

Welcome to your benefits.

2025



Open Enrollment begins May 1st and ends Friday May 16th
New Hires: Enroll within 30 days of hire

LITTLETON
PUBLIC 
SCHOOLS

Agenda – Today you'll learn about:

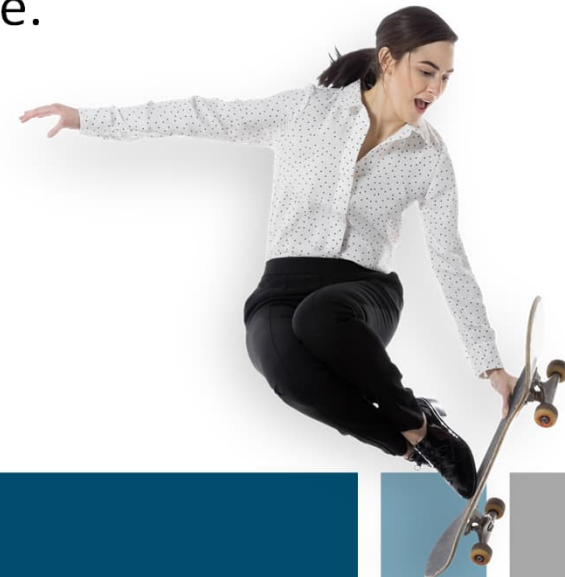
- Benefits eligibility
- Your benefit options
- Health plan costs
- How to enroll
- Questions & answers



Introduction

We have some *exciting* updates for the new plan year:

- Cigna is the new carrier for accident, hospital indemnity, and critical illness.
 - *New!* Enhanced plan designs with lower premiums!
 - *New!* Voluntary benefits enrollment website.



Your 2025 Benefits

What's new for 2025?

Medical

- Medical premiums increasing by 4% for Cigna plans, and by 12.4% for Kaiser plans

Supplemental Health Benefits

- Expanded Hospital coverage for newborns, observation, mental health and substance abuse stays
- Critical illness benefit now includes a severe infectious disease and skin cancer benefit
- All three plans include a \$50 wellness benefit for routine medical, dental, vision preventive visits, or health screening tests, payable separately if you enroll in multiple plans!
- 5% premium reduction for Critical Illness and Hospital Indemnity coverage!

Pet Insurance

- New plan designs for 2025, called [My Pet Protection Choice](#)
- All existing enrollees will be offered new coverage at your individual policy renewal date

Flexible Spending Accounts & Health Savings Accounts

- HSA limits increased to \$4,300 for single and \$8,550 for family
- FSA limits increased to \$3,300 for Healthcare accounts

Your 2025 Benefits

What's NOT changing?

Same core benefits offered:

Healthcare Insurance

4 Medical Plans
2 Cigna - 2 Kaiser

3 Dental Plans

Vision Plan

Life Insurance

Basic Term Life

Basic AD&D

Dependent Life

Will Preparation and
Funeral Planning

Beneficiary Assist
Counseling

Financial Savings

Flexible Spending
Accounts

Health Savings
Accounts

Retirement Plans
403(b) and 457

Additional Benefits

Employee Assistance
Program

Accident

Hospital

Critical Illness

Pet Insurance

Travel Assistance

Your 2025 Benefits

Benefits eligibility – Who can enroll

Eligible Employees & Dependents:

- Employees regularly scheduled to work *20 hours or more per week*, or *0.5 FTE* in the case of licensed employees
- Your legal spouse or civil union partner, and dependent children up to age 26

Coverage time period: *July 1, 2025- June 30, 2026*

- New elections or benefit changes
- Changes must be updated through Employee Online and Cigna Voluntary Benefits site

Once you have enrolled, choices that are taken on a pre-tax basis will be in effect for 12 months unless you have a *qualifying life event*.

- If you have a qualifying event later in the year, you will have up to 31 days following the event to change your coverage:

Marriage

Birth

Adoption

Death

Spouse
coverage

Divorce

Your 2025 Benefits

Annual Enrollment guidelines

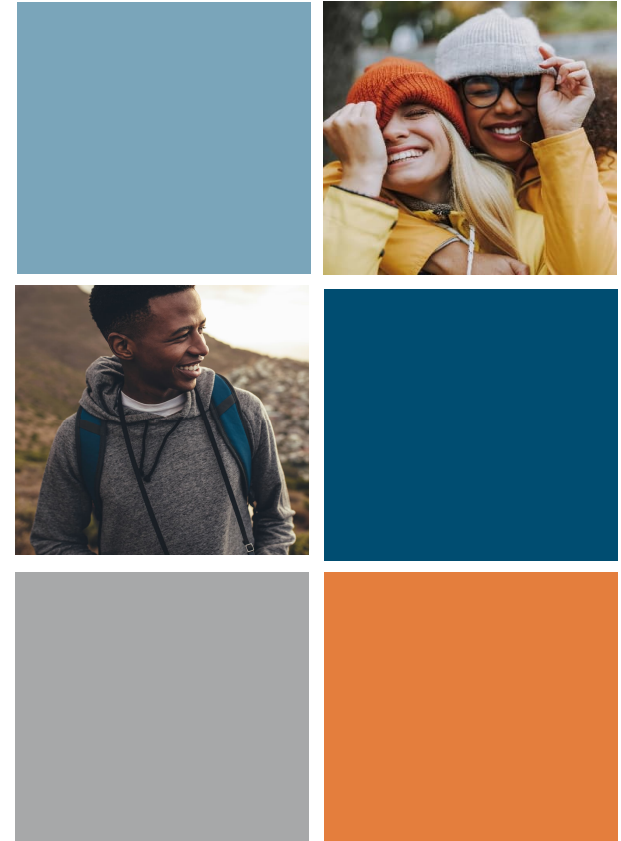
Active Enrollment: [ALL benefits](#)

- This year you **MUST** actively re-enroll your benefit selections: please review and re-approve your medical, dental, vision, and dependent life insurance coverage carefully.
- [Voluntary benefits will be through a new Cigna enrollment site.](#)
- Any selections you make will remain in effect for the next 12 months.
- If you'd like to participate in the Healthcare FSA or Dependent Care FSA plans you need elect pre-tax deduction every year.
- HSA contributions must be re-elected this year.



Health Benefits

Medical Plans



2025/2026 Cigna medical plans

Side-by-side plan comparison



	Cigna HDHP*		Cigna OAP	
	In-network	Out-of-network	In-network	Out-of-network
Annual deductible				
Per person/per family	\$2,500/\$5,000	Not Covered	\$1,750/\$3,500	\$3,500/\$7,000
Out-of-pocket maximum				
Per person/per family	\$4,000/\$8,000	Not Covered	\$4,500/\$9,000	\$9,000/\$18,000
Medical coverage				
Doctor's office visits	Ded.+20% coin.	Not Covered	\$25 copay	Ded.+40% coin.
Specialist visits	Ded.+20% coin.	Not Covered	\$50 copay	Ded.+40% coin.
Preventive care	Covered at 100%	Not Covered	Covered at 100%	Ded.+40% coin.
Telemedicine	Ded.+20% coin.	Not Covered	\$25 / \$50 copay	Not Covered
Outpatient surgery	Ded.+20% coin.	Not Covered	Ded.+20% coin.	Ded.+40% coin.
Inpatient hospital	Ded.+20% coin.	Not Covered	Ded.+20% coin.	Ded.+40% coin.
Emergency room	In-Network Ded.+20% coinsurance		In-Network Ded.+20% coinsurance	
Labs and X-rays	Ded.+20% coin.	Not Covered	Ded.+20% coin.	Ded.+40% coin.
Retail prescription drugs (30-day supply)				
Generic	Ded.+\$15 copay	Not Covered	\$15 copay	Not Covered
Brand Formulary	Ded.+\$35 copay	Not Covered	\$35 copay	Not Covered
Non-formulary	Ded.+\$50 copay	Not Covered	\$50 copay	Not Covered
Specialty	Ded.+\$50 copay	Not Covered	\$50 copay	Not Covered
Mail-order prescription drugs (90-day supply)				
Generic	Ded.+\$30 copay	Not Covered	\$30 copay	Not Covered
Brand Formulary	Ded.+\$70 copay	Not Covered	\$70 copay	Not Covered
Non-formulary	Ded.+100 copay	Not Covered	\$100 copay	Not Covered

*HDHP plan deductibles and out-of-pocket maximums accumulate at the family level.
Deductibles and out-of-pocket maximums for both Cigna and Kaiser accumulate on a Plan Year basis: *July-June*

2025/2026 Kaiser medical plans

Side-by-side plan comparison



	Kaiser HDHP*		Kaiser HMO	
	In-network	Out-of-network	In-network	Out-of-network
Annual deductible				
Per person/per family	\$2,500/\$5,000	Not Covered	\$1,750/\$3,500	Not Covered
Out-of-pocket maximum				
Per person/per family	\$4,000/\$8,000	Not Covered	\$4,500/\$9,000	Not Covered
Medical coverage				
Doctor's office visits	Ded.+20% coin.	Not Covered	\$25	Not Covered
Specialist visits	Ded.+20% coin.	Not Covered	\$50	Not Covered
Preventive care	Covered at 100%	Not Covered	Covered at 100%	Not Covered
Telemedicine	Deductible	Not Covered	Covered at 100%	Not Covered
Outpatient surgery	Ded.+10% coin.**	Not Covered	\$500 copay**	Not Covered
Inpatient hospital	Ded.+20% coin.	Not Covered	Ded.+20% coin.	Not Covered
Emergency room	In-Network Ded.+20% coinsurance		In-Network Ded.+20% coinsurance	
Labs and X-rays	Ded.+20% coin.	Not Covered	Ded.+20% coin.	Not Covered
Retail prescription drugs (30-day supply)				
Generic	Ded.+\$20 copay	Not Covered	\$20	Not Covered
Brand Formulary	Ded.+\$40 copay	Not Covered	\$40	Not Covered
Non-formulary	Ded.+\$60 copay	Not Covered	\$60	Not Covered
Specialty	Ded.+20% coin. up to \$250	Not Covered	20% coin. up to \$250	Not Covered
Mail-order prescription drugs (90-day supply)				
Generic	Ded.+\$40 copay	Not Covered	\$40	Not Covered
Brand Formulary	Ded.+\$80 copay	Not Covered	\$80	Not Covered
Non-formulary	Ded.+\$120 copay	Not Covered	\$120	Not Covered

*HDHP plan deductibles and out-of-pocket maximums accumulate at the family level.

**If performed at a Kaiser Ambulatory Surgery Center; reduces to Ded.+20% coinsurance if at an outpatient hospital.

Medical – A closer look at the HDHP and HSA

When you enroll in the High Deductible Health Plan (HDHP), you are eligible to receive a company contribution to help pay for out-of-pocket expenses, including qualified medical, dental and vision expenses.

LPS will contribute:

- \$1,250 per year for single coverage
- \$1,700 per year if covering a spouse or child(ren)
- You can contribute up to the annual IRS limit of \$4,300 for individual or \$8,550 for family coverage. The maximums include both your contributions and your employer's contributions
- If you are 55 or older, you can contribute an additional \$1,000 per year



HSA eligible plans – Advantages of contributing

- ✓ Tax advantages



Triple Tax Advantage:

Health Savings Account contributions are pre-tax, any distributions for qualified expenses are tax free, and interest earnings are tax free.

- ✓ Balances roll over



- ✓ Contributions from you, employer, family member



Health plan costs

2025/2026 monthly contributions

Cigna Medical	Cigna Medical		
	OAP	HDHP with HSA	HDHP Cost after District HSA Contributions
Employee Only	\$87.39	\$69.37	(\$34.80)
Employee + Spouse	\$1,028.04	\$837.58	\$695.91
Employee + Child(ren)	\$930.58	\$757.82	\$616.15
Family	\$1,486.71	\$1,196.55	\$1,054.88
Kaiser Medical	Kaiser Medical		
	DHMO	HDHP with HSA	HDHP Cost after District HSA Contributions
Employee Only	\$59.34	\$49.87	(\$54.30)
Employee + Spouse	\$764.30	\$647.83	\$506.16
Employee + Child(ren)	\$692.65	\$586.68	\$445.01
Family	\$1,061.18	\$901.23	\$759.56

Medical plans – Comparing the costs

	HDHP w/ \$1,250 HSA Contribution from LPS	Copay Plans
Minimal Care-users: <ul style="list-style-type: none"> - Preventive Care - 2 office visits - 2-4 generic short-term Rx (antibiotic) 	Average out of pocket costs less than \$1,000	Average out of pocket costs between \$30 - \$500
Average Care-users: <ul style="list-style-type: none"> - Preventive Care - Planned procedure - Urgent Care visit(s) - ER visit - prescriptions 	Average out of pocket costs between \$1,000 - \$3,600	Average out of pocket costs between \$500 - \$4,000 (deductible)
Frequent Care-users: <ul style="list-style-type: none"> - Preventive Care - Chronic conditions <ul style="list-style-type: none"> - Multiple maintenance Rx - Catastrophic event 	Average out of pocket costs \$2,500 to \$4,000 (deductible/OOPM met)	Average out of pocket costs between \$1,650 to \$4,500 (deductible met)
Your Annual Premiums:	\$832 through Payroll Deduction* + \$1,250 HSA Contribution from LPS	\$1,049 through Payroll Deduction \$0 HSA Contribution from LPS

*Illustrative contributions and plan expenses used for these comparisons; actual plan expense may vary depending on the actual plan selected and provider billed services.

Member Experience – Minimal Care user



Jessica – Generally healthy, single, in her late 20s

Here's what Jessica anticipates her expenses to be in 2025, based on her care in 2024:

- 2 PCP doctor visits, one is a preventive check-up
- 6 prescriptions: 4 generic, 1 Brand, 1 Non-Preferred Brand

HDHP Plan

Medical + Rx

Medical: \$300
Prescription Drugs: \$405
Total: \$705

HSA Dollars

LPS Contribution: \$1,250
Total left in HSA: \$545

Jessica's Net
Out-of-Pocket
Health Care Costs
= \$0
(Used \$705 from HSA)

Premium Contribution:
\$832

Total Cost to Jessica
= \$832

Savings
of \$412

Copay Plan

Medical + Rx

Medical: \$50 (\$25 x 2 visits)
Prescription Drugs: \$145 (4 x \$15 + \$35 + \$50)
Total: \$195

Jessica's
Out-of-Pocket
Health Care Costs
= \$195

Premium Contribution:
\$1,049

Total Cost to Jessica
= \$1,244
(\$195 + \$1,049)

Member Experience – Frequent Care-user



Matthew – Chronic Condition (well-managed)

Here's what Matthew anticipates his expenses to be in 2025, based on his care in 2024:

- 3 doctor visits – 2 specialist visits – 1 PCP
- 6 monthly prescriptions: 4 generic, 2 Brand

HDHP Plan

Medical + Rx

Medical: \$720
Prescription Drugs: \$3,280
(ded./OOPM met)

Total: \$4,000

HSA Dollars

LPS Contribution: \$1,250

Total left in HSA: \$0

Matthew's
Out-of-Pocket
Health Care Costs
= \$2,750
(Used \$1,250 from HSA)

Premium Contribution:
\$832

Total Cost to Matthew
= \$3,582

(\$832 + \$2,750)

Copay Plan

Medical + Rx

Medical: \$125 (\$50 x 2 + \$25)
Prescription Drugs: \$1,560
(\$15 copay x 4, \$35 copay x 2 = \$130 x 12 months)

Total: \$1,685

Matthew's
Out-of-Pocket
Health Care Costs
= \$1,685

Premium Contribution:
\$1,049

Total Cost to
Matthew = \$2,734

(\$1,049 + \$1,685)

Savings of
\$848

Member Experience – Covering your family



Sophia – Expectant mother, enrolled with Employee + Child coverage

Sophia is expecting another baby soon and trying to decide which medical plan to select for her upcoming maternity stay:

- Inpatient hospital stay
- 2 Pediatrician visits to treat illness/ear infection later in the year
- Generic medications

HDHP Plan

Medical + Rx

Medical: \$4,000 hospital stay
Pediatrician visits: \$200
Prescription Drugs: Covered
Total: \$4,200

HSA Dollars

LPS Family Contribution: \$1,700
Total left in HSA: \$0

Sophia's
Out-of-Pocket
Health Care Costs
= \$2,500
(Used \$1,700 from HSA)

Premium Contribution:
\$9,094

Total Cost to Sophia
= \$11,594

(\$9,094 + \$2,500)

Savings of
\$2,118

Copay Plan

Medical + Rx

Medical: \$3,600 hospital stay (deductible, plus 20%)
Pediatrician visits: \$50 (\$25 copay x 2)
Prescription Drugs: \$30, (\$15 copay x 2)
Total: \$3,680

Sophia's
Out-of-Pocket
Health Care Costs
= \$3,680

Premium Contribution:
\$11,167

Total Cost to Sophia
= \$13,712

(\$10,032 + \$3,680)

Cigna One Guide

After enrollment, personalized support helps you:

- Resolve health care questions and issues
- Save time and money
- Get the most out of your plan(s)
- Find in-network providers, hospitals and labs
- Get cost estimates
- Understand your bills
- Navigate the health care system



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After you've enrolled, access Cigna One Guide® the way that's most convenient to you.



myCigna® website or app¹



Live chat



Phone

Virtual care¹



Cigna Healthcare has partnered with MDLIVE® to offer a comprehensive suite of convenient virtual care options — available by phone or video whenever it works for you.

Primary Care

Preventive care, routine care and specialist referrals

- Preventive care checkups/ wellness screenings available at no additional cost²
- Prescriptions available through home delivery or at local pharmacies, if appropriate
- Receive orders for biometrics, blood work and screenings at local facilities³

Behavioral Care

Talk therapy and psychiatry from the privacy of home

- Access to psychiatrists and therapists
- Schedule an appointment that works for you
- Option to select the same provider for every session
- Care for issues such as anxiety, stress, grief and depression

Urgent Care

On-demand care for minor medical conditions

- On-demand 24/7/365, including holidays
- Care for hundreds of minor medical conditions
- A convenient and affordable alternative to urgent care centers and the ER
- Prescriptions available, if appropriate

Dermatology⁴

Fast, customized care for skin, hair and nail conditions — no appointment required

- Board-certified dermatologists review pictures and symptoms
- Care for common skin, hair and nail conditions including acne, eczema, psoriasis, rosacea, suspicious spots and more
- Diagnosis and customized treatment plan, usually within 24 hours

Cigna Healthcare Wellness Experience

How it works:

Reach your health goals while having fun. The Cigna HealthcareSM Wellness Experience puts powerful resources at your fingertips – at no additional cost to you.

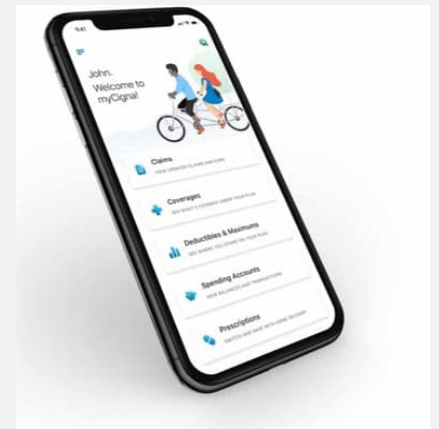
- Personalize your experience: Connect your activity tracker and set topics of interest.
- Complete a Health Check: Answer questions to get a health score and learn about possible risks.
- Track your Healthy Habits: Follow a healthy routine by taking small steps.
- Stay motivated: You can invite up to 10 friends and family members outside of work.
- Participate in fun challenges: Join coworkers and motivate each other to build new healthy habits.



myCigna.com

Your online home for assessment tools, plan management, medical updates and much more:

- Find in-network doctors, dentists and medical services
- View, print and email ID cards
- Review your coverage
- Manage and track claims, account balances and deductibles
- Compare cost and quality information for doctors and hospitals
- Access a variety of health and wellness tools and resources
- Receive alerts when new plan documents are available



 Download the myCigna® app and access your account.¹

Preventive Care



Many preventive services from in-network providers are covered 100% by your health plan.¹ That means you won't pay anything out of your own pocket.

Covered preventive care services can include, but are not limited to:¹

- Screenings for blood pressure, cholesterol and diabetes
- Screenings for colon/rectal cancer
- Mammograms and Pap tests
- PSA blood tests

1. Includes eligible in-network preventive care services. Some preventive care services may not be covered, including most immunizations for travel. Reference plan documents for a list of covered and non-covered preventive care service.



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Your Personal Health Team



When it comes to feeling better about your health, everyone has different needs. That's why we provide a designated personal team of health advocates to listen and help you find solutions.

- Address chronic conditions like diabetes, back pain, depression, arthritis, asthma or cardiac issues
- Partner one-on-one with a health advocate and take a more active role in your health
- Find help managing your care and get information about a variety of treatment options
- Get 24/7 support when you need help with things like your child's high fever or finding late-night medical treatment
- Know what to expect if you need to spend time in the hospital or require surgery
- Get answers to questions about your health plan

Health Information Line



Call the number on your
ID card, 24/7/365

- Offers access to a trained clinician¹ to help you determine when and where to get treatment for immediate health care needs
- Provides guidance and education about both specific health concerns and general health topics



Chat via myCigna.com[®] website or
app Mon-Fri 9:00 am – 8:00 pm EST²

- Provides suggestions for online tools or local resources to help support your physical and mental health needs
- Delivers access to audio health library (both in English and Spanish), as well as podcasts

2025 Medical & Rx Benefits with Kaiser Permanente

Custom Microsite for LPS:

<https://choose.kp.org/littletonps>



A different kind of care

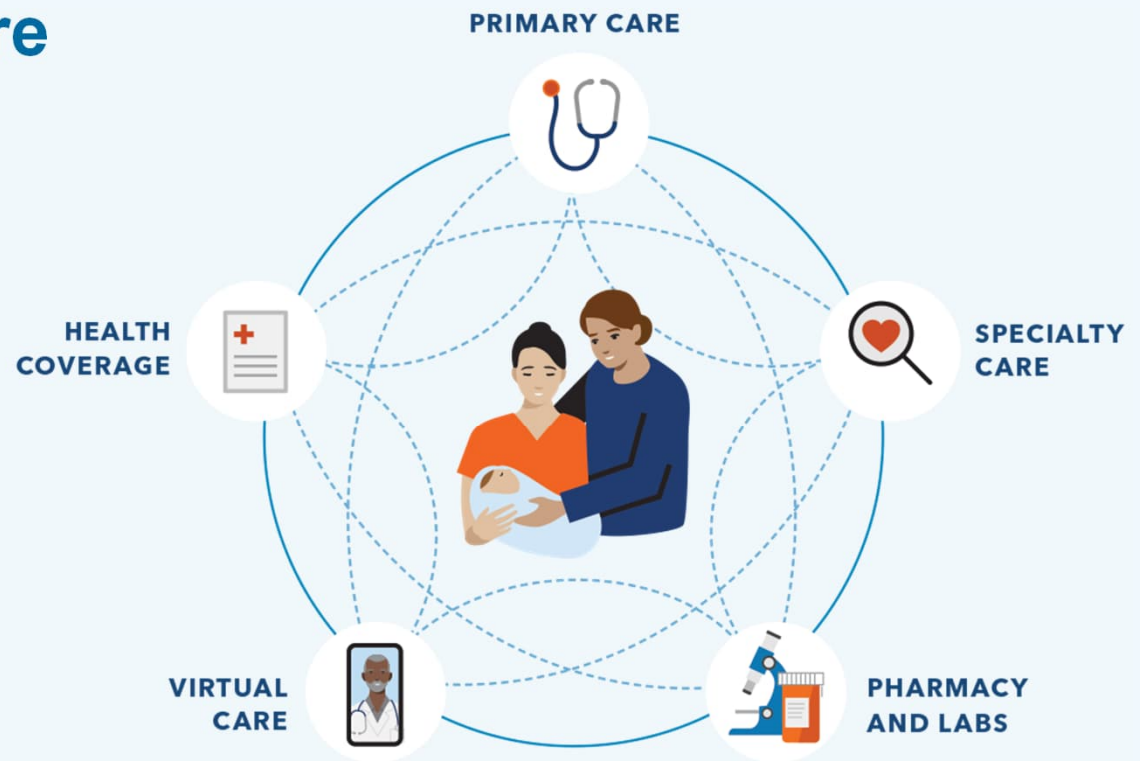
Your health care should make your life easier — with doctors, hospitals, and health plan benefits that are all connected and focused on providing you with exceptional care.

With Kaiser Permanente, you get:

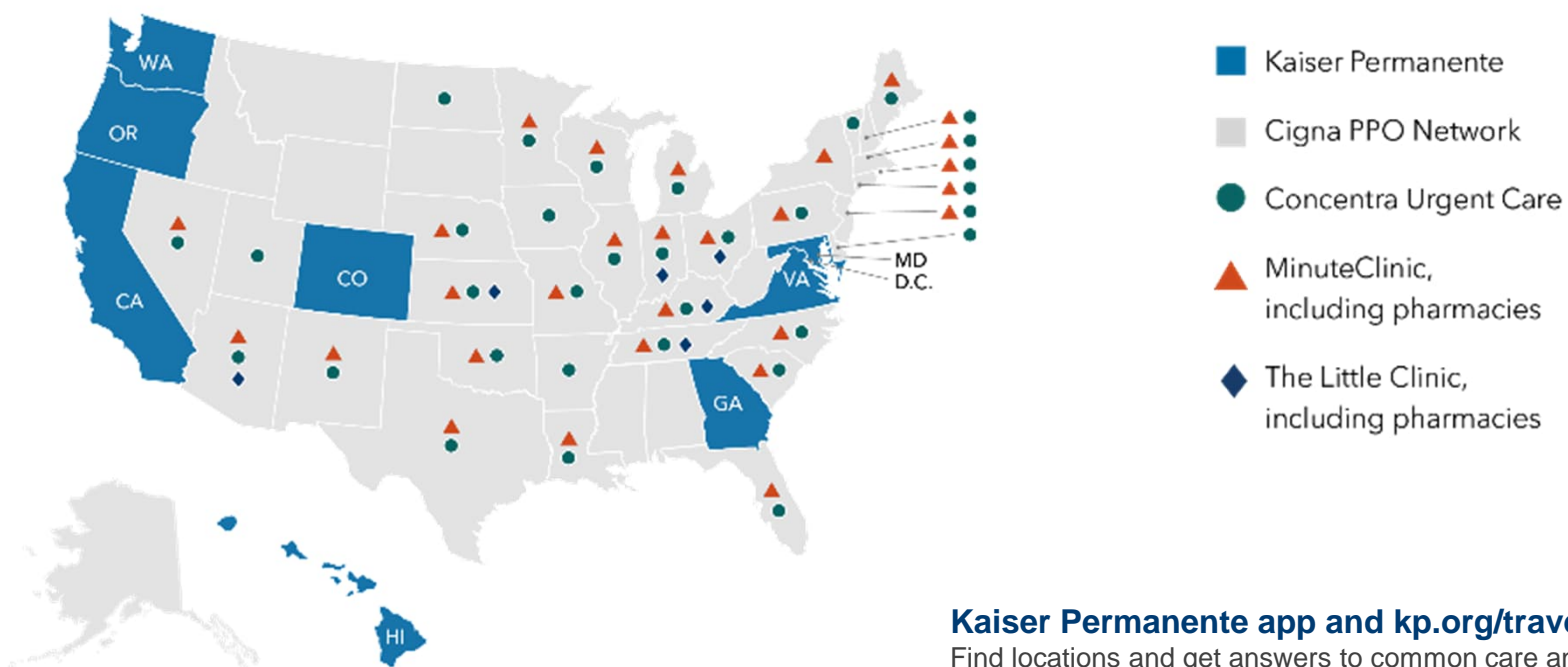
- Personalized care from top specialists
- 24/7 access to care wherever you are
- Predictable costs and less paperwork



Watch our [intro video](#) to learn about care that puts you at the center.



Access to care away from home



Kaiser Permanente app and kp.org/travel

Find locations and get answers to common care and coverage questions.

Away from Home Travel Line: 951-268-3900 (TTY 711)

- 24/7 support while traveling
- Get immunization information from our travel clinic
- Find care in another Kaiser Permanente service area
- Assistance with claims reimbursement



Members are covered for urgent and emergency care anywhere in the world.

Out-of-area benefit for dependents

For dependents up to age 26, we'll cover certain routine, continuing, and follow-up care while the dependent is outside of any Kaiser Permanente service area.¹

For eligible dependents, the out-of-area benefit covers up to:²

- ✓ 10 office visits
- ✓ 10 diagnostic X-rays
- ✓ 10 therapy visits (combined physical, occupational and speech)
- ✓ 12 prescription drug fills
- ✓ 12 diabetic supplies

Urgent and emergency care are covered for out of area dependents.



1. Dependent must be enrolled in a Health Maintenance Organization (HMO), Deductible HMO (DHMO), or High Deductible Health Plan (HDHP).
2. Applicable cost share applies.

Urgent care delivered in the home or office

Members in the Denver/Boulder area have direct access to mobile urgent care services.

Services are for illnesses or injuries that require attention soon but aren't emergencies, such as:

- ✓ Sprains, strains, and cuts that need stitches
- ✓ Migraines, dizziness, and other neurological conditions
- ✓ Asthma, respiratory conditions, and urinary tract issues
- ✓ Members call DispatchHealth directly or are referred through an online chat with a clinician, or our 24/7 advice line.

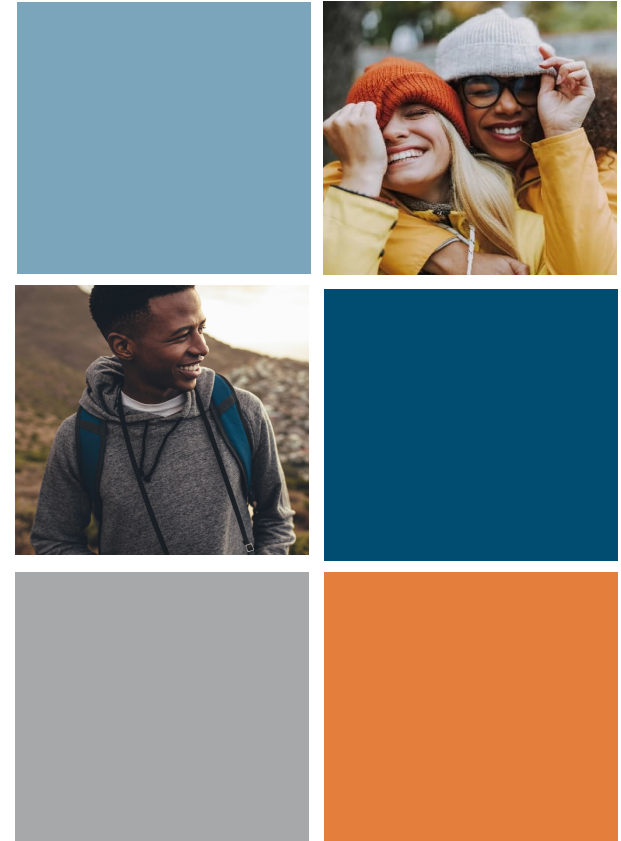
We have teamed up with DispatchHealth to offer even more convenience in Denver/Boulder area.

dispatch
health®



Supplemental Health Benefits

- Accidental Injury – High/Low (2 options)
- Hospital Care – High/Low (2 options)
- Critical Illness - \$20,000 of coverage



Supplemental health benefits

Supplement your medical plan for extra support



Fixed benefits paid directly to you

Accidental Injury insurance
Critical Illness insurance
Hospital Care insurance



Use the money however you want

**Payments can be used for expenses
beyond direct medical costs, including:**

- Everyday household bills, childcare
- Treatment options not covered by traditional insurance
- Travel, room and board for medical treatment

Guarantee issue: Obtain coverage regardless of your previous medical history

Portable: You can take your coverage with you if you retire or leave your company

Auto compare: Cigna will review eligible coverage under the medical plan, if enrolled, and automatically remind you to submit your Accidental Injury claim

Accidental Injury Insurance



Helps to pay for expenses involved with a covered accident or injury

Benefits may be payable for:¹

- Initial treatment
- Emergency room visit
- Hospitalization
 - Admission (per occurrence)
 - Confinement (per day)
- Follow-up care

Covered injuries may include:¹

- Broken bones
- Burns
- Dislocations
- Torn ligaments
- Concussions
- Eye injuries
- Ruptured discs
- Cuts requiring stitches

24-hour accident coverage

- New Benefit!
\$50 Wellness





Accidental Injury Example: Marco

Marco's estimate

Expenses not typically covered by major medical insurance - HDHP	
Emergency room visit	\$3,000
Surgery coinsurance	\$1,000
LPS HSA Contribution	-\$1,250
Out-of-pocket costs	\$2,750

Marco is an avid runner. He pays \$4.83 per month for employee only coverage on the low plan, or \$58 per year.

He falls while trail running and suffers a broken leg and dislocated wrist.

COVERED BENEFIT	Amount Paid to Employee
Leg fracture	\$2,000 (Surgical)
Wrist dislocation	\$500 (Non-Surgical)
Emergency room visit	\$190
Hospital Admission	\$2,000
Hospital Confinement	\$150 (1 day)
Ambulance ride	\$625 (ground)
Follow-up visits	\$225 (3 visits)
Physical therapy	\$500 (10 visits)
Medical device	\$100 (crutches)
Wellness visit or test	\$50 (unrelated cancer screening)
Cash benefit paid to Marco:	\$6,340

Critical Illness Insurance

Benefits and Conditions



Benefit Details

Lump-sum benefit paid upon the diagnosis of a covered condition: \$20,000

Covered conditions may include:¹

Cancer

- Invasive cancer
- Carcinoma in situ
- Skin cancer

Nervous system

- ALS (Lou Gehrig's disease)
- Advanced Alzheimer's disease
- Parkinson's disease
- Multiple Sclerosis

Other specified conditions

- Paralysis
- Renal (kidney) failure
- Major organ failure
- Benign brain tumor
- Coma
- Blindness

Vascular

- Heart attack
- Stroke
- Coronary artery disease
- Wellness Benefit \$50

Childhood

- Heart wall malformation
- Sickle cell anemia
- Newborn NICU
- Cerebral palsy
- Cystic fibrosis
- Muscular dystrophy
- Poliomyelitis





Critical Illness Example: Julie

Julie's estimate

COVERED BENEFIT	Payment Schedule
Employee Amount	\$20,000 of coverage
Spouse Amount	100% of employee benefit
Child(ren) Amount	100% of employee benefit

Expenses not covered by medical insurance - HDHP	
Annual deductible and coinsurance (family coverage)	\$8,000
Other expenses: childcare, lost wages, everyday household expenses	\$750
Out-of-pocket costs	\$8,750

Julie age 38 pays \$8.94 per month for \$20,000 of coverage, or *\$107 per year*.

She is diagnosed with breast cancer and uses her benefit to help cover living expenses.

Covered benefits paid by Critical Illness	
Invasive Cancer	\$20,000
Benefits paid directly to Julie	\$20,000

Hospital Care Insurance



Pays benefits for a covered hospital stay for events like an in-patient procedure or birth of a child

After the first hospital stay, coverage continues so you have additional protection for future hospital stays. You can use the money however you'd like.

For example, it can help you pay for expenses related to:

- o Medical bills not covered by your health plan
- o Childcare
- o Travel
- o Other out-of-pocket expenses

New Benefit! - \$50 Wellness



The average inpatient hospital stay in the United States:
\$2,873 per day³





Hospital Care Example: Nora

Nora's estimate

Nora pays \$13.75 per month for employee only coverage on the low plan, or *\$165 per year*
She has a hospital stay for a birth of child.

Expenses not covered by medical plan HDHP	
Annual deductible and coinsurance (family coverage)	\$8,000
Indirect expenses	\$500
Out-of-pocket costs	\$8,500

COVERED BENEFIT	Payment Schedule
Hospital admission	\$1,000 once per benefit year
Daily confinement	\$100/day up to 15 days per benefit year
Daily ICU confinement	Add'l \$200/day up to 15 days per benefit year
Wellness visit or test	\$50 reimbursement

Covered benefits paid by Hospital Care plan	
Hospital admission	\$1,000
Hospital stay (3 days)	\$300
Newborn Nursery Care Stay (3 days)	\$150
Routine checkup (wellness)	\$50
Benefits paid directly to Nora:	\$1,500

Voluntary benefit plan costs



Monthly Contributions	Supplemental Health Premiums				
	Accident Low Plan	Accident High Plan	Hospital Low Plan	Hospital High Plan	Critical Illness
Employee Only	\$4.83	\$8.02	\$13.75	\$26.48	Age banded
Employee + Spouse	\$7.70	\$12.77	\$26.10	\$50.19	Age banded
Employee + Child(ren)	\$8.51	\$13.80	\$24.26	\$46.91	Age banded
Family	\$13.24	\$21.60	\$38.35	\$74.01	Age banded

Rocky Mountain Reserve

Flexible Spending Accounts



Flexible Spending Accounts (FSAs)

Health Care FSA

- Contribute up to \$3,300 in 2025.
- Use for plan deductibles, copays, and other medical expenses.

Limited Purpose Health Care FSA

- Contribute up to \$3,300 in 2025.
- Can be used with an HSA.
- Use for dental and vision expenses only.

Carryover

- Health Care FSAs allow up to \$660 carryover from the 2025/2026 plan.

Dependent Care FSA

- Contribute up to \$5,000 in 2025.
- Use for child and elder day care and related expenses.

'Use it or lose it' Rule

- Both Health Care and Dependent Care FSA require expenses to be incurred during plan year, you will forfeit any unused amounts.



Accessing funds

Submitting receipts

You have 90 days after the end of the **current plan year** (6/30/2025) to **submit receipts to Rocky Mountain Reserve** for reimbursement

Debit Card

Rocky Mountain Reserve provides a convenient Debit Card

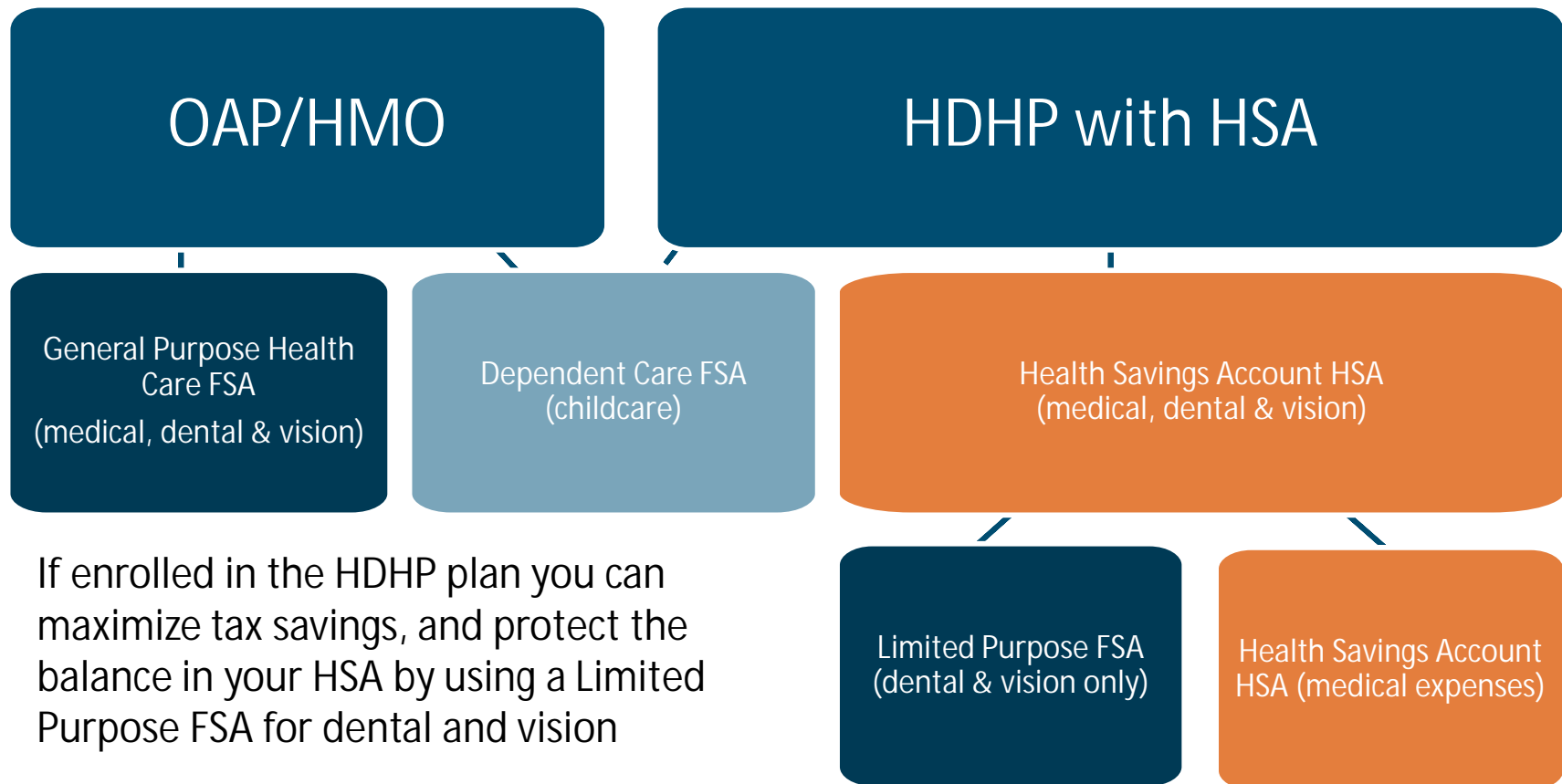
Remember to save all receipts for FSA expenses, in case RMR requests substantiation – you may need to send in copies

Debit cards can be used to pay for over-the-counter drugs and medicines as well as feminine hygiene products

The card pays directly out of your account



How do FSAs and HSAs work together?



IRS qualified reimbursements

Examples of Qualified medical expenses*

- Medical deductibles and out-of-pocket costs
- Acupuncture, chiropractic or psychiatric services
- Dental out of pocket expenses
- Prescriptions
- Vision care, including glasses, contact lenses and LASIK eye surgery
- Smoking cessation treatment and prescriptions
- Family planning procedures
- Hearing aides and batteries
- Alcohol or drug treatment programs
- Covid-19 related PPE and Menstrual care products are IRS eligible expenses
- Over the counter medications
- *HSA Only - Some insurance premiums, such as long-term care, COBRA and individual health care premiums while receiving unemployment*
- *HSA Only - Medicare premiums if over age 65*

Examples of Nonqualified medical expenses

- Air purifiers
- Babysitting, childcare, and nursing services for a normal, healthy baby
- Cosmetic surgery and related expenses
- Health club dues (unless prescribed by physician to treat illness)
- Illegal operations and treatments
- Massages for general well being
- Toothpaste, cosmetics and toiletries
- Vitamins and nutritional supplements
- Weight loss programs for improvement of appearance, general health, or sense of well-being
- *HSA Only - Medigap supplement premiums*

* This is not a complete list. For a detailed list, visit the IRS website at www.irs.gov and see Publications 502 and 969 for additional information.

Dental & Vision

- Cigna Dental
- VSP Vision



Dental – Comparing the plans

	Your in-network costs:		
	Dental High Plan	Dental Low Plan	Dental HMO
Annual deductible (single/family)	\$50 / \$100	\$50 / \$100	Not Applicable
Annual benefit maximum	\$2,000	\$1,000	100% No Deductible
Preventive care	Covered at 100%	Covered at 100%	Covered at 100%
Basic care	You pay 20% After Deductible	20% After Deductible	See Copay Schedule
Major care	You pay 50% After Deductible	50% After Deductible	See Copay Schedule
Orthodontia care	You pay 50% No Deductible	Not Covered	See Copay Schedule
Orthodontia Lifetime Max	\$3,000	Not Applicable	Not Applicable

Your 2025 Benefits

Vision – Overview of coverage

	Your in-network costs:
	Preferred Provider
Eye exam (once every 12 months)	Covered 100% for a standard eye exam Routine retinal screening up to \$39 copay
Lenses (once every 12 months) <ul style="list-style-type: none"> • Single, Bifocal, Trifocal 	Covered at 100% for standard lenses
Lenses (once every 12 months) <ul style="list-style-type: none"> • Premium Progressives • Custom Progressives 	Up to \$80 - \$90 copay Up to \$120 - \$160 copay
Frames (once every 24 months)	\$200 allowance for most brands \$220 allowance for featured brands
Contact lenses (once every 12 months)	\$150 allowance Up to \$60 copay for fitting and evaluation

Your 2025 Benefits

Dental & Vision plan costs

Monthly contributions

	Dental		
	Dental High Plan	Dental Low Plan	Dental HMO
Employee Only	\$22.54	\$15.01	\$1.99
Employee + Spouse	\$67.74	\$28.06	\$5.29
Employee + Child(ren)	\$103.39	\$45.47	\$10.63
Family	\$148.58	\$68.53	\$19.02

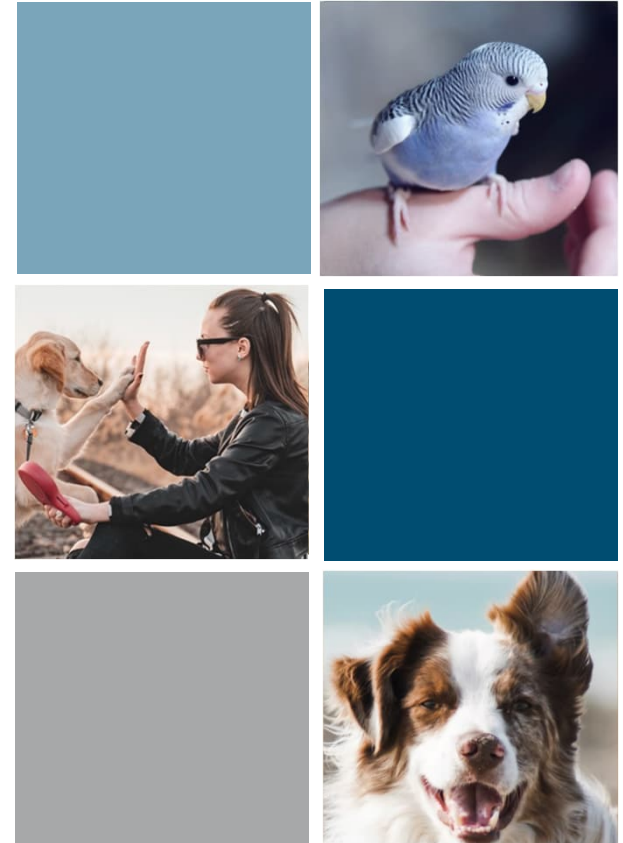
Monthly contributions

	Vision
Employee Only	\$11.29
Employee + 1	\$21.28
Family	\$28.94

Nationwide

Pet insurance

Nationwide






Your 2025 Benefits

Choose your My Pet Protection Choice level of reimbursement

New Plans

Phasing out

My Pet Protection Choice™	Accident & Illness	Accident, Illness & Wellness	Customizable	My Pet Protection	My Pet Protection with Wellness500
Annual deductible options	\$250	\$250	\$100 to \$500	\$250	\$250
Reimbursement level	80%	80%	50%, 70% or 80%	50% or 70%	50% or 70%
 Accident coverage	✓	✓	✓	✓	✓
Annual maximum	\$5,000	\$5,000	\$2,500 or \$5,000	\$7,500 maximum annual benefit total for all conditions	\$7,500 maximum annual benefit total for all conditions
Broken bones, animal attack, hit by car, poisoning, heatstroke, and more	✓	✓	✓	✓	✓
 Illness coverage	✓	✓	Optional	✓	✓
Annual maximum	\$5,000	\$5,000	\$2,500 or \$5,000	\$7,500 maximum annual benefit total for all conditions	\$7,500 maximum annual benefit total for all conditions
Ear infections, diabetes, vomiting, allergies, cancer, and more	✓	✓	✓	✓	✓
 Hereditary & congenital coverage	✓	✓	Optional when purchased with illness coverage	✓	✓
Annual maximum	\$5,000	\$5,000	\$2,500 or \$5,000	\$7,500 maximum annual benefit total for all conditions	\$7,500 maximum annual benefit total for all conditions
Hip dysplasia, cherry eye, elbow dysplasia, umbilical hernia, brachycephalic syndrome, and more	✓	✓	✓	✓	✓

- New plan designs for 2025, called My Pet Protection Choice
- Coverage can be customized (accident, illness, hereditary congenital, and wellness)
- More flexible pricing for different budgets and pet needs
- Accident only coverage now available
- Existing enrollees will be offered new coverage at your next policy renewal date

My Pet Protection Choice Wellness coverage

New Plans

Phasing out

My Pet Protection Choice™	Accident & Illness	Accident, Illness & Wellness	Customizable	My Pet Protection	My Pet Protection with Wellness500
 Wellness coverage (for dogs & cats)		✓	Optional		✓
Annual maximum		\$450	\$450 or \$800		\$500
Vaccination or titer, fecal test, deworming, microchip, health certificate, heartworm or FeLV/FIV test, flea control or heartworm prevention, and more		✓	✓		✓
Spay/neuter or dental ³ and one additional test ⁴			✓		✓
 Wellness coverage (for birds)⁵			Optional		✓
Annual maximum			\$200, \$300 or \$500		\$500
Panel or titer, parasite/fecal test, CBC, culture, parasite prevention treatment, beak trim, nail trim, wing trim and more			✓		✓

- New plan designs for 2025, called My Pet Protection Choice
- Wellness coverage for dogs and cats based on benefit schedule
- Customizable for avian wellness

Enroll in pet insurance in just four steps

1

Go online

Go to your company's custom landing page or search for LPS on www.PetsNationwide.com to start a quote.

2

Answer a few questions

Answer just a few questions on your pet including name, species and state.

3

Choose a product

Select your desired plan and add any additional pets.

4

Enter payment

Enter your employee ID for payroll deduction or payment information to complete your purchase.

Enrollment available by phone at 877-738-7874

.....

Benefit enrollment open year-round

.....

Each pet issued an individual policy

.....

Multiple-pet discount available

Open enrollment

Complete your enrollment



Your 2025 Benefits

Open enrollment checklist

Open Enrollment

- May 1st through May 16th
- Review the 2025 Benefits Guide
- All changes must be submitted no later than May 16th

Active Enrollment

- You MUST actively enroll or waive ALL benefits this year including coverage for medical, dental, vision, dependent life insurance and re-elect your FSA and HSA pre-tax contributions
- Take advantage of the new voluntary benefit options available

Enrollment elections

- Verify your enrollment selections on Employee Online for core benefits
- Separate Cigna enrollment site for voluntary benefits
- Waiving coverage? Please re-certify your decision to waive enrollment
- Review your selections carefully and submit your elections online

Reminder: The choices you make during Open Enrollment will remain in effect until the next open enrollment period unless you have a qualifying event such as marriage, birth, divorce, death or change in you or your spouse's employment status

Enrollment elections

Employee Online

Log in to [Employee Online](#)

1. Under Menu, click on [Benefits](#) then [Click to Enroll](#).
2. Click on [Choose New Plans](#) and click the arrow to the right to begin.
3. Start selecting your new plans or waive/re-enroll if you decide to keep the same plan you have this year.
4. When you are done with each selection, click on the right arrow to move on to the next benefit, and repeat step 3-4.
5. If you are done reviewing your core benefit elections, click [Finish](#).
6. This should take you back to your summary benefit plan page. You will see [Pending Approval](#) next to each benefit. Make sure you click [Confirm All](#) to finalize your request.
7. [Connect to the Voluntary Benefits enrollment site through Employee Online](#)



Benefit selections will be effective for July 1, 2025

Enrollment elections

Employee Online

The screenshot displays the BusinessPlus Employee Online interface. At the top, a dark blue header contains the BusinessPlus logo on the left and 'Employee Online' on the right. Below the header, a navigation bar includes a home icon, a 'Menu' dropdown, and a sidebar with icons for Home, Personal Information, Payroll Information, and Benefits. The 'Benefits' option is highlighted. The main content area is divided into three columns: 'Benefit Enrollment' with links to 'Click to Enroll', 'Adding a New Baby' (with steps for adding family info and benefit plans), and 'Life Insurance' (with a link for the Harford Life Beneficiary Designation Form); 'My Benefits' with links for 'Dependent Coverage (Family Information)', 'Insurance', 'Tax Affidavit', 'Eligibility Affidavit', and 'Tuition Reimbursement'; and 'Retirement Forms' with links for 'Retirement Plans', 'TIAA 403B, 457', 'Pera 401K, 457', and '401K, 403B Elected Plans'. On the right side of the page, a partial view of another section titled 'Littleton Public Schools En' and 'new your human resources' is visible.

BusinessPlus Employee Online

Menu ▾

Employee Online

- Home
- Personal Information
- Payroll Information
- Benefits**

Benefit Enrollment

- Click to Enroll
- Adding a New Baby**
 - Step 1: Add Your Baby to your Family Info
 - Step 2: Add Your Baby to your Benefit Plans
- Life Insurance**
 - Harford Life Beneficiary Designation Form

My Benefits

- Dependent Coverage (Family Information)
- Insurance
- Tax Affidavit
- Eligibility Affidavit
- Tuition Reimbursement

Retirement Forms

- Retirement Plans
- TIAA 403B, 457
- Pera 401K, 457
- 401K, 403B Elected Plans

Littleton Public Schools En
new your human resources

Enrollment elections

Cigna Voluntary Benefits

Connect to the Website through Employee Online

Your web browser should open a new window, or you can go directly to: <https://cigna.benselect.com/LPS>

If it's your FIRST TIME enrolling on site:

1) At the "Employee Login" screen

- Enter your Social Security Number and your personal identification number (PIN).
- Your PIN is a combination of the last 4 digits of your Social Security Number and the last 2 digits of your birth year.
- For example, if the last 4 digits of your SSN are 3214 and you were born on September 21, 1968, your PIN would be "321468".

2) **Sign & Submit:** You must complete all steps to process your enrollment choices. In this step, you will sign a benefit confirmation form electronically using your PIN. *This the new PIN that you changed after your initial login.

3) **Next Button:** Click the Next button to begin your enrollment for that benefit and view the benefit forms in the library.

4) **Enrollment changes and ongoing access:** You can access the site after you submit enrollment anytime during the Open Enrollment period. You will login with your SSN and your updated PIN.

Enrollment elections

Cigna Voluntary Benefits

A screenshot of the "ENROLLMENT SITE" for Littleton Public Schools. The background is a photo of a smiling woman and a young girl with bubbles. A white login box is overlaid on the right. The box contains the title "Littleton Public Schools Benefits Enrollment", instructions to use a Social Security Number and PIN, input fields for "Employee SSN:" and "PIN:", a "Log in" button, and links for "FORGOT PASSWORD" and "New employee? Click here".

ENROLLMENT SITE

Littleton Public Schools Benefits Enrollment

To use this website, you must have your Social Security Number and your confidential Personal Identification Number (PIN). If you have questions or need help, please contact your Human Resources Department.

Employee SSN:

PIN:

By entering your Employee ID or Username and Personal Identification Number, you are agreeing to the [Terms of Use](#).


[FORGOT PASSWORD](#)

[New employee? Click here](#)

[Log in](#)

Enrollment elections

Cigna Voluntary Benefits

 Your PIN (Personal Identification Number) is the secret code you use to access the system. Entering your PIN is the equivalent of your digital signature. Please change your PIN. You may choose any combination of letters and numbers.

PIN requirements:

- Minimum 4 character(s) required.
- Maximum 30 character(s) allowed.
- PIN cannot start with Employee User Name.
- PIN cannot equal Employee User Name.
- PIN cannot start with Employee ID.
- PIN cannot equal Employee ID.
- PIN cannot equal Employee SSN.

Employee User ID:

New PIN:

Re-enter your new PIN to verify:

Security Questions

Before you can complete your PIN change, you must select a security question, answer it, and provide your email address. This will allow

Select Security Question:

Answer:

Email Address:


Confirm Email:

Please change your
PIN, then proceed to
the enrollment screen

LITTLETON

PUBLIC

SCHOOLS



Status (25% Complete)

Home

You & Your Family

My Benefits

Sign & Submit

Next

Welcome Back, Brent

For most benefits, Open Enrollment is the only time of year you are allowed to make changes in your benefits. Unless you experience some qualifying life event, you will only be able to make benefit changes during the annual Open Enrollment period. Please note that open enrollment ends Saturday, May 17, 2025.

Here is a summary of your current benefit elections:

✓ Your Benefits

Plan	Benefit	Cost per Paycheck	Coverage Termination Date
Cigna Accident	Cigna Accident - Plan 1	\$4.83 after-tax	
Cigna Critical Illness	Family - \$20,000	\$2.19 after-tax	
Cigna Hospital Care	Cigna Hospital Care - Plan 2, Emp + Spouse	\$50.19 after-tax	
		\$57.21 total	

What would you like to do?

- Update my personal information (address, phone, e-mail, etc.)
- Change my benefits due to a qualifying life event
- Review forms that I signed
- Find a document or form
- Change my PIN

Press **Next** to review personal information and begin enrollment.

Next

Your 2025 Benefits

Enrollment elections

Cigna Voluntary Benefits

[Home](#) [You & Your Family](#) [My Benefits](#) [Sign & Submit](#) [Next >](#)

Sign and Submit

Here is a recap of your enrollment elections. The summary below shows your election for each benefit and includes your pre-tax and post-tax contributions **per pay period** for each plan.

- **Are You Satisfied With Your Elections?** If you are satisfied with your choices, click on the "NEXT" button at the bottom of this screen to sign your Enrollment Verification Form electronically using your PIN.
- **Need to Make Some Changes?** If you wish to make any changes to your elections, click on the benefit plan name in the menu on the left.

Your Benefits

Plan	Description	Employee Pretax Cost	Employee Posttax Cost
Cigna Accident	Cigna Accident - Plan 1; EO	\$0.00	\$4.83
Cigna Critical Illness	Cigna Critical Illness (CI); FA	\$0.00	\$2.19
Cigna Hospital Care	Cigna Hospital Care - Plan 1; ES	\$0.00	\$26.10
Total		\$0.00	\$33.12

Signatures Required

To complete your enrollment, you must sign the following forms. Press Next to begin signing forms.

Form Name	Status	Date Signed/Reviewed
Enrollment Confirmation	Unsigned	

being void.

- Pursuant to IRC § 125, "pre-tax" elections are irrevocable during the plan year. No changes to "pre-tax" elections are allowed during the plan year unless you experience a qualified change in status event. Qualified change in status events include: change in marital status, change in dependent status, change in employment status. You have 30 days from the date of the change to contact human resources to change your benefit elections.
- I understand that it is my responsibility to verify the deduction amounts from my paycheck and to notify my Employer immediately of any discrepancies.
- I understand any unused balance in a Dependent Care or Health Care Reimbursement account in which I am enrolled will be forfeited under the "Use It or Lose It" rule. Expenses must be incurred during the plan year for which the election amount was redirected.

Your total deductions per pay period...
\$ 33.12

Employee Signature _____ Date _____

[Download Form](#)

Please enter your PIN below and click on "SIGN FORM" to complete your enrollment and submit your elections. By entering your PIN, you are electronically signing the **Benefit Verification/Deduction Confirmation Form** above. Please review it carefully before entering your PIN.

PIN: [Sign Form](#)

You must enter your new PIN to confirm your elections.

After making your elections, don't forget to sign and submit the form. An unsigned application will be discarded at the end of the enrollment.

Once you sign the form, your enrollment is complete!

[Home](#) [You & Your Family](#) [My Benefits](#) [Sign & Submit](#) [Logout](#)

Sign/Submit Complete

Congratulations!

Your enrollment is now complete. You may log-in to the system at any time during the year to review your benefit elections.

Recap of Your Elections

Listed below is a recap of your elections including who is covered under each benefit plan and your named beneficiaries. **Scroll down to the bottom of this screen to view a list of your completed enrollment forms.**

✔ Cigna Accident

Enrollment Details

Person Name	Relationship	Description	Policy #	Cost
Brent Test	Employee	Cigna Accident - Plan 1; EO		\$4.83

✔ Cigna Critical Illness

Enrollment Details

Person Name	Relationship	Description	Policy #	Cost
Brent Test	Employee	Cigna Critical Illness (CI); FA		\$2.19
Spouse Test	Spouse	Covered by Employee		
Child2 Test	Child	Covered by Employee		

✔ Cigna Hospital Care

Enrollment Details

Your 2025 Benefits

Enrollment elections

Tips and reminders

Confirm your elections

Make sure to confirm your elections in Employee Online

Make sure to confirm your elections for Cigna Supplemental benefits

Address information

Update your address/contact information in self service by May 16th

Medical ID Cards

Current members will not receive a new ID unless changing plans

If you need a new ID Card, mail service delivery generally takes 5-7 days

Medical Plan Accumulators

Deductibles and out-of-pocket maximums accumulate on a Plan Year basis

Amounts will reset again as of July 1, 2025

Questions

OPEN ENROLLMENT SUPPORT:

Cigna Pre-Enrollment

888-806-5094

24 hours a day, 7 days a week

Kaiser Permanente

800-514-0985

Monday – Friday 8am to 7pm MST

HSA Bank

800-357-6246

24 hours a day, 7 days a week

Cigna Supplemental Benefits

(800) 754-3207

Rocky Mountain Reserve

(888) 722-1223

Monday – Friday 8am to 5pm MST

VSP

800-877-7195

Monday – Friday 5am to 6pm PST

Saturday – Sunday 7am to 5pm PST

Aetna EAP

866-252-4468

The Hartford

(800) 523-2233

Nationwide

(877) 738-7874

Questions & answers

