



# EMPLOYEE BENEFITS

Benefit plans effective April 1, 2024–March 31, 2025



HEART OF THE ROCKIES  
REGIONAL MEDICAL CENTER

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 2024-2025 plan year (April 1, 2024 through March 31, 2025). The elections you make at this time will remain the same through March 31, 2025, 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.

# 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 [www.umar.com](http://www.umar.com), select “Find a provider”, select **UnitedHealthcare 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 MEDICAL PLAN		
	Services provided by HRRMC and First Street Family Health	In-Network	Out -of-Network
<b>Plan Year Deductible</b> Per Covered Person/Per Family Unit	HRRMC tier and In-Network do cross accumulate, but OON does not cross accumulate		
	\$0	\$1,000/\$2,000	\$1,500/\$3,000
<b>Plan Year Out-of-Pocket Maximum</b> Per Covered Person/Per Family Unit	Deductible not included		
	\$4,500/\$9,000	\$5,500/\$11,000	\$10,000/\$20,000
<b>Preventive Care</b>	100% covered (no ded.)	100% covered (no ded.)	100% covered (no ded.)
<b>Physician Services</b> Office Visit	\$25 copay	\$50 copay	50% after ded.
<b>Inpatient Hospital Services</b> 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 50% after ded.
<b>Outpatient/Ambulatory Surgery</b> HRRMC and In-Network have different benefits	\$250 copay after ded.	\$1,000 copay after ded.	50% after ded.
<b>Emergency Room Services</b>	\$125 copay	\$125 copay	\$125 copay
<b>Lab and X-ray</b>	25% after ded.	25% after ded.	50% after ded.
<b>Occupational/Physical/Speech Therapy</b>	Medical Necessity reviewed after 25 visits.		
	\$25 copay	\$50 copay	50% after ded.
<b>Mammograms</b> Diagnostic Mammograms	100% covered (no ded.)	25% after ded.	50% after ded.
Diagnostic 3-D Mammograms	25% after ded.	25% after ded.	50% after ded.
Preventive Mammograms	100% covered (no ded.)	100% covered (no ded.)	100% covered (no ded.)
<b>Chiropractic</b>	\$40 copay	\$50 copay	50% after ded.
<b>Home Health Care</b>	25% after ded.	25% after ded.	50% after ded.
<b>Hospice Care</b>	25% after ded.	25% after ded.	50% after ded.
<b>Inpatient Mental Health/Substance Abuse</b> 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 50% after ded.
<b>Outpatient Visit Mental Health/Substance Abuse</b>	25% after ded.	25% after ded.	50% after ded.
<b>Office Visit Mental Health/Substance Abuse</b>	Payable under Office Visit benefit	Payable under Office Visit benefit	50% after ded.

## Summary of Covered Benefits Continued

<b>Weight Management</b>	\$10,000 Lifetime maximum benefit		
	Payable as any other illness	Payable as any other illness	50% after ded.
<b>Retail Prescriptions (30 day supply)</b>	Prescription birth control 100% covered (no ded.)		
Generic	15% up to \$25 maximum	30% to a \$75 maximum	Not Covered
Preferred Brands	30% up to \$85 maximum	40% to a \$250 maximum	Not Covered
Non-Preferred Brands	40% up to \$85 maximum	50% to a \$250 maximum	Not Covered
Specialty	20% up to \$225 maximum	50% to a \$650 maximum	Not Covered
<b>Retail/Mail Prescriptions (90 day supply)</b>			
Generic	15% up to \$50 maximum	30% to a \$250 maximum	Not Covered
Preferred Brands	20% up to \$170 maximum	40% to a \$350 maximum	Not Covered
Non-Preferred Brands	20% up to \$170 maximum	50% to a \$350 maximum	Not Covered
Specialty	NA		

# Prescription Benefit thru Script Sourcing!

ScriptSourcing can provide many name-brand and specialty medications for a \$0 copay.

ScriptSourcing may contact you or you may be asked to schedule a call with the ScriptSourcing team if you take medicine they can source for a \$0 copay. They will assist you with the application and enrollment process.

Once approved, you will receive your medication at no cost.



**ScriptSourcing Direct Line:**  
410-902-8811



**ScriptSourcing Website:**  
[www.scriptsourcing.com/enroll](http://www.scriptsourcing.com/enroll)

Please note that for some specialty medications, your ScriptSourcing advocate may ask about your household income to search through various programs on your behalf.

Eligibility is based on household size and income, so the information requested may include:

- Driver's License
- Paystubs
- Proof of Address
- Tax Returns

# Medical Insurance Plan

## Tobacco Cessation Assistance

HRRMC has a tobacco cessation benefit through the prescription drug plan. Under this benefit, coverage is provided for prescription tobacco cessation products. Generic and Brand (with NO generic equivalent) medications will be covered at 100%. This benefit is for adults 18 years and older. Please reach out to Liviniti to find out what specific medications are covered.

## 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 [www.umar.com](http://www.umar.com) you can:

- View claims activity
- View a summary of all covered dependents
- Access provider links and contact information
- Access and submit important forms
- Update your personal information
- View and print Plan Documents

While in [www.umar.com](http://www.umar.com), you can access your FSA information too.

**Note:** You must register for [www.umar.com](http://www.umar.com) by going to that website.



## UMR App

**The UMR app is another way to easily access your medical benefits.**

We have a smarter, simpler, faster way to manage your health care benefits, right from the palm of your hand.

**With just a tap, you can:**

- Access your digital ID card
- View your plan details on-demand – anytime, anywhere
- Find out if there is a copay for your upcoming appointment
- Chat, call or message UMR's member support team

**Download the UMR app today!**

Scan the QR code below or visit your app store to get started.





# 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 [www.deltadentalco.com](http://www.deltadentalco.com) 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
<b>Plan Year Deductible</b>	\$50 Single/\$150 Family	\$50 Single/\$150 Family
<b>Maximum Benefit/Plan Year</b>	\$500 per member	\$1,500 per member
<b>Preventive and Diagnostic Services</b> Cleanings, oral examinations, topical fluoride applications, X-rays, space maintainers, and sealants	You pay 0%	You pay 0%
<b>Basic Services</b> Fillings, simple extractions, endodontics, repair of crowns, dentures, inlays and onlays, general anesthesia, oral surgery, and periodontics	You pay 90%	You pay 20%
<b>Major Services</b> Bridgework, crowns, onlays, inlays, and dentures	You pay 90%	You pay 50%
<b>Orthodontia Services</b>	Not Covered	Not Covered



# Vision Benefits

HRRMC offers 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 [www.vsp.com](http://www.vsp.com) 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	Copay	Frequency
<b>WellVision Eye Exam</b>	\$10	Every 12 months
<b>Prescription Glasses</b>	\$20	Every 12 months
<b>Frame: \$70-150 allowance; 20% off any amount over</b>	Included with Glasses	Every 12 months
<b>Lenses: Single vision, Lined bifocal, and lined trifocal lenses</b>	Included with Glasses	Every 12 months
<b>Contacts (instead of Glasses): \$130 allowance</b> <b>Contact Lens exam (fitting and evaluation)</b>	No Copay Covered in full after copay	Every 12 months



# Medical/Dental/Vision Costs

Listed below are the monthly and per pay period costs for medical/dental/vision coverage, effective April 1, 2024. 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 (Monthly)	Employee Cost	
			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 (Monthly)	Employee Cost	
			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 (Monthly)	Employee Cost	
			Monthly	Per Pay Period
Employee Only	\$15.50	\$15.50	\$0.00	\$0.00
Employee + Spouse	\$29.45	\$29.45	\$0.00	\$0.00
Employee + Child(ren)	\$30.23	\$30.23	\$0.00	\$0.00
Employee + Family	\$49.30	\$49.30	\$0.00	\$0.00

## DENTAL – Buy-Up Plan

Coverage Level	Total	Employer Cost (Monthly)	Employee Cost	
			Monthly	Per Pay Period
Employee Only	\$30.82	\$15.50	\$15.32	\$7.66
Employee + Spouse	\$58.55	\$29.45	\$29.10	\$14.55
Employee + Child(ren)	\$60.10	\$30.23	\$29.87	\$14.94
Employee + Family	\$98.00	\$49.30	\$48.70	\$24.35

## VISION

Coverage Level	Total	Employer Cost (Monthly)	Employee Cost	
			Monthly	Per Pay Period
Employee Only	\$8.15	\$8.15	\$0.00	\$0.00
Employee + Spouse	\$13.03	\$13.03	\$0.00	\$0.00
Employee + Child(ren)	\$13.30	\$13.30	\$0.00	\$0.00
Employee + Family	\$21.45	\$21.45	\$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 UMR.

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 not 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 \$3,200 for the 2024-2025 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 or 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 2024–2025 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 2024-2025 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 Lincoln Financial. If you die as a result of an accident, your beneficiary would receive both the life benefit and the AD&D benefit.

### Beneficiary Designations

Please be sure to keep your beneficiary designations up to date.

- **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 an additional cash benefit in the case of an accidental death.
- **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 and an additional cash benefit in the case of an accidental death.
- **Beneficiary Designation:** To update your beneficiary information for these coverages, please complete the Lincoln Beneficiary Designation Form and return it to Human Resources.

## Long-Term Disability Insurance

HRRMC provides long-term disability insurance to eligible employees at no cost through Lincoln Financial. 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 Lincoln Financial lines of coverage is first of the month following date of hire.

## Employee Assistance Program

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
- Anxiety
- Career
- Child and elderly care
- Death, grief, and dying
- Depression
- Drug/alcohol concerns
- Eating disorders
- Financial problems
- Legal referrals
- Marital and relationship
- Mood disorders
- Psychological issues
- Sexual issues
- Stress
- Work related

Contact the EAP by telephone at 800-873-7138 or 303-832-1068, or on the web at [www.minesandassociates.com](http://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 \$65 per employee per year.

## 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 2024 reduction is based on prior social security contributions and accumulated balances in this pension. For more information, go to [www.socialsecurity.gov](http://www.socialsecurity.gov).

### 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 \$15,000, 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-, 15-, 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 guaranteed issue (without medical underwriting) for short term disability, critical care, whole 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](mailto: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 Protection™ 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.

# EMPLOYEE BENEFITS



## 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:

Audrey Duarte Cowan  
Benefits & Hospitality Coordinator  
**Phone:** 719-530-2339  
**Fax:** 719-530-2219  
**Email:** [audrey.duartecowan@hrrmc.net](mailto:audrey.duartecowan@hrrmc.net)

Sarah McMahan  
Director of Human Resources  
**Phone:** 719-530-2214  
**Email:** [sarah.mcmahan@hrrmc.net](mailto:sarah.mcmahan@hrrmc.net)

Provider/Plan	Contact Number	Website
Medical and FSAs—UMR	800-826-9781	<a href="http://www.umar.com">www.umar.com</a>
Medical Network—UnitedHealthcare Choice Plus	800-826-9781	<a href="http://www.umar.com">www.umar.com</a>
Prescription Drug Coverage—Southern Scripts	800-710-9341	<a href="mailto:support@southernscripts.net">support@southernscripts.net</a> <a href="http://www.southernscripts.net">www.southernscripts.net</a>
Prescription Drug Coverage—Script sourcing	410-902-8811	<a href="http://www.script sourcing.com">www.script sourcing.com</a>
Flexible Spending Accounts—UMR	800-826-9781	<a href="http://www.umar.com">www.umar.com</a>
Dental—Delta Dental of CO	800-610-0201	<a href="http://www.deltadentalco.com">www.deltadentalco.com</a>
Vision—VSP	800-877-7195	<a href="http://www.vsp.com">www.vsp.com</a>
Life and AD&D/LTD—Lincoln Financial	800-423-2765	<a href="http://www.lincolnfinancial.com">www.lincolnfinancial.com</a>
To report a claim with Lincoln (Life or LTD)	800-423-2765	Please see Human Resources
Employee Assistance Program—Mines & Associates	800-873-7138 or 303-832-1068	<a href="http://www.minesandassociates.com">www.minesandassociates.com</a> Company Code: hrrmc
401(a) Plan and 457(b) Plan—Empower	866-467-7756	<a href="http://www.empower-retirement.com/participant">www.empower-retirement.com/participant</a>
Voluntary Benefit Plans—Colonial	303-525-2352 Customer service: 800-325-4368	<a href="http://www.coloniallife.com">www.coloniallife.com</a> Email: <a href="mailto:kristen.randall@coloniallifesales.com">kristen.randall@coloniallifesales.com</a>
Life Lock	800-607-9174	<a href="http://www.lifelock.com">www.lifelock.com</a>

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.