENTIST**

Visit deltadentalco.com or call 800.610.0201 to find out if your provider is in the Delta Dental PPO Network.

### **NOTED PLAN FEATURES**

- » Orthodontic lifetime maximums
- » Implant coverage in PPO Low and PPO High plans only
- » No annual maximum benefit in EPO plan
- » No lifetime maximum on orthodontics in EPO plan

Delta Dental does not provide an ID card, coverage is confirmed using name, date of birth and/or social security number.

	DELTA DENTAL	DELTA DENTAL	DELTA DENTAL
Summary of Covered Services	PPO LOW PLAN	PPO HIGH PLAN	EPO PLAN
Annual Maximum Benefit	\$1,250 per person	\$1,250 per person \$2,000 per person	
Deductible Single/Family	\$25 individual <sup>1</sup> /\$75 family <sup>1</sup>	\$25 individual <sup>1</sup> /\$75 family <sup>1</sup>	None
Preventive Services			
Two Routine Cleanings Oral Evaluation Bitewing X-Rays Full Mouth X-Rays or Panoramic Fluoride Treatment Space Maintainers Sealants	\$0 PPO Dentist 20% Premier Dentist 20% Non-Participating Dentist <sup>2</sup> (of Max Plan Allowance)	\$0 PPO Dentist \$0 Premier Dentist \$0 Non-Participating Dentist <sup>2</sup> (of Max Plan Allowance)	Copay (see copay listing found in the "Dental" section of denvergov.org/benefits)
Basic Services			
Amalgam Fillings Resin, Composite Oral Surgery (Extractions) General Anesthesia Surgical Periodontal (gums) Root Canal Therapy	20% PPO Dentist 50% Premier Dentist 50% Non-Participating Dentist <sup>2</sup> (of Max Plan Allowance)	10% PPO Dentist 20% Premier Dentist 20% Non-Participating Dentist <sup>2</sup> (of Max Plan Allowance)	Copay (see copay listing)
Major Services Crowns Dentures, Partials, Bridges Implants	50% PPO Dentist 50% Premier Dentist 50% Non-Participating Dentist <sup>2</sup> (of Max Plan Allowance)	60% PPO Dentist (Implants 50%) 50% Premier Dentist 50% Non-Participating Dentist <sup>2</sup> (of Max Plan Allowance)	Copay (see copay listing) Implants Not Covered
Orthodontics Complete Orthodontic Evaluation Active Orthodontic Treatment	50% PPO Dentist 50% Premier Dentist 50% Non-Participating Dentist <sup>2</sup>	50% PPO Dentist 50% Premier Dentist 50% Non-Participating Dentist <sup>2</sup>	Copay (see copay listing)
Orthodontics Lifetime Maximum	\$1,000 per person	\$2,000 per person	Unlimited (see copay listing)
Network	Delta Dental PPO plus Premier Plan	Delta Dental PPO plus Premier Plan	Delta Dental PPO No Premier Plan or Out-of- Network

<sup>(1)</sup> Applies to basic and major services when you see a PPO dentist. It will apply to all services except orthodontics when you see a non-PPO dentist.

(2) Members are responsible for the difference between the non-participating max plan allowance and the full fee charged by the dentist.

### Vision Plan

Eye exams are an important part of overall health care for your family. With VSP you will get the highest level of care, including an annual exam designed to detect signs of health conditions like diabetes and high blood pressure. **VSP does not provide an ID card, coverage is confirmed using name, date of birth and/or social security number.** 

### FIND A VISION PROVIDER

Find a VSP provider at vsp.com or call 800-877-7195.

0	VSP			
Summary of Covered Services	In-Network			
Routine Exams (every calendar year)	\$10 copay			
Prescription Glasses	\$25 copay			
Lenses and Frames - see below				
Lenses (every calendar year)				
Single vision, lined bifocal and lined trifocal lenses.	Included in prescription glasses copay			
Impact-resistant lenses for dependent children				
Lens Enhancements (every calendar year)				
Standard progressive lenses	\$0 copay			
Premium progressive lenses	\$95-\$105 copay			
Custom progressive lenses	\$150-\$175 copay			
Frames (every other calendar year)	\$160 allowance + 20% off balance \$90 allowance at Costco + 20% off balance			
Contact Lenses (every calendar year)				
Contact lenses instead of frames	\$160 allowance; copay does not apply			
Exam and fitting	Up to \$60 copay			

VSP has special pricing for LASIK with participating centers, a savings that can add up to hundreds of dollars for VSP members. Visit vsp.com or call 800-877-7195.

### Employee Health and Well-Being

The City and County of Denver provides a voluntary employee health and well-being program to help employees lead healthier, more fulfilling lives and do their best work. The program takes a holistic approach, emphasizing the following four pillars of well-being:



### PHYSICAL WELL-BEING

- Nutrition
- Preventive care
- Physical activity



### MENTAL WELL-BEING

- · Stress management
- Mindfulness
- Volunteer program



### FINANCIAL WELL-BEING

- · Debt management
- College savings
- Retirement planning



### PROFESSIONAL WELL-BEING

- Career development
- Skill building
- Resiliency training

### **VITALITY®**

The city offers employees the opportunity to engage in Vitality, a unique wellness program that provides employees with the tools and motivation to make healthy choices. Vitality's personalized, interactive approach considers current overall health, lifestyle and health risk factors. Employees can choose from, engage in and be rewarded for a wide variety of healthy activities – online education, physical activity, preventive care and more – on their own personal pathway to better health.

Because the city wants employees to be the healthiest they can be - for themselves, their family and their friends - the city has incorporated the Vitality program into its benefits package to help educate, motivate and assist employees in realizing the limitless benefits of making healthy choices and adopting healthy behaviors. There's something for everyone in Vitality with activities associated with each of the city's four pillars of well-being. Are you ready to take your first step toward your healthiest life? Go to powerofvitality.com to get started!

### \$600 WELLNESS INCENTIVE

Earn the \$600 Wellness Incentive! The annual Wellness Incentive is available to all employees enrolled as the primary account holder in a city-sponsored medical plan. Eligible employees who complete the requirements by December 31 will receive the \$600 Wellness Incentive according to the type of health plan they

### are enrolled in:

- » Employees enrolled in a highdeductible health plan (HDHP) will receive a one-time \$600 deposit to their Optum health savings account (HSA) in January.
- » Employees enrolled in a DHMO will receive a \$25 health insurance premium reduction in the first two pay periods of each month, for a total of a \$600 annual discount.

To view the list of requirements to earn the Wellness Incentive, visit the Wellness page on DenverHub.org or click on the Act Now, Employer Incentive button at powerofvitality.com.

SUPPORT

### **HEALTH AND WELL-BEING TEAM**

web: DenverHub.org phone: 720-913-5690

email: wellness@denvergov.org

### **VITALITY TEAM**

web: powerofvitality.com phone: 877-224-7117

email: wellness@powerofvitality.com





### ONSITE EMPLOYEE ASSISTANCE PROGRAM CONSULTANT

Onsite Employee Assistance Program (EAP) Consultants are licensed mental health professionals provided by Optum to exclusively support city employees. Their services are free and completely confidential. Employees can meet with an EAP consultant to discuss stress management, communication strategies, substance abuse, grief/loss, family struggles, work-related issues or any other mental health-related concerns they might have. Sessions can be held by phone, virtually or in person. Learn more on DenverHub.

### GUIDANCERESOURCES® EMPLOYEE ASSISTANCE PROGRAM

Personal issues, planning for life events or simply managing daily life can affect your work, health and family. The city provides a wide variety of resources through the GuidanceResources® Employee Assistance Program (EAP). These confidential resources are available to help you deal with a wide range of work-life issues. GuidanceResources® is confidential and provided at no charge to you and your dependents for up to six sessions per issue, per year.

#### **NOT JUST A COUNSELING PROGRAM**

GuidanceResources® offers a large variety of services beyond counseling through the ComPsych® GuidanceResources® program. You can also find legal information and resources; financial information, resources and tools; information, referrals and resources for work-life needs and lots of online information. Their services are available with just a call or click.

- » Call 877-327-3854 or 800-697-0353 (TDD).
- » Speak to a counseling professional who will help guide you to the appropriate services.
- » Visit online at guidanceresources.com and enter Denver Web ID: DENVEREAP

### MY SECURE ADVANTAGE

My Secure Advantage (MSA) is a comprehensive financial wellness program available to all benefits-eligible employees. Whether you're managing student loans, buying a home, growing your family, reducing debt, or preparing for retirement, MSA will help guide you through it. Programming includes:

### **PRIVATE FINANCIAL WEBSITE**

Year-round access to online video courses, articles, calculators and worksheets on their secure website.

#### **ASSESSMENT AND ACTION PLAN**

Receive an action plan based on the results of your financial assessment and track your financial well-being score over time to see your progress.

### **PERSONAL MONEY COACH**

Each calendar year, you have 90 days of unlimited access to a money coach. Coaches don't sell products or services – their mission is to provide confidential,

unbiased guidance to help you create, manage and achieve your financial goals, no matter what your current life stage or financial situation may be.

#### **MSA WALLET**

Budgeting software to monitor your cash flow in one place with 24/7 visibility and bank-level security.

#### **CREDIT SCORE AND REPORT**

Work with a coach to access ID monitoring and credit benefits during your benefit period. Get your TransUnion credit score (updated every 30 days) and credit report (updated annually).

#### **LIVE EVENTS**

Enjoy webinars and live forums covering virtually all areas of finance and related life events.

Register for My Secure Advantage at denver.mysecureadvantage.com or call 888-724-2326.

### BEHAVIORAL HEALTH RESOURCES BEHAVIORAL HEALTH TOOLKIT FOR EMPLOYEES

This online guide is available to employees and their dependents. Here you'll find information about the Employee Assistance Program, substance use, leave and time off and behavioral health services offered through the city's medical plans. Access these resources at Denvergov.org by typing "behavioral health" in the search field.

### BEHAVIORAL HEALTH TOOLKIT FOR MANAGERS

This resource provides managers and supervisors with guidance to help prepare for and handle a crisis that may affect the team. This toolkit also offers tips for managing employee well-being and leveraging the Employee Assistance Program for help dealing with difficult issues as they arise. This resource can be found on DenverHub.org by typing "behavioral health" in the search field.

### Life Insurance

#### LIFE INSURANCE

The city offers several life insurance policy options through Standard Insurance Company. You are automatically enrolled in a basic life insurance policy and are eligible to voluntarily enroll in additional life policies.

#### **BASIC LIFE INSURANCE**

The city pays for your basic life insurance benefit equal to two times your annual salary, up to a maximum of \$400,000. You are automatically enrolled and this policy is effective upon hire.

### ADDITIONAL AND DEPENDENT LIFE INSURANCE

Additional life policies for you and your dependents are optional benefits and are paid for entirely by you in after-tax deductions. The premium rates are based upon set rates determined by age and tobacco use (except for the children policies mentioned below). View rates in Workday or Denvergov.org/benefits by typing "Employee Life Insurance" in the search field.

In addition to your basic life insurance, you may apply to purchase additional life insurance for yourself in increments of \$5,000 up to a maximum of \$300,000. Within 30 days of your hire or rehire date, you can elect up to \$200,000 without providing a medical history statement.

You can apply to purchase additional life coverage for your spouse in increments of \$5,000 up to a maximum of \$300,000, but cannot exceed 100 percent of your combined basic and additional life coverage. Within 30 days of your hire or rehire date, you can elect spousal life up to \$30,000 without providing a medical history statement.

You may also purchase additional life coverage for your eligible children in the amounts of \$5,000 at a cost of \$0.75 monthly or \$10,000 at a cost of \$1.50 monthly.

Standard Insurance Company requires

completion and submission of a medical history statement for any voluntary additional life and spouse life policies when requested more than 30 days from hire or rehire date. Child life and AD&D policies are exempt from the medical history requirement.

### ACCIDENTAL DEATH AND DISMEMBERMENT

You can purchase accidental death and dismemberment (AD&D) coverage. This coverage pays a benefit if you or your eligible dependents die or suffer serious injury as a result of a covered accident. You can buy AD&D coverage in increments of \$10,000 up to a maximum of \$500,000. Amounts in excess of \$250,000 cannot exceed 10 times your annual earnings. If you are enrolled in AD&D coverage, you may also elect to insure your eligible dependents. The amount of insurance for each dependent is determined as follows:

- » Spouse only 60% of your amount
- » Child only 15% of your amount, not to exceed \$25,000 per child
- » Spouse and child 50% of your amount for spouse and 10% of your amount per child

#### LIFE INSURANCE BENEFICIARIES

Be sure to designate beneficiaries for your life insurance through Workday.

See more beneficiary information on page 25.

Only during the annual Benefits Open Enrollment period. If you currently have a voluntary additional life insurance policy or spousal life policy, you can increase these policies by up to \$20,000 per policy, provided the increase(s) do not result in policies that exceed the guaranteed issue amounts of \$200,000 in additional life or \$30,000 in spousal life, and you have not been denied life insurance coverage in the past by Standard Insurance Company.





## Disability Insurance

#### **DISABILITY INSURANCE**

To help protect your income if unable to work due to injury or illness, the city offers you short-term and long-term disability benefits. All disability plans are offered through Standard Insurance Company.

### SHORT-TERM DISABILITY - HIRED AFTER JANUARY 1, 2010

If you were hired or rehired after January 1, 2010, or converted to the paid time off (PTO) plan, the city pays the full cost of the premiums for your short-term disability insurance. You are automatically enrolled into this benefit and it is effective first of the month following hire. After 14 consecutive calendar days of total disability (called the waiting period), your short-term disability payments will begin. The benefit pays 70% of your weekly predisability earnings to a weekly maximum of \$1,500.

### SHORT-TERM DISABILITY - HIRED PRIOR TO JANUARY 1, 2010 AND REMAIN ON THE SICK AND VACATION LEAVE PLANS

For those hired by the city prior to January 1, 2010, and remain on the sick and vacation leave plans, the short-term disability benefit is optional and may be elected during open enrollment. If elected, it's paid for entirely by the employee. This voluntary benefit has two plan levels both pay 70% of your pre-disability earnings but with different waiting periods and premiums — see chart below for plan details.

#### **LONG-TERM DISABILITY**

The city pays the full cost of your longterm disability insurance. You are automatically enrolled in this benefit and it is effective first of the month following hire. If you are partially or totally disabled for more than 180 days, the benefit pays 60% of your monthly pre-disability earnings to a monthly maximum of \$6,000.

### WORKPLACE POSSIBILITIES, STAY-AT-WORK RESOURCES

The city is committed to providing the resources you need to perform your job with the greatest overall wellness, productivity and comfort. To fulfil this commitment, the city has partnered with Standard Insurance Company disability insurance to provide assistance to covered employees¹ who may be experiencing difficulties at work that could be related to a medical condition. The service is provided through Standard Insurance Company's Workplace Possibilities Program (WPP).

The key objectives of the program are to:

 Remove barriers to employees' comfort, safety and ability to perform their jobs effectively

- Assess workstations and implement solutions to ensure employees perform their jobs productively and safely
- Assist employees in resuming job duties after a leave of absence due to a medical condition
- Promote open communication among all parties, including the employee, medical providers, ADA coordinator and WPP consultants

While participation is encouraged, the WPP is completely voluntary and is provided at no cost to you. A WPP consultant will contact you to obtain your medical information only if you sign an Authorization to Obtain and Release Information form. The WPP consultant will not share your medical information with your management team, but the WPP consultant may speak with your management team about your work capacity, possible worksite modifications and/or your expected return-to-work date.

Participation in the WWP does not in any way replace or restrict your right to participate in the Interactive Process as prescribed in Americans with Disabilities Act as amended (ADAAA) and Career Service Rule 12.

If you have questions about ADA or would like a referral for WPP, contact the city's ADA coordinator via email at cityfmlaandada@denvergov.org or call 720-913-5620.

PLAN	MAXIMUM WEEKLY BENEFIT	WAITING PERIOD	MONTHLY COST
1	\$1,500	14 days	.875% x Gross Monthly Earnings
2	\$1,500	60 days	.395% x Gross Monthly Earnings

Please note: If you choose to enroll or change short-term disability plan options during open enrollment, you may be subject to a late entrant or change penalty for the first 12 consecutive months of enrollment.

<sup>(1)</sup> Standard Insurance Company's Workplace Possibilities Program is available to employees with long-term disability insurance with Standard Insurance Company.

### Legal Services Plan

UltimateAdvisor® legal insurance from ARAG offers you affordable reliable counsel when something in life turns into a legal issue, like a dispute with a contractor, a traffic ticket or the need for estate planning including preparation of a trust. You'll have the opportunity to voluntarily enroll in the legal plan within your first 30 days of hire, rehire or qualifying life event, and annually during the open enrollment period. For as little as \$15.50 per month, you can enroll in the plan and have a place to turn to for help, with access to a nationwide network of attorneys who will:

- » Work with you in person, over the phone or online to consult with you on legal issues
- » Review or prepare documents
- » Make follow-up calls or write letters on your behalf
- » Represent you, if needed

With an UltimateAdvisor® legal insurance plan from ARAG®, you can count on a wide range of coverage and services, like the following examples - and many more - when you work with a network attorney to address the legal situations you may encounter in life.

#### **Consumer Protection**

- » Auto repair
- » Buy or sell a car
- » Personal property disputes
- » Consumer fraud
- » Home improvement
- » Small claims court

### **Criminal Matters**

- » Juvenile
- » Parental responsibility

#### **Debt-Related Matters**

- » Debt collection
- » Garnishments
- » Personal bankruptcy
- » Student loan debt

#### **Driving Matters**

- » License suspension/revocation
- » Traffic tickets

#### **Tax Issues**

- » IRS tax audit
- » IRS tax collection

#### **Family**

- » Adoption
- » Guardianship/conservatorship
- » Name change
- » Pet-related matters

#### **Landlord/Tenant Issues**

- » Contracts/Lease agreements
- » Eviction
- » Security deposit
- » Disputes with a landlord

### **Real Estate & Home Ownership**

- » Buying a home
- » Deeds
- » Foreclosure
- » Contractor issues
- » Neighbor disputes
- » Promissory notes
- » Real estate disputes
- » Transferring property
- » Selling a home

### **Wills & Estate Planning**

» Powers of attorney

- » Wills
- » Trusts

Attorney fees for most covered legal matters are 100% paid in full when you work with a network attorney, which means you'll avoid paying high-cost attorney fees. It's like having an attorney on retainer whenever you have a question or need guidance regarding a legal matter.

### How does legal insurance work?

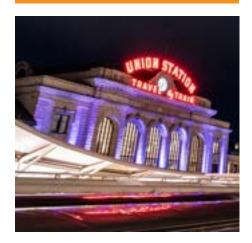
- 1. Call 800-247-4184 when you have a legal matter.
- Customer care will walk you through your options and help you find the appropriate network attorney.
- Meet with your network attorney over the phone or in person to begin resolving your legal issue.

#### Why should you get legal insurance?

- » Receive 100 percent paid-in-full coverage for most covered legal matters when you work with a network attorney.
- » Save an average of \$2,100 per legal matter
- » Access more than 13,000 attorneys within ARAG's network with an average of 20 years of experience.
- » Quickly address your covered legal situations with a network attorney who is only a phone call away for legal help and representation.
- » Use DIY Docs to help you create any of 350+ legally valid documents, including state-specific templates.

For a complete list of exclusions or any other questions about the legal plan, call 800-247-4184 or visit ARAG's website at ARAGLegal.com.

## Additional Benefits





### Recreation and Fitness Centers, Pet Adoption and Transportation

### RECREATION AND FITNESS CENTERS

Employees of the City and County of Denver and Denver Health & Hospital Authority who are eligible for benefits can get a 25% membership discount at any Denver recreation center. For more information, visit DenverHub.org or call 720-913-5687.

The employee fitness center features a full complement of fitness equipment, exercise classes and services for city employees. The center is located in the Webb Municipal Building and is open for early morning workouts, as well as after work hours and on Saturdays. Members of the Denver Employee Fitness Center also have full access to all Denver recreation centers. For more information about the fitness center, visit denvergov.org/wellness or call 720-913-5687.

#### PET ADOPTION

As a City and County of Denver employee, you are awarded one free pet adoption at the Denver Animal Shelter with your city name badge or payslip. Visit denvergov.org/animalshelter for adoption requirements.

### TRANSPORTATION PROGRAMS

As a way to encourage alternative transportation, the city participates in the Regional Transportation District (RTD) EcoPass program for limited and unlimited employees and subsidizes the EcoPass. The EcoPass allows you to use all of RTD's bus, light-rail and train networks.

Enrollment advantages include:

- » Ability to pay for commuting expenses with pre-tax dollars
- » Avoiding parking challenges and cost

Contact OHR Benefits & Wellness at benefits@denvergov.org or call 720-913-5697 to enroll.

### Retirement Planning

### RETIREMENT PLANNING

All financial planning experts will agree, the earlier you begin investing in your future, the better. And having multiple options to invest in your future is even better!

As a city employee, you have already started investing through the pension and social security. In addition, the city offers many other opportunities to plan for your retirement.

### DENVER EMPLOYEES RETIREMENT PLAN (DERP)

Your DERP Pension Benefit is one of the most important benefits you receive as it is your foundation for a strong retirement future. Your DERP Pension Benefit provides a guaranteed, lifelong monthly pension for you, or your beneficiary, when you retire. Advantages of a DERP Pension Benefit are:

- » It's guaranteed. Once you have five years of service credit, you are eligible to receive a lifetime, monthly DERP Pension Benefit.
- » It's for life. You can't outlive your DERP Pension Benefit.
- » It's professionally managed. As a member, your plan is maintenance free. You don't have to make investment decisions.

In addition to receiving the security of your DERP Pension Benefit, you are immediately eligible for DERP Plus Benefits that include disability retirement and active death retirement to ensure you and your loved ones are covered while you are employed.

To learn more about your DERP Pension Benefit, visit DERP.org. You'll find a wealth of information about your DERP Pension Benefit and the steps you should take at each stage of your retirement journey.

### **SOCIAL SECURITY**

You and the city are also contributing to Social Security. The income from your DERP Pension Benefit and Social Security are a couple of the basic building blocks for providing you comfort and security in your retirement. Learn when you're eligible to start collecting social security at ssa.gov.

### **SUMMIT SAVINGS**

You can also take advantage of Denver's Summit Savings plan. The Summit Savings plan is a voluntary retirement plan similar to a 401(k), but known in Internal Revenue Code as a 457(b) for government employees. This plan is an employer-sponsored defined-contribution retirement account in which you can invest money for your retirement, typically in your choice of a variety of mutual funds. Your voluntary contributions can be made pre-tax (with tax deferred until later) or after-tax. There are no matching contributions from the city in this plan.

The city's 457(b) program is administered by Nationwide. You can book a virtual account review with Nationwide's local Denver financial planning representatives to discuss your Summit Savings account and get answers to your questions. You'll also receive insights, guidance and educational tools to make the most of your account. Schedule your virtual account review and earn 50 Vitality points!

Already have a Summit Savings account? Check out Nationwide's retirement planning tool, "My Interactive Retirement Planner" by logging into your account. This tool is programmed to include your DERP Pension Benefit and Social Security in addition to your Summit Savings balance and current contributions to determine your retirement readiness.

To learn more about Summit Savings, call 720-913-9308 or visit denvergov.org/457.

#### **HEALTH SAVINGS ACCOUNT**

Unlike DERP, Social Security and Summit Savings, you are not automatically eligible to contribute to a health savings account (HSA). To be eligible to contribute, you must be enrolled in a HDHP. If you can contribute to an HSA, the money you and the city contribute to your HSA (see page 14 for city HSA matching) is actually designated for your health care expenses, but we all know these expenses will never go away and, in fact, can tend to increase as you age. So, investing in your current and future health care now is like investing in a retirement plan. And even if you remain healthy and cannot use your HSA money, eventually you might instead use the HSA money for paying Medicare premiums, or you can pass the HSA money on to a beneficiary.

### FINANCIAL PLANNING

If you need help figuring out how to plan financially for your retirement, talk to your money coach available through My Secure Advantage (see page 19). With 90 days of unlimited access to a money coach, you can review how you're currently preparing for retirement or talk about how to get started.

### Beneficiary Designation





Having an up-to-date beneficiary designation can make sure your assets go where you intended. This simple move can save your loved one's time and money. Review your beneficiaries whenever your situation changes.

### DENVER EMPLOYEES RETIREMENT PLAN (DERP)

Your DERP Pension Benefit provides benefits to your survivors upon your death so, it's important to designate a primary beneficiary. You should also designate a contingent beneficiary in the event you and your primary beneficiary pass away at the same time. DERP beneficiaries must be designated directly with DERP.

- 1. Log in to your MyDERP.org account.
- Click the Beneficiary button and designate your primary and contingent beneficiaries.

### LIFE INSURANCE

Your life insurance beneficiary information is tracked in Workday. You can update your beneficiary information for your life insurance in Workday at any time, including basic life insurance paid by the city, and additional life insurance paid by you. The most recent beneficiary designations become the official beneficiaries if the need for a claim should arise. Be sure to keep your beneficiary information in Workday up to date! Search "Beneficiary Designation" in DenverHub.org for a helpful job aid.

### **SUMMIT SAVINGS**

If you are a Summit Savings plan participant, beneficiary information for your Summit Savings account is tracked by Nationwide. You have access to update your beneficiary info by logging into your account at denver457.com.

### **HEALTH SAVINGS ACCOUNT (HSA)**

If you have an Optum Bank HSA, your beneficiary information is tracked by Optum Bank. You have access to update your beneficiary information by logging in to your account at optumbank.com and navigating to "Account Management."

### Dependent Eligibility Verification

### **Dependent Documentation**

### **DEPENDENT DOCUMENTATION**

All employees adding dependents will be asked to upload documentation in Workday verifying eligibility of their covered dependents.

The following list provides an easy guide to determine which forms and documents must be submitted. Failure to submit appropriate documentation will result in dependent's ineligibility for coverage.

#### **SPOUSE**

A spouse is a person to whom an employee is legally married.

### **REQUIRED ELIGIBILITY DOCUMENTS**

- » Marriage Certificate -or-
- » Common Law Affidavit -and-
- » a copy of your most recent tax return (front page through line 6 of Form 1040) -or- if the tax return is unavailable a copy of TWO of the following documents:
  - » Proof of shared residence via joint mortgage statement or rental lease
  - » Auto title or registration showing both names
  - » Joint checking, bank, investment or credit account statement
  - » Will or life insurance policy that designates the other as primary

### SPOUSAL EQUIVALENT

A spousal equivalent is a partnership not recognized by the federal government as a marriage.

#### **REQUIRED ELIGIBILITY DOCUMENTS**

- » Affidavit of Domestic Partnership -or-
- » Spousal Equivalent Affidavit -or-
- » Civil Union Certificate
- » -and- ONE of the following:
  - » Proof of shared residence via joint mortgage statement or rental lease
  - » Auto title or registration showing both names
  - » Joint checking, bank, investment or credit account statement
  - » Will or life insurance policy that designates the other as primary

Please note that the deduction for a domestic partner is not a pre-tax qualified deduction.

### **CHILDREN**

A child of an employee.

### **REQUIRED ELIGIBILITY DOCUMENTS**

- » Birth Certificate -or-
- » Qualified Medical Child Support Order

### **STEPCHILDREN**

A child of an employee's spouse or spousal equivalent.

#### REQUIRED ELIGIBILITY DOCUMENTS

- » Birth Certificate -and-
- » Spouse documents -or-
- » Spousal equivalent documents

### LEGALLY ADOPTED CHILDREN

A child legally adopted by an employee, employee's spouse or spousal equivalent.

### REQUIRED ELIGIBILITY DOCUMENTS

» Court documentation. Must include presiding judge's signature and court seal.

#### **CHILDREN OVER AGE 26**

An employee's child or stepchild who is physically or mentally unable to care for themselves.

#### REQUIRED ELIGIBILITY DOCUMENTS

- » Birth Certificate -and-
- » Disabled dependent certification and-
- » Spouse or spousal equivalent documents for stepchildren

### Work-Life Balance

## Paid time off to support work-life balance.

All employees hired or rehired after January 1, 2010 accrue paid time off (PTO). The amount of PTO you receive each year is based on the following chart taken from Career Service Rule 10: Paid Leave. A proportionate amount shall be allowed eligible employees working part-time.

COMPLETED YEARS OF SERVICE	PTO HOURS ACCRUED PER MONTH		
0-0.5 years	10 hours per month		
0.5-5 years	12 hours per month		
5–10 years	15 hours per month		
10-15 years	18 hours per month		
15 + years	19 hours per month		

Maximum PTO bank: 400 hours

All employees hired prior to January 1, 2010 may still accrue both sick and vacation leave. Sheriffs accrue both sick and vacation leave. The amount of sick and vacation you receive each year is based on the following charts taken from Career Service Rule 10.

COMPLETED YEARS OF SERVICE	SICK HOURS ACCRUED PER MONTH	VACATION HOURS ACCRUED PER MONTH
0-5 years	8 hours per month	8 hours per month
5-10 years	8 hours per month	10 hours per month
10-15 years	8 hours per month	12 hours per month
15 + years	8 hours per month	14 hours per month

Maximum vacation bank: Under 10 years = 288 hours, 10 years and over = 336 hours

Maximum sick bank: 960 hours

### 2023 PAID HOLIDAY SCHEDULE

New Year's Day	Independence Day				
Monday, January 2 (observed)	Tuesday, July 4				
Martin Luther King Jr. Day	Labor Day				
Monday, January 16	Monday, September 4				
Presidents' Day	Veterans Day				
Monday, February 20	Friday, November 10 (observed)				
Cesar Chavez Day	Thanksgiving Day				
Monday, March 27 (observed)	Thursday, November 23				
Memorial Day	Christmas Day				
Monday, May 29	Monday, December 25				
Juneteenth Monday, June 19	Personal holiday (upon an agreed date by you and your supervisor)				

### Paid Volunteer Leave Employee Volunteer Program #DenverGoodDeeds

Denver Good Deeds is a paid leave that employees can use to give back to their community. Employees can use one eight-hour day or two fourhour periods to volunteer through citysponsored and approved volunteer projects as outlined in Career Service Rule 9: Pay Administration.

# Part-Time Benefit Plan Premiums & Accruals

Listed below are the **monthly premiums** for medical and dental insurance for part-time employees working 20-29 hours per week. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis. Deductions are taken from the first two paychecks each month. For the monthly premiums for full-time employees, see page 12.

MEDICAL	Employee only		Employee	Employee + spouse Employee +		+ child(ren) Family		nily
	City	Employee	City	Employee	City	Employee	City	Employee
Kaiser DHMO	\$288.80	\$398.81	\$578.63	\$934.12	\$543.22	\$832.01	\$814.14	\$1,386.23
Kaiser HDHP	\$271.81	\$303.45	\$550.52	\$715.05	\$514.86	\$635.66	\$777.61	\$1,062.88
United DHMO (CDP)	\$330.59	\$456.53	\$662.36	\$1,069.30	\$621.82	\$952.41	\$931.95	\$1,586.83
United HDHP	\$358.53	\$400.27	\$726.18	\$943.19	\$679.13	\$838.48	\$1,025.90	\$1,402.27

DENTAL	Employee only		Employee + spouse		Employee + child(ren)		Family	
	City	Employee	City	Employee	City	Employee	City	Employee
Delta PPO Low Plan	\$12.62	\$16.87	\$25.54	\$39.93	\$23.75	\$35.21	\$39.63	\$65.33
Delta PPO High Plan	\$12.62	\$27.67	\$25.54	\$63.93	\$23.75	\$56.83	\$39.63	\$103.81
Delta EPO Plan	\$12.62	\$18.02	\$25.54	\$42.49	\$23.75	\$37.53	\$39.63	\$69.45

Listed below are the **monthly premiums** for vision insurance for part-time employees working 20-29 hours per week. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis.

VISION	Employee only	Employee + spouse	Employee + child(ren)	Family	
VSP	\$5.72	\$11.64	\$10.73	\$19.61	

### PAID TIME OFF

Eligible employees working part-time earn a proportionate amount of full-time leave accruals found on page 27.

#### **Paid Holiday Leave**

An eligible part-time employee regularly scheduled to work at least 20 hours per week receives paid holiday leave as follows:

- » Employees regularly scheduled to work 20-29 hours per week receive 4 hours of paid holiday leave.
- » Employees regularly scheduled to work 30-39 hours per week receive 6 hours of paid holiday leave.

See page 27 for the 2023 paid holiday schedule.

### If you have any questions, feel free to contact any of our providers directly.

### **BENEFIT & WELLNESS OFFICE**

Office of Human Resources 201 W. Colfax Ave., Dept. 412

Denver, CO 80202 denvergov.org/benefits benefits@denvergov.org

720-913-5697 Fax: 720-913-5548 Text: 720-515-6457

### **DENTAL**

Delta Dental of Colorado deltadentalco.com 800-610-0201 Group: 6026

Mobile app: Delta Dental

### EMPLOYEE ASSISTANCE PROGRAM

GuidanceResources® guidanceresources.com Web ID: DENVEREAP 877-327-3854

Mobile app: GuidanceNow<sup>SM</sup>

### **EMPLOYEE HEALTH & WELL-BEING**

Denver Wellness denvergov.org/wellness wellness@denvergov.org

720-913-5690

My Secure Advantage denver.mysecureadvantage.com 888-724-2326

Vitality

powerofvitality.com wellness@powerofvitality.com

877-224-7117

Mobile app: Vitality Today

### **FLEXIBLE SPENDING**

Alerus Retirement and Benefits alerusrb.com info@alerusrb.com 877-661-4727

### **HEALTH SAVINGS ACCOUNT**

Optum Bank® optumbank.com 800-791-9361

Group #: UnitedHealthcare 717340A Kaiser Permanente 717340B

Mobile app: Optum Bank

### **LEGAL**

ARAG

ARAGLegal.com

Website Access Code: 18168ccd service@ARAGlegal.com

800-247-4184

Mobile app: ARAG Legal

### LIFE AND DISABILITY INSURANCE

Standard Insurance Company standard.com Group# 615855

Group# 615855 888-937-4783

#### **MEDICAL**

Kaiser Permanente

kp.org

Group# 0075

303-338-3800 or 303-338-4545 Mobile app: Kaiser Permanente

UnitedHealthcare myuhc.com

Group# 0717340 800-842-5520

Mobile app: Health4Me

DispatchHealth dispatchhealth.com 303-500-1518

### RETIREMENT PLANNING

Denver Employees Retirement Plan derp.org 303-839-5419

Summit Savings

457(b) Deferred Compensation Plan

denver457.com

Nationwide: 833-268-7079 Denver representative: 720-484-9055 or 720-551-6404

### TECHNICAL SUPPORT

Workday

denvergov.org/supportnow

720-337-4357

Mobile app: Workday

### **VISION**

**VSP** 

vsp.com

800-877-7195 Mobile app: VSP

