

EL PASO



COUNTY

Summary of El Paso County Retiree Health Benefits 2022 Plan Year

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**Financial Services Department
Employee Benefits Division**

200 South Cascade Avenue, Suite 150-B
Colorado Springs, CO 80903

Phone: (719) 520-7420 | Fax: (719) 520-7497

E-mail: employeebenefits@elpasoco.com

Pre-Medicare Eligible

Retiree/Retiree Spouse 2022 Open Enrollment Information

★New in 2022★

- **Slight Increase to Medical Plan Rates and Adjusted Subsidies** (See Plan Costs and Medical Subsidies on pages 10-11)
- **Slight Decrease to Dental Plan Costs** (See Plan Costs on pages 10)
- **No Changes to Plan Carriers or Benefits**

Dear El Paso County Retiree Benefit Plan Participant:

Enclosed you will find a Retiree Benefit Election Form. If you wish to make Open Enrollment changes to your benefits or dependents, or need to update your information, you will need to complete the enrollment form provided in this packet (keep the pink copy for your records) and return it to the El Paso County Employee Benefits Division at 200 South Cascade Avenue, Suite 150-B, Colorado Springs, CO 80903, **no later than Wednesday, November 3, 2021.**

If you do not want to make any changes to your enrollment, do not complete an enrollment form. Your current health insurance elections will automatically continue in 2022.

Please review the following pages for a summary of benefits, adjusted plan rates and medical plan subsidy amounts.

Changes made during this Open Enrollment period will be effective January 1, 2022.

Reach Your Peak

The 2022 Reach Your Peak (RYP) enrollment period begins October 20, 2021 and ends November 3, 2021. During that period, register at or log on to www.ReachYourPeakEPC.com from any computer or mobile device and then follow the on-screen instructions to schedule a 2022 Health Consultation at an El Paso County Employee Health Center. Health Consultation appointments must be scheduled during the enrollment period. A confirmation e-mail will be sent to you with your appointment details within minutes of completing the RYP enrollment process.

Note for returning RYP participants: You must re-enroll each year; you are not automatically enrolled in the new year.

Meeting Notice

An open enrollment presentation can be found online at <https://admin.elpasoco.com/retirees>.

If you have any questions regarding El Paso County retiree health insurance benefits, you are encouraged to contact the Employee Benefits Division at (719) 520-7420. For questions regarding your retirement benefits, please contact the Retirement Office at (719) 520-7490.

Retiree Open Enrollment closes on November 3, 2021

Medicare Eligible

Retiree/Retiree Spouse 2022 Open Enrollment Information

★New in 2022★

- **Reduced Medical Plan Rates and Adjusted Subsidies** (See Plan Costs and Medical Subsidies on pages 10-11)
- **Slight Decrease to Dental Plan Costs** (See Plan Costs on pages 10)
- **No Changes to Plan Carriers or Benefits**

Dear El Paso County Retiree Benefit Plan Participant:

Enclosed you will find a Retiree Benefit Election Form. If you wish to make Open Enrollment changes to your benefits or dependents, or need to update your information, you will need to complete the enrollment form provided in this packet (keep the pink copy for your records) and return it to the El Paso County Employee Benefits Division at 200 South Cascade Avenue, Suite 150-B, Colorado Springs, CO 80903, **no later than Wednesday, November 3, 2021.**

If you do not want to make any changes to your enrollment, do not complete an enrollment form. Your current health insurance elections will automatically continue in 2022.

Please review the following pages for a summary of benefits, adjusted plan rates and medical plan subsidy amounts.

Changes made during this Open Enrollment period will be effective January 1, 2022.

Meeting Notice

An open enrollment presentation can be found online at <https://admin.elpasoco.com/retirees>.

If you have any questions regarding your medical or prescription plan benefits, you are encouraged to contact Retiree First at (719) 249-7788 (TTY 711) or toll free at (855) 531-8844 (TTY 711). For questions regarding your dental or vision benefits, contact the Employee Benefits Division at (719) 520-7420. For questions regarding your retirement benefits, please contact the Retirement Office at (719) 520-7490.

Retiree Open Enrollment closes on November 3, 2021

Contact List

Financial Services Department – Employee Benefits Division

Employee Benefits Division (719) 520-7420
 Employee Benefits Division E-mail employeebenefits@elpasoco.com
 Employee Benefits Website admin.elpasoco.com/financial-services/employee-benefits
 HIPAA Compliance (719) 520-7402

El Paso County Retirement Plan

Retirement Office (719) 520-7490
 Retirement E-mail epcrpsupport@elpasoco.com
 Retirement Website retirement.elpasoco.com

El Paso County Health Centers

Regional Development Center (RDC) (719) 520-7080
 Citizens Service Center (CSC) (719) 520-7600
 24/7 Telehealth (877) 272-0813
 Premise Health Patient Portal mypremisehealth.com

Pre-Medicare Eligible

Medical Plan / UMR (Administrator) /

United Healthcare Choice Plus (Network)

(Group #76-414547)

Use the Member Services Number and Website for in-network provider listings, questions, claims, ID cards and pre-authorizations

UMR Member Services (800) 207-3172
 UMR Website umr.com

Additional Medical Plan Programs:

SurgeryPlus Phone (833) 814-5702
 SurgeryPlus Website epcepo.surgeryplus.com
 SleepCharge Phone (877) 615-7257
 SleepCharge Website sleepcharge.com/epcmed

Prescription Plan / Express Scripts

ID cards issued by Medical Plan / UMR

(RxBIN #003858 / RxPCN #A4 / RxGRP #ELPASO16)

Express Scripts Member Services (855) 738-1153
 Express Scripts Website express-scripts.com
 Accredo Specialty Rx (800) 803-2523
 Accredo Specialty Rx Website accredo.com

Dental Plans / Delta Dental of Colorado

(Group #12104)

Delta Dental Member Services (800) 610-0201
 Delta Dental Website deltadentalco.com

Vision Plan / EyeMed

(Access Plan H / Group #9728999)

EyeMed Member Services (866) 723-0596
 EyeMed Website eyemed.com

Wellness Program / Reach Your Peak (RYP)

RYP Phone (719) 520-7420 option 4
 RYP E-Mail mailto:reachyourpeakepc@elpasoco.com
 RYP Website (Powered by Propel) reachyourpeakepc.com
 Website Technical Questions (888) 339-4131
 Health Reimbursement Account (HRA) / Employee Benefits Corporation (EBC)
 EBC Customer Service (800) 346-2126
 EBC Website ebcflex.com
 EBC Claims Fax Number (608) 831-4790

Medicare Eligible

Medical Plan & Prescription Plan / Retiree First (Administrator) / Humana Medicare Advantage Prescription Drug Plan (Insurer)

Use the Retiree First Member Services Number for Plan Questions, Claims, and ID Cards.

Retiree First Member Services (Local) (719) 249-7788 (TTY 711)
 Retiree First Member Services (Toll Free) (855) 531-8844 (TTY 711)

Find a Provider:

Use anywhere Medicare is accepted. For assistance in finding a provider contact Retiree First.

Please refer to your Retiree First or Humana literature for policy numbers and further information.

Dental Plans / Delta Dental of Colorado

(Group #12104)

Delta Dental Member Services (800) 610-0201
 Delta Dental Website deltadentalco.com

Vision Plan / EyeMed

(Access Plan H / Group #9728999)

EyeMed Member Services (866) 723-0596
 EyeMed Website eyemed.com

General Benefits Information

Medical Plan Benefits

Pre-Medicare Eligible Retirees and Spouses: There is one medical plan for pre-Medicare eligible retirees and spouses - the El Paso County Exclusive Provider Organization (EPO) Medical Plan administered by UMR. Prescription Plan benefits will continue through Express Scripts. See page 6 for a summary of the EPO Medical Plan and Prescription Plan benefits.

Medicare Eligible Retirees and Spouses: There is one medical plan for Medicare eligible retirees and spouses - the Humana Medicare Advantage Prescription Drug (MAPD) Plan administered by Retiree First. **Medicare Eligible Plan enrollees must also be enrolled in Medicare Part A and Part B.** See page 7 for a summary of the Humana MAPD Plan benefits. Medicare-eligible retirees and spouses will continue to have access to the El Paso County Employee Health Centers when enrolled on the Retiree First/Humana MAPD Plan.

Dental Plan Benefits

Dental Plans will continue through Delta Dental. If you are currently enrolled in the high or low plan and wish to keep the same option, there is no need to change your dental plan election. You have the opportunity during this open enrollment period to change or cancel your dental benefits. See page 8 for a summary of Dental Plan benefits.

Vision Plan Benefits

Vision Plan benefits will continue through the EyeMed Vision "Access" Plan. See page 9 for a summary of Vision Plan benefits.

Eligible Dependents

The retiree's legal spouse and child(ren) up to age 26 (or older if disabled with continued coverage). Proof of relationship must be submitted to the El Paso County Employee Benefits Division when adding dependents (i.e., marriage license, civil union certificates, birth certificates).

Insurance Cards

Keep your current ID cards. For 2022, new cards will only be issued if you are adding/removing dependents on the Pre-Medicare Eligible Medical Plan (UMR).

Summary Plan Documents

For a copy of the Summary Plan Documents (SPD) contact the Employee Benefits Division at (719) 520-7420 or employeebenefits@elpasoco.com or go to www.elpasoco.com under Employee Benefits Division.

El Paso County Health Centers

El Paso County Employee Health Centers are available to all enrolled El Paso County Medical Plan participants. The El Paso County Employee Health Centers offer quality, convenient and affordable medical care, along with a full range of preventive health and wellness services.

Employee Health Center Locations, Hours and Contact Information:

Regional Development Center (RDC) Health Center
2880 International Circle, Lower Level, Suite N010
Phone: **(719) 520-7080**

Citizens Service Center (CSC) Health Center
1675 West Garden of the Gods Road, Suite 1053
Phone: **(719) 520-7600**

Health Center Hours: **Monday through Friday, 8:00 a.m. to 5:00 p.m.**

Premise Health Patient Portal: mypremisehealth.com

24/7 Telehealth: **(877) 272-0813**

\$10 Copay per Visit/Virtual Visit with Physician, Nurse Practitioner or Clinical Psychologist – No Copay for Nurse or Lab Visit

Services include:

- Comprehensive Individual/Family Primary Care
- Urgent and Acute Care (e.g., flu, fever, viral infections, nausea, cuts, sprains/strains, headaches, rashes, etc.)
- Preventive Health (e.g., annual physicals)
- Mental/Behavioral Health
- Disease Management and Health Coaching

- Stress Management Counseling
- Smoking Cessation Counseling
- Wellness Education/Support
- Referrals to Specialists
- Vaccinations, Injections and Laboratory Services

Services available to members ages 6 months through adult

24/7 National Virtual Visits (also known as "telehealth"): While we encourage you to contact and utilize the El Paso County Employee Health Centers and onsite medical providers during regular business hours, El Paso County Medical Plan participants have 24/7 after-hours access to visit with a Board-Certified provider using a telephone, tablet or computer. Premise National Virtual Health visits can be performed by phone or video and are available anywhere in the United States. No appointment is needed. National Virtual Visits will be accessed by the My Premise Health app (available on Apple Store and Google Play) or at mypremisehealth.com. Telehealth visits are ideal for after-hours non-emergency medical issues and conditions such as cold, cough, flu, earache, sinus infection, sore throat, fever, headache, backache, allergies and nausea. In addition to Virtual Primary/Acute Care services, you can also schedule convenient Virtual Behavioral Health visits via the My Premise Health app, at mypremisehealth.com or by scheduling a Virtual Behavioral Health appointment with a Premise Member Engagement Specialist at (877) 272-0813.

Summary of El Paso County Medical Benefits

Pre-Medicare Eligible Medical Plan – UMR

The EPC Medical Plan is an Exclusive Provider Organization (EPO) Plan

Provider Directory can be found at: umr.com - UnitedHealthcare Choice Plus Network

Benefits	In-Network Benefits Only
Annual Plan Deductible – Individual / Family Maximum	\$2,000 / \$4,000
Annual Out-Of-Pocket Maximum* - Individual / Family	\$3,000 / \$7,000
Coinsurance	75% Plan Pays / 25% Member Pays
Annual Limit	Unlimited
Premise Health Centers - Office Visit	\$10 Copay for Physician, Nurse Practitioner, Psychologist Visit \$0 Copay for Preventive Care Visit \$0 Copay for Condition Management Nurse Visit \$0 Copay for RYP program related follow-up Visits
Primary Care Physician (PCP) Office Visit	\$50 Copay
Specialist Office Visit	\$50 Copay
Preventive Care Visit	\$0 Copay
Outpatient Short-Term Rehabilitation Therapy Services	\$20 Copay (60 days combined maximum per calendar year)
Chiropractic Services	\$20 Copay (24 visit maximum per calendar year)
Urgent Care / Emergency Room	\$100 Copay / \$200 Copay
Ambulance	Plan Pays 75% After Deductible
Outpatient Mental Disorders and Substance Abuse Treatment	\$10 Copay
Advanced Radiology (ex. MRI, CT Scan, CAT, PET, etc)	Plan Pays 75% - No Deductible Plan Pays 100% with Referral from Employee Health Center for Diagnostic Tests
Outpatient Facility Services - Per Admission**	\$250 Copay then Plan Pays 75% - No Deductible
Hospital Inpatient - Per Admission**	\$500 Copay then Plan Pays 75% After Deductible

* Deductibles, copayments and amounts over the allowable charge do not apply toward the out-of-pocket maximum

** **SurgeryPlus** offers waived deductible and coinsurance for approved, non-emergent surgical procedures (see page 9 for more details)

Express Scripts Prescription Plan

Prescription Plan is included with Medical Plan enrollment

Formulary and Provider Directory: www.express-scripts.com[†]

Prescription Plan Tiers	Retail 30 Day Supply	Retail or Mail Order Up to 90 Day Supply	Accredo Specialty 30 Day Supply
First Tier (Generic)	\$6.00	\$15.00	
Second Tier (Preferred Brand)	\$30.00	\$75.00	
Third Tier (Non-Preferred Brand)	\$50.00	\$125.00	
Fourth Tier (Preferred Specialty) ^{††}			\$100.00
Fifth Tier (Non-Preferred Specialty) ^{††}			\$200.00

[†] This link includes standard information about the network and formulary provided by Express Scripts. It does not account for any El Paso County plan specific inclusions, exclusions, step therapy requirements, prior authorization, etc.

^{††} \$2,500 Out-of-Pocket Maximum

Reach Your Peak Wellness Program: Reach Your Peak (RYP) Wellness Program enrollment and RYP Health Reimbursement Account (HRA) will terminate and HRA funds will be forfeited effective the date the retiree is Medicare eligible. Retirees with HRA balances remaining at the time they become Medicare eligible have a 3-month runout period after the HRA termination date to submit claims to Employee Benefits Corporation (EBC) for services received prior to the termination date.

For questions on the RYP program, e-mail reachyourpeakepc@elpasoco.com or call (719) 520-7420 option 4.

Summary of El Paso County Medical Benefits

Medicare Eligible Humana Medicare Advantage Plan Administered by Retiree First

Contact Retiree First with any medical plan questions at (719) 249-7788 (TTY 711) or Toll Free at (855) 531-8844 (TTY 711)

The Medicare Advantage Plan can be used anywhere Medicare is accepted

Member must be enrolled in Medicare Part A and Part B

Humana will act as your primary insurance for Medical. (You will no longer need your Medicare Card; please put this somewhere safe.)

The Pre-Medicare Eligible Plan will terminate effective the date the retiree or spouse is Medicare eligible. The retiree may elect to continue coverage for the retiree or spouse through the Medicare Eligible Plan. Enrollees of the Medicare Eligible Plan must be enrolled in and maintain enrollment in Medicare Part A and Part B. Any lapse in Medicare Part A and Part B coverage will forfeit/terminate your Medical Insurance. Enrollees of the Medicare Eligible Plan cannot be enrolled in another Individual Medicare Advantage (MA), Medicare Advantage Prescription Drug Plan (MAPD) or Individual Part D Prescription Drug Plan (PDP) at the same time as the MAPD group plan through El Paso County. Other coverage will forfeit/terminate your Medical Insurance.

Benefits	Medicare Providers
Annual Plan Deductible, Part A	\$250
Coinsurance, Part B	96% Plan Pays / 4% Member Pays
Annual Out-Of-Pocket Maximum*, Part B	\$2,250
Premise Health Centers - Office Visit	\$10 Copay for Physician, Nurse Practitioner, Psychologist Visit \$0 Copay for Preventive Care Visit \$0 Copay for Condition Management Nurse Visit
Preventive Services	Covered 100%
Primary Care Physician (PCP) Office Visit	96% Plan Pays / 4% Member Pays
Specialist Office Visit	
Diagnostic Procedure or Test	
Outpatient Services	
Advanced Imaging (MRI, CT, PET)	
Rehabilitation Therapies (Occupational, Physical, Speech)	
Urgent Care	
Ambulance Services	96% Plan Pays / 4% Member Pays per date of service Limited to Medicare-covered transportation
Emergency Care	96% Plan Pays / 4% Member Pays If admitted to hospital, see Inpatient Services
Inpatient Services	Covered 100% after combined Annual Deductible per admission
Lab Services	Covered 100%
Annual Wellness Visit	Covered 100%

* Part D Pharmacy, Extra Services and the Plan Premium do not apply toward the out-of-pocket maximum

Humana Medicare Part D Prescription Plan Administered by Retiree First

Contact Retiree First with any prescription plan questions at (719) 249-7788 (TTY 711) or Toll Free at (855) 531-8844 (TTY 711)

Prescription Plan is included with Medical Plan enrollment

Annual Out-Of-Pocket Maximum	\$2,500		
Prescription Plan Tiers	Retail 30 Day Supply	Retail or Mail Order Up to 90 Day Supply	Specialty 30 Day Supply
First Tier (Generic)	\$6.00	\$15.00	
Second Tier (Preferred Brand)	\$30.00	\$75.00	
Third Tier (Non-Preferred Brand)	\$50.00	\$125.00	
Specialty Drugs			\$100.00

Reach Your Peak (RYP) Wellness Program: Medicare-eligible retirees and their spouses are not eligible for RYP enrollment.

Note: RYP enrollment and RYP Health Reimbursement Account (HRA) will terminate and HRA funds will be forfeited effective the date the retiree is Medicare eligible. Retirees with HRA balances remaining at the time they become Medicare eligible have a 3-month runout period after the HRA termination date to submit claims to Employee Benefits Corporation (EBC) for services received prior to the termination date.

This is only a summary of benefits. Should there be differences between this summary and the plan documents, contracts or policies, the plan documents, contract, and/or policies will govern.

Summary of El Paso County Dental Benefits

- There are two (2) Dental Options to choose from through Delta Dental – Low and High
- To search for a Delta Dental In-Network provider please visit www.deltadentalco.com

Delta Dental LOW OPTION PPO Plan				
Maximum Benefit Calendar Year Maximum	\$1,000 per person, per calendar year			
Calendar Year Deductible Applies to Basic and Major	Individual Deductible - \$50 per person Family Deductible - \$150 maximum			
Benefits		PPO Dentist	Premier Dentist*	Out-of-Network Dentist**
Diagnostic and Preventive Services	Oral Exams and Cleanings, Sealants, Fluoride (for children) and X-rays	100%	80%	80%
Basic Services	Fillings, Simple Extraction, Oral Surgery	80%	60%	60%
Major Services	Endodontics/Periodontics, Crowns, Dentures, Bridges	50%	30%	30%
Orthodontic Services	Not Covered			

This is a Maximum Allowable Charge (MAC) PPO plan. The MAC plan is a feature of Delta Dental that will help you save on out-of-pocket costs. While you may visit any licensed dentist you will receive the greatest savings when you choose a PPO dentist.

* Premier Dentist – The member will be responsible for the difference between the PPO dentist's Allowable Fee and the fee from the Premier Maximum Plan Allowance (MPA)

** Out-of-Network Dentist – The member will be responsible for the difference between the PPO dentist's Allowable Fee and the full fee charged by the dentist

Delta Dental HIGH OPTION PPO Plus Premier Plan				
Maximum Benefit Calendar Year Maximum	\$1,500 per person, per calendar year			
Calendar Year Deductible Applies to Basic and Major	Individual Deductible - \$25 per person PPO Network / \$50 per person Premier/Out-of-Network Family Deductible - \$75 PPO Network maximum / \$150 Premier/Out-of-Network maximum			
Benefits		PPO Dentist [†]	Premier Dentist ^{††}	Out-of-Network Dentist ^{†††}
Diagnostic and Preventive Services	Oral Exams and Cleanings, Sealants, Fluoride (for children) and X-rays	100%	100%	100%
Basic Services	Fillings, Simple Extraction, Oral Surgery, Endodontics/Periodontics	90%	70%	70%
Major Services	Crowns, Dentures, Bridges	60%	30%	30%
Orthodontic Services	Covered regardless of age \$1,500 lifetime maximum	50%	50%	50%

This is a Delta Dental PPO Plus Premier plan. You and your family members may visit any licensed dentist, but will enjoy the greatest out-of-pocket savings if you see a Delta Dental PPO dentist.

[†] PPO Dentist – Payment is based on the PPO dentist's Allowable Fee, or the actual fee charged, whichever is less

^{††} Premier Dentist – Payment is based on the Premier Maximum Plan Allowance (MPA), or the fee actually charged, whichever is less

^{†††} Out-of-Network Dentist – Payment is based on the Out-of-Network Maximum Plan Allowance (MPA); members are responsible for the difference between the out-of-network MPA and the full fee charged by the dentist

Summary of El Paso County Vision Benefits

EyeMed "Access" Vision Plan Find a provider at www.eyemed.com			
Benefits	Frequency	In-Network	Out-of-Network (Reimbursement)
Exam	Once Every 12 Months	\$10 Copay	Up to \$35
Standard Plastic Lenses Single Vision Bifocal Trifocal Lenticular Standard Progressive Lens Premium Progressive Lens	Once Every 12 Months	\$25 Copay \$25 Copay \$25 Copay \$25 Copay \$25 Copay \$25 Copay, 80% of Charge less \$120 Allowance	Up to \$40 Up to \$60 Up to \$80 Up to \$80 Up to \$60 Up to \$60
Contact Lenses Conventional Disposable Medically Necessary	Once Every 12 Months	\$0 Copay, \$150 Allowance, 15% off balance over \$150 \$0 Copay, \$150 Allowance \$0 Copay, Paid in Full	Up to \$105 Up to \$105 Up to \$200
Frames	Once Every 24 Months	\$0 Copay, \$150 Allowance, 20% off balance over \$150	Up to \$45

SurgeryPlus for Pre-Medicare Eligible EPO Medical Plan

SurgeryPlus is a supplemental benefit that offers higher quality, a great experience and waived deductible and coinsurance for non-emergent surgical procedures. If you are enrolled in the El Paso County EPO Medical Plan, you are automatically enrolled in this benefit at **no additional cost** to the member. To use this benefit, you must start by contacting SurgeryPlus.

The benefits of using SurgeryPlus include:

- **High-Quality:** SurgeryPlus has already located and rigorously screened the area's top-quality surgeons. Before being allowed into the network, surgeons are required to meet various qualifications including board certification, fellowship training, minimum volume thresholds, background checks and more.
- **A Better Experience:** A dedicated Care Advocate will manage the entire procedure process for you, including locating a surgeon, scheduling appointments, transferring medical records and arranging all logistics. You will work with the same Care Advocate through the entire process, so they will know all the details of your case and ensure your top satisfaction.
- **Lower Costs:** Because of lower contracted rates, El Paso County will waive your deductible and coinsurance when you use SurgeryPlus. You could save thousands on your procedure!

Hundreds of procedures are covered. Below is a list of the main categories; however, call SurgeryPlus to inquire about a specific procedure and a Care Advocate will assist you with your needs and questions.

- Orthopedics
- Cardiac
- Ear, Nose, & Throat (ENT)
- Pain Management
- Spine
- General Surgery
- GYN

For more information: Online: epcepo.surgeryplus.com | Phone: 1-833-814-5702

SleepCharge for Pre-Medicare Eligible EPO Medical Plan

The El Paso County EPO Medical Plan has partnered with NoxHealth to bring you the SleepCharge Program for Sleep Apnea.

This benefit provides:

- Medical experts who will help you assess your sleep health
- A personalized treatment plan, including all equipment and supplies
- Dedicated Care Managers, always available to support you
- The latest sleep health education and advice

Eligibility: Retirees and their adult dependents **under age 64** enrolled on the El Paso County EPO Medical Plan are eligible.

Cost: All costs for the program are covered by the El Paso County EPO Medical Plan.

Assess your sleep health now at epcmed.fusionhealth.com/sleep

For more information: Online: sleepcharge.com/epcmed | Phone: 1-877-615-7257 | E-mail: sleep@noxhealth.com

2022 Monthly Benefit Plan Costs

	Retiree Only or Spouse Only	Retiree + Spouse	Retiree + Children	Retiree + Family
Pre-Medicare UMR EPO Medical Plan	\$ 822.54*	\$ 1,581.15*	\$ 1,505.12*	\$ 2,222.32*
Medicare Eligible Retiree First/Humana MAPD Plan**	\$ 207.38*	N/A	N/A	N/A
Delta Dental PPO Dental Plan Low Option	\$ 21.04	\$ 35.36	\$ 54.69	\$ 79.96
Delta Dental PPO Dental Plan High Option	\$ 44.22	\$ 74.28	\$ 114.95	\$ 168.01
EyeMed Vision Plan	\$ 7.60	\$ 14.44	\$ 15.19	\$ 22.33

*Medical Plan costs do not include subsidy amounts – see below and page 11 for subsidy schedules

**Medicare eligible retirees/spouses enrolled in the Retiree First/Humana MAPD Plan must also be enrolled in Medicare Part A and Part B

2022 Retiree Medical Plan Subsidy Schedules

Retirement 2004 through 2022 Pre-Medicare Eligible UMR EPO Medical Plan			
Years of Service	Monthly Plan Cost	County Subsidy	Retiree Contribution
Retiree Only	\$ 822.54		
Less than 8 Years		\$ 0.00	\$ 822.54
8-14 Years		\$ 452.40	\$ 370.14
15-19 Years		\$ 616.91	\$ 205.63
20+ Years		\$ 822.54	\$ 0.00
Retiree + Spouse	\$ 1,581.15		
Less than 8 Years		\$ 0.00	\$ 1,581.15
8-14 Years		\$ 452.40	\$ 1,128.75
15-19 Years		\$ 616.91	\$ 964.24
20+ Years		\$ 822.54	\$ 758.61
Retiree + Child(ren)	\$ 1,505.12		
Less than 8 Years		\$ 0.00	\$ 1,505.12
8-14 Years		\$ 452.40	\$ 1,052.72
15-19 Years		\$ 616.91	\$ 888.21
20+ Years		\$ 822.54	\$ 682.58
Retiree + Family	\$ 2,222.32		
Less than 8 Years		\$ 0.00	\$ 2,222.32
8-14 Years		\$ 452.40	\$ 1,769.92
15-19 Years		\$ 616.91	\$ 1,605.41
20+ Years		\$ 822.54	\$ 1,399.78

Medicare-Eligible Retiree First/Humana MAPD Plan			
Years of Service	Monthly Plan Cost	County Subsidy	Retiree Contribution
Retiree Only	\$ 207.38		
Less than 8 Years		\$ 0.00	\$ 207.38
8-14 Years		\$ 114.06	\$ 93.32
15-19 Years		\$ 155.54	\$ 51.84
20+ Years		\$ 207.38	\$ 0.00

2022 Retiree Medical Plan Subsidy Schedules

Elected and Appointed Officials Pre-Medicare Eligible UMR EPO Medical Plan			
Years of Service	Monthly Plan Cost	County Subsidy	Retiree Contribution
Retiree Only			
	\$ 822.54		
Less than 4 Years		\$ 0.00	\$ 822.54
4-7 Years		\$ 411.27	\$ 411.27
8+ Years		\$ 822.54	\$ 0.00
Retiree + Spouse			
	\$ 1,581.15		
Less than 4 Years		\$ 0.00	\$ 1,581.15
4-7 Years		\$ 411.27	\$ 1,169.88
8+ Years		\$ 822.54	\$ 758.61
Retiree + Child(ren)			
	\$ 1,505.12		
Less than 4 Years		\$ 0.00	\$ 1,505.12
4-7 Years		\$ 411.27	\$ 1,093.85
8+ Years		\$ 822.54	\$ 682.58
Retiree + Family			
	\$ 2,222.32		
Less than 4 Years		\$ 0.00	\$ 2,222.32
4-7 Years		\$ 411.27	\$ 1,811.05
8+ Years		\$ 822.54	\$ 1,399.78

Elected and Appointed Officials Medicare-Eligible Retiree First/Humana MAPD Plan			
Years of Service	Monthly Plan Cost	County Subsidy	Retiree Contribution
Retiree Only			
	\$ 207.38		
Less than 4 Years		\$ 0.00	\$ 207.38
4-7 Years		\$ 103.69	\$ 103.69
8+ Years		\$ 207.38	\$ 0.00

Health Care Reform Notice

Grandfathered Health Plan: El Paso County believes this EPO Medical Health Plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your Plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the plan administrator at El Paso County Employee Benefits Division (719) 520-7420. You may also contact the U.S. Department of Health and Human Services at www.healthcare.gov.

This is only a summary of benefits. For further plan details, refer to the Summary Plan Descriptions (SPDs) found on elpasoco.com.
Should there be differences between this summary and the plan documents, contracts or policies, the plan documents, contract and/or policies will govern.
We make every effort to make sure that the textual information provided is accurate and correct but occasionally an error can occur.
El Paso County reserves the right to correct any typographical errors and/or inaccuracies contained in printed materials at any time without prior notification.

Frequently Asked Questions

If I am not making any changes during Open Enrollment, do I need to submit an enrollment form?

No. You should only complete the enrollment form if you wish to make changes to your benefits or dependents or need to update your information.

How do I enroll/re-enroll in the Reach Your Peak (RYP) Wellness Program?

RYP enrollment is available to Pre-Medicare Eligible retirees and their spouses enrolled in the El Paso County EPO Medical Plan. RYP enrollment is held annually in conjunction with Open Enrollment. **The 2022 RYP enrollment period begins October 20, 2021 and ends November 3, 2021.** During that period, register at or log on to www.ReachYourPeakEPC.com from any computer or mobile device and then follow on-screen instructions to schedule a 2022 Health Consultation at an El Paso County Employee Health Center. Health Consultation appointments must be scheduled during the enrollment period. A confirmation e-mail will be sent to you with your appointment details within minutes of completing the RYP enrollment process. See the enclosed RYP flyer for more information.

What if I experience a Qualifying Life Event in 2022?

If you have a qualifying life event as defined by the IRS (i.e., birth, adoption, marriage/civil union, divorce) you can make changes to your benefits by submitting a Retiree Benefit Election Form to the El Paso County Employee Benefits Division **within 31** days of the life event effective date. Documentation will be required for the life event and, if adding a dependent, proof of relationship. If there is no qualifying life event, changes can only be made at annual open enrollment.

If you become Medicare eligible due to disability and are enrolled on the El Paso County Medical Plan, you **must notify** the Employee Benefits Division of your Medicare-eligibility and submit a Retiree Benefit Election Form **within 31** days of the effective date of Medicare coverage. See below "I am (or my dependent spouse is) turning 65 this year. What do I need to do?" for more information about Medicare eligibility.

I am (or my dependent spouse is) turning 65 this year. What do I need to do?

The Pre-Medicare Eligible Medical and Prescription Plans will terminate effective the date the retiree or spouse is Medicare eligible.

Medicare enrollment starts three (3) months before you turn 65. You should review materials from the Social Security Administration and enroll in the appropriate plan coverage. Around this time, you will also receive a Retiree Benefit Election Form with a letter from El Paso County providing instructions for continuing or waiving medical plan coverage on the Medicare Eligible Medical and Prescription Plans.

If you wish to waive Medical Plan coverage due to Medicare eligibility: You must complete a Retiree Benefit Election Form and provide proof of Medicare coverage and submit to the Employee Benefits Division by the end of the month prior to you turning 65.

If you wish to continue your Medical Plan coverage with El Paso County:* You will have the opportunity to enroll in the County's Medicare-eligible plan, the Humana Medicare Advantage Prescription Drug (MAPD) Plan administered by Retiree First. **You must enroll in Medicare Part A and Part B in order to enroll in the Humana MAPD Plan.** You must (1) complete an El Paso County Retiree Benefit Election Form and elect the Medicare Eligible Retiree First/Humana MAPD Plan, (2) complete a Retiree First Medicare Advantage Prescription Drug Plan Individual Enrollment Form, and (3) provide proof of Medicare Part A and Part B coverage. The forms must be submitted to the Employee Benefits Division no later than the end of the month prior to you turning 65.

When this coverage is effective, you will only need your Humana MAPD ID Card for Medical and Prescription coverage. Humana will act as your primary insurance for medical and you will not need to use your Medicare ID card. Keep your Medicare ID card somewhere safe.

Retiree First will reach out to you with a "Welcome" call and will send you additional plan information.

*Enrollment onto the Humana MAPD plan is dependent on the receipt of your Retiree Benefit Election Form, Retiree First Enrollment Form, and Medicare Part A and Part B enrollment. Enrollees of the Medicare Eligible Plan must be enrolled in and maintain enrollment in Medicare Part A and Part B. Medicare Part A and Part B premiums are the enrollee's responsibility and are typically deducted from Social Security benefits. Any lapse in Medicare Part A and Part B coverage will forfeit/terminate your Medical Insurance. Enrollees of the Medicare Eligible Plan cannot be enrolled in another Individual Medicare Advantage (MA), Medicare Advantage Prescription Drug Plan (MAPD) or Individual Part D Prescription Drug Plan (PDP) at the same time as the MAPD group plan through El Paso County. **Other coverage will forfeit/terminate your Medical Insurance.**

If I waive a benefit, can I pick it back up in the future?

If at any point you waive a benefit, you will not have the option of electing to have that benefit in the future.

Who do I contact if I did not get or cannot find my insurance card(s)?

Please refer to the Contact List on page 4 and call the member services number for the plan which you are seeking an insurance card.