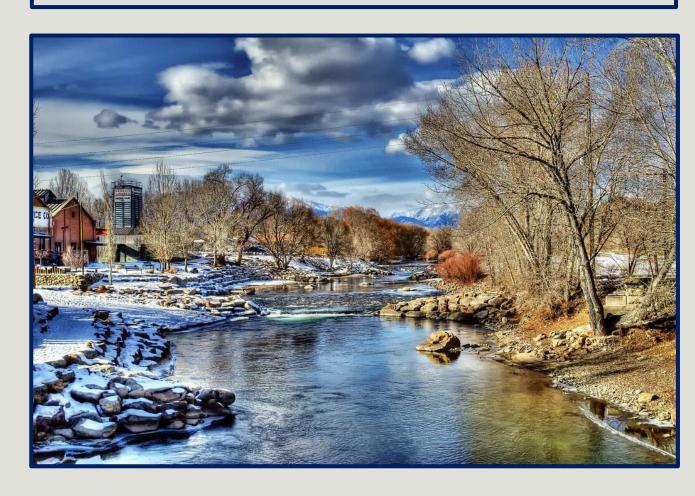


# Your Employee Benefits

Effective April 1, 2021 - March 31, 2022



Valuable benefits available exclusively to you!

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#### The Heart of the Rockies Regional Medical Center Benefits Package

Benefits are an integral part of the overall compensation package provided by Heart of the Rockies Regional Medical Center (HRRMC). Within this Benefits Guide you will find important information on the benefits available to you for the 2021-2022 plan year (April 1, 2021 through March 31, 2022). The elections you make at this time will remain the same through March 31, 2022, unless you experience a qualifying life event. Please take a moment to review the benefits HRRMC offers to determine which plans are best for you.



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# **Benefits Eligibility**

Your coverage is effective on the first of the month following your date of hire.

#### Medical, Dental, Vision, and FSAs

- All active, full-time employees regularly scheduled to work 32 hours or more per week (or 64 hours per pay period).
- All active, part-time employees regularly scheduled to work 24 hours or more per week (or 48 hours per pay period).

#### Life/AD&D Insurance:

- Class 1: All active, full-time employees regularly scheduled to work 32 hours or more per week (or 64 hours per pay period).
- Class 2: All active, part-time employees regularly scheduled to work a minimum of 24 hours per week (or 48 hours per pay period).

#### **Long-Term Disability Insurance**

 All active, full-time employees, officers, executives, managers, and medical-degreed/certified personnel regularly scheduled to work 32 hours or more per week (or 64 hours per pay period).

#### Many of the plans offer coverage for eligible dependents, including\*:

- Your legal spouse or civil union partner.
- Your children to age 26, regardless of student, marital, or tax-dependent status (including a stepchild, legally-adopted child, a child placed with you for adoption, or a child for whom you are the legal guardian).
- Your dependent children of any age who are physically or mentally unable to care for themselves.
  - Applies to medical/Rx, dental, vision, and health care FSA coverage only; eligibility varies for other coverages.
     Please see Human Resources or plan documents outlining eligibility for more information.

# **Enrollment**

- You can sign up for benefits or change your benefit elections at the following times:
- Within 30 days of your initial eligibility date (as a newly hired employee).
- During the annual benefits open enrollment period.
- Within 30 days of a qualifying life event (see other limitations or extensions for Medicare and Medicaid in the plan document)
- If you do not sign up for benefits during your initial eligibility period or during the open enrollment period, you will not be
  able to elect coverage until the following plan year, unless you experience a qualifying event.

# **Changing Your Benefits during the Year**

HRRMC allows you to pay your portion of the medical/dental/vision benefits, and fund the flexible spending accounts, on a pre- tax basis. Thus, due to IRS regulations, once you have made your elections for the plan year, you cannot change your benefits until the next annual open enrollment period. The only exception is if you experience a qualifying life event. Election changes must be consistent with your life event.

Qualifying life events include, but are not limited to:

Marriage, legal separation, or divorce Change in employment status for you, your spouse, or your dependents

Change in a dependent's eligibility (child at age 26) Birth, adoption, or death of a child

To request a benefits change, notify the Human Resources department within 30 days of the qualifying life event. Change requests submitted after 30 days cannot be accepted. You will need to provide proof of the change, such as a marriage certificate or record of birth.

# **Medical Insurance Plan**

HRRMC offers you and your eligible dependents a comprehensive medical plan, which is administered by UMR. The plan offers in- and out-of-network benefits, providing you the freedom to choose any provider. However, you will pay less out of your pocket when you choose a network provider.

Locate a network provider at <u>www.umr.com</u>, select "Find a provider", select United Healthcare Choice Plus as the network.

The table below summarizes the key features of the medical plan. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

SUMMARY OF COVERED BENEFITS		HRRMC ME	EDICAL PLAN		
	Services provided by HRRMC and First Street Family Health	In-Ne	etwork	Out -of-Network	
Plan Year Deductible	HRRMC tier and In-Network do cross accumulate, but OON does not cross				
Trail real beduction		accui	mulate		
Per Covered Person/Per Family Unit	\$500/\$1,000	\$500/	/\$1,000	\$1,500/\$3,000	
Plan Year Out-of-Pocket Maximum		Deductible	not included		
Per Covered Person/Per Family Unit	\$5,000/\$10,000	\$5,000,	/\$10,000	\$10,000/\$20,000	
Preventive Care	100% covered (no ded.)	100% cover	red (no ded.)	100% covered (no ded.)	
Physician Services					
Office Visit	\$25 copay	\$40	copay	40% after ded.	
Inpatient Hospital Services HRRMC and In-Network have different benefits	\$200 copay/day, then 25% after ded.	\$350 copay/day,	then 25% after ded.	\$600 copay/day, then 40% after ded.	
Outpatient/Ambulatory Surgery HRRMC and In-Network have different benefits	\$250 copay after ded.	\$1,000 copay after ded.		40% after ded.	
Emergency Room Services	\$125 copay	\$125	copay	\$125 copay	
Lab and X-ray	25% after ded.	25% after ded.		40% after ded.	
Occupational/Physical/Speech Therapy	Medical Necessity reviewed after 25 vis \$25 copay \$40 copay		viewed after 25 visits.		
			copay	40% after ded.	
Mammograms Diagnostic Mammograms	100% covere	ed after ded.	100% covered after ded.	100% covered after ded.	
Diagnostic 3-D Mammograms	25% aft	er ded.	25% after ded.	40% after ded.	
Preventive Mammograms	100% covere	ed (no ded.)	100% covered (no ded.)	100% covered (no ded.)	
Chiropractic	\$40 c	орау	\$40 copay	40% after ded.	
Home Health Care	25% aft	er ded.	25% after ded.	40% after ded.	
Hospice Care	25% aft	er ded.	25% after ded.	40% after ded.	
Inpatient Mental Health/Substance Abuse HRRMC and In-Network have	\$200 canay/day, than	·		\$600 capay/day, than	
different benefits	25% after ded.	0 copay/day, then \$350 copay/day, then 25% after ded.		\$600 copay/day, then 40% after ded.	
Outpatient Visit Mental Health/Substance Abuse	25% after ded.	25% after ded.		40% after ded.	
Office Visit Mental Health/Substance Abuse	Payable under Office Visit benefit	Payable under it Office Visit benefit		40% after ded.	
Smoking Cessation	20%, up to \$600 lifetime maximum (prescriptions only)				

# Summary of Covered Benefits Continued

	\$10,000 Lifetin	ne maximum	benefit		
Weight Management	Payable as any other illness	Pay	rable as any other illness	40% after ded.	
	In-House HRRMC Pharmacy Other Network Pharmac		Other Network Pharmacies	macies	
Retail Prescriptions (up to a 30-day supply)	Prescription birth contr	ered (no ded.)			
Generic	20% up to \$30 maximum		30% up to \$50 maximum		
Preferred Brands	30% up to \$90 maximum		40% up to \$150 maximum		
Non-Preferred Brands	40% up to \$90 maximum		50% up to \$150 maximum		
Specialty	20% up to \$250 maximum		30% up to \$250 maximum		
Mail Order Prescriptions (up to a 90-day supply)	NA		30% up to \$250 maximum		



# **Medical Insurance Plan**

#### No Deductible When Services/Procedures are Received at HRRMC

Per the summary on the previous page, HRRMC will waive the \$500 individual deductible for all services or procedures (where deductible applies) performed by HRRMC. This only applies to HRRMC.

If you have a procedure or are an inpatient at HRRMC, you may receive a bill from providers who attended to you—such as the radiologist, anesthesia provider, pathologist or cardiologist —for services processed and applied to your deductible before the bill from HRRMC. You will need to pay the provider's bill in full, but that charge can be put toward your \$500 deductible. Please bring your paid receipt to PFS and the PFS representative will reduce your balance due to HRRMC by the amount of the deductible you paid to your physician.

If you meet some of the \$500 deductible at HRRMC and some of the deductible at another hospital or provider at a different hospital, we will only waive the portion of the deductible that is met for services received at HRRMC.

#### **Tobacco Cessation Assistance**

HRRMC has a tobacco cessation benefit. Under this benefit, coverage is provided for prescription tobacco cessation products. The plan will cover 80% of the cost of tobacco cessation products, up to a \$600 lifetime maximum.

#### **WWW.UMR.COM (Portal)**

The UMR Portal provides enrolled plan members with 24/7 access to their personal benefits and other health care information.

Through <u>www.umr.com</u> you can:

- View claims activity
- View a summary of all covered dependents
- Access provider links and contact information

While in www.umr.com, you can access your FSA information too.

Note: You must register for www.umr.com by going to that website.

- Access and submit important forms
- Update your personal information
- View and print Plan Documents



# **Dental Benefits**

HRRMC offers you and your eligible dependents a comprehensive dental plan through Delta Dental of Colorado. In order to enroll in the dental and vision plan, you must be enrolled in the medical plan. As part of the 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. You can locate a network provider at <a href="www.deltadentalco.com">www.deltadentalco.com</a> or by calling Delta Dental at 1-800-610-0201.

The table below summarizes the key features of the dental plans being offered. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

DENTAL Summary of Benefits	Base Plan	Buy-Up Plan
Plan Year Deductible	\$50 Single/\$150	\$50 Single/\$150
	Family	Family
Maximum Benefit/Plan Year	\$500 per member	\$1,500 per member
Preventive and Diagnostic Services	You pay 0%	You pay 0%
Cleanings, oral examinations, topical fluoride applications, X-		
rays, space maintainers, and sealants		
Basic Services	You pay 90%	You pay 20%
Fillings, simple extractions, endodontics, repair of crowns,		
dentures, inlays and onlays, general anesthesia, oral surgery, and		
periodontics		
Major Services	You pay 90%	You pay 50%
Bridgework, crowns, onlays, inlays, and dentures		
Orthodontia Services	Not Covered	Not Covered

# **Vison Benefits**

HRRMC will be offering you and your eligible dependents a comprehensive vision plan through VSP. In order to enroll in the dental and vision plan, you must be enrolled in the medical plan. You can save on eyewear and eye care when you see a VSP Choice Plan network doctor.

Create an account on <a href="www.vsp.com">www.vsp.com</a> to view your in-network coverage, find a VSP network doctor and discover savings with exclusive member extras. You may also contact VSP at 1-800-877-7195.

VISION Summary of Benefits	Сорау	Frequency
WellVision Eye Exam	\$10	Every 12
		months
Prescription Glasses	\$20	Every 12
		months
Frame: \$130-\$150 allowance; 20% off any amount over	Included with	Every 12
	Glasses	months
Lenses: Single vision, Lined bifocal, and lined trifocal	Included with	Every 12
lenses	Glasses	months
Contacts (instead of Glasses): \$130 allowance	No Copay	Every 12
Contact Lens exam (fitting and evaluation)	Up to \$60	months



# **Medical/Dental/Vision Costs**

Listed below are the monthly and per pay period costs for medical/dental/vision coverage, effective April 1, 2021. In order to enroll in the dental and vision plan, you must be enrolled in the medical plan. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis.

If you experience a change in status (e.g. switch from regular, full-time to regular, part-time), you will see the change in premium on your next paycheck.

### MEDICAL - Full-Time (32 hours per week or more)

Coverage Level	Total	Employer Cost	Employe e Cost	
		(Monthly)	Monthly	Per Pay Period
Employee Only	\$874.58	\$758.88	\$115.70	\$57.85
Employee + Spouse	\$1,709.37	\$1,340.11	\$369.26	\$184.63
Employee + Child(ren)	\$1,618.28	\$1,267.40	\$350.88	\$175.44
Employee + Family	\$2,622.72	\$2,060.62	\$562.10	\$281.05

# MEDICAL - Part-Time (24-31 hours per week)

Coverage Level	Total	Employer Cost		loye ost
		(Monthly)	Monthly	Per Pay Period
Employee Only	\$874.58	\$627.48	\$247.10	\$123.55
Employee + Spouse	\$1,709.37	\$1,135.17	\$574.20	\$287.10
Employee + Child(ren)	\$1,618.28	\$1,072.98	\$545.30	\$272.65
Employee + Family	\$2,622.72	\$1,745.52	\$877.20	\$438.60

### **DENTAL – Base Plan**

Coverage Level	Total	Employer Cost	Employe e Cost	
		(Monthly)	Monthly	Per Pay Period
Employee Only	\$15.94	\$15.94	\$0.00	\$0.00
Employee + Spouse	\$30.28	\$30.28	\$0.00	\$0.00
Employee + Child(ren)	\$31.08	\$31.08	\$0.00	\$0.00
Employee + Family	\$50.68	\$50.68	\$0.00	\$0.00

### **DENTAL – Buy-Up Plan**

Coverage Level	Total	Employer Cost	Employe e Cost	
		(Monthly)	Monthly	Per Pay Period
Employee Only	\$31.68	\$15.94	\$15.74	\$7.87
Employee + Spouse	\$60.19	\$30.28	\$29.91	\$14.96
Employee + Child(ren)	\$61.78	\$31.08	\$30.70	\$15.35
Employee + Family	\$100.75	\$50.68	\$50.07	\$25.04

#### **VISION**

Coverage Level	Total	Employer	Employe	
		Cost	e C	ost
		(Monthly)	Monthly	Per Pay Period
Employee Only	\$9.05	\$9.05	\$0.00	\$0.00
Employee + Spouse	\$14.48	\$14.48	\$0.00	\$0.00
Employee + Child(ren)	\$14.78	\$14.78	\$0.00	\$0.00
Employee + Family	\$23.83	\$23.83	\$0.00	\$0.00

# **Flexible Spending Accounts**

HRRMC offers two flexible spending account (FSA) options—the health care FSA and the dependent care FSA—which allow you to pay for eligible health care and dependent care expenses with pre-tax dollars. The FSAs are administered by LIMR.

You decide how much to contribute to each FSA on a plan year basis up to the maximum allowable amounts. Your annual election will be divided by 24 pay periods and deducted evenly on a pre-tax basis from each paycheck throughout the plan year.

#### **Accessing Your FSA Funds**

#### **Claim Form**

Submit a completed claim form and an EOB, bill, or itemized receipt from the provider, to UMR for reimbursement. Keep all receipts in case UMR requires you to verify the eligibility of a purchase.

#### **Debit Card**

The debit card can be used to pay for eligible health care expenses at the point of service. Always save itemized documentation for FSA purchases. You will be asked to submit documentation to verify the eligibility of a purchase. You will automatically receive the debit card, however it is up to you whether or not you choose to activate and use the card.

#### **Health Care FSA**

The health care FSA allows you to set aside money from your paycheck on a pre-tax basis to pay for eligible out-of- pocket expenses, such as deductibles, copays, and other health-related expenses, that are not paid by the medical, dental, or vision plans.

Over-the-counter (OTC) medications are eligible for reimbursement without a prescription.

HRRMC will help you fund your health care FSA by providing an initial contribution of \$400 if you enroll in the medical plan.

If you waive HRRMC medical coverage, HRRMC will provide \$500 for full-time employees and \$450 for part-time employees so long as you provide proof of other coverage.

The health care FSA maximum contribution is \$2,750 for the 2021 - 2022 plan year.

#### **Dependent Care FSA**

The dependent care FSA allows you to set aside money from your paycheck on a pre-tax basis for day care expenses to allow you and your spouse to work or attend school full time. Eligible dependents are children under 13 years of age, or a child over 13, spouse, or elderly parent residing in your house who is physically or mentally unable to care for himself for herself. Examples of eligible expenses are day care facility fees, before- and after-school care, and in-home babysitting fees (income must be reported by your care provider).

You may contribute up to \$5,000 to the dependent care FSA for the 2021 - 2022 plan year if you are married and file a joint return, or if you file a single or head of household return.

If you are married and file separate returns, you can each elect \$2,500 for the 2021- 2022 plan year.

#### Things to Consider Before Contributing to an FSA:

\*Be sure to fund the accounts wisely. Due to the favorable tax treatment of FSAs, the IRS requires that you forfeit any money left in your account if you do not spend it by the end of the plan year. All claims must be submitted for reimbursement within 90 days following the end of the plan year, which ends March 31.

You cannot take income tax deductions for expenses you pay with your FSA(s).

You cannot stop or change your FSA contribution(s) during the plan year, unless you experience a qualifying life event.



# **Basic Life and AD&D Insurance**

Life and Accidental Death and Dismemberment (AD&D) insurance is an important element of your income protection planning, especially for those who depend on you for financial security. For your peace of mind, HRRMC provides Basic Life and AD&D insurance to all eligible employees at no cost through AXA/Equitable (as of 4/1/21). If you die as a result of an accident, your beneficiary would receive both the life benefit and the AD&D benefit.

Class 1: If you are an active full-time employee working at least 32 hours/week, you will receive two times your annual compensation in life insurance, to a maximum of \$350,000, and two times your annual compensation in AD&D insurance, to a maximum of \$250,000.

Class 2: If you are an active part-time employee working 24-31 hours/week, you will receive a flat \$10,000 in life insurance plus a flat \$10,000 in AD&D insurance.

Beneficiary Designation: To update your beneficiary information for these coverages, please log into the Benefit Center to make the adjustment.

# **Long-Term Disability Insurance**

HRRMC provides long-term disability insurance to eligible employees at no cost through AXA/Equitable. Long-term disability insurance is designed to help you meet your financial needs if you are disabled for 90 days or more due to illness or injury. Employees are eligible for this benefit on the first of the month following 90 days of disability.

You are eligible to receive 60% of your monthly covered earnings to a maximum of \$10,000 per month. Disability payments will only continue to be payable after 24 months if the disability is solely due to injury or sickness, you are unable to perform the material duties of any occupation for which you are qualified, and you are unable to earn 60% or more of your indexed earnings.

Eligibility for all AXA lines of coverage is first of the month following date of hire.

# **Employee Assistance Program**

HRRMC provides long-term disability insurance to eligible employees at no cost through AXA/Equitable. Long-term disability insurance is designed to help you meet your financial needs if you are disabled for 90 days or more due to illness or injury. Employees are eligible for this benefit on the first of the month following 90 days of disability. You are eligible to receive 60% of your monthly covered earnings to a maximum of \$10,000 per month. Disability payments will only continue to be payable after 24 months if the disability is solely due to injury or sickness, you are unable to perform the material duties of any occupation for which you are qualified, and you are unable to earn 60% or more of your indexed earnings.

HRRMC provides an employee assistance program (EAP) through Mines and Associates. The EAP provides counseling to help you manage problems before they adversely affect your personal life, health, and/or job performance. You and your household members are eligible for the EAP. The EAP is a free, strictly-confidential service that includes telephonic counseling and up to three face-to-face visits, per issue, per family member residing within the household, with a licensed professional counselor.

#### Assistance is available for the following personal and work-life situations:

\*Abuse \*Drug/Alcohol Concerns \*Psychological Issues

\*Anxiety \*Eating Disorders \*Sexual Issues

\*Career \*Financial Problems \*Stress

\*Child and Elderly Care \*Legal Referrals \*Work Related

\*Death, Grief and Dying \*Marital and Relationships

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\*Depression \*Mood Disorders

Contact the EAP by telephone at 800-873-7138 or 303-832-1068, or on the web at www.minesandassociates.com.

# **REACH AirMedCare Membership**

HRRMC has partnered with REACH Air Medical Services to provide membership coverage in the AirMedCare network.

- Members pay no out-of-pocket expenses for emergency-medical flights provided by REACH.
- Coverage is provided at over 220 aircraft locations in 32 states.
- Highly skilled nurses, medics, and pilots are ready 24 hours per day.
- Even if someone who is not related to you is living in your household, he or she may qualify for this benefit.
- Membership cards and ID stickers for your vehicles will arrive at your home address. If you do not receive these, please contact Human Resources.
- This is paid for by the employer, but the value is \$50 per employee per month.

# **Retirement Savings Plans**

HRRMC does not participate in social security, with the exception of the Medicare insurance portion. Instead, HRRMC has established a 401(a) government retirement plan. You make mandatory contributions that are matched by HRRMC. In addition, we offer a 457(b) government retirement plan for elective contributions, with additional matching HRRMC funds.

By contributing to these plans rather than to social security, you have more control over your retirement investments. You are able to make individual investment decisions within the investment options currently offered under the plans. Since these plans are government retirement plans, there could be a reduction in the social security benefit awarded at retirement. Any potential reduction is based on prior social security contributions and accumulated balances in this pension. For more information, go to <a href="https://www.socialsecurity.gov">www.socialsecurity.gov</a>.

# 401(a) Plan

The minimum, mandatory contribution that is deducted from your pay is 3.75% of gross wages. All employees participate at this level beginning with the first pay period of employment. HRRMC matches this mandatory contribution dollar-for-dollar up to regulatory and policy limitations. This deduction is made prior to federal and state income taxes, thereby reducing federal income tax liability.

# 457(b) Plan

You may also elect to make an additional pre-tax contribution to the 457(b) plan. You may elect to contribute up to the regulatory maximum each year. HRRMC matches the elective contribution up to 3.25% of gross wages up to the established policy and regulatory limitations.

The HRRMC match on combined mandatory and elective contributions is a maximum of 7% of your gross income or \$4,312.50, whichever is less.

You are always 100% vested in your contributions as well as the matching HRRMC contributions.



# **Voluntary Benefit Plans**

# **Colonial Life Voluntary Benefit Plans**

HRRMC offers all eligible employees working 24 or more hours per week the option to enroll in a number of products through Colonial. The coverage options available to you are short-term disability insurance, accident insurance, whole life insurance, and critical illness insurance, which includes cancer coverage. HRRMC also offers a term life insurance option through Colonial. Term life coverage is available in 10-, 20-, and 30-year terms.

For all current employees, enrollment in Colonial products is only allowed during the open enrollment period. Newly hired employees must enroll during their initial eligibility period to receive the guarantee issue (without medical underwriting) for short term disability, critical care, term life insurance. All other voluntary plans may be subject to medical underwriting.

Your assigned Colonial representative will walk you through each of the options above. If you are interested in enrolling, please contact Kristen Randall at Colonial at 303-525-2352 or via email at kristen randall@coloniallifesales.com.

You can also contact Colonial Life customer service by calling 800-325-4368.

# Lifelock

#### WHAT IS LIFELOCK®?

LifeLock is a leader in identity theft protection services. Information is moving faster than ever and life has never owed more quickly or been shared so broadly. Since 2005, LifeLock has been pioneers in identity protection, leveraging unique data, science and patented technology. They provide threat detection, proactive identity alerts and comprehensive remediation services. With over 4.5 million members, LifeLock is committed to providing consumers peace of mind amid the growing threat of identity theft.

#### **HOW DOES LIFELOCK WORK?**

LifeLock was designed to help stop identity theft by going above and beyond what members can do on their own. LifeLock alerts† members whenever they detect personal information on black market websites or when personal information is being used to apply for wireless services, retail credit, utilities, mortgage loans and more within their extensive network. If you're a victim of identity theft, LifeLock helps protect you with our Million Dollar ProtectionTM Package. This includes reimbursement for stolen funds and coverage for personal expenses—each with limits of up to \$1 million based on the limits of your plan—and our Service Guarantee to provide for lawyers and experts if needed, to help resolve your case.



# **IMPORTANT CONTACT INFORMATION:**

If you have any questions regarding your benefits or the material contained in this guide, please contact the Human Resources Department.

### **Heart of the Rockies Regional Medical Center Human Resources:**

Bridget Russell, Benefits Specialist Julio Nunez, HR Director

Phone: 719-530-2339 Phone: 719-530-2214 Fax: 719-530-2219 Fax: 719-530-2219

Email: bridget.russell@hrrmc.net Email: julio.nunez@hrrmc.net

Provider/Plan	Contact Number	Website
Medical and FSAs—UMR	800-826-9781	www.umr.com
Medical Network—UnitedHealthcare Choice Plus	800-826-9781	www.umr.com
Prescription Drug Coverage—Optum RX	877-559-2955	<u>www.umr.com</u>
Flexible Spending Accounts—UMR	800-826-9781	<u>www.umr.com</u>
<b>Dental</b> —Delta Dental of CO	800-610-0201	www.deltadentalco.com
Vision—VSP	800-877-7195	www.vsp.com
Life and AD&D/LTD—AXA/Equitable	866-274-9887	www.equitable.com/employeebenefi <u>ts</u> (log on to EB360)
To report a claim with AXA (Life or LTD)	866-274-9887	Please see Human Resources
Employee Assistance Program—Mines & Associates	800-873-7138 or 303-832-1068	www.minesandassociates.com Username: hrrmc; Password: employee
401(a) Plan and 457(b) Plan—Empower	866-467-7756	<u>www.empower-</u> <u>retirement.com/participant</u>
Voluntary Benefit Plans—Colonial	303-525-2352 Customer service: 800-325-4368	www.coloniallife.com Email: kristen.randall@coloniallifesales.com
Life Lock	800-607-9174	www.lifelock.com

This Benefit Guide is published for employees of Heart of the Rockies Regional Medical Center, and is only a highlight of the benefit plans. Official plan and insurance documents actually govern your rights and benefits under each plan. If any discrepancies exist between this Benefit Guide and any of the official documents, the official documents will prevail.