



Colorado Springs Utilities  
*It's how we're all connected*

# GUIDE TO YOUR 2023 BENEFITS



Welcome to your

# Colorado Springs Utilities Benefits

We are proud to offer a comprehensive benefits program to help you and your family protect your health and financial security. Your benefits are a valuable part of your overall compensation; we encourage you to learn more about the options available to you and how they work so you can get the most out of your plans.

This guide is designed to provide general information and does not include every detail. Detailed benefit plan information, including plan documents and important regulatory notices, is available on the intranet under Human Resources > Benefits.



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*This document is intended as an outline of coverage available and is not intended to be a legal contract. If a discrepancy exists between this document and the various plan documents, contracts and agreements, the provisions of the plan documents and/or contracts and agreements will prevail.*

## Have questions about your benefits?

Contact the Utilities Resource Center (URC) at [719.668.4357 \(HELP\)](tel:719.668.4357). A case will be sent to your benefits team. You can also learn more about your benefits by visiting the Benefits page on the intranet, located under **Human Resources > Benefits**.

## Open Enrollment Checklist:

- Review your healthcare spending from this year. Estimate if your expenses will be more or less next year. Do you plan to have a baby in 2023? Do you have a surgery scheduled for 2023? Reviewing these bills, your healthcare and your current financial position will help you pick the best plan for your situation.
- Review the **medical, dental** and **vision** plans and costs on pages 9–12. When reviewing the cost of each plan, pay attention to the premiums **AND** out-of-pocket expenses.
- Flexible spending accounts are a great way to pay for out-of-pocket costs related to medical, dental, vision and pharmacy. To have an FSA, you must actively enroll again for 2023 even if you were already enrolled in 2022. **More details** can be found on page 14.
- The **voluntary wellness program**, described in more detail on pages 5 and 6, offers multiple ways to earn incentives and rewards through healthy activities. Taking charge of your health is a great way to offset costs throughout the year.
- The **Life and AD&D insurance** options are detailed on pages 15-16. If you have changed age brackets, your costs will change for 2023.
- Review your **vacation buy** options for 2023. See page 19 for more details.
- Once you have checked off all the boxes above, you are ready to enroll in benefits pre- or post-tax. You are able to enroll **October 3 through October 17 at 5:00 p.m. MT**. Make your benefit elections on the intranet via Employee Self Service (ESS). You can access ESS from your personal computer or device at <https://portal.csu.org>. If you still have questions, please reach out to the Utilities Resource Center at [719.668.4357 \(HELP\)](tel:719.668.4357).

# Eligibility and Enrollment

## Who is eligible for benefits?

Regular, Special, full-time and part-time employees are eligible for all benefits. Hourly employees are eligible for medical coverage, basic life insurance, spending accounts, employee assistance program, and the voluntary wellness program.

You may also enroll your eligible dependents. Generally, your dependents are:

- Your legal spouse or civil union partner
- Your dependent children up to age 26, regardless of student, financial, or marital status
- Your children age 26 and older, if they were disabled prior to reaching age 26, depend on you for financial support, and cannot be claimed as a tax dependent by anyone else. You will be required to provide appropriate documentation of their total disability and dependency.

Your dependent's information must be accurate for federal reporting purposes. Make sure the information matches the dependent's Social Security card, and confirm that the dependent's date of birth is correct.

Detailed benefit plan information regarding eligibility is available on the intranet under Human Resources > Benefits.



**Important!** Newborns must be added within 31 days of birth to be eligible for benefits!



### **HAVE YOU GOTTEN MARRIED RECENTLY? HAD A BABY? DIVORCED? LOSS OF OTHER COVERAGE?**

If so, you might have a special enrollment right. If you are experiencing a mid-year change in status, you must notify Human Resources in writing within **31 days** of the change-in-status event. You will need to complete a benefit change form. Human Resources will determine if your change request is permitted, and if so, changes become effective prospectively, on the first day of the month, following the approved change in status event (except for newborn and adopted children, who are covered back to the date of birth, adoption, or placement for adoption). Detailed benefit plan information, regarding change-in-status changes is outlined on the intranet under Human Resources > Benefits.

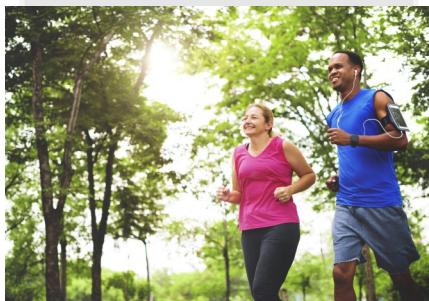
# Voluntary Wellness Program

All Employees and Spouses

Cigna, Group #3336236

800.Cigna24 (244.6224)

www.myCigna.com



## Better decisions. Better engagement. Better health.

Get rewarded for taking an active role in your health. You and your spouse can earn rewards, and you don't have to be enrolled in a medical plan to participate.

**The more you do, the more incentives and rewards you can earn.**

### I'm ready. How do I start?

Once registered on [myCigna.com](http://myCigna.com), log on and click on the "Wellness" tab. There you'll find a link to the incentive awards page, as well as:

- Details on how to get started
- A list of available healthy actions and goals
- Instructions on how to earn and redeem your rewards

### NEED A LITTLE BOOST TO HELP YOU ALONG THE WAY?

Cigna customer service representatives are there to help and encourage you — from start to finish. Simply call [800.CIGNA24 \(800.244.6224\)](tel:800.CIGNA24).



EARN UP TO \$100

#### Debit Card = Apps & Activities:

Choose your own fitness and nutrition goals that will allow you to be rewarded for achieving healthy lifestyle behaviors. Program dates: January 1, 2023 – December 31, 2023

EARN UP TO \$400

#### Payroll Deposit (\$100 per quarter) = Gym Rebate:

Complete 15 gym/class workouts each quarter, and you will earn reimbursement of \$100 per quarter for membership dues. Program dates: January 1, 2023 – December 31, 2023

EARN UP TO \$500

#### Fund Deposit = Wellness Funding:

Take preventive steps toward wellness, and you will earn money for your Health Reimbursement Account (HRA) or Health Savings Account (HSA) for 2024 (only for those enrolled in one of our medical plans in 2023). Program dates: November 1, 2022 – October 31, 2023

- If you're enrolled in the Basic or Classic medical plan, your reward will be deposited into your HRA.
- If you're enrolled in the Saver medical plan with HSA, your reward will be deposited into your HSA.
- If you're enrolled in the Saver medical plan but not eligible for an HSA, your reward will be deposited into an HRA.
- **Spouses are also eligible to earn up to \$500 per year!**



The **HSA and HRA are administered by PayFlex**. You will receive a debit card, which makes it easy to pay for eligible healthcare expenses as you incur them. To view your account balance and manage your HSA and HRA online, visit [www.payflex.com](http://www.payflex.com).



#### A GREAT place to start is with the Health Assessment.

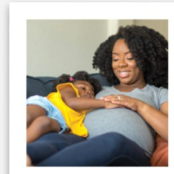
Visit [www.myCigna.com](http://www.myCigna.com) and get started with the new plan year!

## Ways to Earn Bonus Rewards

We offer even more ways to earn rewards for maintaining a healthy lifestyle:

### HEALTHY PREGNANCIES, HEALTHY BABIES

Maternity support goals can earn Wellness Funding for participants (employee or spouse enrolled in the medical plan) who complete the program. You will earn \$150 for enrolling in the first trimester and \$75 for enrolling in the second trimester.



### QUARTERLY PRIZE BONUS DRAWING

This wellness drawing includes enrolled and waived program participants. Cigna will draw 10 winners per quarter. Drawings are limited to the employee. Spouses and COBRA participants are not eligible to participate in the drawings.



	Activities	Date Range	
<b>Q1 Participation Drawing</b>	<b>2 or more activities</b> completed within program dates	01/01/2023 - 03/31/2023	<b>PRIZE: \$30-\$50</b>
<b>Q2 Participation Drawing</b>	<b>2 or more activities</b> completed within program dates	04/01/2023 - 06/30/2023	<b>PRIZE: \$30-\$50</b>
<b>Q3 Participation Drawing</b>	<b>2 or more activities</b> completed within program dates	07/01/2023 - 09/30/2023	<b>PRIZE: \$30-\$50</b>
<b>Q4 Participation Drawing</b>	<b>1 or more activities</b> completed within program dates (earlier end date)	10/01/2023 - 12/01/2023	<b>PRIZE: \$30-\$50</b>

## Why is investing in wellness important?



We operate a self-funded medical plan. Self-funded plans operate with monies that are a combination of premiums from the employees and per-employee contributions from Colorado Springs Utilities. What this means is that we take on the financial risk of all medical claims and pay them out of the health fund. How participants manage their health has a direct impact on how much money is paid in claims.

## How can I help reduce costs?



Getting and staying healthy is the best way you can help us run an effective health plan. Make sure you are scheduling your annual preventive visits and screenings. You will help the health fund and earn wellness funding at the same time.



# Medical Plan Overview

All Employees

Cigna, Group #3336236

800.Cigna24 (244.6224)

www.myCigna.com

## Definitions

**Allowed Amount:** Maximum amount on which payment is based for covered healthcare services. If your provider charges more than the allowed amount, you may have to pay the difference (balance billing).

**Coinsurance:** Your share of the costs of a covered healthcare service, calculated as a percentage of the allowed amount.

**Copayment (copay):** A fixed amount for a covered service, paid by a patient to the provider of service before receiving the service.

**Deductible:** The amount you pay before the plan begins to pay benefits for covered expenses. Under the Basic and Classic plans, copays do not apply toward the deductible.

**Evidence of Insurability (EOI):** A record of a person's past and current health events used to verify whether a person meets the definition of good health.

**In-network:** Providers that have contracted with our benefit vendors.

**Out-of-network:** Providers that have not contracted with our benefit vendors.

**Out-of-pocket maximum:** The maximum amount you pay for eligible expenses. Once met, the plan pays 100% for the rest of the plan year.

There are three medical plan options, administered through Cigna:



**Saver Plan #34:** PPO health plan, which is a High Deductible Health Plan, that is compatible with a Health Savings Account (HSA). This plan features the highest deductible of the three plans but also has the lowest premium. All services, except preventive care, are subject to the deductible, and then coinsurance applies.



**Basic Plan #35:** PPO health plan that features a lower deductible than the Saver Plan but costs more in premium. You will pay a copay at the time of service for most services; some services are subject to the deductible and coinsurance.



**Classic Plan #37:** PPO health plan that features the lowest deductible of the three plan options but also has the highest premium. You will pay a copay at the time of service for most services; some services are subject to the deductible and coinsurance plus a copay.

All three plans utilize the Cigna Open Access Plus (OAP) network. With the OAP, you don't need to select a primary care provider (PCP) or get referrals to see specialists. You also have coverage if you go out-of-network, but you will pay more out of pocket.

## How do I select the plan that's best for me?

Which plan is best for you depends on your healthcare needs, your budget and whether you expect to use out-of-network providers. Consider this:

A plan that pays a **higher portion of your medical costs**, but has **higher monthly premiums**, may be better if:



You see a doctor, whether a primary physician or a specialist, frequently.



You frequently need emergency care.



You take expensive or brand-name medications on a regular basis.



You are expecting a baby, plan to have a baby, or have small children.



You have a planned surgery coming up.



You've recently been diagnosed with a chronic condition such as diabetes or cancer.



### Don't Forget:

In-network preventive care is covered at 100%!

A plan with **higher out-of-pocket costs and lower monthly premiums** may be the financially smart choice if:

- You can't afford the higher monthly premiums for a plan with lower out-of-pocket costs.
- You are in good health and rarely see a doctor.



## Consider using the City Employee Medical Clinic

FOR ACUTE PRIMARY CARE (COLDS, FLU, ETC.), MINOR PROCEDURES, AND PREVENTIVE CARE

### Lane Center for Academic Health Sciences Building

4863 North Nevada Avenue, Second Floor

Phone: **719.385.5841**

Hours: Monday, Tuesday, Thursday and Friday: 7:30 a.m.–4:30 p.m.  
Wednesday: 9:00 a.m.–6:00 p.m.

**Basic and Classic Medical Plans:** All services (office visits and physician-ordered lab draws) are covered at 100% with no copay.

**Saver Plan:** Other than preventive services, you will be responsible for paying the entire cost at the time of service. To have the expense apply toward your benefits (deductible/coinsurance) submit a medical claim form with supporting documentation to Cigna. Appointments for your physician-ordered lab draws are not accepted at the clinic. You can use Quest or LabCorp; either lab will file the claim with Cigna.

## City Employee Pharmacy

### City Administration Building

30 S. Nevada Ave., Ste. L04

Mail Code 890

Phone: **719.385.2261**

Fax: **719.385.2264**


Hours: 8:30 a.m.–5:30 p.m. M–F


- Employees can fill both 30- and 90-day prescriptions.
- Interoffice mail delivery is available for some prescriptions; for more information please ask the City Pharmacy.





## Where should I go for care?


Knowing where to go when you need medical care is key to getting the best treatment with the lowest out-of-pocket costs.


 **Cigna Health Information Line –** Free service connecting you with a clinician who can help you choose the right care in the right setting at the right time. Available 24/7, 365 days a year, call **888.806.5042**.


 **Doctor's office –** The best place to go for routine or preventive care, to keep track of your medications, or for a referral to see a specialist.

 **Convenience care clinic –** Treats minor medical conditions. Located in retail stores and pharmacies and often open nights and weekends.

 **Virtual Care (Telehealth) –** Speak with an MDLIVE medical or behavioral health provider by phone or video chat, whenever and wherever you want. Visit **myCigna.com** to connect with an MDLIVE virtual provider and find cost information.

 **Urgent care center –** For conditions that aren't life threatening. Staffed by nurses and doctors and usually has extended hours.

 **DispatchHealth –** On-demand medical care in the comfort of your home, work, or place of need, for minor to severe injuries and illnesses. Call **303.500.1518** for more information.

 **Emergency room (ER) –** For immediate treatment of critical, life-threatening injuries or illnesses.



# Medical and Prescription Plan Highlights

All Employees

	Saver Plan #34	Basic Plan #35	Classic Plan #37
Total possible wellness funding based on Cigna's MotivateMe (employee/spouse)	\$500 / \$1,000	\$500 / \$1,000	\$500 / \$1,000
HSA employer funding (employee/dependent)	\$600 / \$1,200	N/A	N/A
Total possible employer funding	\$1,100 / \$2,200	\$500 / \$1,000	\$500 / \$1,000

Plan Features	Saver Plan #34	Basic Plan #35	Classic Plan #37	Out-of-Network Benefits
	In-Network	In-Network	In-Network	
Medical annual deductible* (Individual/family) *copays do not apply	\$3,500 / \$7,000	\$1,875 / \$3,750	\$750 / \$1,500	\$4,500 / \$9,000
Medical annual out-of-pocket maximum (OPM) - Includes medical deductible, coinsurance, and copays (Basic and Classic Rx copays do not apply) (Individual/family)	\$5,000 / \$10,000	\$3,750 / \$7,500	\$2,750 / \$5,500	\$9,000 / \$18,000
Coinsurance (plan pays)	80%	80%	85%	50%
Preventive services	100%	100%	100%	Excluded
Office visit copays	Subject to D & C*	\$25 PCP \$50 Specialist	\$25 PCP \$50 Specialist	Subject to D & C*
Cigna Care Designated Physician's office visit copays	Subject to D & C*	\$15 PCP \$40 Specialist	\$15 PCP \$40 Specialist	Not applicable
City Employee Medical Clinic Preventive and coaching services Acute and urgent care services, and select diagnostic lab draws	100%	100%	100%	Not applicable
	Subject to D & C*	100%	100%	
Convenience care clinic and telemedicine copay	Subject to D & C*	\$25	\$25	Not applicable
Urgent care facility copay	Subject to D & C*	\$50	\$50	Not applicable
Emergency room services	Subject to D & C*	Subject to D & C*	Subject to D & C*	Not applicable
Inpatient hospital services	Subject to D & C*	Subject to D & C*	Subject to D & C* plus \$200 copay	Subject to D & C*
Outpatient hospital or ambulatory surgical center services	Subject to D & C*	Subject to D & C*	Subject to D & C* plus \$100 copay	Subject to D & C*
Advanced Radiology Imaging (MRI, MRA, CAT scan, PET scan, etc.)	Subject to D & C*	Subject to D & C*	Subject to D & C* plus \$100 copay	Subject to D & C*
Laboratory draw services Preferred labs (LabCorp and Quest) Non-preferred labs (i.e., outpatient hospital labs, etc.)	Subject to D & C at 80%	Subject to D & C at 80%	Subject to D & C at 85%	Subject to D & C*
	Subject to D & C at 60%	Subject to D & C at 60%	Subject to D & C at 60%	Subject to D & C*
Massage therapy acupuncture and/or chiropractic (combined 20 visit max per year)	Subject to D & C*	\$25	\$25	Subject to D & C*



**STILL NEED HELP DECIDING WHICH MEDICAL PLAN IS RIGHT FOR YOU AND YOUR FAMILY?**

Contact Cigna's One Guide pre-enrollment line at [888.806.5042](tel:888.806.5042).

Pharmacy Benefit (Must use a Cigna's Open Access Plus network pharmacy; there is no out-of-network benefit)				
	Saver Plan #34	Basic #35 and Classic Plan #37		
<b>Pharmacy annual copay maximum</b>	Not applicable	\$2,500 per individual / \$5,000 per family		
		Generic	Preferred brand	Non-preferred brand
<b>Retail 30-day supply copay</b>	Subject to D & C*	Greater of \$10 or 20% of actual cost with a \$25 maximum per prescription	Greater of \$30 or 30% of actual cost with a \$60 maximum per prescription	Greater of \$50 or 40% of actual cost with a \$150 maximum per prescription
<b>Cigna 90 Now Program 90-day supply copay</b> <i>(City Employee Pharmacy and select retail pharmacy)</i>	Subject to D & C*	\$25	Greater of \$63 or 20% of actual cost with a \$150 maximum per prescription	Greater of \$120 or 30% of actual cost with a \$250 maximum per prescription
<b>Cigna Home Delivery pharmacy 90-day supply copay</b>	Subject to D & C*	\$25	\$63	\$150
<b>Specialty pharmacy</b> <i>(up to 30-day supply from Cigna Home Delivery only)</i>	Subject to D & C*	Greater of \$10 or 20% of actual cost with a \$25 maximum per prescription	Greater of \$30 or 30% of actual cost with a \$60 maximum per prescription	Greater of \$50 or 40% of actual cost with a \$150 maximum per prescription
<b>Diabetic supplies</b>	Supplies will be covered at 100% for generic and preferred brand tier only at Cigna Home Delivery and in-network retail pharmacies. Non-preferred supplies will be covered at the regular retail or Cigna Home Delivery copay.			
	Supplies include continuous glucose monitors and component, blood glucose test strips, lancing devices and lancets, syringes and pen needles, and urine test strips.			
<b>Preventive Medication Program</b>	100% coverage at Cigna Home Delivery and in-network retail pharmacies for select preventive generic and preferred brand maintenance drugs for conditions such as asthma, osteoporosis, depression, diabetes, heart disease & stroke, cholesterol, high blood pressure, smoking cessation, and prenatal vitamins.			

\* Deductible and coinsurance

## 2023 semi-month medical premium rate schedules

Based on 24 payroll deductions per calendar year

EE Only = Employee Only EE + SP = Employee + Spouse EE + CH = Employee + Child(ren) EE + FM = Employee + Family

Saver Plan #34			
Coverage	Total plan cost	Employer share	Employee share
EE Only	\$347.48	\$342.48	\$5.00
EE + SP	\$712.33	\$616.95	\$95.38
EE + CH	\$625.46	\$583.23	\$42.23
EE + FM	\$990.30	\$882.51	\$107.79

Basic Plan #35			
Coverage	Total plan cost	Employer share	Employee share
EE Only	\$372.73	\$350.00	\$22.73
EE + SP	\$764.10	\$616.95	\$147.15
EE + CH	\$670.92	\$596.73	\$74.19
EE + FM	\$1,062.28	\$882.51	\$179.77

Classic Plan #37			
Coverage	Total plan cost	Employer share	Employee share
EE Only	\$392.54	\$350.00	\$42.54
EE + SP	\$804.71	\$616.95	\$187.76
EE + CH	\$706.57	\$596.73	\$109.84
EE + FM	\$1,118.74	\$882.51	\$236.23

**Tobacco use premium surcharge:** An additional \$10 medical premium will be assessed if either the employee or spouse uses tobacco products. Tobacco status can be changed anytime during the plan year, as long as the employee or spouse is tobacco-free for 12 months.

# Dental Plan

Regular and Special Employees Only

Delta Dental, Group #7714

800.610.0201

www.deltadentalco.com

You have two dental plan options administered through Delta Dental of Colorado:

- **Buy-Up Plan:** This plan combines the Delta Dental PPO and Premier networks. This plan allows you to receive discounts when using a Delta Dental Premier dentist.
- **Standard Plan:** With the Delta Dental PPO, you have access to a network of dentists who accept reduced fees for covered services, giving you the lowest out-of-pocket costs when compared to dentists not in the PPO network.

Obtain information on your dental plan, find a dentist, verify benefits, track and view your claims, or print an ID card by visiting Delta Dental's website at [www.deltadentalco.com](http://www.deltadentalco.com).

Plan Features	Delta Buy-Up Plan			Delta Standard Plan	
	PPO network benefits PPO providers includes Prevention First benefit	Premier network benefits Premier Providers	Out-of-network benefits Non-participating providers	PPO network benefits PPO providers includes Prevention First benefit	Out-of-network benefits Premier providers and non-participating providers
<b>Annual maximum benefit</b> <i>Maximum amount the plan will pay per year per covered member</i>	\$2,000	\$1,250	\$1,250	\$1,500	\$1,250
<b>Annual deductible</b> <i>(Individual/family)</i>	\$25 / \$50	\$50 / \$100	\$50 / \$100	\$25 / \$50	\$50 / \$100
<b>Diagnostic, preventive and adjunctive</b> <i>Cleanings, x-rays, space maintainers, sealants, fluoride varnishes</i>	100%	100%	80%	100%	80%
<b>Basic services</b> <i>Fillings, extractions, oral surgeries, anesthesia, periodontics, endodontics</i>	90%	80%	50%	80%	50%
<b>Major services</b> <i>Relines/denture repair, crowns (full cast), partial and complete dentures, implants (includes bone grafting and sedation)</i>	50%			50%	
<b>Orthodontia</b> <i>Lifetime maximum</i>	50% \$2,000			50% \$2,000	

Your Prevention First benefit includes two teeth cleanings per calendar year! These visits do NOT have to be six months apart. In-network PPO preventive care visits are covered 100% by both plans and do not count toward the annual maximum benefit!

## NEW! Right Start 4 Kids Program

We are proud to offer the Right Start for Kids Program when you enroll. This plan provides dental care for children up to their 13th birthday at 100% coinsurance for diagnostic and preventive, basic and major services, with no deductible when visiting a Delta Dental PPO or Premier provider.

## 2023 semi-monthly dental premium rate schedules

Based on 24 payroll deductions per calendar year

EE Only = Employee Only, EE + SP = Employee + Spouse, EE + CH = Employee + Child(ren), EE + FM = Employee + Family

Delta Buy Up Plan			
Coverage	Total plan cost	Employer share	Employee share
EE Only	\$24.28	\$19.57	\$4.71
EE + SP	\$49.77	\$19.57	\$30.20
EE + CH	\$54.62	\$19.57	\$35.05
EE + FM	\$74.04	\$19.57	\$54.47

Delta Standard Plan			
Coverage	Total plan cost	Employer share	Employee share
EE Only	\$20.57	\$19.57	\$1.00
EE + SP	\$42.17	\$19.57	\$22.60
EE + CH	\$46.29	\$19.57	\$26.72
EE + FM	\$62.74	\$19.57	\$43.17



# Vision Plan

Regular and Special Employees Only

Your vision coverage provides a full range of vision care services provided through Anthem Blue View Vision.

- Visit in-network private practice doctors, local optical stores and national retail stores, including Target Optical, LensCrafters, and more.
- Order eyewear online at [www.glasses.com](http://www.glasses.com) and [www.contactsdirect.com](http://www.contactsdirect.com).
- Receive services out of network, and file a claim for reimbursement.

Please remember that you can see your participating network eye doctor once per calendar year — these visits do NOT have to be 365 days apart.

Plan Features	In-Network Benefit	Out-of-Network Benefit Allowance
<b>Eye exam copay</b>	\$10	Up to \$35
<b>Annual deductible (lenses excluded)</b>	\$15 \$150 retail allowance, then 20% off remaining balance	Up to \$45
<b>Lenses copay (standard plastic)</b>		
• Single vision	\$10	Up to \$25
• Lined bifocal	\$10	Up to \$40
• Lined trifocal	\$10	Up to \$55
• Polycarbonate and/or Transitions lenses for children up to age 19	Covered in full	Not covered
<b>Lens options copay</b>		
• UV coating	\$15	No discounts available
• Tint (solid and gradient)	\$15	
• Transitions lenses	\$75	
• Standard anti-reflective	\$45	
<b>Contact (instead of glasses)</b>		
• Elective conventional lenses	\$150 retail allowance, then 15% off remaining balance	Up to \$130
• Elective disposable lenses	\$150 retail allowance, then no additional discount	Up to \$130



To locate a participating network eye care doctor or location, log in at [www.anthem.com](http://www.anthem.com), or from the home page menu under Care, select Find a Doctor. You may also call member services for assistance at 1-866-723-0515.

## Did you know your eyes can tell an eye care provider a lot about you?



In addition to detecting eye disease, a routine eye exam can help identify signs of serious health conditions like diabetes and high cholesterol. Your vision plan includes an annual eye exam for a \$10 copay!

## 2023 semi-monthly vision premium rate schedules

Based on 24 payroll deductions per calendar year

EE Only—Employee Only

EE + CH—Employee + Child(ren)

EE + SP = Employee + Spouse

EE + FAM = Employee + Family

Anthem Blue View Vision			
Coverage	Total plan cost	Employer share	Employee share
EE Only	\$3.67	\$0.00	\$3.67
EE + SP	\$8.28	\$0.00	\$8.28
EE + CH	\$7.37	\$0.00	\$7.37
EE + FM	\$11.95	\$0.00	\$11.95

# Health Savings Account (HSA)

Available only to those who enroll in the Saver Medical Plan

PayFlex

844.PAYFLEX (844.729.3539)

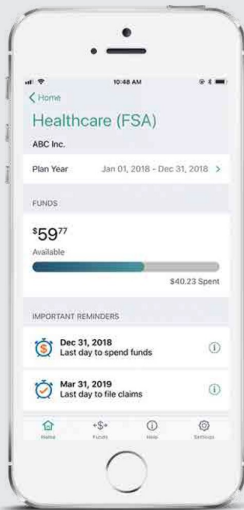
www.payflex.com



You **MUST** be enrolled in the Colorado Springs Utilities Saver Medical Plan in order to enroll in the HSA.

## Keep it simple with the PayFlex mobile app

Manage your account, make payments and deposits, view common eligible expense items, download your Explanation of Benefits (EOB) to substantiate expenses and more!



A Health Savings Account (HSA) is a tax-advantaged savings account that can be used for qualified expenses today and can help you save for future expenses.

To contribute to an HSA, an individual generally cannot have health coverage other than High Deductible Health Plan (HDHP) coverage (a type of health plan with specific deductibles and out-of-pocket limits that makes you eligible to contribute to an HSA). HDHPs paired with HSAs are often referred to as Consumer Driven Health Plans (CDHPs), which put you in control of how you spend your healthcare dollars. **Our Saver Medical Plan is our HDHP.**

### By law, you **MAY NOT** make contributions to an HSA if you:

- Are covered by another healthcare plan that is not an HDHP, such as Medicare, Medicaid, TRICARE, or Medicare supplemental insurance.
- Can be claimed as a dependent on someone else's tax return.
- Are enrolled in a Healthcare Flexible Spending Account (FSA) (unless it is limited purpose) or covered by a spouse. If you are covered under your spouse's medical plan, you can only contribute to your HSA if your spouse's medical plan is also a qualified HDHP.

### Federal regulations place several important restrictions on whether, once enrolled in an HDHP/CDHP, you can be allowed to have contributions to your HSA during the year.

- Any Flexible Spending Account (FSA) plan in which you are currently enrolled must be changed to a Limited Purpose FSA (until the deductible is met) if you or your spouse enrolls in an HDHP/CDHP. To pay for qualified expenses, your HSA must be opened prior to incurring those expenses.
- If your child is under the age of 26 but does not qualify as a dependent on your tax return, they may be covered under your medical plan, but your HSA funds cannot be used for expenses for that dependent.

## Contributing tax-free to your HSA

**\$3,850 individual / \$7,750 family\***

If you are age 55 or older, you can contribute an additional \$1,000 to your HSA each year.

*\*2023 IRS limits include employee and employer contributions as well as funds earned from wellness*

**DID YOU KNOW?**

**We contributes to your HSA! \$600 individual /\$1,200 other coverage tiers**

You may also qualify for additional funding if you complete the voluntary wellness program requirements. See page 5 for more details.

## Pay for qualified medical, dental, and vision expenses

- Certain out-of-pocket expenses
- Certain medical and prescription drug expenses
- Eyeglasses and contacts
- Dental copays

## Triple tax benefits

- Contributions are made pre-tax
- Withdrawals are tax free when used for qualified expenses
- Account accumulates interest and your balance grows tax-deferred

## Make informed decisions

Not sure how much to contribute or how much you'll save?

Visit [www.payflex.com](http://www.payflex.com) to help you understand the benefits of an HSA.

# Flexible Spending Account (FSA)

All Employees




PayFlex

844.PAYFLEX (844.729.3539)

[www.payflex.com](http://www.payflex.com)

Flexible Spending Accounts (FSAs) help you save money by allowing you to use your pretax dollars to pay for certain healthcare and dependent care expenses. The money you put into these accounts is taken out of your paycheck before taxes are withheld. You end up paying taxes on a smaller amount of income, which saves you money.

## What You Need to Know About FSAs

<b>Healthcare FSA</b> 	<ul style="list-style-type: none"><li>• To pay for qualified medical, dental, vision, and pharmacy expenses</li><li>• Not eligible if you contribute to HSA (unless it is a Limited Purpose FSA)</li><li>• Contribute up to \$2,850 pre-tax</li></ul>
<b>Tax Benefits</b> 	<ul style="list-style-type: none"><li>• Contributions are made pre-tax</li><li>• Withdrawals are tax-free when used for qualified expenses</li></ul>
<b>Dependent Care FSA</b> 	<ul style="list-style-type: none"><li>• To pay for qualified dependent and elder care expenses</li><li>• Contribute up to \$5,000 pre-tax</li><li>• Only deposited funds are available</li></ul>

## Use it or lose it

Expenses for FSAs **MUST** be incurred during the plan year 2023, and expenses must be submitted within 90 days following the end of the plan year for reimbursement. The Healthcare FSA allows you to carry over up to \$570 into the next plan year; however, you must elect the Healthcare FSA the following year (\$5 per pay period [\$120 annually] minimum election required). Any amount over \$570 will be forfeited.

### IMPORTANT!

Your FSA elections **DO NOT** automatically carry over year to year. If you want an FSA, you must enroll each year, even if you want to keep your contributions the same. This means if you have money in your FSA you will need to re-enroll or forfeit those funds.

## Health Reimbursement Account (HRA):

An HRA is an account funded by your employer.

- Funds are earned through participation in the Voluntary Wellness Program.
- You can use these funds to pay for eligible healthcare expenses for you and your eligible dependents.



## FSA tips to Remember

- Estimate your expenses carefully before you enroll. The key is to use your FSA for predictable expenses — in other words, expenses you know you will incur during the plan year.
- When submitting a Dependent Care FSA claim, you can only be reimbursed up to the amount you have contributed to date into the plan, less any previous reimbursements.
- You can submit a copy of your Explanation of Benefits (EOB) to substantiate a Healthcare FSA expense.

### EXAMPLES OF WHAT IS COVERED:

- Acupuncture
- Chiropractor
- Copays

### EXAMPLES OF WHAT IS NOT COVERED:

- Cosmetic surgery
- Teeth whitening
- Vitamins
- Personal use items (such as shaving cream or toothpaste)

For more information on FSA eligible expenses please visit [www.payflex.com](http://www.payflex.com).



# Basic Life and AD&D Insurance

All Employees



PERA Life Insurance is offered through Unum. This is another

benefit available to you as an active PERA member who may want to purchase additional coverage. It is a decreasing term life plan, and the benefit amount for the employee is dependent on their age. The plan is for employees, and includes a benefit for spouses and children. You can enroll directly through PERA's website.

Visit [www.copera.org](http://www.copera.org) or call **800.758.PERA** for more information on PERA's life insurance program.

## 100% paid by Colorado Springs Utilities *(All employees)*

Employees are automatically covered by the Basic Life and Accidental Death and Dismemberment (AD&D) insurance. We pay the full cost of coverage.

### **BASIC LIFE INSURANCE**

This type of life insurance pays a benefit in the event of the insured's death during a specified term.

- 1.5 times your annual salary
- Term life insurance that stays in effect while you are employed by Colorado Springs Utilities

### **BASIC AD&D INSURANCE**

This type of insurance pays benefits to the beneficiary if the cause of death is an accident.

- Additional benefit of 1.5 times your annual salary if you die as a result of an accident
- Benefits also payable if you suffer certain injuries, including loss of limb, sight, or paralysis



# Supplemental Life and AD&D Insurance

Regular and Special Employees Only

## Employee-paid

### SUPPLEMENTAL LIFE INSURANCE

Supplemental Life Insurance is group life insurance offered to employees above and beyond what you receive as part of the company benefit. The premium cost is paid by the employee. Evidence of insurability (EOI) rules apply.

- Employee: Elect coverage in \$25,000 increments, up to a maximum benefit of \$500,000 (not to exceed 10 times your salary).
- Spouse: Elect coverage in \$25,000 increments, up to a maximum benefit of \$250,000.
- Child: Elect coverage in \$5,000 increments, up to a maximum benefit of \$25,000; no EOI.

### SUPPLEMENTAL AD&D INSURANCE

Supplemental AD&D Insurance is a type of insurance that pays out clearly defined benefits if an accident causes death, blindness or the loss of one or more limbs. The premium cost is paid by the employee.

- Employee: Benefit equals supplemental life elected amount.
- Spouse and children's coverage levels are based on a percentage of the employee elected coverage amount.

Employee supplemental life rates		
Age	Non-tobacco user per \$1,000	Tobacco user per \$1,000
Under 30	.04	.06
30-34	.04	.09
35-39	.05	.11
40-44	.06	.13
45-49	.10	.20
50-54	.14	.31
55-59	.27	.48
60-64	.42	.70
65-69	.78	1.27
70-74	1.37	2.33
75 plus	1.85	2.39

#### Cost example (employee)

Desired purchase amount: \$150,000

Age on January 1: 40

Smoking status: non-tobacco user

Age rate: .06

1.  $\$150,000 / 1,000 = 150$
2.  $150 \times .06 = \$9.00$
3.  $\$9.00 \text{ monthly} / 2 = \$4.50 \text{ semi-monthly cost}$

Spouse supplemental life rates		
Age	Non-tobacco user per \$1,000	Tobacco user per \$1,000
Under 30	.05	.07
30-34	.06	.10
35-39	.07	.12
40-44	.08	.16
45-49	.12	.24
50-54	.18	.36
55-59	.34	.60
60-64	.53	.87
65-69	1.02	1.44
70-74	1.73	2.94
75 plus	2.58	3.00

Coverage	Supplemental life rates
Employee only	\$.02 per \$1,000 of your coverage amount
Employee and dependents (spouse and/or children)	\$.03 per \$1,000 of your coverage amount The rate is the same regardless of coverage level since rate is based on your coverage amount.



EOI rules apply when enrolling in life, AD&D and disability for the first time and in some cases, when increasing current coverage. Look for an email message or USPS mailing from The Hartford. Coverage is not effective until approved by The Hartford.

Children supplemental life rates
Children per \$5,000 = \$.75 per month (max \$25,000)

# Disability Coverage

Regular and Special Employees Only

## Make the most of your benefits through The Hartford

Your life and disability insurance through The Hartford includes additional valuable services that can help you and your family.



### Funeral Concierge

**Services** – Online tools and live support to help guide you through key decisions. Call [866.854.5429](tel:866.854.5429) or visit [www.everestfuneral.com/hartford](http://www.everestfuneral.com/hartford) (use code HFEVLC).



### Beneficiary Assist Counseling Services

Help you or your beneficiaries cope with emotional, financial, and legal issues that arise after a loss. Call [800.411.7239](tel:800.411.7239).



### Estate Guidance Will

**Services** – Online access to create a simple will.

Visit [www.estateguidance.com](http://www.estateguidance.com) (use code WILLHLF).



### Travel Assistance with ID Theft Protection

Assistance while traveling 100+ miles away from home for 90 days or less. Call [800.243.6108](tel:800.243.6108) (ID number GLD-09012).



### Ability Assist and HealthChampion

Support if you're disabled or are diagnosed with a critical illness. Call 800.96.HELPS.



Disability insurance is designed to provide you with income replacement in the event you are unable to work due to an illness or non-work-related injury. Evidence of insurability (EOI) rules apply.

- **Non-vested (class 1):** Active employees working at least 20 hours per week, with less than five years of PERA service credit
- **Vested (class 2):** Active employees working at least 20 hours per week, with five or more years of PERA service credit

## Employee-paid

### SHORT-TERM DISABILITY INSURANCE (THE HARTFORD)

- Plan pays up to 60% of your weekly earnings, up to a maximum benefit of \$1,500 per week.
- Benefits begin after seven days of absence, or after accumulated sick leave is exhausted.
- For vested employees, benefits are payable for up to seven weeks; for non-vested employees, benefits are payable for up to 25 weeks.

Short-term disability rates

Age bracket	Non-Vested	Vested
Under 25	.15	.06
25-29	.15	.08
30-34	.15	.08
35-39	.16	.08
40-44	.16	.08
45-49	.16	.08
50-54	.16	.10
55-59	.18	.11
60-64	.21	.14
65 plus	.31	.16

Long-term disability rates

Age bracket	Non-Vested	Vested
Under 25	.09	.03
25-29	.13	.03
30-34	.18	.07
35-39	.23	.09
40-44	.46	.15
45-49	.74	.28
50-54	.96	.42
55-59	1.06	.51
60-64	.97	.49
65 plus	.97	.49

### LONG-TERM DISABILITY INSURANCE

- Plan pays up to 60% of your monthly earnings, up to a maximum benefit of \$10,000 per month.
- Benefits begin after 180 days of continuous disability and continue for a maximum of two years, unless disabled from all occupations.
- Pre-existing condition limitations apply.

## PERA-paid

### SHORT-TERM DISABILITY *Vested Employees Only*

- Plan pays 60% of your PERA includable salary.
- Benefits begin after 60 days and are payable for up to 22 months.
- If you are totally and permanently medically disabled from regular and substantial gainful employment or if you are eligible for a service retirement at the time you apply for PERA's STD benefit, the claim will **not** be approved. In this case, it **may** be beneficial for you to elect to apply for the voluntary STD benefit through The Hartford during Open Enrollment (EOI applies) to avoid a gap in coverage.

### MEDICAL DISABILITY RETIREMENT (PERA) *Vested Employees Only*

Vested employees may be entitled to this benefit if totally or permanently disabled. Eligibility and the benefit amount are determined by PERA. Visit [www.copera.org](http://www.copera.org) or call [800.759.PERA](tel:800.759.PERA) for more information on PERA's disability programs.

## FMLA Claims

Leave requests must be submitted through The Hartford. To start a claim call [888.301.5615](tel:888.301.5615).

Once claim is created, track details through the mobile compatible site

[www.abilityadvantage.thehartford.com](http://www.abilityadvantage.thehartford.com).



# Employee Assistance Program (EAP)

All Employees and Family Members

## With the EAP, you never have to go it alone.

Everyone needs a little extra support from time to time. When you're facing difficulty and aren't sure where to turn, your Employee Assistance Program (EAP) can help. EAP has lots of solutions for your concerns about family, work or finances.

When you take advantage of EAP resources, there's no cost to you. Plus, any member of your household is eligible to use the service. Contact your EAP to learn more about managing work-life balance, financial planning and budgeting, family issues, stress, legal matters and more.


## Your Go-To Spot for Support

[AnthemEAP.com](http://AnthemEAP.com) is your one-stop shop for articles, educational materials, tips, tools and more. You can search for information on a variety of topics including:

- Balancing your personal life and work
- Grief and loss support
- Becoming a new parent
- Men's and women's health for all ages
- Moving or buying a home; working and living abroad
- Elder care, child care and adoption
- Pet services such as sitters, boarding and day care
- Access to legal and financial resources
- Tips to live life to the fullest from our WellPost blog
- Monthly seminars on living healthier
- Emotional and mental health well-being
- Maintaining a healthy life style
- Alcohol and drug abuse
- Relationship issues

There's no need to sign up — you and your household members are automatically enrolled.


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 Simply call **800.865.1044** or visit [www.anthemepap.com](http://www.anthemepap.com) and enter Colorado Springs Utilities. Download the mobile app, Learn to Live, for free access to additional tools and resources!


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## Extras that come with your EAP

 **Legal consultation:** Free, half-hour sessions with an attorney who is trained on your concern — child custody, divorce, estate planning, or landlord issues.

 **Financial consultation:** Free access to financial counselors by phone who can assist with a wide range of financial topics, such as bankruptcy, budgeting, controlling debt, estate planning, mortgages, and setting long-term goals for your money.

 **ID recovery and credit monitoring:** Free monitoring and theft resolution services 24 hours a day, seven days a week.

 **Savings center:** Special member discounts on different types of products to help you make the most of your hard-earned dollars. Save money on items you're already buying, such as beauty, clothing, day care, electronics, flowers, gifts, food, travel, and more!

 **Learn to Live:** Free online and mobile program that supports your emotional health and wellness. Includes: guided, self-paced online modules, interactive multimedia activities, master-level clinical coaches, webinars on emotional well-being topics, and comprehensive clinical assessments.

# Vacation Buy

Regular and Special Employees Only

Vacation buy enables you to purchase additional vacation time, on an after-tax basis, which is greater than your annual vacation accruals. You may purchase vacation buy as follows:

Employee Status	Work Week	Minimum / Maximum
Full-time	40 hours	8 hours / 40 hours
Three-quarter time	30 to 39 hours	6 hours / 30 hours
Half-time	20 to 29 hours	4 hours/ 20 hours

## Election instructions

- During your Open Enrollment elections, enter the total number of vacation buy hours you want to purchase. Employee Self Service (ESS) will populate your current hourly rate. The actual cost of your 2023 vacation buy will be based on your hourly rate effective January 1, 2023.
- Vacation buy is an annual election and cannot be changed during the year.

## Hired in 2022 and purchased vacation buy?

- If you were hired in 2022 and purchased vacation buy, the vacation buy hourly rate was adjusted (increased) to correctly calculate your payroll deduction for this benefit for the remainder of the year. If you plan on purchasing vacation buy for 2023, the vacation buy hourly rate in your Open Enrollment screen still reflects the 2022 increased rate as noted above. The 2023 payroll deduction for vacation buy will be recalculated based on your January 1, 2023 hourly rate.
- If you know your January 1, 2023 hourly rate, use the calculation to the right to manually calculate the pay period deduction cost.

## Vacation buy usage

- Vacation buy hours will be included in your regular vacation balance and subject to the annual carryover limit as outlined in the Personnel Policies Manual (PPM).
- The PPM denotes the vacation carryover limits. Unused vacation buy hours will be part of the calculation for the carryover policy limit.
- On the **January 13, 2023** pay date, your vacation buy hours will be added to your vacation balance; however, you can use your purchased hours beginning January 1, 2023.
- When vacation buy hours are used, tax withholding applies.
- Unused vacation buy hours are not cashed out at year-end. There are no exceptions to this rule.

## Separation of employment

- If you separate or retire prior to paying for your vacation buy hours, the final paycheck will be adjusted to pay for any hours used that have not yet been paid.

## Calculating the cost of vacation buy

\$\_\_\_\_\_ hourly rate as of January 1, 2023 x hours purchased =  
 annual cost of vacation buy ÷ 24 = \$\_\_\_\_\_ per pay period  
 deduction cost for 2022

### 2023 VACATION CARRYOVER EXAMPLE:

Annual accrued vacation in 2022 (4.0 X 26 pay periods)	<b>= 104 hrs</b>
Balance of carryover hours from previous year	<b>= 4 hrs</b>
Vacation buy purchased during 2022 Open Enrollment	<b>= 40 hrs</b>
<b>Total vacation available in 2022</b>	<b>= 148 hrs</b>
<b>Total vacation used by 2022 year-end</b>	<b>= 74 hrs</b>
<b>Remaining vacation balance carried over into 2023</b>	<b>= 74 hrs</b>



# Retirement

All Employees

## It is never too early to start saving and planning for your future

MissionSquare and the State of Colorado Public Employees' Retirement Association (PERA) programs are part of the overall compensation and benefit programs available for employees. Both MissionSquare and PERA have specific plans that will help you meet your personal retirement goals.



**MissionSquare**

MissionSquare | 800.669.7400 | [www.missionsq.com](http://www.missionsq.com)

ICMA-RC is now MissionSquare Retirement, a new name that reinforces the company's foundation and solidifies their vision for the future. Still a non-profit independent financial services corporation providing retirement plans and related services for more than a million public sector participant accounts.

MissionSquare offerings include:

- **457 Plan** is available to save money on taxes while accumulating savings for retirement. This program is an optional retirement savings plan that exists to help you. A 457 Roth plan is also available.
- **Roth IRA** is one of the best ways to grow your savings for retirement. The Roth IRA provides you with the opportunity of a lifetime to build retirement assets without ever owing any taxes on the earnings, the ability to withdraw earnings tax-free and penalty-free withdrawal options. The No-Fee Roth IRA gives you access to multiple fund families. There are more than 100 funds to choose from.



**Public Employees' Retirement Association**

(PERA) | 800.759.7372 | [www.copera.org](http://www.copera.org)

PERA Retirement Plan provides retirement and other benefits to employees. Both you and Colorado Springs Utilities contribute to your PERA Retirement Plan. This plan is in lieu of participation in the federal Social Security program. Membership in this program is mandatory at the date of employment. This program is governed by the State of Colorado.

- **401(k)** retirement savings plan is available to you by making voluntary contributions via regular payroll deductions. This plan enables you to save money on taxes while accumulating savings for retirement. A 401(k) Roth plan is also available.

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**You can start saving for retirement at any time**

For additional information on the retirement plans and to locate the enrollment forms, visit the intranet under Human Resources > Benefits > Supplemental Retirement Plans or online through [www.missionsq.com](http://www.missionsq.com) and [www.copera.org](http://www.copera.org).  
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## Long-Term Care (LTC) Insurance

Regular Employees Only

Unum, Policy #907393

800.227.4165

[www.unum.com](http://www.unum.com)

Long-term care is received either at home or in a facility when someone needs assistance with activities of daily living like bathing, dressing or eating or needs supervision due to a severe cognitive impairment such as Alzheimer's disease. Visit the intranet under Human Resources > Benefits > Long-Term Care for more information and links to Unum's site.

### Long-term care insurance plan

#### highlights:

- Purchase coverage for yourself, your spouse, parents or grandparents, children and siblings (minimum age 18), and in-laws.
- New hires who apply during their initial eligibility enrollment period are eligible for benefit amounts on a guaranteed issue amount of up to and including \$9,000 with a Facility Benefit Duration of 3 or 5 years without evidence of insurability (EOI).
- Employees who wish to elect after their initial eligibility period (i.e. during Open Enrollment) must complete the online Enrollment Form and the online LTC Application EOI form.
- The online LTC Application EOI form is required for all family members at all times.
- Long-term care insurance is not a payroll deducted benefit. Participants are set up on direct bill with Unum.
- Premium rates for long-term care insurance are based on your age at the time of purchase and the benefit level you choose. The younger you are when you buy the insurance, the lower the cost. Use Unum's online calculator to determine premiums.
- The benefit is portable.
- The plan's elimination period is 90 days before benefits become payable. The time period can be accumulated over a period of 730 days and needs to be satisfied only once during the life of the plan.

# Vendor Contacts

## Voluntary Wellness Program:

Employees and spouses are eligible to participate. Enrollment in the medical plan is not required.

### **CIGNA WELLNESS**

P.O. Box 182223  
Chattanooga, TN 37422-7223  
**800.Cigna24 (800.244.6224)**  
[www.myCigna.com](http://www.myCigna.com)

## Near Site Medical Clinic:

Nurse practitioners provide general healthcare services from acute care, annual physicals and lab draws. Clinic services include wellness coaching services for weight loss, smoking cessation, cholesterol, healthy eating and exercise.

### **CITY EMPLOYEE MEDICAL CLINIC**

Lane Center for Academic  
Health Sciences Building  
4863 North Nevada Ave., 2nd Flr.  
Colorado Springs, CO 80918  
**719.385.5841**

## Medical and Pharmacy Administrative Services Provider:

Access to a nationwide medical network, known as Open Access Plus. Performs medical claims administration and pharmacy benefit management services, which include retail pharmacy network, mail order, specialty pharmacy services and formulary management. Provides medical management services which include utilization management/pre-certification, case management, disease management and maternity management services.

### **CIGNA**

Group #3336236  
P.O. Box 182223  
Chattanooga, TN 37422-7223  
**800.Cigna24 (800.244.6224)**  
[www.myCigna.com](http://www.myCigna.com)

Cigna Home Delivery - **800.835.3784**  
Cigna Specialty Pharmacy - **800.351.3606**  
Cigna Behavioral Health - **800.283.6226**  
Mobile App: MyCigna

## Delta Dental Plans:

Group #7714  
Delta Dental Buy-Up Plan  
Delta Dental Standard Plan

### **DELTA DENTAL OF COLORADO**

P.O. Box 5468, Denver, CO 80217  
**800.610.0201**  
[www.deltadentalco.com](http://www.deltadentalco.com)

## Vision Plan:

Group # 195774

### **ANTHEM BLUE VIEW VISION**

P.O. Box 8504, Mason, OH 45040-7111  
**866.723.0515**  
[www.anthem.com](http://www.anthem.com)

## Healthcare Accounts

### Administrator:

Flexible Spending Account (FSA), Health Reimbursement Account (HRA) or Health Savings Account (HSA).

### **PAYFLEX**

**844.PAYFLEX (844.729.3539)**  
[www.payflex.com](http://www.payflex.com)

## Basic Employee Life/Accidental Death and Dismemberment/ Personal Loss (AD&D):

Policy #803344

## Supplemental Life and Supplemental AD&D Insurance:

Policy #803344

### **THE HARTFORD GROUP LIFE INSURANCE**

Life Call Center: **888.563.1124**  
Conversion/Portability Forms: **877.320.0484**  
Waiver of Premium  
<https://enroll.thehartfordatwork.com/Csubene>

## Disability Insurance:

Policy #803344  
Short-Term Disability  
Long-Term Disability

### **THE HARTFORD DISABILITY INSURANCE**

P.O. Box 14869, Lexington, KY 40512-4560  
Customer Service: **888.301.5615**  
Fax: **833.357.5153**  
Claim filing website:  
[www.abilityadvantage.thehartford.com](http://www.abilityadvantage.thehartford.com)

## Employee Assistance Program:

The EAP provides solutions to help you balance work and life through confidential and easily accessible services which include:

face-to-face counseling, legal assistance, and financial assistance. The EAP is also your resource for work-life services, such as finding child care.

### **ANTHEM EAP**

**800.865.1044** (24 hours a day)  
[www.anthemep.com](http://www.anthemep.com)  
Login: Colorado Springs Utilities

## MissionSquare:

457 Plan and Roth IRA

### **MISSIONSQUARE**

1120 Lincoln Street, Suite 708,  
Denver, CO 80203  
**800.669.7400**  
[www.missionsq.org](http://www.missionsq.org)

## PERA:

Retirement Plan and 401(k)

### **PUBLIC EMPLOYEES' RETIREMENT ASSOCIATION**

1300 Logan Street  
Denver, CO 80203  
or  
P.O. Box 5800  
Denver, CO 80217-5800  
Information Line: **800.759.7372**  
[www.copera.org](http://www.copera.org)

## Long Term Care Insurance:

Policy #907393

### **UNUM**

Customer Service: **800.227.4165**  
[www.unum.com](http://www.unum.com)

## Leave Management:

Policy #803344

### **THE HARTFORD (FMLA & ADA)**

Customer Service: **888.301.5615**  
Mobile compatible website: [www.abilityadvantage.thehartford.com](http://www.abilityadvantage.thehartford.com)



# Notes