



**THE TOWN OF
FRISCO**
BENEFITS GUIDE 2021

FRISCO
COLORADO

The Town of Frisco

Your 2021 Employee Benefits Guide

BENEFITS DESIGNED TO SUPPORT YOU

At the Town of Frisco, we know our dedicated employees—YOU—are key to our overall success as an organization. As a way to reward you for your hard work, we provide a benefits package that is designed to help you reach your physical, financial, and mental health goals.

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Welcome to your Benefits

JANUARY 1, 2021—DECEMBER 31, 2021

The Town of Frisco offers you and your eligible family members a comprehensive and valuable benefits program. We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family.

There are no changes to your network for 2021, however, with UMR, you will have access to the Choice Plus Network to find medical providers. Access the provider list through www.umar.com.

We recognize the importance of being able to provide our employees and their families with quality benefits as part of their overall compensation package. Therefore, our organization has developed a comprehensive benefits package that delivers quality and value while satisfying the diverse needs of our workforce. This summary is specifically designed to help you further understand the highlights of the benefit options offered to you for 2021.

There are 3 different periods for enrollment:

1. **Open Enrollment** – elections made during open enrollment will become effective January 1, 2021.
2. **New Hire** – elections made as a new hire will become effective on the first of the month following your date of hire.
3. **Qualifying Event** – notify HR of your qualifying event within 30 days of it taking place. Elections made due to a qualifying event will become effective based on what type event takes place. Please refer to page 3 for common examples of qualifying events.

Important: Employees need to complete the PDF enrollment form and submit to Loli in HR –
lolir@townoffrisco.com

Benefit Enrollment and Eligibility

WHO IS ELIGIBLE:

Active, full-time, and 10-month year-round employees working 30 hours per week are eligible for medical benefits only.

Employees working 40 hours per week are eligible for medical, dental, vision, life insurance and disability benefits.

WHEN TO ENROLL:

All enrollment forms must be submitted to HR no later than November 13th, 2020. The benefits you elect during open enrollment will be effective from January 1, 2021 through December 31, 2021.

CHANGING YOUR BENEFITS DURING THE YEAR:

You may make changes to your elections until the last day of our open enrollment period; unless you have a qualified change in status, you cannot make changes to the benefits you elect until the next open enrollment period. **Qualified changes** in status include: marriage, divorce, legal separation, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, change in residence due to an employment transfer for you, or your spouse, commencement or termination of adoption proceedings, or change in spouse's benefits or employment status.

HOW TO ENROLL:

All employees who would like to make changes to their elections must complete the enrollment form. If you do not complete an enrollment form, your coverage will remain the same for 2021 unless you have a qualifying event during the year, with the exception of your FSA elections. You **must** re-enroll every year; your contribution amounts will not roll over.

ELIGIBLE DEPENDENTS:

- Legal Spouse
- Domestic Partner
- Dependent Children up to age 26
 - Natural biological child
 - Stepchild
 - Legally adopted child
 - Child under your Legal Guardianship
 - Child considered an alternate recipient under a Qualified Medical Child Support Order
 - Child of a Domestic Partner

Medical Insurance



UMR/UNITEDHEALTHCARE CHOICE PLUS NETWORK

	HDHP-PPO	
SERVICES	NETWORK BENEFITS	OUT-OF-NETWORK BENEFITS
Calendar Year Deductible - Individual - Family	\$1,400 Individual \$2,800 Family	\$1,650 Individual \$3,050 Family
Out of Pocket Max	\$3,000 Individual \$6,000 Family Includes Deductible & Coinsurance	\$3,500 Individual \$6,500 Family Includes Deductible & Coinsurance
Hospitalization	You pay 20% coinsurance After Deductible	You pay 40% coinsurance After Deductible
Physician Visit Specialist Visit	You pay 20% coinsurance After Deductible	You pay 40% coinsurance After Deductible
Preventive Care	100% covered Not subject to Deductible	You pay 40% coinsurance After Deductible
Emergency Room Urgent Care	You pay 20% coinsurance After Deductible	You pay 40% coinsurance After Deductible
Prescription Drugs (Retail and Mail Order)	You pay 20% coinsurance After Deductible	Not Covered
Preventive Drugs	Covered at 100%	Not Covered

2021 MEDICAL RATES	EMPLOYEE RATES PER PAYCHECK
Employee Only	\$28.88
Employee + 1	\$65.63
Employee + 2	\$107.63
Employee + Family	\$139.13

Important! -> The Town of Frisco will contribute \$750 annually to your HSA for employee only tier level and \$1,400 for employee + 1 or more dependents. The contribution will be split up and deposited into your account the first pay period of each quarter.

Health Savings Account (HSA)



ROCKY MOUNTAIN RESERVE

A health savings account, commonly called an HSA, is a bank account that allows you to save, spend, and invest your money on a pre-tax basis. You must enroll in the UMR HDHP in order to contribute to an HSA.

If you enroll in the UMR HDHP, the Town of Frisco will help you start saving for your health care by contributing money to your HSA, administered by Rocky Mountain Reserve.

The Town of Frisco's annual contribution:

Employee Only: \$750

Employee+1: \$1,400

Employee+2: \$1,400

Family: \$1,400

These annual contributions from the Town are divided and made **quarterly**.

Contribute up to the IRS limits

Contributions to an HSA (including the Town of Frisco's contribution) cannot exceed the annual IRS contribution limits. The 2021 IRS maximum contributions are:

Employee-only coverage: \$ 3,600

All other coverage tiers: \$7,200

Employees age 55+ by December 31 may contribute an additional \$1,000 catch-up contribution to their HSA.

In order to fund an HSA:

- You must be enrolled in the UMR HDHP.

You cannot:

- Be enrolled in a non-HSA-eligible medical plan (e.g., your spouse's HMO plan).
- Be claimed as a dependent on someone else's tax return.
- Be enrolled in Medicare, TRICARE, or TRICARE for Life.
- Have received Veterans Administration benefits in the previous three months, unless you received treatment for a condition that was/is related to your service.

Flexible Spending Accounts (FSA)



ROCKY MOUNTAIN RESERVE

The Town of Frisco offers three flexible spending account (FSA) options through Rocky Mountain Reserve. The money that you put into an FSA is collected from your paycheck before taxes are withheld, which means you don't pay taxes on those dollars. Basically, it is like using a 25% off coupon for your health care and dependent care expenses!

A few very important rules apply to FSAs. Please read this page carefully before you make your FSA elections!

- FSA dollars must be used by the end of the year. Any unused dollars will be forfeited.
- At the end of the year, you can roll over up to \$500 from your health care FSA to use in future years.
- All requests for reimbursement must be submitted to Rocky Mountain Reserve.
- FSA elections must be made every year during open enrollment. Your current year election WILL NOT carry over to next year.

Limited Purpose Health Care FSA

- This benefit is only available if you participate in the Town's medical plan and HSA.
- Limited purpose health care FSA dollars can only be used for **dental and vision** expenses.
- You may contribute up to \$2,800* to your limited purpose health care FSA for the 2021 calendar year. The entire amount you elect is available to you on January 1 or your benefits effective date.
- At the end of the year, you can roll over up to \$500 of your remaining balance.

Health care FSA

- Available to anyone not participating in a HDHP with HSA.
- Health care FSA dollars can be used to pay for eligible out-of-pocket expenses such as deductibles, copays, and other health-related expenses that are not reimbursed by the medical, dental, or vision plans.
- Over-the-counter (OTC) medications require a prescription in order to be reimbursed.
- You may contribute up to \$2,800* to your health care FSA for the 2021 calendar year. The entire amount you elect is available to you on January 1 or your benefits effective date.
- At the end of the year, you can roll over up to \$500 from your health care FSA.

**FSA limits for 2021 have not yet been released by the IRS. We will notify you when available.*



24/7/365 care for:
Cold & flu, allergies, rash and much more!



Licensed doctors
U.S. board-certified doctors average 20 years of experience



In minutes
Connect with a doctor by phone or video



Get a diagnosis
Our doctors recommend treatment and prescribe medication (when medically necessary)

Fees for visits*:

- General Medical Visit Fee - \$49
- Mental Health Visit Fees:
 - \$90 for a licensed therapist
 - \$220 for an initial visit with a psychiatrist
 - \$100 for ongoing visits with a psychiatrist
- Dermatology Visit Fee - \$85.

Download the App, visit [Teladoc.com](https://www.teladoc.com) or call 1-800-Teladoc!

*Fees paid count toward your deductible

Dental Insurance



You may choose any licensed dentist. UMR will administer the claims.

SERVICES	NETWORK BENEFITS
Calendar Year Deductible	\$50 Individual \$150 Family
Calendar Year Maximum	\$2,000 Per Person
Preventive Care	Plan Pays 100% Deductible Waived
Basic Services	You pay 10% After Deductible
Major Services	You pay 10% After Deductible
Orthodontic Treatment – Children and Adults	You pay 10% After Deductible
Orthodontic Lifetime Max – Children and Adults	\$2,000
2021 DENTAL RATES	EMPLOYEE RATES PER PAYCHECK
Employee Only	\$1.50
Employee + 1 dependent	\$2.50
Employee + 2 dependents	\$3.50
Employee + 3 or more dependents	\$4.50

Dental insurance is often seen as unnecessary or a “luxury” item, when in reality, it’s just as important as your medical coverage. People who see the dentist regularly have better health outcomes.



Vision Insurance (VSP)



SERVICES	IN-NETWORK	NON-NETWORK REIMBURSEMENT
Exam	\$0 copay	Reimbursed up to \$50
Frequency		
Exams	12 months	
Lenses	12 months	
Contact Lens Care	12 months	
Frames	24 months	
Lenses:		
Single Vision	\$20 copay	Varies based on Lens
Bifocal	\$20 copay	
Trifocal	\$20 copay	
Lenticular	\$20 copay	
Frame Allowance	\$130 allowance	Reimbursed up to \$70
Contact Lens Allowance—Elective	\$130 allowance	Reimbursed up to \$105
Contact Lens Allowance (Medically Necessary)	Paid in Full	Reimbursed up to \$210
Can I be balanced billed?	No	Yes

2021 VISION RATES	EMPLOYEE RATES PER PAYCHECK
Employee Only	\$0.00
Employee + 1	\$3.18
Employee + 2	\$11.30
Employee + 3 or more	\$11.30



Visit [VSP.com](https://www.vsp.com) to find a provider near you!

Life and Accidental Death & Dismemberment (AD&D)



BASIC LIFE & AD&D INSURANCE (100% EMPLOYER PAID) - MUTUAL OF OMAHA

BENEFIT AMOUNT

1.5 x Annual Salary to a maximum of \$200,000

VOLUNTARY LIFE INSURANCE (EMPLOYEE PAID) – MUTUAL OF OMAHA

- Employees who want to supplement their group life insurance benefits may purchase additional coverage. When you enroll yourself and/or your dependents in this benefit, you pay the full cost through payroll deductions. You can purchase Life Insurance coverage in \$10,000 units to a maximum of \$500,000.
- You are guaranteed covered for amounts up to \$70,000 without completing evidence of insurability.
- You can purchase coverage for your spouse in \$5,000 units up to the lesser of 50% of Employee Life amount or \$150,000.
- Your Spouse is guaranteed covered for amounts up to \$25,000.
- You can also purchase coverage for your dependent children to age 19 in amounts of \$5,000 or \$10,000.



Short-Term Disability



MUTUAL OF OMAHA

This benefit is paid 100% by the Town of Frisco

WEEKLY BENEFIT AMOUNT

If you meet the definition of disability, you would be eligible to receive a weekly benefit if you are disabled equal to 60% of your weekly earnings, to a maximum of \$2,000 per week. This benefit applies to injuries you receive off the job. Since this benefit is paid by the Town, all benefits received are subject to applicable income taxes.

ELIMINATION PERIOD

The Elimination Period is the length of time of continuous disability which must be satisfied before you are eligible to receive benefits. If your disability is due to an injury or sickness, your Elimination Period is 14 consecutive days. Your benefits begin on the 15th day.

BENEFIT DURATION

If you meet the definition of disability you may receive a benefit for 11 weeks, minus the elimination period (9 weeks total paid).



Long-Term Disability



MUTUAL OF OMAHA

This benefit is paid 100% by the Town of Frisco

BENEFIT AMOUNT

- Monthly LTD Benefit:
 - 60% of your monthly earnings
 - To a monthly maximum of \$8,000
 - Subject to applicable income taxes



DEFINITION OF DISABILITY

- You are disabled when:
 - you are limited from performing the material and substantial duties of your regular occupation; and
 - you have a 20% or more loss in indexed monthly earnings due to the same sickness or injury.
 - After benefits have been paid for 36 months, you are disabled when due to the same sickness or injury, you are unable to perform the duties of any gainful occupation for which you are reasonably fitted by education, training or experience.

ELIMINATION PERIOD

- The Elimination Period is the length of time of continuous disability which must be satisfied before you are eligible to receive benefits.
- LTD benefits would begin after 90 days of disability, if you are disabled, as described in the definition above.

BENEFIT DURATION

- Your duration of benefits is based on your age when the disability occurs. Your LTD benefits are payable for the period during which you continue to meet the definition of disability up to the Social Security Normal Retirement Age. If your disability occurs at or after age 62, benefits would be paid for a reduced period of time.
- For more details about these benefits, please see information provided by Mutual of Omaha. Human Resources can assist you with this information.

Employee Assistance Program - EAP

MINES & Associates



The Town of Frisco cares about you and your household's wellbeing.

You are entitled up to six counseling sessions per issue, per household member, per year, **FREE** of charge.

Common issues that arise include:

Stress, Career, Family Issues, Death and Grief, Anxiety, Financial Problems, Drug/Alcohol Abuse, Eating Disorders, Depression, Legal Referrals, Relationships, Work-Related Issues

Contact:

www.minesandassociates.com

Username: frisco

Password: employee

1-800-873-7138

Telehealth Options are now available!

- Telephonic visit – standard telephone visit with a counselor.
- Video – using a secure platform, you can have a video visit with a counselor.
- Digital Messaging using a mobile device or computer – text or message a counselor 24-hours a day!

Just like your face-to-face sessions, all telehealth options are now available on a per issue basis to help you and your household members with whatever comes your way!

Visit minesandassociates.com to begin using Telehealth options!

Accident, Cancer & Hospital Indemnity

AFLAC VOLUNTARY BENEFITS

ACCIDENT COVERAGE

- 24-Hour Accident Coverage with a Wellness Benefit
 - Benefit for routine medical exams and preventative care
 - Daily hospitalization benefits payable for stays due to accident
 - Benefits payable for emergency treatment, X-rays and major diagnostic exams
 - Benefits payable for follow-up treatments and physical therapy
 - Transportation and lodging benefits payable for travel to receive treatment

CANCER INDEMNITY COVERAGE

- Additional coverage to help with innovative treatments from prevention to recovery
 - Cash paid directly to you to help with expenses incurred during treatment, living expenses or any purpose you choose
 - Benefit for early detection and preventative care
 - Benefits upon initial diagnosis
 - Freedom to still choose your provider

HOSPITAL INDEMNITY (HSA Compatible)

- Cash benefit to help relieve financial burden while hospitalized
 - Multiple options including – 1x hospital confinement, daily confinement ICU and waiver of premium
 - Can help offset high deductibles and out of pocket costs

AFLAC PREMIUMS PER PAY PERIOD		
TIER	ACCIDENT	CANCER
Employee Only	\$13.26	\$16.75
Employee + Spouse	\$17.68	\$28.82
1 Parent Family	\$19.96	\$16.75
2 Parent Family	\$25.16	\$28.82
Hospital Indemnity costs vary by age and which level of coverage you choose. Please see next page for rates		

For full plan details, please refer to your Aflac documents

Accident, Cancer & Hospital Indemnity



AFLAC VOLUNTARY BENEFITS

Hospital Indemnity Per Pay Period Premiums

#1 - Benefit \$500	Premium
18-49 INDIVIDUAL	\$9.56
50-59	\$10.21
60-75	\$11.90
18-49 INSURED/SPOUSE	\$13.26
50-59	\$16.32
60-75	\$19.83
18-49 ONE-PARENT FAMILY	\$10.92
50-59	\$11.44
60-75	\$12.81
18-49 TWO-PARENT FAMILY	\$13.46
50-59	\$16.51
60-75	\$20.09

#2 - Benefit \$1,000	Premium
18-49 INDIVIDUAL	\$14.11
50-59	\$14.50
60-75	\$16.97
18-49 INSURED/SPOUSE	\$20.48
50-59	\$23.99
60-75	\$28.47
18-49 ONE-PARENT FAMILY	\$16.32
50-59	\$16.58
60-75	\$17.55
18-49 TWO-PARENT FAMILY	\$20.74
50-59	\$24.25
60-75	\$28.73

#3 - Benefit \$1,500	Premium
18-49 INDIVIDUAL	\$19.18
50-59	\$19.18
60-75	\$22.56
18-49 INSURED/SPOUSE	\$28.54
50-59	\$32.44
60-75	\$37.96
18-49 ONE-PARENT FAMILY	\$22.36
50-59	\$22.56
60-75	\$22.69
18-49 TWO-PARENT FAMILY	\$28.99
50-59	\$32.63
60-75	\$38.22

#4 - Benefit \$2,000	Premium
18-49 INDIVIDUAL	\$25.03
50-59	\$25.29
60-75	\$28.93
18-49 INSURED/SPOUSE	\$37.70
50-59	\$42.12
60-75	\$48.95
18-49 ONE-PARENT FAMILY	\$29.32
50-59	\$29.51
60-75	\$29.77
18-49 TWO-PARENT FAMILY	\$38.48
50-59	\$42.38
60-75	\$49.21

For full plan details, please refer to your Aflac documents

Legal Services

LEGAL SHIELD



With your prepaid legal plan, you can contact your law firm any time you need legal advice or assistance, even 24/7 for covered emergencies.

Use Legal Shield for:

Advice and Consultation - Consult with you on personal legal matters.

Letters and Phone Calls - Make phone calls and write letters on your behalf.

Personal Document Review - Review an unlimited number of legal documents up to 15 pages each.

Trial Defense - Assistance if you're named defendant in a covered civil action suit.

Standard Will Preparation - Will preparation, annual reviews and updates for all covered family members.

Health Care Power of Attorney - Health Care Power of Attorney preparation for all covered family members.

Living Will - Physician/Living Will preparation for all covered family members.

Residential Loan Document Assistance - Mortgage document preparation for the purchase of your primary residence.

Moving Traffic Violations - Assistance with all covered non-criminal and non-commercial moving traffic violations.

Accidents - Defense for covered criminal charges arising from the permitted use of a licensed motor vehicle.

ICMA-RC Retirement

The following videos highlight different retirement plans through the Town of Frisco

- [Your 457 Plan](#)
- [Your 401\(a\) Money Purchase Plan](#)
- [Your Payroll Roth IRA](#)

[Click Here to Login!](#) Or visit www.icmarc.org



Miscellaneous Town Benefits

ADDITIONAL BENEFITS	DESCRIPTION:
Paid Holidays	The Town of Frisco recognizes eight paid holidays each year, typically: New Year's Day; Memorial Day; Independence Day; Labor Day; Thanksgiving Day and the following Friday; Christmas Eve; and Christmas Day.
Personal Time	In addition to the official holidays, full-time year-round employees receive 32 hours of personal time each year.
Annual Leave (Vacation)	Full-time employees accrue Annual Leave with pay based on length of service. In your first twelve months of continuous service you will receive 80 hours, and thereafter you continue to earn more hours each year, up to a maximum of 280 hours per year.
Sick Leave	Our sick leave policy is established to assist you when you are unable to work due to illness, injury or medical condition. Full-time employees accrue sick leave at a rate of eight hours per month.
Wellness Benefit	\$250 annually
Employee Housing Lottery	Please contact Evah@townoffrisco.com
Computer Loans	For details please contact HR.
Down Payment Assistance	The Town of Frisco will offer financial assistance for housing down-payments up to \$40,000.
Firearm Loans	For police only; for details please review the policy in the G: Drive
Jury Duty Pay	If you are chosen for Jury Duty, you may receive paid Jury Duty. Please contact HR for details.
Ski Passes	Employees are eligible for discounted ski passes to Copper Mountain Resort, and/or a ski pass loan.
Tubing Hill Passes	Eight Free passes for you and your family or friends. Value of \$208.
Nordic Pass	Free Nordic pass to Frisco Nordic Center. Value of \$200.
Bereavement Pay	We have taken into consideration the personal needs which arise from the death of an immediate family member. Up to five days may be granted annually with pay; please contact HR for details.
Wash Bay	No charge for use of the Public Works Wash Bay
Trash, Recycling, Compost	No charge for use of the trash, recycling and compost at Town Hall
Employee Recognition	Peak Awards, Employee of the Month, Monthly All Staff meetings, Holiday Party and Summer Picnic, Employee appreciation week, Employee excellence and awards
Membership Discount	Summit Hot Yoga, Silverthorne Recreation Center
Cellphone Discount	Discount with Verizon and Sprint

Notices

WOMEN'S HEALTH AND CANCER RIGHTS ACT OF 1998

In October of 1998, Congress enacted the Women's Health and Cancer Rights Act of 1998. This notice explains some important provisions of the Act. Please review this information carefully.

As specified in the Women's Health and Cancer Rights Act, a plan participant or beneficiary who elects breast reconstruction in connection with a mastectomy is also entitled to the following benefits:

- Reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
Prostheses and treatment of physical complications at all stages of the mastectomy, including lymph edemas.

Health plans must determine the manner of coverage in consultation with the attending physician and the patient. Coverage for breast reconstruction and related services may be subject to deductibles and coinsurance amounts that are consistent with those that apply to other benefits under this plan.

HIPAA (HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996)

HIPAA legislation provides rules that govern group health plans. One of the primary goals in passing HIPAA was to ensure that employees who have a medical condition could leave or change employment without losing their much-needed health insurance. HIPAA includes provisions that set limitations on the use of preexisting condition provisions.

The medical PPO plans through UMR include a preexisting condition limitation clause. You should refer to the UMR Certificate of Coverage booklet for a specific explanation of this provision.

HIPAA requires that all group health plans reduce the period of the preexisting condition exclusion by an individual's "creditable coverage" under a previous group health plan or individual health insurance. Employers and health insurance carriers are responsible for providing each covered individual with a certificate of Creditable Coverage upon termination of coverage. This HIPAA certificate is the document of creditable coverage for future group health insurance.

Certain enrollment rights are also governed by HIPAA. An individual that originally waives coverage at the initial offering and later wants to join the plan will fall into one of the categories below:

SPECIAL ENROLLMENT RIGHTS

Special Enrollee – (must enroll within 30 days of an event listed below (normal preexisting condition limits apply))

- | | | |
|------------|------------|------------------------------|
| • Marriage | • Birth | • Loss of coverage elsewhere |
| • Divorce | • Adoption | |

Resources & Contact Information

Refer to this list when you need to contact one of your benefit vendors.
For general information contact Human Resources.

MEDICAL AND DENTAL	
Provider Name:	UMR/United Healthcare Choice Plus
Provider Phone Number:	(800) 426-7453
Provider Web Address:	www.umar.com
VISION	
Provider Name:	Vision Service Plan (VSP)
Provider Phone Number:	(800) 877-7195
Provider Web Address:	www.vsp.com
PRESCRIPTION DRUG	
Provider Name:	WellDyne Rx
Provider Phone Number:	(888) 479-2000
Provider Web Address:	www.mywdrx.com
FLEXIBLE SPENDING ACCOUNTS (FSA) and HEALTH SAVINGS ACCOUNT (HSA)	
Provider Name:	Rocky Mountain Reserve
Provider Phone Number:	(888) 722-1223
Provider Web Address:	www.rockymountainreserve.com
LIFE AND DISABILITY PLANS	
Provider Name:	Mutual of Omaha
Provider Phone Number:	(800) 655-5142
Provider Web Address:	www.mutualofomaha.com
EMPLOYEE ASSISTANCE PLAN	
Provider Name:	Mines and Associates
Provider Phone Number:	(800) 873-7138
Provider Web Address:	www.minesandassociates.com
WORLDWIDE TRAVEL ASSISTANCE PROGRAM	
Provider Name:	Mutual of Omaha
ID Number:	9900MOO2
Provider Phone Number:	(800) 856-9947 (in the US) (312) 935-3658 (outside the US)
AFLAC	
Contact Person:	Brittany Buckley
Phone Number:	(303) 859-8337
E-mail Address:	brittany_buckley@us.aflac.com

NOTES



Thank you!



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