



PLAN YEAR | **2022**

# EMPLOYEE BENEFITS GUIDE





Our people are our most important resource  
and the key to our success.

That's why at Conejos County we are committed to offering a comprehensive employee benefits program that helps our employees and their families stay healthy, feel secure and maintain a work/life balance.

### **About This Guide**

Welcome to your 2022 Employee Benefits Guide, your single source document for the information you need to make informed decisions about your benefits for yourself and your family.

This guide is intended to be a summary of the benefits offered to you and your family including:

- Medical Insurance
- GAP Insurance
- Dental Insurance
- Vision Insurance
- Life and Voluntary Life Insurance

The guide includes information about your benefit options and provides a summary of the general provisions of your insurance plan benefits. For more detailed information, please see the Summary of Benefits Coverage (SBC), Summary Plan Description (SPD) or Certificate of Coverage booklet for each plan. Official plan documents govern how the plans are administered.

If you have any questions after reading this guide, please contact the Business Office.

**Connie Ricci**

[cricci@co.conejos.co.us](mailto:cricci@co.conejos.co.us)

719-376-5772 Ext. 6

# Eligibility and Enrollment Information

## Eligibility

If you are a Conejos County full-time employee working 40 hours a week, you are eligible to enroll in benefit plans. You may also cover your eligible dependents including: your legal spouse, your dependent child(ren)/step-child(ren) or children of any age if they are incapable of self-support due to a physical or mental disability.

## New Hire Enrollment

The benefits you elect will become effective on the first day of the month following your date of hire.

## During Open Enrollment (December)

The benefit plan year for Conejos County is January 1 to December 31 of each year. You generally have one opportunity each year to make changes to your benefits during the open enrollment period in December for a January 1 effective date.

## When to Enroll or Make Changes

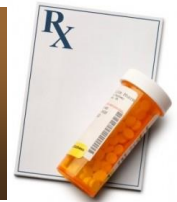
Under IRS rules, your enrollment choices or declination of coverage when you are first eligible will remain in place until the next Open Enrollment, period unless you have a qualified change in status. Qualified status changes include: marriage, divorce, the birth or adoption of a child, or your spouse's gain or loss of employment.

*Only certain types of changes may be permitted, and all changes must be made within 30 days of the qualified status change and be consistent with the change.*

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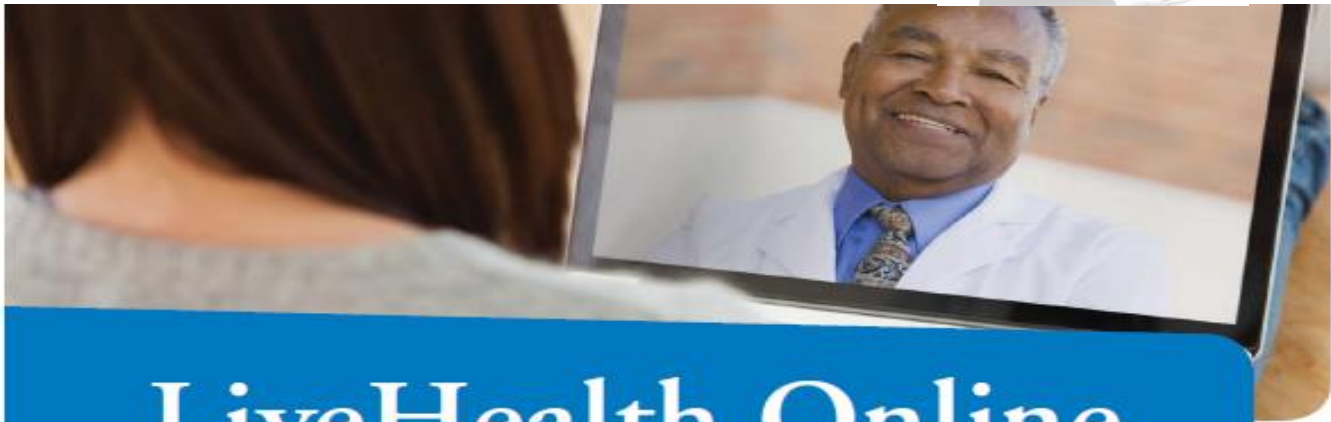
# Medical Insurance: Anthem *(BlueClassic PPO)*



Conejos County will now offer one medical plan option through Anthem that gives you a large network and an increase GAP maximum benefit. You can locate in-network providers by visiting this link: [www.anthem.com](http://www.anthem.com). The chart below summarizes the key (in-network) features of the medical plan. The deductible is the amount that is owed for health care services each year before the insurance company begins to pay.

Plan Feature	In-Network Benefits - PPO
Deductible (Calendar Year)	\$6,000 Individual \$12,000 Family
Coinsurance	70%
Out-of-Pocket Maximum (OOP)	\$8,000 Individual \$16,000 Family
Office Visit <i>Preventive care is covered at 100%</i>	\$30 copay Primary \$60 copay Specialist (Deductible does not apply)
Urgent Care	\$60 copay per visit (Deductible does not apply)
Emergency Services	\$250 copay per visit then 70% covered (Covered by GAP)
Ambulance	70% coinsurance after deductible (\$750 GAP Ded.)
Inpatient Hospitalization	70% coinsurance after deductible (\$750 GAP Ded.)
Outpatient Surgery	70% coinsurance after deductible (\$750 GAP Ded.)
Advanced Radiology (MRI, CT Scan)	70% coinsurance after deductible (\$750 GAP Ded.)
Lab & X-Ray	Covered at 100% (Covered by GAP)
Durable Medical Equipment	Covered at 100% (Covered by GAP)
Chiropractic Care	\$30 Copay / 20 Visit Limit
Prescription Drug Coverage (Rx) Tier 1 – Generic Tier 2 – Preferred Brand Tier 3 – Non-Preferred Brand Tier 4 - Specialty ( <i>preauthorization may be required</i> )	<b>Retail (30-day supply) – Two Tier (1/2)</b> \$15 copay / \$25 copay \$50 copay / \$60 copay \$75 copay / \$85 copay 30% up to a maximum of \$350 / 30% up to a maximum of \$500
Prescription Drug Coverage (Rx) Tier 1 – Generic Tier 2 – Preferred Brand Tier 3 – Non-Preferred Brand Tier 4 - Specialty ( <i>per 30-day supply</i> )	<b>Mail Order (90-day supply)</b> \$37.50 copay \$150 copay \$225 copay 30% up to a maximum of \$350
Out of Network Benefits	
Deductible	\$18,000 Individual / \$36,000 Family
Out-of-Pocket Maximum (OOP)	\$24,000 Individual / \$48,000 Family
Coinsurance	50%

# Medical Insurance: Anthem LiveHealth



## LiveHealth Online

**Feeling under the weather?  
Don't wait – see a doctor 24/7.**

When your own doctor isn't available, you can see a board-certified doctor in minutes using LiveHealth Online on your smartphone, tablet or computer with a webcam. There are no appointments and no long wait times. Sign up today at [livehealthonline.com](http://livehealthonline.com) or download and register using the free mobile app.

**Commonly treated conditions:**

- Pink eye
- Sinus infection
- Cough
- Fever
- Skin Rash
- Headache
- Sore throat
- Cold
- Flu
- Skin infection
- UTI
- Diarrhea and more!

The doctors you see using LiveHealth Online can assess your condition and send a prescription to the pharmacy you select if needed.\*

**Sign up for free today. Go to [livehealthonline.com](http://livehealthonline.com) or download the free mobile app and register.**



# Medical Insurance: Website Registration



Access your healthcare information anytime you want it. With *Anthem.com*, you can check on your claims, get details about your benefits, estimate your medical costs, print an ID card and more. Register now by visiting [www.anthem.com](http://www.anthem.com).



## Looking for a doctor?

### Finding one online is fast and easy

Use our online **Find a Doctor** tool to look for doctors, hospitals, labs and other health care providers in your Anthem Blue Cross and Blue Shield plan. Check if your favorite doctor is part of your plan, or look for one near you. Avoid getting care from doctors outside of your plan if you can — it will cost you more or your plan may not cover it all.



### Here's all you need to do:



1

Go to [anthem.com/find-doctor/](http://anthem.com/find-doctor/)

2

You can look for a doctor by using either:

- **Search as a Member:** Use your member ID card number or log in with a user name and password.
- **Search as a Guest:** Select a plan or network,\* or search by all plans and networks, to get started.

3

Next, select a type of doctor and location. You can also search for a doctor within a certain distance of your location. It's optional to provide a doctor's name.

Hit Search.

#### Choose a doctor to see more information, such as:

- Training
- Specialties
- Languages spoken
- Address (including a map)
- Phone number



#### Going mobile

Use your mobile device to search for doctors, hospitals and more with our free app from the App Store® or Google Play™. Just search for Anthem Anywhere and download the app.

# Supplemental Medical Insurance: EZ MERP



Supplemental medical insurance is often called “GAP” coverage as it is used to help pay deductibles or co-payments and co-insurance from the insured’s medical insurance. Today, these “out-of-pocket” amounts are often quite substantial and can impact a family’s financial stability. Conejos County offer you the choice to pair your major medical plan through Anthem with a GAP Plan option.

	\$7,250 GAP Plan Option
Benefit Period Deductible <i>Per individual / per family</i>	\$750 Individual \$1,500 Family
Inpatient Maximum Benefit <i>Per insured person, per benefit period</i>	Up to \$7,250
Inpatient Services include: • Eligible inpatient hospital stays • Inpatient surgeries • Physicians in-hospital charges • Ambulance services	
Outpatient Maximum Benefit <i>Per family, per benefit period</i>	Up to \$7,250 <i>(2x the per insured person outpatient maximum benefit)</i>
Outpatient Services include: • Treatment in hospital emergency rooms • Surgeries in a hospital outpatient facility or a free-standing outpatient surgery center • Radiological diagnostic testing performed in an outpatient facility (i.e MRI, CT Scans) • Urgent Care services • Durable Medical Equipment	Up to \$7,250 <i>(2x the per insured person outpatient maximum benefit)</i>

## Claims Examples

### Inpatient Benefits

**Inpatient Hospital Claim Example with the \$7,250 GAP Plan:** Here, assume the total hospital cost was \$173,000. Your Anthem medical plan deductible is \$6,000 and your Out of Pocket Max is \$8,000. The GAP plan will cover \$7,250 after your \$750 GAP plan deductible. Your out-of-pocket responsibility for this claim is \$750 (GAP plan \$750 deductible)

### Outpatient Benefits

**Outpatient claims Example with the \$7,250 GAP Plan:** Here, assume you had an emergency room visit and the total cost was \$9,500. Your Anthem medical plan deductible is \$6,000 and your Out of Pocket Max is \$8,000. The GAP plan will cover \$7,250 after your \$750 GAP plan deductible. Your total out-of-pocket responsibility for this claim is \$750 (GAP plan \$750 deductible)

# Supplemental Medical Insurance: EZ MERP (continued)



## Instructions for Submitting Claims to EZMERP

- First, you must get copies of your Explanations of Benefits (EOBs) from your primary insurance.
  - All you do is go to your primary insurance carrier website and set up your personal account.
  - Sign into your account.
  - Find your claims information. You can click on the button that says, "View EOB". EOB stands for Explanation of Benefits. Download (save to a file on your computer) any EOBs that have not been processed by us.

Submit them to EZMERP. 4 ways to do this:

1. Your plan has a dedicated email:

Plan email: [plan1272@merpclaims.com](mailto:plan1272@merpclaims.com)

2. Fax them to: 1-888-551-8357

3. Print and send via regular mail:

EZMERP  
P O Box 4826  
Greenwood Village, CO 80155

4. Use the convenient upload feature now available.

This is the link: Bookmark this for convenience.

<https://a54189.fmphost.com/fmi/webd#>

This link will open on your screen once you click the link.

You will receive an email from EZMERP. This email will contain your Account Name. You will receive a separate email with an initial password. Enter them in the appropriate field.

Log In

Open database "claims" with:

Guest Account

Account Name and Password

Account Name:

Password:

Cancel OK



# Supplemental Medical Insurance: EZ MERP (continued)



Once signed in this window will open. Note the 4 tabs. You can check your personal information. You can Click the Family Claims tab to see your claims history. Contact us tab. Then the last tab is the Upload tab for your claims.

Your personal account information

Click this tab to see your claims history

Click this tab to send us an email.

Click tab to upload copies of your insurance carrier Explanations of Benefits.

**Employee**

First/Middle/Last Name: Joe Sample Family: Sample Male Hire Date: Employment Start Date: 1/1/2018 Cobra Entry: Employment End Date: Cobra Exit:

General Information | **Family Claims** | Contact EZMERP | Upload

**CONTACT INFORMATION**

Email Address: 035710@gmail.com  
Address 1: 123 Elm Street  
Address 2:  
City: Denver State: CO Zip: 80211  
Phone:

**SPECIAL INFORMATION**

Birth Date: 06/15/1978 Age: 39  
SSN: 333-22-1111  
Welldyne Family ID No:  
Insurance Co ID:  
PAI ID Number: PAI Rate:

**DEPENDENTS**

Dependent	Dependent Status	Birth Date	SSN
Sample, Better	Spouse	07/15/1979	
Sample, Little	Son	8/15/1996	

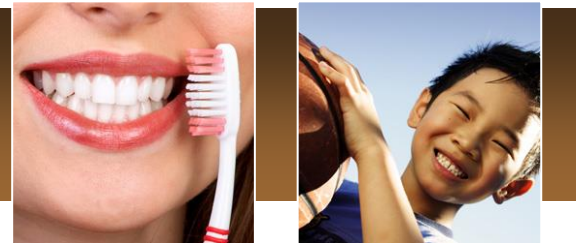
**Security Credentials Insurance Company Web Site**

Log In Password:  
PDF and Log In Password: JS1978abc

Call us at 303-872-2044 or 1-888-553-6426 for assistance with your account.



# Dental Insurance: Delta Dental



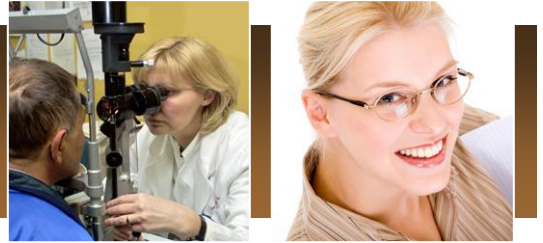
Conejos County offers you a PPO dental plan through Delta Dental that gives you the freedom to choose any dentist when you need care. Participating dentists file claims directly with and accept reimbursement as payment in full. You are only responsible for your deductible and coinsurance, as well as any charge for non-covered services up to approved amount.

If you choose to see a non-participating dentist, you may incur additional out-of-pocket expenses and will be billed the total amount the dentist charges (called balance-billing). When you see an in-network PPO dentist, you are protected from balance-billing.

You can locate in-network dentists by visiting: [www.deltadental.com](http://www.deltadental.com)

Type of Service	In-Network	Out-of-Network
Annual Deductible <i>(Individual / Family)</i>	\$50 / \$150	\$50 / \$150
Annual Maximum Benefit <i>(per covered person)</i>	\$2,000	\$2,000
Orthodontia Lifetime Maximum <i>(Child dependent to age 19)</i>	\$1,000	\$1,000
<b><u>Type A - Preventive Services</u></b> <ul style="list-style-type: none"> <li>• Prophylaxis - Cleanings</li> <li>• Oral Examinations</li> <li>• Topical Fluoride Applications</li> <li>• Full Mouth X-rays</li> <li>• Bitewing X-Rays (Adult/Child)</li> </ul>	Plan Pays: 100% <b>You Pay: 0%</b>	Plan Pays: 100% <b>You Pay: 0%</b>
<b><u>Type B - Basic Restorative</u></b> <ul style="list-style-type: none"> <li>• Space Maintainers</li> <li>• Sealants</li> <li>• Periodontal Maintenance</li> <li>• Amalgam &amp; Composite Fillings</li> <li>• Emergency &amp; Palliative Treatment</li> <li>• Endodontics - Root Canal</li> <li>• Periodontal Surgery</li> <li>• Periodontal Scaling &amp; Root Planning</li> </ul>	Plan Pays: 80% <b>You Pay: 20%</b>	Plan Pays: 80% <b>You Pay: 20%</b>
<b><u>Type C - Major Restorative</u></b> <ul style="list-style-type: none"> <li>• Repairs</li> <li>• General Anesthesia</li> <li>• Oral Surgery (Simple Extractions)</li> <li>• Oral Surgery (Surgical Extractions)</li> <li>• Implants</li> <li>• Bridges</li> <li>• Dentures</li> <li>• Crowns/Inlays/Onlays</li> </ul>	Plan Pays: 50% <b>You Pay: 50%</b>	Plan Pays: 50% <b>You Pay: 50%</b>
<b><u>Type D - Orthodontia</u></b>	Plan Pays 50% <b>You Pay: 50%</b>	Plan Pays 50% <b>You Pay: 50%</b>

# Vision Insurance: The Standard *(VSP Choice Network)*



Conejos County offers a vision plan through The Standard that gives you the freedom to choose any eye care provider when you need care. However, you will maximize your benefits and pay less out of your pocket when a in-network provider is used. Additionally, if a non-network provider is used, you will be responsible for filing a claim for reimbursement and the balance of the bill.

The chart below summarizes the key features of the vision plan.

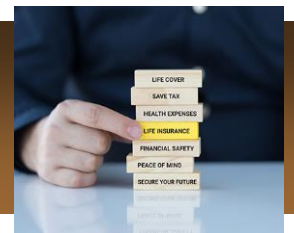
You can locate in-network vision providers and retail chains by visiting VSP's website [www.vsp.com](http://www.vsp.com)

Plan Feature	In-Network	Out-of-Network
Annual Eye Exam <i>(once per 12 months)*</i>	\$10 Copay	\$10 Copay
Materials	You will pay a \$25 copay at the time of service. The materials copay is a single payment that applies to a complete pair of glasses or to frames, whichever is selected.	You will pay a \$25 copay at the time of service.
Eyeglass Lenses <i>(once per 12 months)*</i> • Single Vision • Bifocal • Trifocal • Lenticular	Covered in Full Covered in Full Covered in Full Covered in Full	<b>You will be reimbursed:</b> Up to \$30 Up to \$50 Up to \$65 Up to \$100
Lens Options • Scratch Resistant Coating • Anti-Reflective Coating • Ultraviolet Coating	\$17-33 \$43-\$85 \$16	No Benefit No Benefit No Benefit
Frames <i>(once per 24 months)*</i>	\$150 allowance	<b>You will be reimbursed:</b> Up to \$75
Contact Lenses ** Fit & Follow Up Exams	<b>You will pay:</b> Up to \$60	No Benefit
Contact Lenses • Medically Necessary • Elective	Covered in Full \$150 allowance <i>Elective contact lens allowance can be applied to disposables, but the dollar amount must be used all at once (provider will order 3 or 6 month supply). Applies when contacts are chosen in lieu of glasses.</i>	<b>You will be reimbursed:</b> Up to \$210 Up to \$120
Additional Plan Features • Additional Glasses • Frame Discount • Low Vision <i>(w/ prior auth)</i>	20% discount (complete pair) 20% discount above retail allowance 75% up to \$1,000 every 2 yrs.	No Benefit No Benefit No Benefit
Laser VisionCare	VSP offers an average discount of 15% off or 5% off a promotional offer for LASIK Custom LASIK and PRK. The maximum out-of-pocket per eye for members is \$1,800 for LASIK and \$2,300 for custom LASIK using Wavefront technology, and \$1,500 for PRK. In order to receive the benefit, a VSP provider must coordinate the procedure.	

\*Frequencies are based on date of service

\*\*Contact lenses are in lieu of eyeglass lenses and frames

# Basic Life & AD&D OneAmerica



## LIFE and AD&D INSURANCE

Life and Accidental Death and Dismemberment (AD&D) benefits are essential to the financial security of you and your family. Discussing what might happen to your family if you were not around to provide for isn't always the easiest conversation, but it is necessary. Survivor benefits provide financial assistance in an absence and can help you plan for the unexpected.

As such, Conejos County provides all full-time, active employees with a \$20,000 Basic Life and AD&D benefit through Standard. *You are automatically enrolled in this benefit at no cost to you.*

## DEPENDENT LIFE INSURANCE

You have the option to enroll your spouse or child(ren) in Dependent Life Insurance. Your spouse is eligible for a \$5,000 benefit and children are eligible for a \$5,000 benefit from live birth.

## BENEFICIARY DESIGNATION

A beneficiary is the person you designate to receive your Life Insurance benefit in the event of your death. Your beneficiary for Life Insurance is also your beneficiary for AD&D Insurance.

It is important that your beneficiary is clear so there will be no question as to your intentions. You should designate a primary beneficiary and have the option of designating contingent beneficiaries. You may select a person, your estate or an organization such as a charity as your beneficiary(ies). When naming your beneficiary(ies), please indicate their full name, address, Social Security number, relationship, date of birth and distribution percentage. If your beneficiary is not legally related, please indicate as such by inserting "Not Related" in the relationship field.

It is important that you keep your beneficiary designations up to date. In the event of your death, the last beneficiary designation on file with the District will be filed with your claim and the named beneficiary(ies) will receive the death benefit proceeds.



**Any Questions?**



**Contact Us**

Plan	Contact	Phone
Medical Group #L01655	Anthem <a href="http://www.anthem.com">www.anthem.com</a>	1-877-811-3106
GAP Group# Plan1272	EZ MERP <a href="http://www.ezmerp.biz">www.ezmerp.biz</a>	1-888-551-8357
Dental Group #W2449	Delta Dental <a href="http://www.deltadental.com">www.deltadental.com</a>	1-800-610-0201
Vision Group #166780	The Standard <a href="http://www.standard.com/services">www.standard.com/services</a>	1-800-877-7195
Group Life	OneAmerica <a href="http://www.employeebenefits.aul.com">www.employeebenefits.aul.com</a>	1-800-553-5318
AssuredPartners Colorado & Compass Financial Group	Alec Robinson Senior Account Executive Evelyn Wagner Account Representative Arnie Aranoff SVP Employee Benefits Vince Rogers Senior Local Broker Associate	720-726-3232 <a href="mailto:alec.robinson@assuredpartners.com">alec.robinson@assuredpartners.com</a> 303-228-2213 <a href="mailto:evelyn.wagner@assuredpartners.com">evelyn.wagner@assuredpartners.com</a> 303-228-2147 <a href="mailto:arnie.aranoff@assuredpartners.com">arnie.aranoff@assuredpartners.com</a> 719-589-5494 <a href="mailto:vincent.rogers@ceterawealth.com">vincent.rogers@ceterawealth.com</a>