

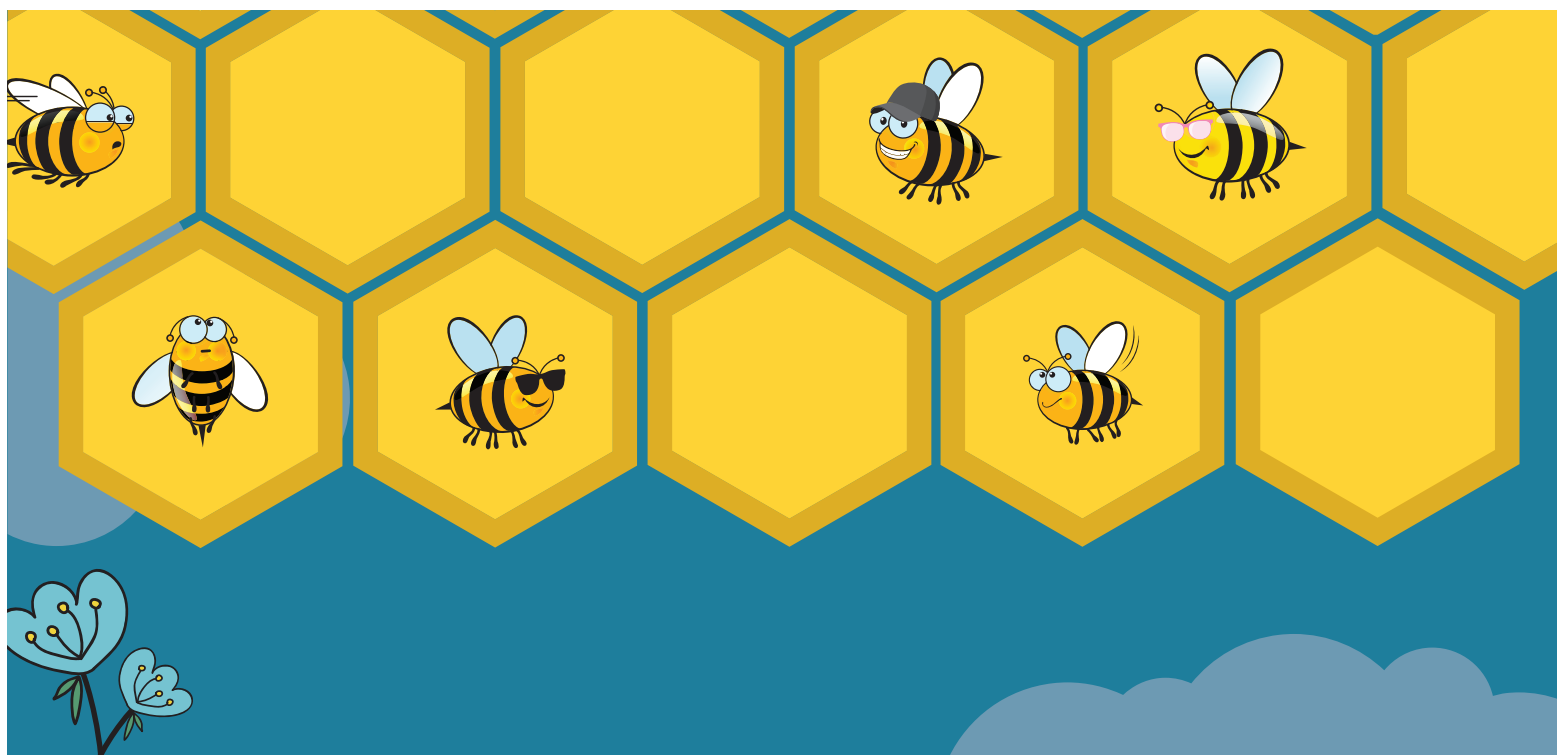


ARAPAHOE COUNTY

THRIVE *in the* HIVE!



ARAPAHOE COUNTY BENEFITS GUIDE 2022



Privacy Statement

Federal law, specifically the Health Insurance Portability and Accountability Act, known as “HIPAA,” requires the privacy protection of your personal health information. At Arapahoe County, we respect and recognize every individual’s right to privacy. We also recognize our obligations to preserve the confidentiality of personal information and have adopted all the guidelines under HIPAA for our use in the collection, use and disclosure of personal information.

We have established and will continue to maintain appropriate safeguards under HIPAA to protect the security and confidentiality of personal information.

If you would like additional information regarding your Health, Disability or Life plans, please refer to the Plan Documents. You may request that a copy be sent to you by contacting the Benefits Team.

Disclaimer

This document highlights only benefits for eligible employees of Arapahoe County. Official insurance documents govern. If any discrepancies exist between this document and the official documents, the official documents govern. This document does not constitute a contract of employment. The company has the right to alter, change, modify, replace and remove any of the benefits at any time including, but not limited to, benefit eligibility definitions. This document does not address company policies. If there is a conflict between this guide and the Human Resources Handbook, the more recent publication will govern. The County’s Benefit Plans are not subject to ERISA.

Official Insurance Documents

All benefit plan insurance documents are available to employees on *My Benefits*. Employees may request a hard copy of any of the plan documents from the Benefits Team. Please allow up to 5 business days for delivery of documentation in hard copy.

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ARAPAHOE COUNTY BENEFIT PROGRAMS

Our goal at Arapahoe County is to provide you with a benefit program designed to give you flexibility and choice, allowing you to personalize your benefits to suit your needs and the needs of your dependents.

The following pages include benefit plan options and a brief summary of the covered benefits. Please carefully review this material along with biweekly costs provided in your new hire or your open enrollment packet. The elections you make during an enrollment period will remain in effect throughout the calendar year unless you experience a qualified life event change. Complete plan information is provided at new hire orientation, during open enrollment or can be found on *My Benefits*.



Enrollment

Every employee will have the opportunity and responsibility for reviewing and electing benefits, first at hire and then annually during open enrollment.

See page 6 of this guide for information on making changes outside of the annual open enrollment.

Enrollment Instructions

Please see the enrollment instructions on *My Benefits* for information on enrolling in benefits during Open Enrollment. New hires will receive instructions for enrolling at New Hire Orientation.

You may view your elected benefits or print a Benefit Detail Report from *My Benefits* at anytime.

It is important that you review your paycheck to ensure that your enrollments and deductions are correct. Due to IRS guidelines, you only have a small window of time in which to make corrections. Please notify the Benefits Team immediately if you have questions or concerns about your benefit deductions.



HEALTH CARE TIPS

Being a healthy consumer

Being a good benefits consumer means learning about benefits costs and making smart choices about the care and services you receive. How we use our plans as individuals affects the costs of coverage for everyone, which is part of being in a group health plan. In addition, the more we spend on our individual care, the greater impact it will have on overall costs of coverage. This doesn't mean, however, that you shouldn't schedule preventive and necessary visits, as neglecting these services can lead to severe health complications in the future which will increase the expense of the plan to you and the County. This guide gives you a general overview of the plans, and we recommend you keep a copy at home. Using the provider websites and the materials on *My Benefits* can help you with your more detailed questions. Use the tools made available to you to make educated decisions.

Benefits vs. Care

It's important to note that the County offers employees benefits, not care. You, along with your care team, are responsible for deciding what care is best for you. If the plan does not cover part or all of the cost of your care, you are responsible for the cost of care that you decide is best for you.

You want to review with your family the cost impact of your specific care needs and deem which plan(s) will work best for you and your family.

By becoming more involved in your care, you will not only feel more in control of your well-being, but you will be able to make better decisions that could save you money.

Who Is Eligible For County Benefits?

Employees

As an Elected Official, Regular or Grant Funded (GF) employee, you are eligible for the benefits described in this brochure, unless otherwise noted in the Eligibility Chart below. In general, you are considered “full-time” if you are regularly scheduled to work 40 or more hours per week. You are considered “part-time, benefits eligible” if you are regularly scheduled to work an average of at least 20 hours per week.

Temporary employees and contractors are generally not eligible for benefits. Temporary employees and employees working less than 20 hours per week may be eligible for paid sick time depending on hours worked.

Eligibility Chart

Benefit	Benefit Eligibility	Not Eligible
Medical Deductible HMO (DHMO) HMO Plus (HMO+)	First of the month following 30 days of service	
Dental	First of the month following 30 days of service	
Vision	First of the month following 30 days of service	
Health Reimbursement (HRA)	First of the month following 30 days of service; enrollment in DHMO	
Flexible Spending Account (FSA) Healthcare Dependent Care Transportation Adoption	First of the month following 30 days of service	Grant Funded
Basic Life and AD&D Insurance	First of the month following 30 days of service	
Additional Life and AD&D Insurance (Employee, Spouse, Child)	First of the month following 30 days of service	
Short-term Disability	First of the month following 30 days of service	
Long-term Disability	First of the month following 30 days of service	
Employee Assistance Program (EAP)	First of the month following 30 days of service	
401a Defined Benefit Plan	First full pay period worked	Regular Part-time, Grant Funded
Smart Start Savings Plan (457)	Date of Hire	
Ancillary Benefits Accident Hospital Indemnity Critical Illness Prepaid Legal Home and Auto	First of the month following 30 days of service	
Tuition Reimbursement	Classes starting after 6 months of service	Elected Officials, Grant Funded
Student Loan Payment	Upon accumulating at least 40 hours of vacation carryover	Elected Officials, Grant Funded
Arapahoe Rewards Discounts	Date of Hire	
Vacation	Date of Hire; Accrual prorated in first month of service	Elected Officials
Sick	Accrual begins with first full month of service	Elected Officials
Holiday Paid Time Off	Date of Hire	
Floating Holidays	First of Month following 6 months of service	

Which family members can I cover?

Your eligible family members may also be enrolled in certain benefit plans. Eligible family members include:

- Your lawful spouse (as outlined for federal tax purposes)
- Your common law spouse (requires a notarized Declaration of Dependents & Common Law Marriage Form)
- Your civil union partner (requires a Civil Union Certificate)*
- Your child(ren) under age 26; if:
 - Your natural child(ren)
 - Your stepchild(ren) who lives with you
 - Your adopted child(ren) – (adoption must be finalized by court)
 - Your civil union partner's child(ren)*
 - Child(ren) for whom you have permanent legal guardianship and who is primarily dependent on you for 50 percent of their financial support
 - Your child(ren) on whose behalf a Medical Child Support Notice has been issued
 - Others, if required by state law
- Your child(ren) over the age of 26 who are determined to be disabled either by the State or by Kaiser as not capable of self-sustaining employment because of a mental or physical handicap prior to the age of 26.



*Some benefits such as Flexible Spending Accounts and Health Reimbursement Accounts are a tax savings benefit and civil union relationships may not be recognized by the IRS for this tax advantage. Consult your tax advisor for detailed information.



It is your responsibility to notify the Benefits Team within 31 days of the eligibility or ineligibility of a dependent through My Benefits.

Proof of Dependent Eligibility

Prior to adding eligible dependents to your County benefit plans when you are hired, at open enrollment or upon a qualifying life event, you must submit documentation through *My Benefits*. Please ensure that any documentation contains a description of the relationship, and the eligible dependent(s): legal name, address if different than yours, birth date and Social Security Number (SSN) (for newborn children, update SSN as soon as received, but no later than six months from birth).



Loss of Dependent Eligibility

Only eligible dependents may be covered under County benefit plans. It is your responsibility to notify the Benefits Team within 31 days of loss of eligibility due to age, divorce, legal separation or other events that would disqualify a dependent from coverage.

Failure to promptly submit a qualified life event through *My Benefits* is insurance fraud and may result in consequences up to and including repayment of the cost of ineligible benefits paid, loss of future plan coverage and/or loss of employment.

For more information, please contact the Benefits Team at 720-874-5551.

Dual Coverage with Arapahoe County: If your spouse or eligible dependents are also employees of the County you may elect to be covered as either an employee or as an eligible dependent, but not as both. **Note:** Additional Life AD&D can only be elected as an employee, not as a dependent when both you and your spouse are Arapahoe County employees.

Dual Coverage with two employers/insurance providers: If your child(ren) are covered under your medical plan and another medical plan such as your spouse's plan, be aware that the Spouse Birthday Rule applies: which ever policy holder's birthday falls first in the calendar year is the primary insurance for dependents when filing claims.

If you have questions regarding dual coverage or dependent coverage, please contact the Benefits Team at 720-874-5551.

When and how can I make changes to my benefits?

Benefits are elected on an annual basis and can be changed only during Open Enrollment. However, the IRS has determined that certain life events qualify you for changes to your benefits during the year. All benefit changes require two conditions to be met before they can be approved.

- All changes must be requested through *My Benefits*, and
- Appropriate documented proof provided within 31 days of the event.

If both conditions are not met within the 31 days, the Life Event will not be approved and the next opportunity to make changes will be at Open Enrollment. Please be aware that only Birth and Adoption can be retroactively covered. All other events will be effective on the first of the month following notification. To avoid breaks in coverage, you should submit a life event through *My Benefits* as soon as you know a Qualified Life Event will occur, even if it hasn't occurred yet.

The following are Qualified Life Events:

- You gain or lose a dependent (birth, marriage, divorce, death, adoption, common law marriage, etc.)
- Your dependent loses coverage due to employment change
- Your dependent becomes eligible for other coverage
- You become ineligible for benefits because you don't work the required number of hours
- You become eligible for benefits because your employment status changes

Your benefit changes must be requested through My Benefits within 31 calendar days (60 for CHIP and Medicaid) from the event date.

The benefit change should be consistent with the nature of the event. Changes due to a Qualified Life Event may be requested through *My Benefits*.

Qualified Life Events Table

Life Event	Changes Allowed	Accepted Documentation
Birth	Add New Child(ren)	Birth Certificate, Vanity Birth Certificate (feet print), crib card, hospital discharge papers, letter from Doctor or Midwife
Adoption	Add New Child(ren)	Final Adoption Papers, or placement for adoption papers
Marriage	Add Spouse and Child(ren)	Marriage Certificate or Letter from the Officiate, Civil Union Certificate
Divorce or Annulment*	Drop Ex-Spouse and drop any child dependents	Divorce Decree, Declaration of Nullity or Court Order
Death	Drop deceased dependent	Death Certificate or Letter from Officiate
Gain Coverage Elsewhere	Drop coverage for yourself and any dependents gaining other coverage	Letter from new carrier or enrollment documentation for each person
Lost Coverage Elsewhere	Add coverage under ACG's Plans for yourself and any dependents that have also lost coverage	Creditable Coverage Certificate, Letter from prior carrier, Letter from sponsor of prior plan (employer) for each person

*Legal separation included under divorce

Confirmation of Elections

Regardless of whether you actively enroll for benefits (during the new hire enrollment period or during open enrollment), a Benefit Detail Report is available through *My Benefits*.

This report outlines your benefits, premium costs and beneficiary designations for 2022. Please review this Benefit Detail Report carefully and report any administrative errors to the Benefits Team within the stated time frame as corrections received outside of the stated time frame will not be accepted. If there is a discrepancy between a printed Benefit Detail Report and *My Benefits*, *My Benefits* will govern.

Allowable changes not requiring a Qualified Life Event

You may change the following benefits at any time:

- Smart Start Savings Plan;
- Auto and Home Insurance;
- Beneficiary Designation changes for Life Insurance, Smart Start Savings Plan or Retirement.
- Student Loan Payment

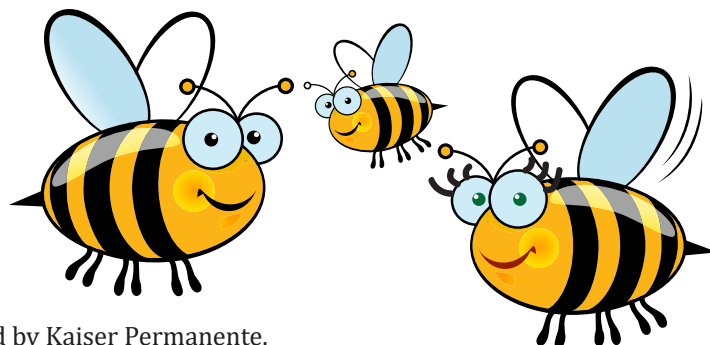
For information regarding how to make changes to these benefits, contact the Benefits Team at 720-874-5551.

HEALTH PLANS

The opportunity to have access to tax deferred healthcare is an extremely valuable benefit. At Arapahoe County, we present a comprehensive benefit package with an assortment of medical, dental and vision plans giving you the opportunity to pick and choose what is best for you and your circumstances.

Coverage Tiers

- Employee only
- Employee + Spouse
- Employee + Child(ren)
- Employee + Family



Medical Plan

You have the choice of two fully insured medical plans administered by Kaiser Permanente.

- Deductible HMO (DHMO)
- HMO Plus (HMO+)

Each plan offers different levels of coverage, **premiums** and **out-of-pocket (OOP)** expenses. It is important for you to discuss these options with your family and choose the plan best suited for your specific needs.

No matter what decision you make, both plans offer a variety of medical services, which include, but are not limited to: preventive, hospitalization, surgery, office visits, emergency care and prescription drug coverage.

For many medical services, such as physician office visits and prescription drugs, you make a **copayment** for the services. For preventive services, the plan pays 100% in-network. Please be advised that if during a preventive appointment diagnostic services are performed, there will likely be a charge.

On the Deductible HMO Plan, medical services not covered by a **copay**, such as inpatient hospitalization and outpatient surgery must satisfy an annual **deductible** before the plan begins to make payment. The Deductible HMO is accompanied with a Health Reimbursement Account (HRA) which applies to the **deductible**. (Refer to HRA section for information on how this deductible may be reduced.)

On the HMO Plus Plan or after the **deductible** is satisfied on the DHMO, the plan pays a portion of covered expenses and you pay a percentage. This is referred to as **coinsurance**.

The combination of **copays**, **deductible** and **coinsurance** you pay is your **out-of-pocket** costs. The annual **out-of-pocket maximum** limits your total annual costs. Once you reach that amount, the plan pays 100% for the remainder of the calendar year.

Out-of-Network Services

The HMO Plus Plan allows for 10 out-of-network, in office procedures each year, but the majority of all coverage must be utilized with in the Kaiser Permanente Network.

Out-of-Network in-office procedures

- Office Visits
- Blood Draw
- X-Rays

Preventive Services

Arapahoe County health plans enable you to take a more active role in your health. A first step in that role is to maintain your well-being and keep up on your preventive care appointments, which are covered by the plan at 100% and could satisfy part of your Wellness Counts requirement(s). There are advantages on keeping up your preventive appointments, including early detection of potentially serious conditions and better overall health, resulting in healthcare savings in the future.

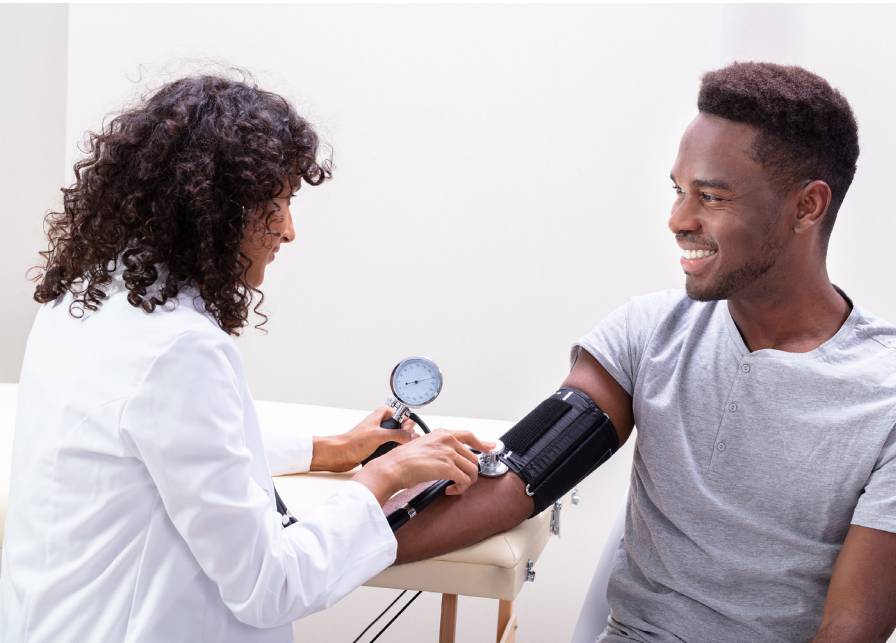
Out-of-Area Dependent Coverage

Kaiser Permanente covers routine, continuing, and follow-up care for anyone enrolled in the plan who is an out-of-area dependent. Therefore, out-of-area services will be covered for non-urgent medical needs. Medically necessary urgent and emergency care are covered for dependents while out of the service area.

The Out-of-Area Dependent Benefit will cover up to:

- 5 office visits
- 5 diagnostic X-rays
- 5 prescription drug refills

Applicable copays/coinsurance apply. For additional details please visit [My Benefits](#).



Medical At-A-Glance:

	DHMO	HMO+
Annual Deductible [□]	\$2000/\$4000	\$0/\$0
Health Reimbursement ^{□□}	\$1000/\$2000	\$0/\$0
Out-of-Pocket Max	\$4,000/\$8,000	\$4,000/\$8,000
Preventive Care	No Charge	No Charge
24/7 Medical Advice by Phone	No Charge	No Charge
Primary Care		
Office Visit	\$25	\$30
Services during a visit	10%	
Chat with a Doctor	No Charge	No Charge
Phone Visit	No Charge	No Charge
Video Visit	No Charge	No Charge
Specialty Care		
Office Visit	\$50	\$50
Services during a visit	10%	
Chat with a Doctor	No Charge	No Charge
Phone Visit	No Charge	No Charge
Video Visit	No Charge	No Charge
Diagnostic Lab & X-Ray	10%	\$50
Mental Health Outpatient		
Office Visit	No Charge	No Charge
Services during a visit	10%	
Phone Visit	No Charge	No Charge
Video Visit	No Charge	No Charge
Urgent and Emergent Care		
Urgent Care	\$60	\$60
Services during a visit	10%	
Mobile ER (Dispatch Health)	\$60	\$60
Emergency Room**	10% up to \$350	\$350
Surgeries and Hospitalization		
Outpatient Surgery in ASC	10%	20%
Outpatient Surgery in Hospital	20%	30%
Inpatient Hospital	10%	20%
Prescription Drugs		
Retail: Up to a 30-day supply*	Preferred Generic: \$15	Preferred Generic: \$15
	Preferred Brand: \$30	Preferred Brand: \$30
	Non-Preferred Generic & Brand: \$60	Non-Preferred Generic & Brand: \$60
	Specialty: 20% co-insurance up to \$250	Specialty: 20% co-insurance up to \$250
Mail Order: Up to a 90-day supply*	Generic: \$30	Generic: \$30
	Brand: \$60	Brand: \$60
	Non-Preferred Generic & Brand: \$120	Non-Preferred Generic & Brand: \$120

- Any procedure done during an office visit is subject to deductible and OOP.
- The Health Reimbursement Account reimburses any portion of the second half of the deductible, if reached.
- Urgent Care – lower copay applies during office hours at a Kaiser Permanente facility in the service area; higher copay or coinsurance applies after hours at a designated Kaiser Permanente facility.

* Some quantity limits may apply

** Emergency Room copay is waived if admitted.

1

First you Meet the Plan Deductible

- You can use funds in your FSA or HRA to pay down your deductible.
- Copays do not contribute to the deductible.
- Any one person can meet the individual deductible or a combination of family payments to meet the family deductible.



2

- Then you pay Coinsurance and/or Copays

3

- Plan pays 100% of all covered charges for the balance of the year after you meet the out-of-pocket maximum.
- The out-of-pocket maximum is the most you will have to pay in addition to premiums in any plan year.

This list is not intended to be all inclusive. Please see your Evidence of Coverage for complete details.

Copays are applied before deductible; coinsurance is applied after deductible.

Please note: One or more of these plans provides at least the minimum value required under the Patient Protection and Affordable Care Act (PPACA) and is affordable per Healthcare Reform guidelines.

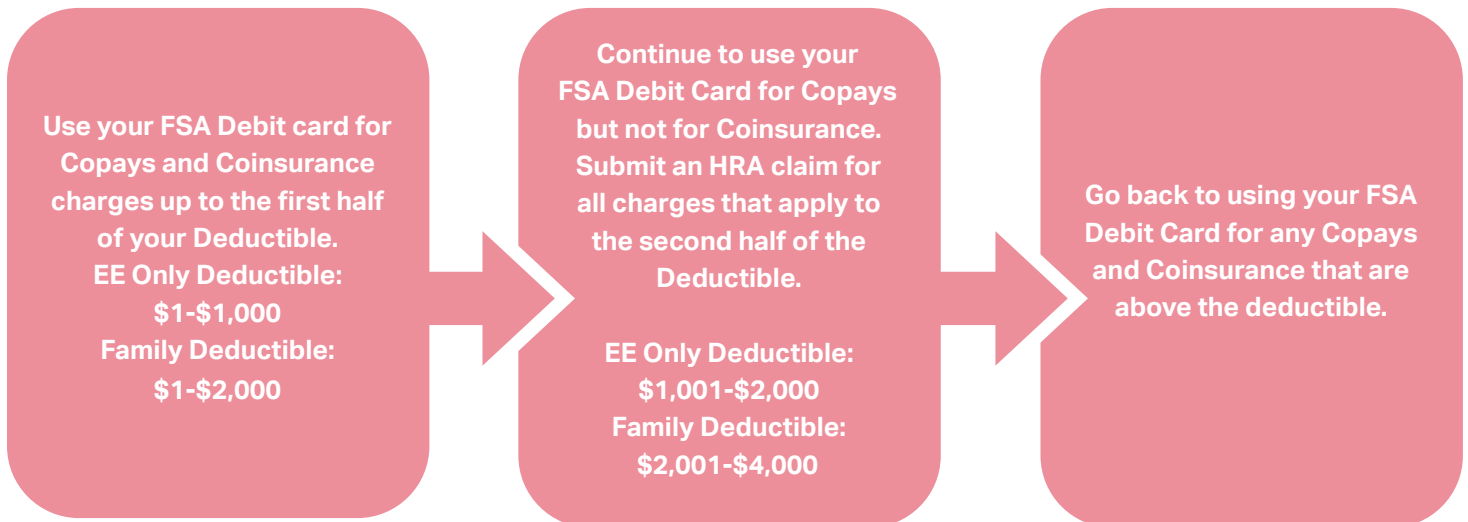
Health Reimbursement Account (HRA)

If you choose the Deductible HMO you are also electing the Health Reimbursement Account. The HRA helps reduce your and your covered dependents' out-of-pocket expenses by reimbursing you for deductible expenses that exceed \$1,000 for any covered individual or \$2,000 for a family. For example, with a deductible for one family member of \$2,000, you would pay the deductible directly and once you have paid more than \$1,000 you then submit a claim for reimbursement of any cost above the first \$1,000 of that deductible. You will be reimbursed tax-free for qualified medical expenses through the Health Reimbursement Account.

You are responsible for submitting HRA claims to Alerus, the County's HRA Administrator. You can submit expenses as they are incurred and Alerus will track when you have paid your share (\$1,000 individual/\$2,000 family) and then will begin reimbursing you for the remaining amount of the deductible when a proper claim form and Explanation Of Benefits are submitted. The unused balance does not carry forward to the next year. If you prefer paper, HRA claim forms can be found on *My Benefits*.

Any reimbursed funds are not eligible under the Healthcare Flexible Spending Account.

Using Your HRA with a Flexible Spending Account



Well-being Guidance

Sometimes life can be challenging. That is why Arapahoe County provides all employees with Well-being Guidance Services at no cost to you. Primarily this service provides you with **confidential** 24/7/365 guidance on some of those challenges.

Could you feel happier than you do? We offer stress reduction guidance.

Feel like you are arguing with your spouse, kids, coworkers? We offer communication guidance.

Would you like to get frustrated or irritated less? We offer mind health guidance.

Want to sleep better or have more energy? We offer mindfulness guidance.

Are you needing to have a tough conversation with a direct report? We offer manager guidance.

Are you about to go on a vacation? We can guide you to a pet sitter.

Do you need to complete a will? We can guide you to legal assistance.

There are a variety of issues we can provide guidance on, including but not limited to:

- Child-care and parenting
- Helping aging parents
- Financial issues
- Legal concerns
- Work and career
- Emotional Well-being
- Addiction and recovery
- Well-being and prevention
- Life events
- Coping with stress and change
- Relationship issues
- Resources to support work/life success
- Dealing with traumatic events



Dental Plan

Regular dental exams can help you and your dentist detect problems in the early stages when treatment is simpler and costs are lower. Keeping your teeth and gums clean and healthy will help prevent most tooth decay and periodontal disease, and is an important part of maintaining your health.

Arapahoe County offers dental insurance through Delta Dental of Colorado. You have access to Delta Dental's PPO network at a discounted rate. As a member in Delta Dental, you always have the choice of seeing any licensed dentist; however, you will experience the greatest savings if you see a Delta Dental PPO dentist. No cards are issued for this plan; coverage will be verified by your Social Security number.

Below is a summary of the coverage under the plan:

Benefit	Coverage
Annual Deductible	\$50
Employee Only	\$100
Employee + one or more	
Annual Maximum (per person)	\$1,500
Diagnostics & Preventive Care: Includes cleanings, fluoride treatments, sealants & x-rays	100%, no deductible
Basic Services: Includes fillings, periodontics, scaling and root planning, and oral surgery	80% after deductible
Major Services: Includes crowns, implants, bridges and full & partial dentures	50% after deductible
Orthodontia	50%, no deductible
	\$1,500 lifetime maximum
Temporomandibular Joint (TMJ) services: TMJ diagnostic and appliances	50%, no deductible
	\$750 lifetime maximum

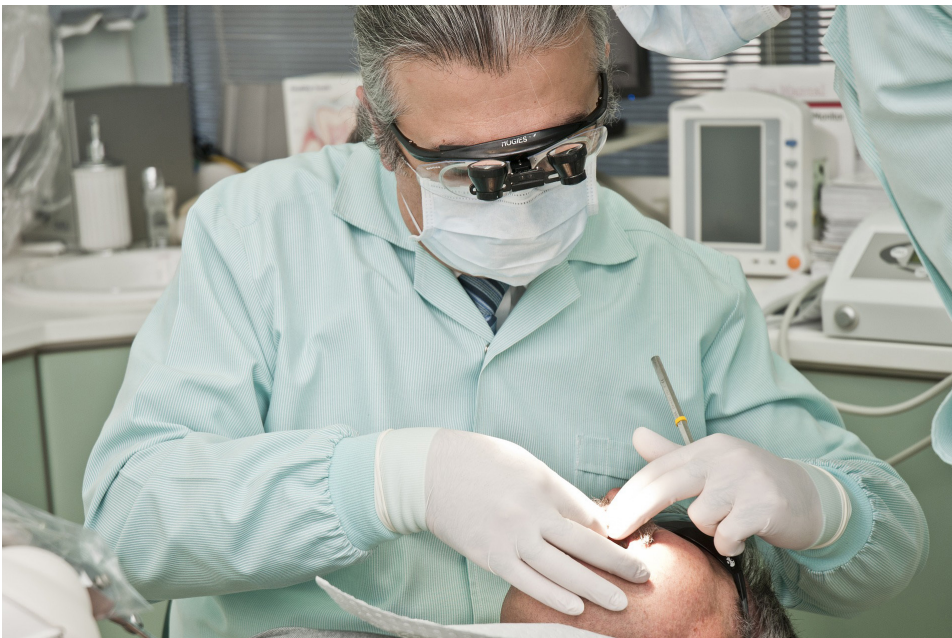


Vision Care Discount Program

If you and your dependents are enrolled in Delta Dental, you are also eligible for discounted vision care benefits offered through EyeMed Vision Care.

To receive discounted vision benefits, you need to use an EyeMed provider. For a list of providers call 1-866-246-9041 or visit www.eyemedvisioncare.com/deltadental.

When you see the provider, you need to present an ID card to receive the discount. You may pick up ID cards and pamphlets at benefit fairs, in the Benefits Department, print one from *My Benefits* or from the above website.



Vision Plan

Regular vision screenings can help you and your ophthalmologist detect problems in the early stages when treatment is simpler, and costs are lower. Your eye doctor can also detect early signs of serious health problems such as diabetes, high blood pressure and risk of stroke, based on the appearance and structure of your eye, making regular vision screenings an important part of maintaining your health.



Arapahoe County offers vision coverage through Vision Service Plan's (VSP) Choice Network. The plan provides discounted services for the employee and covered dependents. No cards are issued for this plan; coverage will be verified by your Social Security Number.

When you visit a VSP provider, your vision benefits will include:

Benefit	Coverage
Exam (every 12 months)	\$10 copay
Kids Exam (every 6 months)	
Lenses (every 12 months)	\$10 copay
Frames (every 24 months)	\$10 copay
KidsCare Frames (every 12 months)	\$190 allowance
Contacts	\$190 allowance



Value Added Discounts

Laser VisionCareSM – VSP has contracted with many of the nation's finest laser surgery facilities and doctors, offering you a discount off PRK and LASIK surgeries.

Contact Lenses – Extra savings with exclusive contact lens rebates for VSP members.

Prescription Glasses – 20% off any amount over your frame allowance and an average of 35%-40% off non-covered lens enhancements with VSP providers, 30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP provider on the same day as your Well Vision Exam. Or get a 20% discount from and VSP provider within 12 months of your last Well Vision Exam.

KidsCare – New pair of frames every year, new lenses as needed, (minimum prescription change required), impact-resistant polycarbonate lenses at no charge.

Arapahoe County Well-being Program

What do you think of when you think of wellness? A fad, a trend, or the next diet craze out there? At Arapahoe County we believe that wellness has evolved from perhaps just that, a craze or a passing trend, into a lifestyle or a constant state of 'being well' or 'well-being'. We look at wellness as more than just physical fitness -- something we do short-term for an incentive that we'll forget about in a few weeks -- to opportunities to make healthier choices every day that have the power to improve our lives for the better of our future.



"Arapahoe WOW" (Working on Well-being) offers opportunities to engage in long lasting behavior change that will allow all of us to live our best lives and be the best version of ourselves. This serves everyone well – all of us, our co-workers, our families and especially the residents of Arapahoe County. We fully believe in our values of accountability, inclusivity, accessibility and integrity and want you to feel empowered to take great care of yourself, so that you can take great care of our residents every day at work.

Arapahoe WOW aims to offer opportunities to make decisions that will help lead to a healthier you by focusing on our six "petals" of well-being: Career, Community, Emotional, Financial, Physical, and Social.

Career: Creating **fulfilled** and **engaged** employees by utilizing Arapahoe Learns for opportunities for continuing education.

Community: Offering employees time to **connect** with **philanthropic** events, volunteer at local schools and be involved in their neighborhood community.

Emotional: Sharing Guidance Resources to make **mindful** choices and create **balance** in and outside of work.

Financial: Introducing financial habits that help us become **secure** in our current financial status and be **prepared** for a bright future.

Physical: Making the **healthy** choice the easier one and presenting programs that leave us feeling **energized** and excited to live our best lives.

Social: Holistic well-being gives us the security of meeting a basic human need to be **included** and feel **supported** through positive relationships with family, friends, and when needed, support groups.



We want to meet you where you are and help you grow and move to a new level of health and well-being! To that end, we offer you *My Well-being* hosted at www.arapahoewow.com with several programs and challenges throughout the year.

By completing programs in the portal, including Wellness Counts (incentive program which offers a reward to offset the following years healthcare premiums) and making small changes surrounding the six petals of well-being, you will be empowered to form daily habits that will lead to healthier lifestyles.

Complete Arapahoe County WOW Activities and earn. Review your program overview or check the incentive tracking table on the portal to learn more about activities and rewards.

Reward mall credits must be redeemed by Jan. 20 of the following year.

Your Money Line powered by Pete the Planner

This program takes our focus on financial well-being to a whole new level! Not only can you work on a great retirement plan, you can have direct access to professional financial problem solvers who are committed to helping you improve your financial life, no matter what stage of life you are in. Their service has two main components: 1) A professionally staffed helpline—from 7 a.m. to 7 p.m., Monday through Friday, employees will be able to call, email, or live chat with trained and credentialed finance professionals. Once an employee speaks with a particular professional, that professional can become the employee's coach/counselor for the duration of the relationship. 2) Programs and Dashboard—not only do most people need some level of guidance, but they also need specific guidance to very common financial challenges. This offering includes access to a financial dashboard with dozens of hours of videos, articles, and podcasts, and we serve employees through specific campaigns (Suite of Solutions) listed below.



- **Stability Academy** - designed to quantify your financial stability, through education specific to the challenges you're facing, and then remeasure stability to show improvement.
- **Public Service (Student) Loan Forgiveness (PSLF) Tool** - designed to help you determine your eligibility for the federal PSLF program, get you in compliance with the program, and keep you in compliance.
- **Debt Reduction Tool** - provides you with a specific plan to pay off your consumer debt.
- **Housing Hero** - helps you sort through your biggest housing challenges, from housing affordability, to mortgages, to maintenance upkeep costs.
- **College Aid Coach** - helps make a financially sound college decision near the end of high school so that parents and students can save tens of thousands of dollars on college, by getting all the data upfront.
- **Mock Retirement** - pre-retirement readiness initiative which helps you "practice" retiring on the planned retirement income for three months, specifically to help you retire earlier, with a higher level of confidence.
- **Accountability Coaching** - designed to hold you accountable to your financial goals with a knowledgeable and empathetic expert helping you along the way.
- **Help with Bills** - designed to triage major cash flow issues through help finding community resources which can provide financial assistance and support such as SNAP, WIC, and other services.
- **Budget Boss** - helps you put together a budget and stick to it. Budget Boss helps you examine your current spending habits, set goals around making changes, and then helps you track your budget going forward.
- **Overachievers Alliance** - Financial well-being isn't just about fixing problems, it's also about providing a roadmap for those people who are doing great but want to do even better.

Visit *My Well-being* for more information and to get started.



My Well-being Portal

Participate in group and personal well-being challenges. You will have the opportunity to join group challenges throughout the year and you can complete personal challenges whenever you like.

Select Challenges → Search along the top navigation to browse available personal challenges.

Sync your favorite devices and apps or download the Navigate Well-being App to simply and seamlessly track activity within the portal: step count, activity minutes, nutrition, hydration, sleep and weight. This information can also be tracked manually. Browse a library of recipes and workout videos. Don't make healthy living a chore! Search for exercises and meals you actually enjoy, then add them to your Favorites for easy retrieval later.

Our hope is that this portal gives you the resources you need to make the choices for you and your dependents that allow you to live your best life – and one that is truly fulfilled, connected, balanced, prepared, healthy and supported!

Nursing Mothers

Breastfeeding mothers are allowed to use unpaid break time or to use paid break time, meal time or both to express breast milk for her nursing child for up to two years after the child's birth. A private space (not a toilet stall or restroom) will be made available for mothers to express milk. Wherever practicable, the private space will include an electrical outlet for the use of an electric breast pump. For the location nearest you, please contact Benefits.



Caregiving Support

The County is pleased to provide a support opportunity for those giving care to family members through Homethrive. We hope to create the path for you to be fully present at work through high-tech, high-touch family caregiving support that reduces the work, worry and stress for those of you who are balancing career and supporting aging family members.

- **Care Guide** – dedicated social worker will build a relationship with the entire family to provide ongoing coaching, advocacy, and guidance
- **Social Programming** – provides an extensive list of social programs that help reduce isolation
- **Coordination of Support Services** – conducts time savings research to maximize current insurance coverage and other resources such as transportation, food, prescriptions
- **Connective technology** – improved outcomes and care through age-appropriate tablet and application
- **Personalized Care Plan** – for family based on ongoing assessment of the individual being cared for, home safety, family dynamics, etc.



Flexible Spending Account (FSA)

Flexible Spending Accounts are bank accounts in which you set aside a predetermined amount of your biweekly pre-tax pay (approximately 25% savings), to be used toward qualified medical and dependent care expenses. You can use your FSA to pay medical, dental and vision deductibles, copays, and/or child care expenses. To participate, you must make an annual election which is then deducted from your paycheck pre-tax, biweekly and deposited into a Healthcare FSA and/or Dependent Care FSA throughout the Plan Year. All claims must be submitted to Alerus no later than February 28 of the following Plan Year. You must budget carefully. The IRS has strict rules:

Rule 1 – Use it or lose it Any money left in your FSA at the close of the Plan Year will be forfeited. You will also forfeit money in your account when your participation in the FSA ends. If employment ends, you may choose to continue the Healthcare FSA through COBRA continuation.

Rule 2 – Separation of plans Your FSA can be used only for qualified expenses as determined by the IRS and accounts must be kept separate. If you have money left in your Dependent Care account, you may not use that money to pay for healthcare expenses. Likewise, money in your Healthcare FSA cannot be used toward dependent care.

Rule 3 – Irrevocability You cannot change the annual election for your Healthcare FSA and Dependent Care FSA until the next Open Enrollment or until you experience a qualified life event.

Healthcare FSA

You can use a Healthcare FSA to pay for eligible healthcare expenses that you incur for yourself or your dependents.

Eligible Expenses

- Deductibles, coinsurance and copays for medical, dental or vision care that are not reimbursed under the HRA
- Any qualified expenses for medical care, dental care or vision care that are not paid under an insurance plan
- Out-of-pocket costs for prescription drugs, including oral contraceptives
- Over-the-counter drugs, contraceptives, feminine hygiene and first-aid supplies
- Orthodontia
- Chiropractic services
- Eyeglasses, contact lenses, contact lens cleaning solutions and supplies and vision correction surgery
- Specialized equipment for disabled persons
- Guide or guide dog for persons who are visually or hearing impaired

Hearing exams, hearing aids and necessary batteries

Dependent Care FSA

You can use a Dependent Care FSA to pay for eligible dependent care expenses, such as daycare, for your dependents under the age of 13. If you are married, your spouse must be employed, a full-time student, looking for full-time employment, or disabled.

Eligible Expenses

- Day care
- Pre-school
- Day camp
- Before and after school care
- Adult/elder care (adult may qualify as dependent if you provide more than half of that person's maintenance costs)

* See [Alerus.com/eligible-expenses](https://www.alerus.com/eligible-expenses) for an all inclusive list.

Transit FSA

Qualified transportation plans allow you to deduct money from your paycheck before taxes to pay for transit expenses (public mass transit or 7 + passenger van pools) **to and from work**. Unlike other pre-tax accounts, a transit plan allows greater flexibility with enrollment and election changes, making it a simple way to save money on your public transportation commute.



You may elect to deduct an amount from your paycheck each pay period, up to the monthly limits set by the IRS. You can enroll, change your election, or revoke your election at any time before the start of each pay period via *My Benefits*. You will receive a Alerus debit card which can be used to pay for eligible transit expenses. You can also submit claims to be reimbursed for money you spend out-of-pocket on eligible expenses. Funds are available on your debit card after they are deducted from your paycheck.

Adoption FSA

Adoption Flexible Spending Accounts allow you to set aside pre-tax dollars to pay for eligible adoption expenses. This plan will allow you to reimburse yourself for reasonable and necessary expenses that you incur in the process of legally adoption an eligible child, including; adoption fees, court costs, attorney fees and related travel costs. The pre-tax treatment of a child that is not a US citizen only applies in the year in which the adoption is final. This plan can be elected during Open Enrollment or upon starting the adoption process as a Qualified Life Event.

***All FSAs have stringent rules and regulations. For details on eligible or ineligible expenses, please visit the IRS website at www.irs.gov.**



Contribution Limits:

Healthcare FSA \$2,850 annual maximum

Dependent Care FSA \$5,000 annual maximum

Transit FSA \$280 monthly maximum

Adoption FSA \$14,300 annual maximum



Medical Gap Coverage

Arapahoe County offers three medical gap plans through AFLAC. Aflac pays CASH directly to you if you or your family get sick or hurt.

What plans are available?

Accident Plan: Pays CASH to you if you or your family get HURT in an accident/injury. 24/7 coverage on or off the job. Includes accidental death life insurance benefit and a wellness benefit.

Critical Illness Plan: Pays CASH to you if you or your family are diagnosed/treated for cancer, heart attack, stroke or kidney failure. Children are protected at no cost. This plan has rates that are dependent on age and tobacco usage. A separate line of coverage can be elected for your spouse.

Hospital Plan: Pays CASH to you if you or your family are hospitalized, can customize to add benefits for surgeries, doctor visits and helps offset out of pocket medical costs.

These three plans may be combined when elected, to allow for payment from each should your claim meet the qualifications of more than one line of coverage elected.

It is your responsibility to file claims through www.aflacgroupinsurance.com.



INCOME SECURITY

An important part of the Benefit program offered by Arapahoe County is protection against loss of income from unexpected occurrences. Arapahoe County offers a wide variety of life insurance programs along with a comprehensive disability plans on a post-tax basis.

Life and Accidental Death and Dismemberment (AD&D) Insurance



Basic

As an employee, you are automatically provided with County-paid Basic Life and Basic AD&D Insurance coverage equal to 1½ times your annual salary up to a maximum of \$200,000 for full-time employees; up to \$100,000 for part-time employees, through The Standard. Coverage amounts in excess of \$50,000 are subject to imputed income for tax purposes.

If you die while covered by the Basic Life and Basic AD&D Insurance Plans, your beneficiary will receive a benefit from the insurance plan. If your death is the result of an accident, your beneficiary will receive an additional AD&D benefit in the same amount as the life insurance benefit. If an accidental injury results in the loss of limb, sight, hearing or speech, the plan will pay a lump-sum benefit to you. The amount of the AD&D benefit will depend on the nature and severity of your injury.



Public Safety AD&D

Beneficiaries of public safety officers receive an additional benefit of \$50,000 or 100% of the AD&D insurance benefit, whichever is less, if injured in a Line of Duty accident for which AD&D insurance benefits are payable.

Additional Life and AD&D

In addition, eligible employees have the option of purchasing up to an additional \$400,000 (subject to a 4X annual income cap), in \$10,000 increments.

Eligible employees have the option to purchase up to \$400,000 (\$10,000 increments) in Spouse Life and AD&D Insurance and up to \$20,000 (\$10,000 increments) in Child Life and AD&D coverage, at discounted rates. Employees must be enrolled in Additional Life and AD&D in order to purchase coverage for their eligible spouse and/or dependent child(ren). Coverage for your spouse cannot exceed coverage elected by the employee for Additional Life and AD&D. Children are insured from live birth until age 26 for the full benefit amount elected.

To file a claim, please contact the Benefits Team.



A Few Notes on Life and AD&D

Requests greater than Guarantee Issue

If you are requesting Additional Life/AD&D for the first time as a new hire and you request an amount over \$200,000 you will be subject to Evidence of Insurability. If you requesting Additional Life/AD&D for your spouse/civil union partner, within your new hire eligibility period and you request an amount above \$30,000 your spouse/civil union partner will be required to submit Evidence of Insurability. During annual enrollments, you may increase your or your spouses life insurance by submitting Evidence of Insurability. Children's coverage never requires Evidence of Insurability. The Evidence of Insurability link can be found through *My Benefits*.

Accelerated Benefit

An Accelerated Benefit is included with your life insurance coverage. With this benefit, you may withdraw up to 75% of your Life benefit to a maximum of \$500,000, of your combined basic Group Life and Additional Life insurance coverage if you become terminally ill, have a life expectancy of less than 12 months and meet other eligibility requirements. This benefit allows you to use the proceeds as you desire – whether to cover medical expenses or to maintain your quality of life. The amount paid under the combine Accelerated Benefit provision including an interest charge would reduce the amount of basic Group Life and Additional Life insurance payable upon your death.

Benefit Reduction

The benefit of these plans begins to reduce at age 70. Please read the Plan documents for details.

Coverage after Separation from Service

If you leave employment, these benefits offer a portability option to continue a term policy or may be converted to an individual policy. Eligibility requirements apply. Refer to the Coverage Highlights for the amounts you may be able to purchase. This must be declared within 31 days of separation.

Travel Assistance Services

The Standard includes a travel assistance program that provides a full range of 24-hour medical, legal and travel assistance services to you and your dependents when you travel more than 100 miles from home or in a foreign country for trips of up to 180 days. Information about this benefit can be found on *My Benefits*.

Life Services Toolkit

This free service provides employees with additional services such as estate planning, financial planning, health and wellness, funeral arrangements, etc. The Life Services Toolkit also provides services to your beneficiary to assist them in the event of your death.

Rates
Employee Life and
Spousal Life rates are
age-rated.





Disability Insurance

Arapahoe County provides a disability program to all eligible employees to help replace income in the event you are unable to work due to a non-work-related illness or injury. Time away from work for pregnancy and childbirth are both covered under the disability plan. You must be enrolled in the plan prior to the illness, accident or pregnancy to be covered. Replacement income protects your family's financial security. These plans are administered through The Standard.

Short-Term Disability (STD)

Short-Term Disability provides a partial replacement of your weekly earnings in the event you become disabled from a non-work-related illness or injury. Short-Term Disability is a voluntary plan for eligible employees who enroll. Short-term disability benefits start after a 14-day waiting period*. Once you have been approved by The Standard, your benefits will run for the maximum period based on the disability or seven consecutive weeks, whichever is less, up to 60 days. A week is defined as seven days, counting both weekends and holidays that happen to fall within your disability period. Additional limits may apply based on the severity of the disability: Natural birth may be capped at six weeks of benefit and cesarean delivery may be capped at eight weeks of benefit.

The Short-Term Disability benefit is 60% of your base salary up to \$2,500 per week. Should you need this benefit (and are enrolled), it is your responsibility to contact The Standard at 800-378-2395 to file a disability claim.

*If you enroll in STD after your initial eligibility period or you enroll during an annual enrollment period, and you have a disability caused by a medical condition (pregnancy, disease, surgery, etc.) during the first 12 months of being insured, your benefit waiting period will be extended to 60 days, therefore, no benefits will be payable. If you have any type of disability caused by an accident, your benefit waiting period will be 14 days. Once you have been insured under the plan for 12 continuous months, the extended benefit period will no longer apply and benefits would begin after you satisfy the 14 Day Waiting Period.

If you are approved for disability benefits, the amount used to supplement through other payment, such as sick or vacation, will be no more than a combined total equal to 100% of base pay. If receiving other income, such as state disability or military benefits, etc. these amounts will be considered deductible income and will reduce the benefit payable under the plan.

Long-Term Disability (LTD)

Arapahoe County provides eligible employees with Long-Term Disability benefit that begins after a 60-day waiting period and generally lasts up to Social Security normal retirement age. This is a County-paid benefit. The benefit under the LTD is 60 percent of your base salary up to a \$5,000 monthly maximum, paid monthly by The Standard.

Your disability benefit may be reduced by deductible sources of income and any earnings you have while disabled. Taxes will be withheld from your disability income. The Standard may periodically require proof of continued disability.



A pre-existing condition limitation may apply to you should you have any type of pre-existing condition 3 months prior to your effective date. If you become disabled during the first 12 months of being insured and you have a pre-existing condition 3 months prior to your effective date, benefits may not be payable to you. However, if you have been continuously insured under the LTD plan with the prior carrier you will be provided credit for the number of months insured under the prior plan when satisfying the pre-existing condition provision.

WEALTH BUILDING

Maybe you are not thinking about your future financial welfare on a daily basis, but now is the time to start planning. There are multiple ways for an employee to save for their future. In addition to Social Security benefits and personal savings, Arapahoe County provides benefits to assist you in meeting your savings goals.

401(a) Defined Benefit Retirement Plan

The Arapahoe County Retirement Plan is a mandatory defined benefit program designed to help you establish a source of income for your retirement years. Through the Plan, eligible employees will set aside a pre-determined percent of salary, currently not less than 9% and subject to change on a pretax basis of which the County matches.

Retirement eligibility is determined by your age and years of service. Contributions to the Arapahoe County Retirement Plan begin with the check representing your first full pay period.

For complete details regarding your retirement plan, visit *Inside Arapahoe* > Departments > Human Resources > Benefits > Retirement Plan.

Smart Start Savings Plan

The Smart Start Savings Plan (457b Deferred Compensation plan) gives eligible employees the ability to deduct pre-tax earnings from their paycheck so the employee can invest those earnings towards their own personal financial goals. Enrollment and changes are employee-directed.

The Plan offers the following:

- Lower current taxes on your income
- Tax deferred investment earnings
- Automatic payroll deductions
- A variety of professionally managed investment choices
- In-service withdrawal options

Your Deferral Contribution

You are eligible to join this plan at any time throughout the year. You also may increase or decrease the amount of your contribution at any time throughout the year. There will be an annual contribution limit set by the IRS. Currently, employees may contribute up to \$20,500. If you are 50 or older, you may contribute an additional \$6,500 through the catch-up provision. Annual limits are set by the IRS each year and are subject to change.



**Example only: Not guaranteed return year after year.*

Impact to Take Home Pay Example

Example Employee

- Is hired at age 27; will retire at age 67; expected to live to age 90
- Makes \$42,000 gross at hire; consistently receives a 2% increase each year
- Does not opt out or increase contribution throughout career

Without 457 Contribution	
Wages	\$42,000.00
Medical	\$260.00
HCFA	\$1,300.00
401A EE	\$3,780.00
457 0%	\$0.00
Taxable Wages	\$36,660.00
Federal Tax	\$6,598.80
State Tax	\$1,649.70
Medicare	\$586.56
Social Security	\$2,492.88
Take Home Pay	\$25,332.06

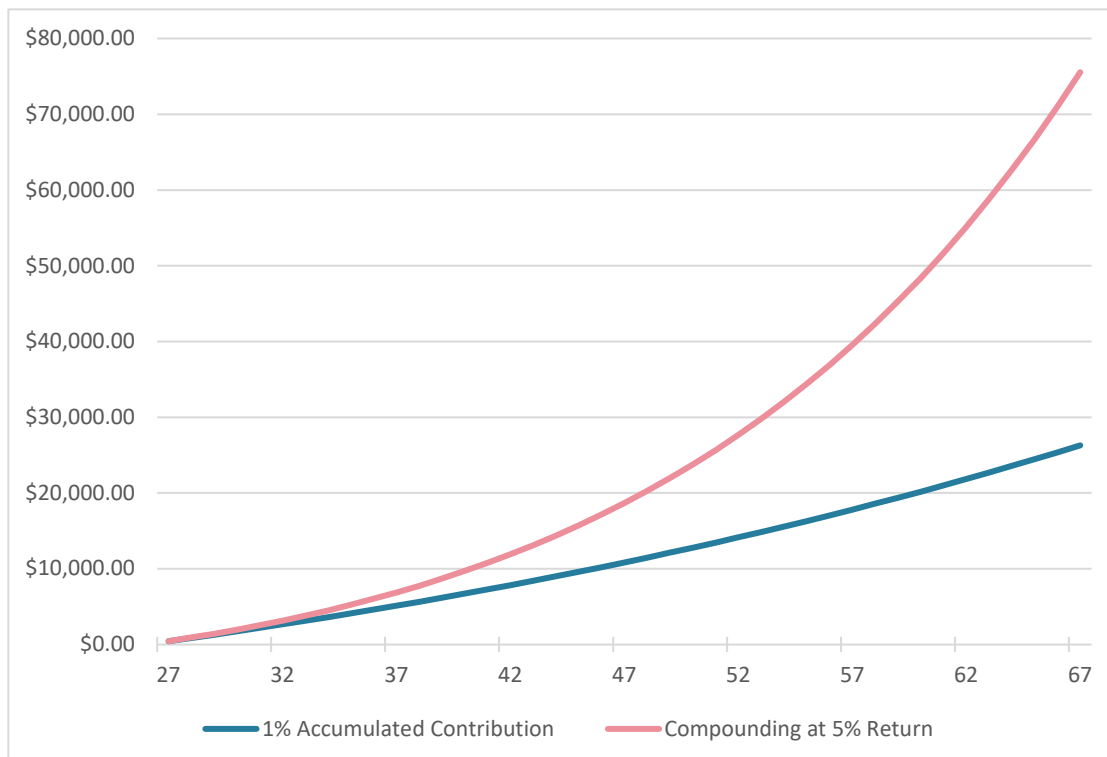
With 457 1% Contribution	
Wages	\$42,000.00
Medical	\$260.00
HCFA	\$1,300.00
401A EE	\$3,780.00
457 1%	\$420.00
Taxable Wages	\$36,240.00
Federal Tax	\$6,523.20
State Tax	\$1,630.80
Medicare	\$579.84
Social Security	\$2,464.32
Take Home Pay	\$25,041.84

If the employee stays with the 1% auto-enrollment contribution he adds \$420 to his savings but will net out a cost of \$290.22, essentially gaining \$129.78 in his first year.

Annual Reduction to Take Home Pay: \$290.22
Percent impact to Take Home Pay: 0.69%

The Power of Time on Money (Compounding)

Now if that same employee continues to participate with just 1% with an average and consistent return of 5%* every year for the next 40 years, he will have:



TIME OFF

Arapahoe County understands the importance of taking time off from work. Everyone needs time to relax, be alone or be with family and friends. There are also times when you may need to take time off to take care of personal business or family needs without the stress of lost income. Non-exempt employees should request actual time off. Exempt employees' time off should only be reported for full day absences, or according to department process/practice.



Vacation

Eligible employees who work 20 hours or more per week earn vacation time off on the last calendar day of the month in accordance with the following provisions:

- Vacation hours are accrued on a pro-rated basis effective as of the date of hire.
- Vacation hours accrued within a month are not available for use until the month following the accrual.
- Advances on vacation leave not yet accrued are not allowed.

Vacation hours accrue for all active employees based on scheduled hours and years of service, as shown below:

Years of Service	Full-time Accrual per month	On Leave or Part-time Accrual Rate per month
Under 5	10 hours	.058 per hour worked up to 10 hours
5-10	12 hours	.069 per hour worked up to 12 hours
10-15	14 hours	.081 per hour worked up to 14 hours
15+	16 hours	.092 per hour worked up to 16 hours

Vacation Carry-Over

Employees may accrue and carry-over vacation hours into the following year. Limits are shown in the table below. Any accrued hours in excess of limit on January 21 the following year will be forfeited. It is the responsibility of each employee to monitor vacation hours.

Hired before January 1, 1983	Carry over up to 240 hours*
Hired after January 1, 1983	Carry over up to 144 hours

*These employees may "sell-back" unused accrued vacation hours to the County, one time during employment at the County. Please contact Payroll at 303-795-4595 or 303-795-4596 for details.

Upon separation an employee will be paid out for all accrued and unused vacation time remaining.

Sick Time

Eligible employees who work 20 hours or more per week are provided with up to 8 hours per month of sick time off on the last calendar day of the month. Sick hours accrued within a month are not available for use until the month following the accrual. Unused sick time can carry over to the following year. The maximum amount of sick time that can be carried over in any given calendar year is 480 hours. Time off that exceeds your available balance may be paid out of your vacation balance, if available. Sick time off pay is required to be used concurrently with a Family and Medical Leave, Family Care Leave or a Non-Family Medical Leave. Refer to the Leave of Absence section for details. Unused sick time will be paid out upon termination at 50% of unused sick time up to a maximum of 240 hours, unless hired prior to 1/1/1983. Employees who are rehired within 6 months of their separation date will have accrued, but not paid out, sick hours reinstated.



Temporary employees and employees working less than 20 hours per week, will accrue 1 hour per 30 hours worked. Sick accrued, but not used, will not be paid out upon separation.

Sick time is designated to be used only in the event that you are unable to report to work because of your own or a family member's qualified illness, injury or condition and may not be used to supplement vacation. Non-exempt employees may use sick hours for time away from the office for your own or a family member's health appointments, when they cannot be scheduled outside of work hours. If an illness or injury requires you to be away from work for more than three (3) consecutive days, please contact the Human Resources ADAA and Leave Administrator at 303-795-4486 to discuss your options under Leave of Absence policies.

Full-time Accrual per month	On Leave or Part-time Accrual Rate per month
8 hours	.046 per hour worked up to 8 hours

Sick Time Carry Over

Employees may accrue and carry over sick hours into the following year. Any accrued hours in excess of the 480-hour limit on January 21 will be converted, per the employee's direction, to either additional Vacation hours or payout as stated in the table below. If no direction is provided, Arapahoe County will pay out the excess. Annual payouts are processed through Payroll. If eligible, a Payroll team member will reach out to you directly in February.

Hired before January 1, 1983	1 hour of sick to 1 hour of vacation or 1 hour of pay
Hired after January 1, 1983	2 hours of sick to 1 hour of vacation or 1 hour of pay

Sick Time Donation

Under certain conditions, employees may request sick time donations. To be eligible for donated time employees are required to:

- Have a "serious health condition" as defined under the Family Medical Leave Act for the employee, a spouse, dependent child, or parent that results in a qualifying continuous period of absence (other leaves under the Family Medical Leave Act are not included under this program)
- Have been approved for FMLA
- Be classified as a regular full-time, regular job share, regular part-time employee, or a grant funded employee
- Have been employed with Arapahoe County for at least 12 months and have worked at least 1,250 hours in the 12 month period preceding the date of the request
- Have exhausted all accumulated paid time off (i.e., vacation, sick, comp time, floating holiday, etc.)
- Not currently receiving long-term disability benefits
- Receive Supervisor and Department Director/Elected Official approval

Holidays

Arapahoe County offers paid time off for 12 designated holidays and 2 floating holidays to eligible employees.

Holidays that fall on Saturday will be observed the preceding Friday.
Holidays that fall on Sunday will be observed the following Monday.

Regardless of your work schedule full-time employees will receive 8 hours paid for each holiday and part-time employees working at least 20 hours per week will receive 4 hours paid for each holiday.

Non-exempt employees who are requested by their Department Director or Elected Official to work on Thanksgiving Day, Christmas Day or New Year's Day will be paid for the holiday plus two times the base hourly rate for the number of hours worked. If the request is for any other holiday the employee will be paid for the holiday plus 1½ times the base hourly rate for the number of hours worked. Worked Holiday pay is only for working on the day the County observes the holiday. Exempt employees who work on an observed holiday are not eligible for additional pay.

Employees in the Sheriff's Office and Coroner's Office may receive alternate time-off in lieu of receiving the standard County holidays.

Observed Holidays

- New Year's Day
- Martin Luther King Jr. Day
- Presidents' Day
- Memorial Day
- Independence Day
- Labor Day
- Arapahoe Day
- Veteran's Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Eve
- Christmas Day



Floating Holidays

Eligible employees receive two floating holidays in addition to the scheduled holidays listed on the previous page. Full-time employees will receive 8 hours paid for these days off and part-time employees working at least 20 hours per week will receive 4 hours paid for each floating holiday. Employees need to coordinate the use of these days with their supervisor. Employees should schedule these days off to use before January 20 of the following year. If not used by January 20 the time off will be forfeited. If unused at time of termination, this benefit is forfeited.

Bereavement

When you experience the loss of an immediate family member, the County provides up to five days of paid time off for bereavement. Full-time employees will receive up to 8 hours paid per day and part-time employees working at least 20 hours per week will receive up to 4 hours paid per day. Immediate family is defined as: relatives by blood, marriage (including stepfamily members, and in-laws), or civil union to include spouse or partner, children, parents, grandparents, grandchildren, and siblings of an employee or employee's spouse or partner. In certain situations, other relationships will be considered and approved by the Department Director/Elected Official and the Director of Human Resources. Documentation of the loss may be required based on Department or Office guidelines.

Jury Duty

Arapahoe County recognizes jury duty as a civic responsibility. Eligible employees will receive their standard pay for up to 3 days while serving as a juror. For jury duty lasting more than 3 days, employees may continue to receive their scheduled pay unless a lengthy service causes financial hardship for the County. Upon receipt of a juror summons, employees must notify their manager before the start of the jury duty period. If an employee is excused from jury duty during regular work hours they are expected to return to work promptly.

Voting

Any employee may take up to 2 hours off work with pay on an election day to vote. Employees are expected to work with their manager prior to election day to schedule their 2 hours off.

LEAVES OF ABSENCE

Arapahoe County provides all federal and state required leaves of absence and some additional leaves. Generally, leaves of absence are unpaid. However, often employees may be required to or choose to supplement their time off with benefit payments such as compensatory time, sick, vacation, and disability. Additionally, some leaves of absence may have an impact to your benefits (medical, dental, vision, life, disability, medical gap, pre-paid legal) eligibility. For information on leaves of absence contact your Leave Administrator at Leaves@arapahoe.gov.

Family Medical Leave / Military Family Leave

Eligibility for Leave:

Employees who have been employed by Arapahoe County for at least twelve months and who have worked at least 1,250 hours in the twelve months preceding the first day of requested leave are eligible for family/medical or military/family leave if certain conditions are met:

Family and Medical Leave (FMLA Leave)

The County provides up to 12 weeks of unpaid, job-protected leave to eligible employees. Leave is available for one or more of the following circumstances:

- The birth of a child or to care for the child within the first 12 months after birth.
- Placement of a child with the employee for adoption or foster care within the first 12 months of placement.
- To care for a family member who is defined under the Family and Medical Leave Act as a spouse, child (under 18 or disabled) or parent of the employee who has a serious health condition as defined by the Family and Medical Leave Act.
- The inability of an employee to perform his/her job duties due to a serious health condition as defined by the Family and Medical Leave Act. This can include work-related illness or injuries.
- Incapacity due to pregnancy prenatal medical care or childbirth.

Military Family Leave

Eligible employees with a spouse, son, daughter, or parent on active duty or called to active duty status in the Armed Forces, National Guard, or Reserves may use up to 12 weeks to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

Eligible employees may also take up to 26 weeks of leave to care for a covered service member during a single 12-month period. A covered service member is a current member of the Armed Forces, National Guard, or Reserves, who has a serious injury or illness incurred or aggravated in the line of duty on active duty. Covered service member also includes veterans who were members of the Armed Forces, National Guard, or Reserves at any time during the period of five years preceding the start of treatment, recuperation, or therapy.

The injury or illness must make the service member medically unfit to perform his or her duties for which the service member is undergoing medical treatment, recuperation, or therapy; or is in outpatient status; or is on the temporary disability retired list. In the case of a veteran, the qualifying illness or injury must be incurred or aggravated in the line of duty and manifest itself before or after the service member became a veteran.

Definition of Serious Health Condition

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job, or prevents a qualified family member from participating in school or other daily activities.

Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than 3 consecutive full calendar days combined with at least two visits to a health care provider or one visit and a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

Employee Responsibilities

The employee must provide 30-day advance notice of the need to take FMLA leave when the need is foreseeable. When a 30-day notice is not possible, the employee must provide notice as soon as practicable and generally, must comply with the County's call-in procedures.

Employees must provide sufficient information for the County to determine if the leave may qualify for protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions; the family member is unable to perform daily activities; the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees must also inform the County if the requested leave is for a reason for which FMLA leave was previously taken or certified.

All employees requesting leave must complete the applicable forms discussed below.

- For family and medical leave stemming from a medical condition the employee must have the physician or health care provider complete the Certification of Health Care Provider form documenting the medical reasons for the leave.
- If the leave stems from an employee's medical condition, the medical certification must specify medical facts supporting the existence of a serious health condition and that the employee is unable to perform his/her essential job duties because of the health condition.
- For leaves stemming from the medical condition of a family member, the medical statement must specify that the employee is needed to care for the family member and specify medical facts which support the existence of a serious health condition.
- Employees who fail to provide a medical certification in a timely manner (within 15 days after the request for leave is made) may be denied leave.
- Documentation confirming family relationship, adoption or foster care may also be required.
- The FMLA forms can be found on Inside Arapahoe. All documents supporting an employee's request for leave must be sent to their Leave Administrator in Human Resources for review and approval.

County Responsibilities

Human Resources will inform employees requesting leave whether they are eligible under the FMLA. If they are, the notice will specify any additional information required, and specify the employee's rights and responsibilities. If the employee is not eligible for FMLA, Human Resources will provide a reason for the ineligibility.

Human Resources will inform employees if leave will be designated as FMLA-protected and the amount of leave counted against the employee's leave entitlement. If it is determined that the leave is not FMLA-protected, Human Resources will notify the employee.

If a medical certification is incomplete or inconsistent, the Human Resources Department will notify the employee and the employee will have seven (7) calendar days to submit a sufficient certification.

Arapahoe County reserves its right to seek clarification and authentication of medical certifications. If Arapahoe County has reason to doubt the validity of a medical certification, it reserves the right to request a second medical opinion at the County's expense. An employee's failure to provide notification and an appropriate medical certification in a timely basis may result in delayed approval or denial of leave. Continued absence after the denial of leave may result in disciplinary action up to and including dismissal from employment.

Amount of Leave

In the case of eligible employees who request leave to care for a service member in the military or a Veteran as defined and permitted under the Family and Medical Leave Act, they may be granted unpaid leave for a period up to 26 weeks during a single 12 month period. Leave to care for a service member or a Veteran may be combined with any additional family and medical leave taken by the employee provided the total leave in a single 12-month period does not exceed 26 weeks.

Remaining eligible employees may be granted unpaid family or medical leave for a period of 12 weeks during a 12-month rolling period as defined by Arapahoe County. The rolling period is to be measured backward from the date an employee uses any FMLA. Each time an employee takes FMLA leave, the remaining entitlement is any balance of the 12 weeks which has not been used during the previous 12 months.

Part-time employees who meet the eligibility requirements for FMLA leave are granted leave on a pro-rated basis based upon the average amount of hours they work per week and pursuant to the applicable law.

In the case of leave for the birth or adoption of a child, if both spouses are Arapahoe County employees, their combined leave may be limited to 12 weeks.

In the case of leave to care for a service member in the military as defined under the Family and Medical Leave Act, if both spouses are Arapahoe County employees, their combined leave may be limited to 26 weeks during a single 12-month period.

Benefits During Leave

Under FMLA leave, employees must first use any earned sick leave and then any available compensatory time at the beginning of the leave due to the employee's own serious health condition or the serious health condition of a covered family member.

In addition, employees must use any available compensatory time for:

- Care of a well child within the first 12 months after birth.
- Placement of a child with the employee for adoption or foster care within the first 12 months of placement.

After all sick leave (and compensatory time, if available) is exhausted, vacation leave may be used at the discretion of the employee.

Employees who are receiving Short Term Disability (STD) benefits may use sick leave, compensatory time, or vacation to receive up to 100% of their base pay.

During FMLA, an employee's benefits will continue on the same terms as if the employee had continued to work. The County continues to pay the employer portion. If an employee is receiving pay for time off benefits, appropriate deductions for the employee portion will be taken from the employee's paycheck. An employee on unpaid leave must make arrangements with the Benefits Team for payment of the employee's portion. Failure to pay the employee's portion of benefits in a timely manner will result in a cancellation of coverage.

Return from Leave

An employee on leave is required to report periodically on their status and intent to return to work. Upon returning from leave, an employee, except for certain highly compensated employees, will be reinstated to the same or an equivalent position subject to the rules of FMLA. A Release to Return to Work from the employee's medical provider is required verifying an employee's ability to return to work from medical leave. Failure to return to work on the day after the expiration of leave may result in termination of employment.

Reduced Work Schedule/Intermittent Leave

An employee who is taking family/medical leave on account of his or her serious medical condition, the serious medical condition of a family member, the serious injury or illness of a family member of the Armed Forces or a Veteran or due to qualifying exigencies may take leave intermittently or on a reduced-schedule basis.

An intermittent or reduced schedule leave for the birth and placement of a child is at the discretion of the employee's Department or Office.

An employee requesting a reduced work schedule/intermittent leave must consult with their supervisor and make a reasonable effort to schedule the leave so as not to unduly disrupt the County's operations. Employees are expected to consult with their supervisor prior to the scheduling of treatments to work out a schedule which best suits the needs of both the Department or Office and the employee.

Appropriate medical certifications and/or appropriate documentation will be required for all intermittent and reduced schedule leave. Intermittent and reduced schedule leave will be treated in the same manner as longer-term absences under the FMLA and will be applied against the employee's total FMLA allowable hours.

Where necessary, an employee on intermittent or a reduced schedule may be transferred to another position, with no loss in pay or benefits, which will more easily accommodate the need for the leave.

Abuse of Leave

Leave under the FMLA is granted solely for the purposes set forth in these guidelines and as defined by the Family and Medical Leave Act. Use of family and medical leave or military family leave for other purposes is strictly prohibited. Employees using family and medical leave are still expected to comply with all County guidelines, policies and rules and failure to do so may result in disciplinary action, up to and including dismissal from employment.

Unlawful Acts

FMLA makes it unlawful for the County to:

- Interfere with, restrain, or deny the exercise of any right provided under FMLA.
- Discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

Enforcement

An employee may file a complaint with the U.S. Department of Labor or may bring a private lawsuit against the County.

FMLA does not affect any federal or state law prohibiting discrimination or supersede any state or local law or collective bargaining agreement which provides greater family or medical leave rights.

Colorado Family Care Act (FCA)

The County provides up to 12 weeks of unpaid leave to eligible employees to care for their partners in a civil union or domestic partnership who have a serious health condition. Domestic partners are those with a registered domestic partnership with the municipality in which they reside or with the state. Parties to a civil union are those registered under the Colorado Civil Unions Act.

Generally, leave under the Family Care Act is administered consistent with FMLA regulations. Contact your Leave Administrator if you need family care leave.

Non-FMLA Medical Leave of Absence

Employees who do not meet the eligibility requirements for FMLA may be provided a medical leave of absence in limited circumstances. Such leave could include but is not limited to time off for an employee's illness, pregnancy, or personal injury.

For a Non-FMLA medical leave to be granted, the following conditions must be met:

- Approvals must be obtained from the employee's Department/Office and Human Resources prior to the leave when the leave is foreseeable.
- The employee must submit to the Leaves Administrator a written statement from a physician outlining the reason for the leave and the estimated time needed. Arapahoe County reserves the right to obtain additional medical opinions at the County's expense.

If the leave is approved, all available sick and vacation leave as well as any compensatory time that may be available must be used during the leave of absence. After all leave hours have been utilized, the remaining leave will be without pay.

It is not always possible to hold an employee's position during a Non-FMLA Medical Leave of Absence, therefore, there is no job guarantee. In the event the employee's job is filled, he/she may reapply for a position in the future.

During an approved Non-FMLA Medical Leave of Absence, the County will continue benefits for up to six weeks if the employee continues to pay the employee's portion of the premium in a timely manner. It is the employee's responsibility to contact the Benefits Team for information in regards to their payment of benefits. In cases when an accommodation under the Americans with Disabilities Act Amendments Act (ADAAA) has been approved through the Leave Administrator and the County Attorney's office, benefits may be extended past the standard six weeks for a reasonable period, which may be for the duration of the accommodation, as long as the employee continues to pay the employee's portion of the premium in a timely manner. Failure to pay the employee's share of the premiums in a timely manner will result in a cancellation of benefits.

Personal Leave of Absence

The County may grant a leave to an employee for personal reasons. The reason for the leave must include a situation or circumstance which is not covered under the Family and Medical Leave Act. It is not always possible to hold an employee's position during a Personal Leave of Absence therefore this is not a job-protected leave.

The request will be reviewed by the employee's immediate supervisor who will then submit the request along with information regarding the business impact to the Department Director or Elected Official for approval. If approved, the Department Director or Elected Official will inform the Leaves Administrator. All accrued vacation leave and compensatory time must be used prior to the employee being placed on leave without pay. Sick leave may not be utilized during personal leave.

Medical and dental insurance benefits may be continued up to 6 weeks during personal leave provided the employee pays the employees portion of their coverage. Seniority will not be affected when the employee returns to work at the end of the approved leave period. At the discretion of the Department Director/Elected Official, an annual review may be withheld until the employee returns to work, and if an increase is given, it shall not be retroactive.

Military/Reserve Leave

Arapahoe County complies with all applicable laws governing leaves for military service.

Any employee of Arapahoe County who is a member of the National Guard or reserve forces is given up to 15 paid working days up to a maximum of 120 hours each calendar year for military leave without loss of seniority or benefits. In a time of National Emergency, the Board of County Commissioners may extend the paid leave period. As a rule, however, insured benefits will not be extended past 6 weeks of leave.

An unpaid military leave of absence will be granted to employees called to active duty or inducted into the uniformed services of the United States for a period of up to five years. Employees who perform and return from service will be reinstated in accordance with applicable state and federal laws. Benefits will be terminated on the last day of the month in which the active duty leave began. Upon return employees may reelect benefits.

Supporting documents must be sent to the Leave Administrator. These documents should include copies of the employee's military orders as issued by the employee's branch of the armed services. Leaves must be coordinated with the Leave Administrator and the Benefits Team to determine pay, benefits and any other necessary issues.

OTHER BENEFITS

Tuition Reimbursement

The Arapahoe County Tuition Reimbursement Program is designed to assist employees in upgrading their skills and improving their performance. When fiscally practical, the County will reimburse up to \$1,200 per calendar year for tuition and course-related fees plus 100 percent of the cost of books and other required materials for any approved course regardless of tuition limit. Reimbursement is on a first-come, first-served basis while funds last. Classes must be taken at an accredited college or university. Classes or Degree program must relate directly to your current job. Reimbursement is conditional on the employee receiving a “C” grade or better, or a “pass.” All receipts and grades for approved courses must be submitted by January 20 of the following year. Submissions received after this date will not be reimbursed.

Written requests must be submitted to the Benefits Team in advance of class starting. Tuition reimbursements are classified as non-taxable earnings. Exclusions include but are not limited to CLEP exams, certification programs, prior learning credits and continuing education, or doctoral programs. Training and Education that does not meet the above standards will be treated as training through the department’s training budget, so plan in advance.

Student Loan Payments

Employees who have student loans in their names, may exchange 40 hours of vacation (if accrued) for a once a year student loan payment. BenefitEd will administer the payment on employee’s behalf. Payments will be net of Social Security, Medicare, and State and Federal taxes. Additionally, employees will pay a \$4.50 (or less) administration fee.

Legal Plan

Eligible employees may elect on a post-tax basis, legal assistance through MetLife Legal’s network of more than 12,000 participating attorneys. This service provides documentation and guidance with most personal (non-criminal) legal needs such as:

- Uncontested Adoption or Guardianship
- Adoption and Legitimization (Contested)
- Guardianship or Conservatorship (Contested)
- Protection from Domestic Violence
- Prenuptial Agreement
- Name Change
- Wills, Living Wills, Living Trusts, and Powers of Attorney
- Identity Theft Defense
- Sale, Purchase or Refinancing of Your Primary Residence
- Sale, Purchase or Refinancing of Your Second or Vacation Home
- Security Deposit Assistance
- Zoning Applications
- Boundary or Title Disputes
- Eviction Defense
- Tenant Problems (where you are the tenant)
- Property Tax Assessment
- Personal Property Protection
- Consumer Protection Matters
- Debt Collection Defense
- Personal Bankruptcy or Wage Earner Plan
- Tax Audits
- Small Claims Assistance
- Personal Injury (25 percent Network Maximum)
- Traffic Ticket Defense (No DUI)
- Restoration of Driving Privileges
- Juvenile Court Defense
- Probate (10 percent Network Discount)

Arapahoe Rewards

Arapahoe Rewards provide Arapahoe County employees special rates on products and services. Arapahoe Rewards may be accessed from your home computer at <https://arapahoecounty.savings.beneplace.com>. If you would like to nominate a vendor (local or national) to be on the site, please complete the Nomination Form on the site for review. Discounts include, but are not limited to: pet insurance, cellphones, flowers, vacations, tuition, sporting events, fitness memberships, weight management memberships, etc. In addition to discounts employees may enroll in home and/or auto insurance with payroll deductions.

Home and Auto

Through Arapahoe Rewards you may elect Home and Auto Insurance coverage at a discounted rate. You may choose between three providers: Liberty Mutual, MetLife or Travelers.

The screenshot displays the Arapahoe Rewards website interface. At the top, there's a navigation bar with the Arapahoe County logo, a search bar, and a user profile icon for Lisa. Below the navigation bar, there are several category tabs: SHOPPING, TRAVEL & TICKETS, INSURANCE, BRANDS, NEW/LIMITED, ARAPAHOE SPECIALS, BACK 2 SCHOOL, and SUMMER. The main content area features four large promotional tiles: 'New/Used Car Search' (Save over \$3,000), 'Hotel Deal Finder' (Discounts up to 60%), 'Rental Car Deals' (Save up to 25% nationwide), and 'Appliance Savings' (Save on appliances). Below these, there's a 'Premium Offers' section with a grid of eight smaller promotional tiles. These tiles include offers from Disney World (up to \$80 off gate prices), Brookdale (up to 10% on senior living services), SeaWorld (up to 40% off), Chase (save on mortgage), UpBank (up to \$1,000 credit on closing costs), Lenovo (up to 76% off grade A tech), Universal (up to \$65 on tickets plus hotel), and a lender fee offer (save \$1,290 with no lender fee). Each tile includes an image, the offer details, and a view count.

Cost and Time Saving Tips

Nurse Hotline

The Kaiser Nurse Hotline is a free service available 24/7/365 to answer your medical questions. Connect with a licensed care provider day or night for advice, referrals, prescriptions, and more. Call 303-338-4545

Chat with a Doc

You can login to kp.org or the KP app to open Chat to talk to an Emergency Room Doctor, Pharmacist, Psychologist or Financial Counselor free of charge. This may save you a copay and a trip to the office. Available between 6 a.m. and 10 p.m., 7 days a week.

Dispatch Health

This is a mobile urgent care unit that makes house calls. This service costs the same as your regular urgent care copay but you can avoid the long waits in the clinic and rest at home while waiting for care. Order care between 8 a.m. and 10 p.m., 7 days a week through the mobile app or by calling 303-500-1518.

Email

Kaiser Members can email their doctor's office with non-urgent questions – often saving an appointment and a trip to the medical office, as well as a copay.

Video Visits

A convenient option to get care is through Kaiser's secure, personalized video visits. Kaiser Permanente providers will determine whether a patient's care needs can be addressed through a video visit. Talk to your physician for more information.

E-visit

E-visits are available 24 hours a day, 7 days a week for certain medical conditions, to registered users of kp.org, at no cost.

Medication Adherence

Medication adherence is associated with fewer inpatient hospital days and emergency department visits. Follow the doctor's orders regarding medications and save out-of-pocket expenses for avoidable hospital and emergency room visits.

Generics vs Name Brand

By requesting generic prescriptions when possible, you can save on out-of-pocket cost. Participants pay a \$15 copay for generic as compared to \$30 copay for name brand.

Mail Order

Mail order prescriptions can save you even more when you receive a 3-month supply and pay only two copayments for both generic and name brand prescriptions.

Dental Cleaning

Proper dental cleanings help prevent more serious (costly) medical conditions that can be caused by bacteria such as gum disease, infections, heart attack, stroke, or preterm labor. Often your dental health may be an early indicator of other medical issues. By getting your biannual cleanings you help prevent serious health conditions or get early detection.

FREQUENTLY ASKED QUESTIONS

When will premiums be deducted from my paycheck?

Your biweekly payroll deductions will begin based on your eligibility date. For example: Say you are a full-time employee hired on 6/13/22 and you were eligible to enroll in your benefits plans effective 8/1/22 (eligibility date). No matter what date you enroll (within your enrollment window), the coverage will become effective on the eligibility date; in this case 8/1/22. In this example your first deduction would be on the 8/19/2022 paycheck. Paychecks are issued two weeks in arrears.

What do I do if my elected benefits are not deducted from my check or are deducted in the wrong amount(s)?

Contact the Benefits Team within one week of the missed or inaccurate deduction. **You are responsible for confirming the accuracy of deductions from each paycheck.** You can confirm this by comparing your benefit detail report to your bi-weekly pay statement in SAP. Failure to notify the Benefits Team in a timely manner could result in no coverage (regardless of election) or in substantial paycheck impact for future checks in order to catch-up your portion of the premiums for the coverage elected.

When will I receive my ID cards?

You should receive your Health Insurance ID cards within ten days of your effective date. Cards will be mailed to your mailing address on file in SAP. You may order a new ID card from www.kp.org after your effective date. New cards will be sent only when you change plans or request a new card. There are no ID cards for Delta Dental or VSP.

When can I take the Well-being Survey?

Once your benefits are effective, register at *My Well-being*. Once registered, you will be able to complete the Well-being Survey, during Wellness Counts.

Do I have to complete the Well-being Survey more than once?

Yes. You must complete the Well-being Survey every Plan year in order to participate in Well-being Counts. To be considered as complete for the purpose of the Wellness Counts program, the well-being survey must be completed within the Wellness Counts program dates. The Wellness Counts program typically runs March through July.

Is there an incentive for completing the Wellness Counts program?

Yes. If you complete the Wellness Counts program each year you will receive a \$10 per paycheck premium reduction in the following year.

How long are my benefit elections effective?

Your elections remain in effect for the entire Plan year, unless you have a qualifying life event. You can make changes during the year only if you have an approved change in your work or family status. This includes elections of waive or decline. Changes in your health conditions are not considered qualifying life event changes as defined by the Department of Labor and will not allow a change in enrollment. You may change your Smart Start Savings elections at any time as well as your beneficiary designations.

If I don't elect benefits during my initial offering will I have the chance again later?

Yes, eligible employees have the opportunity to enroll for coverage annually at Open Enrollment. However, for some benefits (Life and Disability) failure to enroll at the initial offering could void the guarantee issue amount and require an Evidence of Insurability form (EOI) to be completed. Based on the underwriting of this health review, coverage may be denied.

If I fail to enroll during Open Enrollment will my current coverage roll over to next year?

No, Arapahoe County hosts active enrollments, which means you must actively enroll each year in order to have coverage the following year. However, County provided benefits; EAP, Basic Life, Long-Term Disability, 401a and time off will continue.

What are qualified life events?

The following are examples of work and qualified life event:

- You gain or lose a dependent (birth, marriage, divorce, death, adoption, common-law marriage, etc.)
- Your dependent loses coverage due to employment change
- Your dependent becomes eligible for other coverage
- You become ineligible for benefits because you don't work the required number of hours
- You become eligible for benefits because your employment status changes

All changes to your benefits must be consistent with your life event. For example, a person who gains a dependent may add that dependent to coverage but may not drop their current coverage. To make a benefit election, you must complete a life event request through *My Benefits* within 31 days from the work/family qualifying event, with appropriate documentation of the event.

What is appropriate documentation for qualified life events?

- Birth – Copy of the Birth Certificate, vanity birth certificate, crib card or hospital discharge papers
- Adoption – Copy of final adoption papers or placement for adoption papers
- Marriage – Copy of the Marriage Certificate (not license) or a letter from the Officiate
- Divorce, Annulment or Legal Separation – Copy of the Divorce Decree, declaration of nullity or court order
- Death – Copy of the Death Certificate
- Gain Coverage elsewhere – Letter from new carrier or enrollment documentation
- Loss of Coverage elsewhere – Copy of Creditable Coverage of letter from prior carrier

Documentation must include employee name, effective date, and an explanation of event.

How do I add a dependent?

You may add a dependent during your initial enrollment period, annual enrollment period, or when you have a qualified life event. You may add your dependent(s) by entering their personal information for each new dependent in *My Benefits* and electing the appropriate coverage level. Provide documentation that speaks to the relationship of the dependent with the enrollment.

Do I need to designate a beneficiary, even if I don't elect benefits?

Yes, the County provides you with employer-paid life and AD&D insurance and participation in the 401(a) retirement plan is required. The *My Benefits* enrollment system will require this information (including beneficiary's Social Security Number and date of birth) at time of enrollment and upon any subsequent changes.

If I waive the County's medical coverage can I gain coverage on the Health Exchange in 2022?

Yes, you would be able to enroll through the Health Exchange. Please be aware that one or more of the County's plans provides at least the minimum value required under the Affordable Care Act (ACA) and is affordable per Healthcare Reform guidelines. Therefore, if you choose to elect coverage through the Exchange, it is unlikely that you would receive a subsidy to the premiums.

What are qualifying conditions under sick paid time off?

You may use sick time for your own or a qualified family members physical or mental illness or injury, including appointments for the treatment and care of the illness or injury. Additionally, you may take accrued sick time off for counseling, medical care, victim services, relocation and/or legal services and participation in legal proceedings as a result of domestic abuse, sexual assault or criminal harassment.

Can I roll over a previous 401K into the Arapahoe County 457 Plan?

Yes. You may roll over funds from qualified Defined Contribution Plans (401k, 403a, 457b, etc.) into the Arapahoe County Smart Start Savings Plan at any time after your first paycheck. You can begin the rollover process by logging in to www.icmarc.org and following the Rollover Decisions from the “For Participants” drop-down menu.

Can I change my Smart Start contribution amount?

Yes. You may change your contribution amounts at any time through *My Benefits*. Changes will be applied to the first unprocessed payroll following the change as long as entered by close of business on the Thursday before payroll.

Can I change my investment funds in the Smart Start Savings plan?

Yes. You are completely in charge of the investment allocations of any monies deducted from your check for your Smart Start Savings. Arapahoe County offers a diversified menu of investment funds for you to choose from, including target date funds, for easy management. Arapahoe County will not advise you on investments; please consult with your financial advisor for a review of options.

Can I take a loan from my Smart Start Savings?

Yes. Arapahoe County’s Plan offers one general purchase loan at a time. Only one loan can be active at a time. Please review the Plan Documents on the *My Benefits* for details on loans and other in-service withdrawal options.

How do I update my name and/or address with benefits carriers?

All changes to your name, address, or phone number should be updated in SAP (Arapahoe County’s Human Capital Management System). Human Resources will update carriers at least every two weeks.

How do I elect to participate in the Student Loan Payment program?

You may elect to exchange vacation at any time through *My Benefits*. Once you start your enrollment you will be directed to BenefitEd to enter your lender’s information. You will need your Lender’s company name, address and your account number.

Can I exchange more than 40 hours toward my student loan payment?

No. While we acknowledge that student loan debt can be stressful, we do not want employees to neglect their physical, emotional and social well-being by not taking time away from work. Therefore, you may only exchange 40 hours once each calendar year.

If I leave Arapahoe County, how long will my coverage remain in effect?

Your elected Medical, Dental, Vision, FSA, Basic Life, Additional Life, Long-Term Disability and Short-Term Disability benefits will terminate at 11:59 p.m. on the last day of the month in which you separate employment. Therefore, your share of the premiums for the remainder of the month will be deducted from your final pay. Your Smart Start Savings, and 401a retirement benefits terminate at 11:59 p.m. on your date of termination.

When will I receive COBRA after leaving Arapahoe County?

Alerus will issue a COBRA packet mailed to your last known address.

GLOSSARY

Active

Means a scheduled work day in which you are performing work or are on a scheduled vacation. You are not considered an active employee if you are on any form of Leave of Absence.

After-Tax Dollars

Income from which federal, Social Security (OASDI/Medicare tax), state and local taxes have already been deducted.

Annual Contribution

The amount of earnings you may allocate to a benefit in any one period of time. For the purposes of the HRA and FSA the annual contribution is set by the IRS and applies to a calendar year (Jan. 1 to Dec. 31).

Annual Deductible

The amount you pay for covered services each plan year before the plan starts to pay for certain benefits.

Before-Tax Dollars

Income on which, under current law, you pay no federal income or Social Security (OASDI/Medicare tax) taxes. In many states, you pay no state or local taxes on before-tax dollars either.

Coinsurance

Coinsurance is a shared cost between what you pay for covered services after you satisfy your deductible and what the Plan pays on your behalf.

Copay

A copay is a flat amount that you pay for covered services.

Date of Service

Date of service accounts for active employment time only.

Employee Classification

A regular employee works directly for Arapahoe County through W2 qualified earnings. Grant Funded employees are considered employees of the County but paid for out of grant funds. Temporary employees (intended to work on projects lasting less than one year at no more than 29 hours per week), contractors and seasonal employees are not eligible for Arapahoe County benefits, unless otherwise required by law.

Evidence of Insurability (EOI)

Document required for enrolling or increasing Life insurance when medical underwriting is required. This is typically an online questionnaire; however, depending on your answers, additional information may be required, including a doctor's response.

Guarantee Issue

The maximum amount of Life coverage guaranteed to be issued if elected at your first offering.

In-Network

Service paid for when participants use providers and facilities that are in the Plan's network. These providers and facilities have contractual discounted rates with the carrier.

Incurred Expense

An expense is incurred when the service that gives rise to the expense has been provided, not when you are billed or when you pay the expense.

Inpatient

A person who receives medical treatment or services requiring one or more overnight stay(s) in a hospital or other approved care facility.

Maximum Annual Out-of-Pocket Limit

The most you will have to pay for covered medical expenses in a year, after premiums. Monies paid by the participant for noncompliance penalties or provider charges that are in excess of the maximum reimbursable charges are not included in calculating the maximum annual out-of-pocket limit.

Network Area

A geographical area in which the Medical/Dental/Vision networks are available to participants.

Network Providers

Physicians, hospitals, dentists and other healthcare providers located in network areas that participate in the Medical/Dental/Vision Networks.

Out-of-Network Benefits

The benefits which are available to participants when they use out-of-network providers that are subject to deductibles, coinsurance and usual, customary and reasonable (UCR) benefits levels.

Out-of-Network Providers

Physicians, hospitals or other healthcare providers who do not participate in the network.

Outpatient

Treatment including services, supplies and medicines provided and used at a hospital under the direction of a physician to a person not admitted as a registered bed patient; or services rendered in a physician's office, laboratory or X-ray facility, an ambulatory surgical center, or the patient's home.

Pharmacy

A licensed establishment where covered prescription drugs are filled and dispensed by a pharmacist licensed under the laws of the state where he or she practices.

Physician

A person licensed, and acting within the scope of that license, to practice medicine or perform surgery.

Social Security Wage Base

Social Security's Old-Age, Survivors and Disability Insurance (OASDI) program limits the amount of earnings subject to taxation for a given year. The same annual limit also applies when those earnings are used in a benefit computation. This limit could increase each year with increases in the national average wage index. We call this annual limit the contribution and benefit base. For earnings in 2022, this base is \$146,700.

Usual, Customary and Reasonable (UCR-Specific to Arapahoe County Government Plans)

The amount paid for a medical service in a geographic area based on what 90% of providers in that area usually charge for the same or similar medical service. The UCR amount is used when non-emergency treatment is sought at an out-of-network provider or facility. The Plan will pay the out-of-network coinsurance amount based on the UCR rate, and the member will be responsible to pay their provider for any difference between the originally billed amount and the UCR.

CUSTOMER SERVICE CONTACT INFORMATION

Medical Plans

Kaiser Permanente | Group #0954
303-338-3800 | www.kp.org
Claims: Kaiser Permanente
P.O. Box 261130 | Plano, TX 75026

Well-being Guidance (EAP)

ComPsych
866-519-8360 | www.guidanceresources.com (ArapahoeEAP)

Dental

Delta Dental | Group #1525
800-610-0201 | www.deltadentalco.com
Claims: Delta Dental of Colorado
P.O. Box 173803
Denver, CO 80217

Vision

VSP | Group#12063668
800-877-7195 | www.vsp.com
Claims: Vision Service Plan
P.O. Box 385018
Birmingham, AL 35238-5018

Flexible Spending Accounts/ Health Reimbursement

Alerus
Group: Arapahoe County
303-369-7886
www.Alerus.com
Claims: Alerus
PO Box 3789
Littleton, CO 80161

Home Thrive

888-777-2199
Homethrive.com
signup.homethrive.com

Life and AD&D

The Standard | Policy # 163355
Questions/Claims: 1-800-628-8600

Life Services Toolkit

The Standard 800-378-5742 www.standard.com/mytoolkit (Username: support)

Global Travel Assistance

Phone: 800-527-0218 (US, Canada, Puerto Rico, US Virgin Islands and Bermuda)
Phone: 1-410-453-6330 (everywhere else) Webpage: Assistance@uhcglobal.com

Disability Insurance

The Standard | Policy # 163355
Telephonic Claim submission: 1-800-378-2395
Claim Questions: 1-800-368-1135

Accident, Hospital & Critical Illness

Aflac | Group #25780 | Website: www.aflac.com
Claims: www.aflacgroupinsurance.com
855-889-6526
Michael DiDonna 720-936-0176 direct

401(a) Retirement Plan

Arapahoe County
Lew Quigley 303-795-4484 or Mona Goodyear 303-636-1551
<http://acgret.org>

Smart Start Savings Plan

Mission Square | Group #301986
800-669-7400 | www.icmarc.org

Legal Plan

MetLife Legal | 800-821-6400
www.legalplans.com (Password: 6090642)

Arapahoe Rewards

www.beneplace.com/arapahoecounty

Working on Well-being (WOW)

My Well-being
www.arapahoewow.com

Your Money Line

Your Money Line
833-890-4077 | answers@yourmoneyline.com

Schedule a Meeting:

<https://yourmoneyline.com/schedule-a-meeting>

URL to register & Live Chat: yourmoneyline.com/arapahoe



Benefits Team: If after contacting these resources you require escalated benefit support, please contact the Benefits Team at benefits@arapahoegov.com or 720-874-5551. Please leave a detailed message and allow 24 hours for a return call/email.



ARAPAHOE COUNTY

Better Together

