

Welcome to your benefits.

2024



Open Enrollment begins May 1st and ends Friday May 17th
New Hires: Enroll within 30 days of hire



Agenda – Today you'll learn about:

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



Introduction

- We are happy to announce **minimal changes** for the upcoming plan year!
- LPS continues to offer both Cigna and Kaiser medical plan options.
- Cigna OAP doctor's visits will now be covered at either a \$25 or \$50 copay to mirror the Kaiser DHMO medical plan.
- When you choose one of the HDHP medical plans, you receive funds in your HSA account to reimburse for out-of-pocket expenses.
- New FSA plan administrator for the 2024/2025 plan year.



What's new for 2024?

Medical

- Medical premiums increasing on average 3% to 5%, depending on your plan selection
- Cigna OAP now includes copayments for routine primary care and specialist visits
- No other changes to benefits

Dental

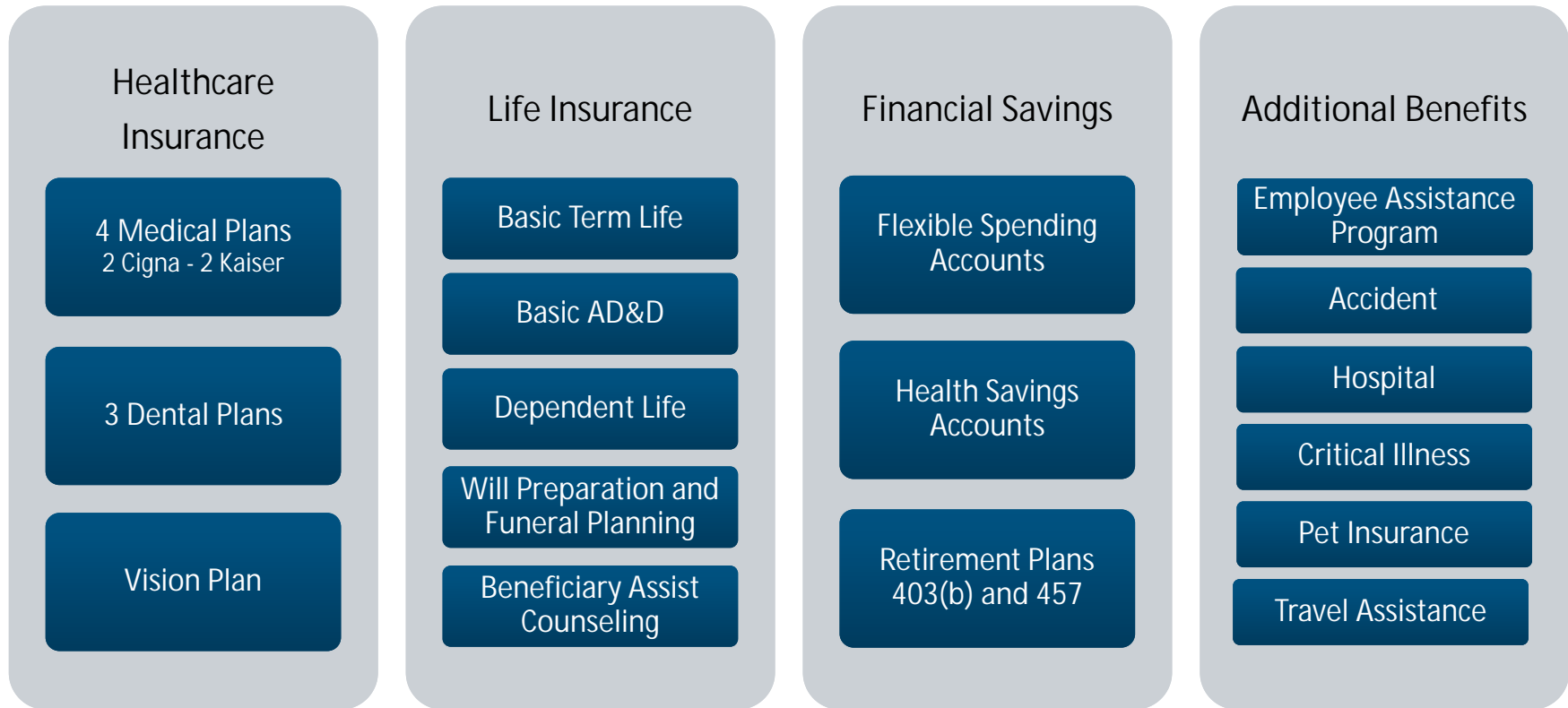
- Dental premiums increasing by 3%
- No change to benefits

Flexible Spending Accounts & Health Savings Accounts

- HSA limits increased to \$4,150 for single and \$8,300 for family
- FSA limits increased to \$3,200 for Healthcare accounts

What's NOT changing?

Same core benefits offered:



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

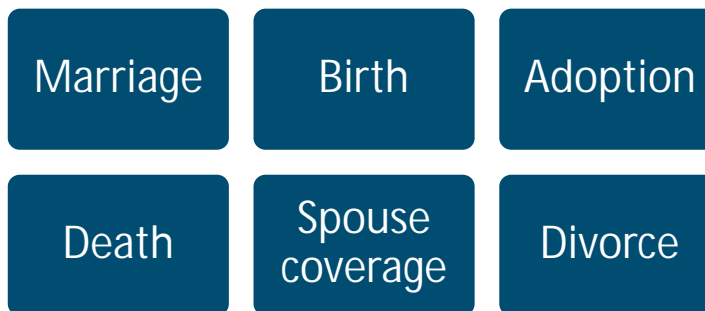
- Coverage time period: *July 1, 2024 - June 30, 2025*

New elections or benefit changes

Changes must be updated through the LPS Benefit Enrollment page online

- 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:



Annual enrollment guidelines

May 1st through May 17th



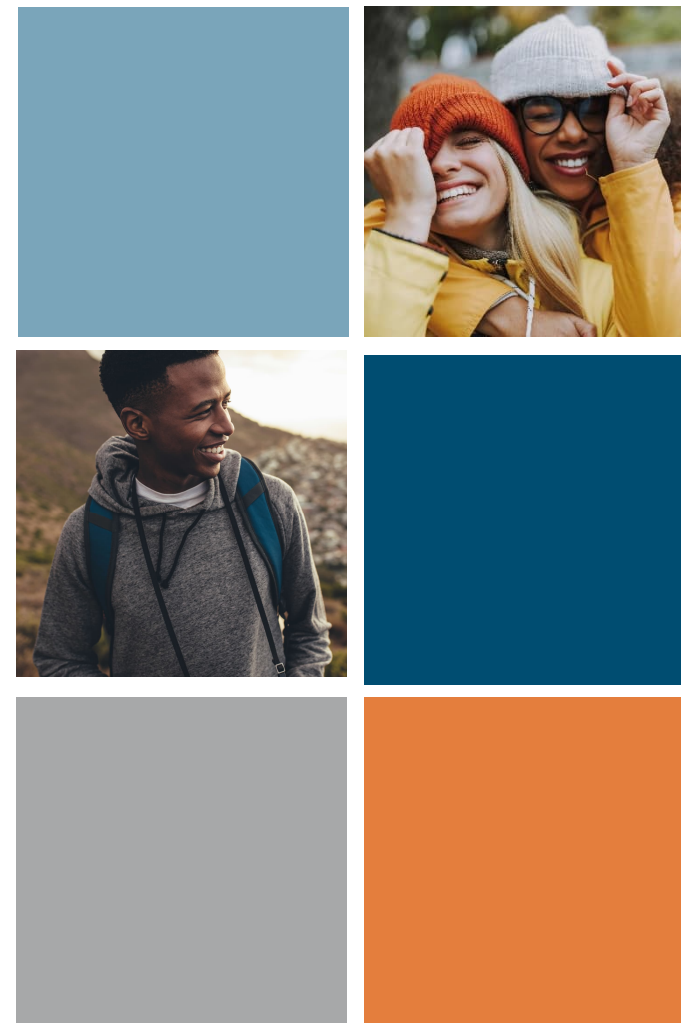
Active Enrollment: ALL benefits

- 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.
- 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.

Be sure to review your current benefit selections to ensure you have the coverage you desire

Health Benefits

Medical Plans



2024/2025 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	Ded.+20% coin.	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*

2024/2025 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.

**Ambulatory surgical center: \$500 / surgery, deductible does not apply. Outpatient hospital: Ded.+20% coinsurance.

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 \$4,150 for individual or \$8,300 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



- ✓ Balances roll over



- ✓ Contributions from you, employer, family member



Triple Tax Advantage:

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

Health plan costs

2024/2025 monthly contributions

Cigna Medical	Cigna Medical		
	OAP	HDHP with HSA	HDHP Cost after District HSA Contributions
Employee Only	\$78.53	\$70.85	(\$33.32)
Employee + Spouse	\$923.98	\$855.53	\$713.86
Employee + Child(ren)	\$835.99	\$774.05	\$632.38
Family	\$1,319.99	\$1,222.18	\$1,080.51

Kaiser Medical	Kaiser Medical		
	DHMO	HDHP with HSA	HDHP Cost after District HSA Contributions
Employee Only	\$52.80	\$44.36	(\$59.81)
Employee + Spouse	\$679.96	\$576.35	\$434.68
Employee + Child(ren)	\$616.22	\$521.94	\$380.27
Family	\$944.10	\$801.79	\$660.12

Medical plans – Comparing the costs

- Minimal Care-users:**
 - Preventive Care
 - 2 office visits
 - 2 generic short-term Rx (antibiotic)
- Average Care-users:**
 - Preventive Care
 - Planned procedure
 - Urgent Care visit(s)
 - ER visit
 - prescriptions
- Frequent Care-users:**
 - Preventive Care
 - Chronic conditions
 - Multiple maintenance Rx
 - Catastrophic event

HDHP w/ \$1,250 HSA Contribution from LPS

Average out of pocket costs less than \$1,000

Average out of pocket costs between \$1,000 - \$3,600

Average out of pocket costs \$2,500 to \$4,000 (deductible/OOPM met)

Copay Plans

Average out of pocket costs between \$30 - \$500

Average out of pocket costs between \$500 - \$4,000 (deductible)

Average out of pocket costs between \$1,750 to \$4,500 (deductible met)

Your Annual Premiums:

\$850 through Payroll Deduction*
+\$1,250 HSA Contribution from LPS

\$942 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 2024, based on her care in 2023:

- 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: \$850
Total Cost to Jessica = \$850

Savings of \$287

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: \$942
Total Cost to Jessica = \$1,137
 (\$195 + \$942)



Member Experience – Frequent Care-user



Matthew – Chronic Condition (well-managed)

Here’s what Matthew anticipates his expenses to be in 2024, based on his care in 2023:

- 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:
 \$850

Total Cost to Matthew
 = \$3,600

Copay Plan

Medical + Rx

Medical: \$125 (\$50 x 2 + \$25)
 Prescription Drugs (every 90 days): \$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:
 \$942

Total Cost to
 Matthew = \$2,627
 (\$942+ \$1,685)

Savings of
 \$973

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:
 \$9,289

Total Cost to Sophia
 = \$11,789

Savings of
 \$1,723

Copay Plan

Medical + Rx

Medical: \$3,400 hospital stay (deductible, plus 20%)
 Pediatrician visits: \$50 (\$25 copay x 2)
 Prescription Drugs: \$30, (\$15 copay x 2)
 Total: \$3,480

Sophia's
 Out-of-Pocket
 Health Care Costs
 = \$3,480

Premium Contribution:
 \$10,032

Total Cost to Sophia
 = \$13,512
 (\$10,032 + \$3,480)

Cigna One Guide®

Ready to answer all your health plan questions. And so much more.

Let's face it, understanding and using your health plan isn't always easy. Well, not to worry. Your Cigna One Guide® team is ready and waiting to help. It's our highest level of personal support available.

Simply call us, click-to-chat on **myCigna.com** or use the **myCigna® App**. You'll automatically be connected with a One Guide representative who will help guide you where you need to go.

Helping you save money. And stay healthy. Your Cigna One Guide team can help you:

Understand your plan

- › Learn how your coverage works
- › Get answers to your health care or plan questions

Get care

- › Find an in-network health care provider, lab or urgent care center
- › Connect with health coaches, pharmacists and more
- › Connect with dedicated, one-on-one support for complex health situations

Save and earn

- › Earn incentives (if provided by your employer)
- › Get cost estimates to avoid surprises



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MDLIVE[®]

Primary Care

Preventive care, routine care, and specialist referrals

- Preventive care checkups/wellness screenings available at no additional cost to identify conditions early
- Routine care visits allow you to build a relationship with the same primary care provider (PCP) to help manage conditions
- Prescriptions available through home delivery or at local pharmacies, if appropriate
- Receive orders for biometrics, blood work and screenings at local facilities

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 emergency room
- Prescriptions available, if appropriate

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, life changes, grief and depression

Dermatology

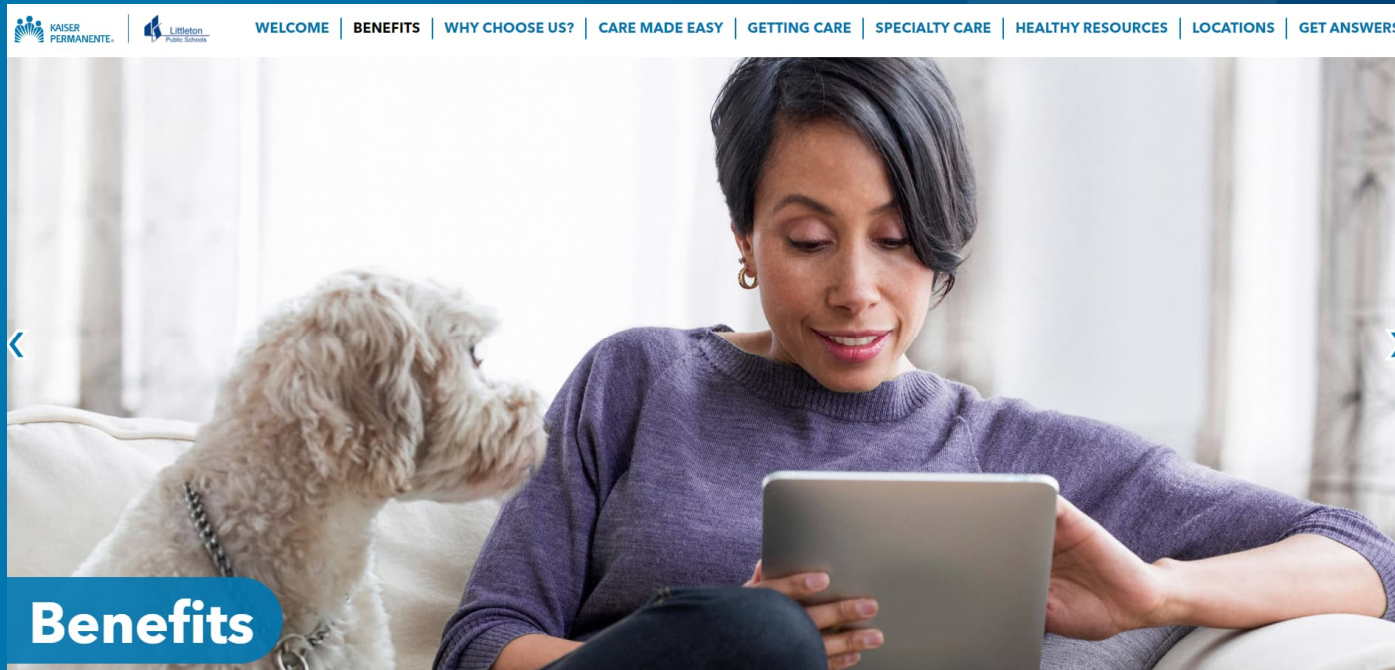
Fast, customized care for skin, hair and nail conditions — no appointment required

- Board-certified dermatologists review pictures and symptoms; prescriptions available, if appropriate
- 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



2024 Medical & Rx Benefits with Kaiser Permanente

Custom Microsite for LPS



Self-care and wellness coaching apps offer convenient support around the clock



Physicians can also prescribe from our formulary of evidence-based apps — including ones developed to help treat addiction, address youth mental health needs, and more.

The apps and services described above are not covered under health plan benefits, are not a Medicare-covered benefit, and are not subject to the terms set forth in members' Evidence of Coverage or other plan documents. The apps and services may be discontinued at any time. Calm and myStrength can be used by members 13 and over. The Headspace Care app and services are not available to any members under 18 years old. Eligible Kaiser Permanente members can text with a coach using the Headspace Care app for 90 days per year. After the 90 days, members can continue to access the other services available on the Headspace Care app for the remainder of the year at no cost.



Video visits with Amwell therapists @kp.org/getcare

Scheduled, one-on-one video counseling sessions provide treatment and support for conditions such as:

- Stress
- Anxiety
- Depression
- Bipolar disorder
- Obsessive-compulsive disorder (OCD)
- Post-traumatic stress disorder (PTSD)



Specialty
care



Laptop &
desktop



Cost depends
on plan coverage



Kids away at College? Out of Area Benefit Coverage for Dependents!

Both the DHMO and HDHP plans cover the following routine, continuing, and follow up care for your dependent while outside the Kaiser Permanente service area:

- Up to 5 office visits
- Up to 5 diagnostic X-rays
- Up to 5 prescription drug fills
- Up to 5 therapy visits
(combined physical, occupational and speech)

Applicable cost share applies

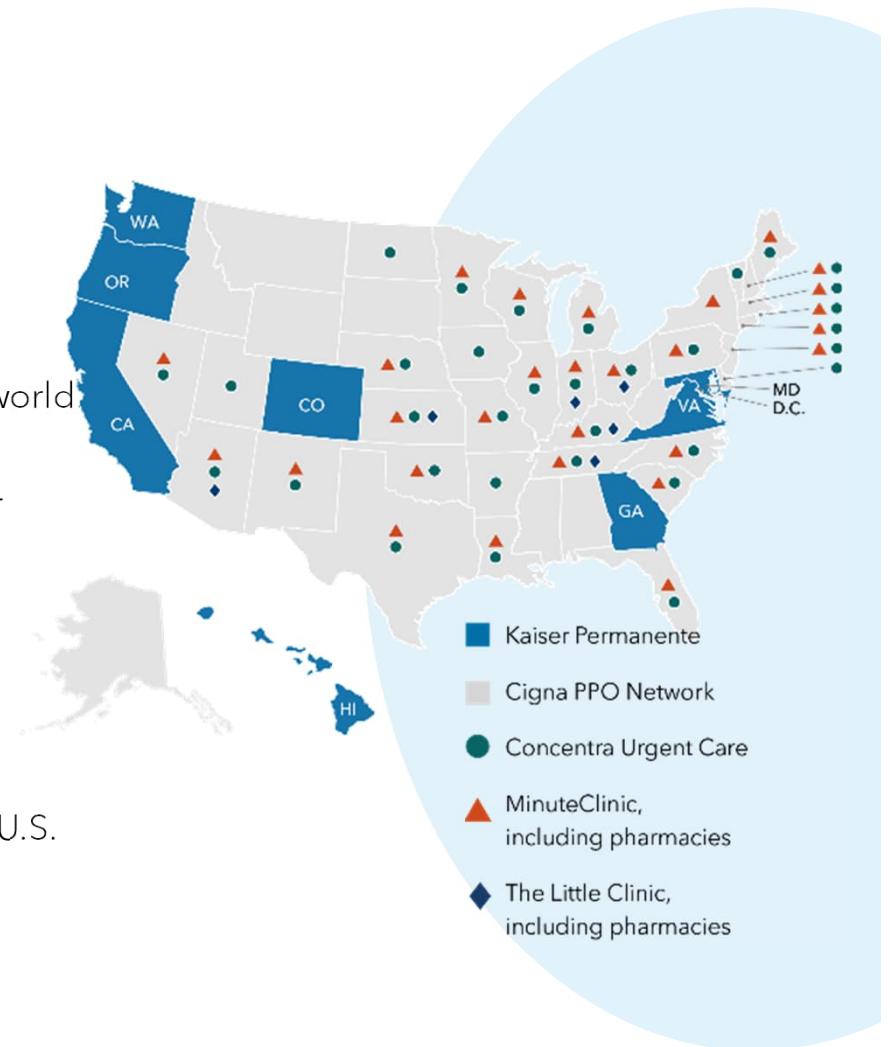
*** Proof of your Kaiser Permanente coverage should allow you to waive Student Health Plan policies that often are added onto tuition bills.**



Care While Traveling

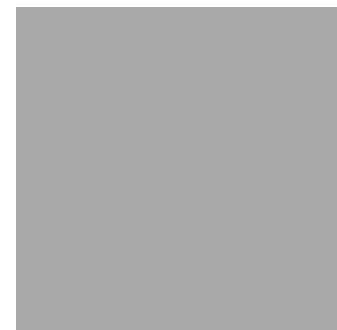
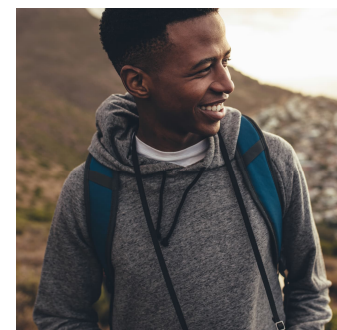
Members have more options than ever to get care away from home:

- Coverage for emergency and urgent care anywhere in the world
- For added convenience, when they're outside Kaiser Permanente states, they can visit the following and pay their standard cost share (no need to file a claim):
 - MinuteClinic (in select CVS and Target stores)
 - The Little Clinic - including pharmacies
 - Concentra urgent care centers
 - Cigna PPO Network providers.
- Phone and video visits are available on-demand across the U.S.
- 24/7 Away from Home Travel Line



Rocky Mountain Reserve

Flexible Spending Accounts



Flexible Spending Accounts (FSAs)

- Health Care FSA
 - Contribute up to **\$3,200** in 2024.
 - Use for plan deductibles, copays, and other medical expenses.
- Limited Purpose Health Care FSA
 - Contribute up to **\$3,200** in 2024.
 - Can be used with an HSA.
 - Use for dental and vision expenses only.
- Dependent Care FSA
 - Contribute up to **\$5,000** in 2024.
 - Use for child and elder day care and related expenses.
- 'Use it or lose it' Rule
 - Expenses need to be incurred during plan year, you will forfeit any unused amounts
 - Health Care FSA allows up to **\$610** carryover from the 2023/2024 plan



Accessing funds

- Submitting receipts

You have 90 days after the end of the **current plan year** (6/30/2024) to **submit receipts to Alerus** for reimbursement

Any **NEW plan year** expenses starting July 1, 2024, through June 30, 2025, **send to Rocky Mountain Reserve**

- Debit Card

Rocky Mountain Reserve provides a convenient Debit Card

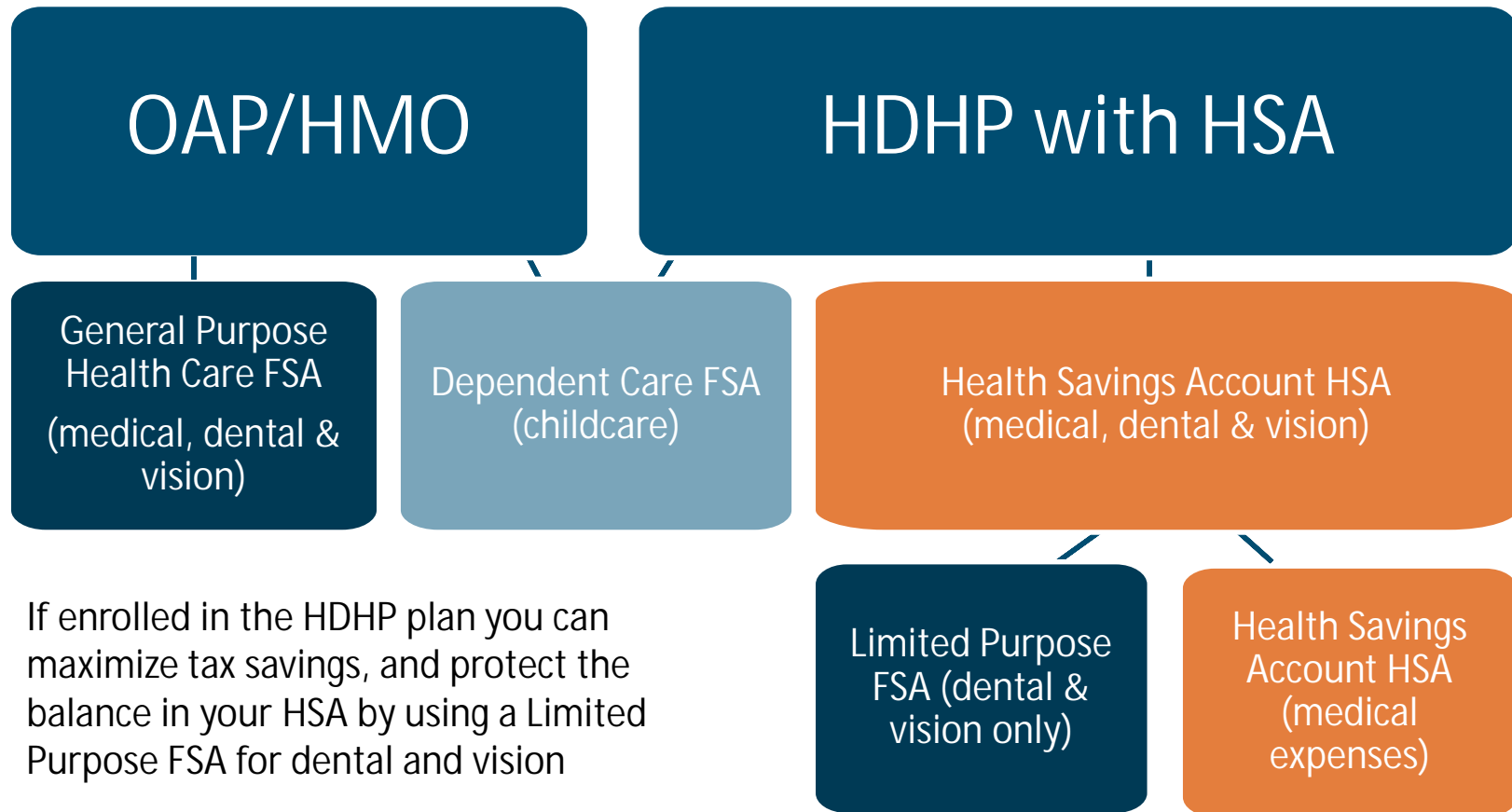
Remember to save all receipts for FSA expenses, in case RMR requests substantiation – you may need to send in copies

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*

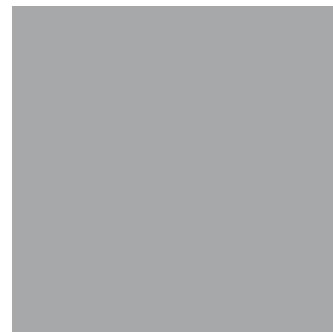
Examples of Nonqualified medical expenses

- 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 plan options



Dental Plan Comparison	Dental High Plan	Dental Low Plan	Dental HMO
Annual deductible (per person / per family)	\$50 / \$100	\$50 / \$100	Not applicable
Calendar-year maximum	\$2,000	\$1,000	100% no deductible
Preventive / Diagnostic Services	Covered at 100%	Covered at 100%	Covered at 100%
Basic Services	You pay 20% After Deductible	20% After Deductible	See Copay Schedule
Major Services	You pay 50% After Deductible	50% After Deductible	See Copay Schedule
Orthodontia	You pay 50% No Deductible	Not Covered	See Copay Schedule
Orthodontia Lifetime Max	\$3,000	Not applicable	Not applicable

Vision coverage



VSP Vision	Frequency	Preferred Provider
Eye Exam	Every 12 months	Covered 100% for a standard eye exam
Lenses: Single, Bifocal, Trifocal	Every 12 months	Covered 100% for standard lenses
Lenses: Premium Progressives	Every 12 months	Up to \$80 - \$90 copay for progressive lenses
Frames	Every 24 months	\$200 allowance for most brands \$220 allowance featured brands
Contacts: Conventional & Disposable	Every 12 months	\$150 Allowance Up to \$60 copay for fitting and evaluation

Dental & Vision plan costs

2024/2025 monthly contributions

Dental	Cigna Dental		
	Dental PPO High	Dental PPO Low	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

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

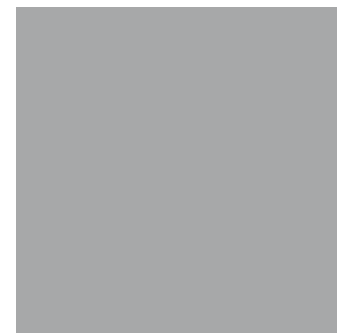
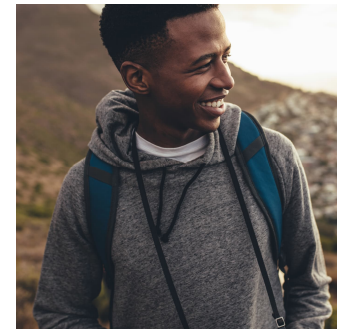
The Hartford

Supplemental health benefits

Accidental Injury – High/Low (2 options)

Hospital Care – High/Low (2 options)

Critical Illness - \$20,000 of coverage



Accident Insurance

Example High plan:

Mark is an avid runner. He pays \$8.02 per month for employee only coverage, or \$96 per year

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

COVERED BENEFIT	Sample Payment Schedule	Amount Paid to Employee
Leg fracture	\$2,000	\$2,000
Wrist dislocation	\$1,000	\$1,000
Emergency room visit	\$300	\$300
Hospital Admission	\$2,000	\$2,000
Hospital Confinement	\$300 per day	(2 days) \$600
Ambulance ride	\$750	(ground) \$750
Follow-up visits	\$150	(2 visits) \$300
Physical therapy	\$75 up to 10 treatments	(6 visits) \$450
Medical device	\$200	(crutches) \$200
Cash benefit paid directly to Mark:		\$7,600

Hospital Care

- Illness
- Accidents
- Pregnancy
- Newborn complications
- Mental/Behavioral health

COVERED BENEFIT	Payment Schedule
First day hospital confinement <i>This benefit pays the first day you stay in a regular hospital bed</i>	\$2,000 Once per benefit year
Daily Hospital Confinement	\$200 up to 30 days per benefit year
Daily ICU Confinement	\$400 up to 30 days per benefit year
Wellness Benefit for routine wellness	\$50 reimbursement

Example High plan:

Susan pays \$27.87 per month for employee only coverage, or \$334 per year

She has a hospital stay for a scheduled shoulder surgery

Covered benefits paid by Hospital Care plan	
Hospital admission	\$2,000
Hospital stay (3 days)	\$600
Benefits paid directly to Susan	\$2,600

Critical Illness

- Invasive Cancer
- Heart Attack
- Stroke
- Kidney Failure
- Organ Failure
- Alzheimer's and more

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

Example:

Julie age 45 pays \$19.60 per month for \$20,000 of coverage, or \$235 per year

She is diagnosed with invasive breast cancer and needs help paying for living expenses

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

Voluntary benefit plan costs

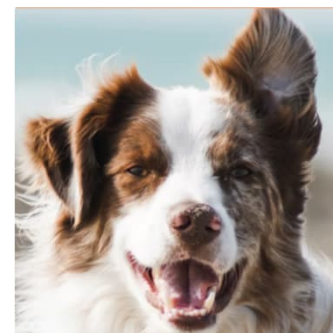
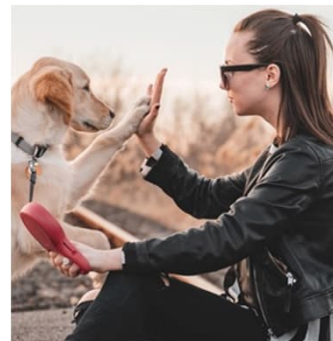
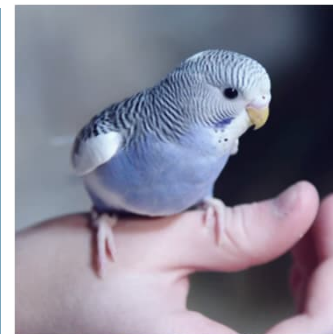
Monthly contributions

The Hartford	Supplemental Health Premiums				
	Accident Low Plan	Accident High Plan	Hospital Low Plan	Hospital High Plan	Critical Illness
Employee Only	\$4.83	\$8.02	\$14.47	\$27.87	Age banded
Employee + Spouse	\$7.70	\$12.77	\$27.47	\$52.83	Age banded
Employee + Child(ren)	\$8.51	\$13.80	\$25.54	\$49.38	Age banded
Family	\$13.24	\$21.60	\$40.37	\$77.90	Age banded

Nationwide

Pet insurance

Nationwide



Choose your My Pet Protection level of reimbursement

	My Pet Protection
Accidents, including poisonings and allergic reactions	●
Injuries including cuts, sprains, and broken bones	●
Common illnesses, including ear infections, vomiting and diarrhea	●
Serious/chronic illnesses, including cancer and diabetes	●
Hereditary and congenital conditions	●
Surgeries and hospitalizations	●
X-rays, MRIs and CT scans	●
Prescription medications and therapeutic diets	●

Choose from two levels of coverage

70%
reimbursement

50%
reimbursement

Certain coverages may be excluded due to pre-existing conditions. See policy documents for a complete list of exclusions.

Enroll in pet insurance in just four steps

1

Go online

Go to your company's custom landing page or search for your company 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

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Benefit enrollment open year-round

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Each pet issued an individual policy

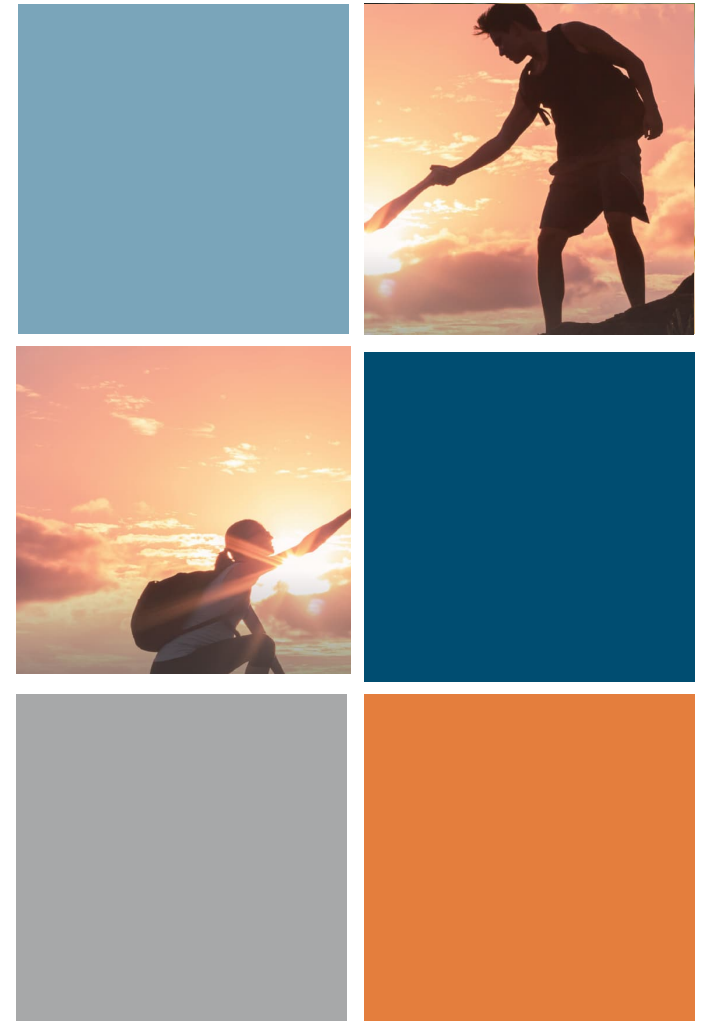
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Multiple-pet discount available

Resources for Living

Employee Assistance Program

Resources
for Living[®]



Anytime support

Emotional wellbeing support



You can access up to 5 counseling sessions per issue each year. You can also call us 24 hours a day for in-the-moment emotional well-being support.

Counseling sessions are available face to face, via televideo or chat therapy. Services are free and confidential. We're always here to help with a wide range of issues including:

- Anxiety
- Relationship support
- Depression
- Stress management
- Work/life balance
- Family issues
- Grief and loss
- Self-esteem and personal development
- Substance misuse and more

Legal services



You can get a free 30-minute consultation with a participating attorney for up to three new legal topics related to:

- General
- Family
- Civil/Criminal law
- Elder law and estate planning
- Divorce
- Wills and other document preparation
- Real estate transactions
- Mediation services

Daily life assistance



Competing day-to-day needs can make it tough to know where to start. Call us for personalized guidance. We'll help you find resources for:

- Child care, parenting and adoption
- Care for older adults
- Caregiver support
- School and financial aid research
- Special needs
- Pet care
- Community resources/basic needs
- Home repair and improvement
- Summer programs for kids
- Household services and more

Financial services



Simply call for a free 30-minute consultation for up to three new financial topics related to:

- Budgeting
- Retirement or other financial planning
- Mortgages and refinancing
- Credit and debt issues
- College funding
- Tax and IRS questions

Anytime support

Online resources



Your member website offers a full range of tools and resources to help with emotional wellbeing, work/life balance and more. You'll find:

- Articles and self-assessments
- Adult care and child care provider search tool
- Stress resource center
- Video resources
- Live and recorded webinars
- Mobile app

Employee Assistance Program

To access services:
1-866-252-4468 / TTY: 711
resourcesforliving.com

Username: lps
Password: eap

Additional services



Chat therapy — Send secure text messages to your counselor, who will respond within one working day up to five days a week. A week of texting counts as one session. You can also schedule to meet online for 30-minute televideo sessions. Each televideo session counts as one visit. Work on the same kinds of issues you'd see a counselor face-to-face to talk about.

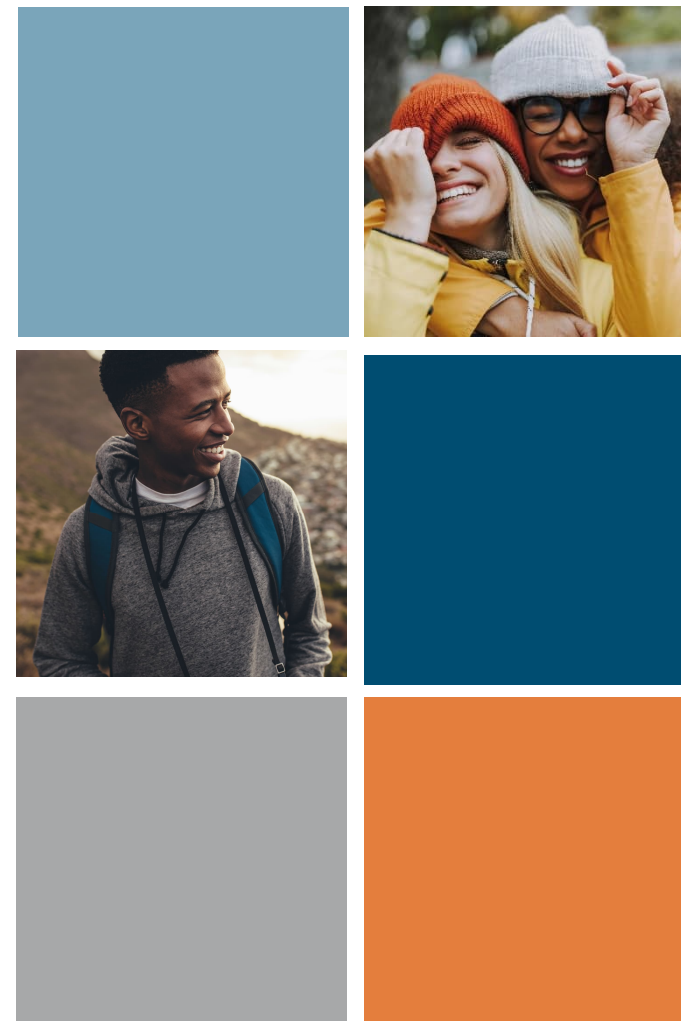
Proactive placement — We partner with you to assist in finding a counselor by calling providers in your area to ensure they have open appointments. We'll send you a list of providers within five business days for routine requests or two business days for urgent situations.

Identity theft services — One hour fraud resolution phone consultation or coaching about ID theft prevention and credit restoration. Services include a free emergency kit for victims.

MindCheck — Online tools that make it easy to improve your emotional wellbeing. Measure your mindset and get feedback and resources to maintain a positive outlook.

Open enrollment

Complete your enrollment through Employee Online



Open enrollment checklist

Open Enrollment

- May 1st through May 17th
- Review the 2024 Benefits Guide
- All changes must be submitted no later than May 17th

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
- 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. If you are done with going over your coverage types, click [Finish](#).
5. 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.



Benefit selections will be effective for July 1, 2024

Enrollment elections

Employee Online

The screenshot displays the BusinessPlus Employee Online interface. At the top, the BusinessPlus logo is on the left and 'Employee Online' is on the right. Below the logo is a 'Menu' dropdown with a home icon. A left-hand navigation menu is open, showing options: Home, Personal Information, Payroll Information, and Benefits (which is highlighted). The main content area is divided into three columns:

- 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

On the right side of the page, there is a blue header for 'Littleton Public Schools En' and a white section with the text 'New your human resources'.

Enrollment elections

Tips and reminders

Address information

Update your address/contact information in self service by May 17th

Medical ID Cards

Cigna OAP members will receive a new ID card with the addition of copayments

Kaiser or Cigna HDHP enrollees will not receive a new card 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, 2024

Prescription Drugs

If you are new to LPS or changing plans, Cigna or Kaiser may need a new mail order form and prescription from your doctor

Most pharmacists can resubmit a prescription to your insurance within 7-10 business days without charging up front

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

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

