

Employee Benefit Plan Broker of Record

RFP FY23-SCHR-03

Addendum #1

Issued April 27, 2023

1. Who is the current broker for Sandoval County?

Alliant Benefits

2. How long has this broker held the County's contract?

December 2021 – June 2022 (Professional Services Agreement to obtain quotes from the market for employee benefits). July 2022 – June 2023 (provide broker services once the County became independent from the City of Albuquerque plan).

3. How much was this broker paid in 2021 and 2022?

Zero in 2021, \$9995.00 January 2022 – June 2022, Zero from the County from July 2022 to present. The broker is paid from the benefit vendors (medical on a PEPM basis, the other benefits on a percentage basis).

4. Please provide a copy of the current benefit guide or new hire packet.

The 2022 benefits guide has been attached.

5. What is the renewal or effective date of your benefit plan year?

July 1, 20xx – June 30, 20xx

6. When do the following vendor contracts terminate:

- a. Medical

Annually. Currently working on the renewal for July 2023.

- b. Dental

June 30, 2024

- c. Vision

June 30, 2026

- d. Life/Disability

Basic Life/AD&D: June 30, 2024

Voluntary Life: June 30, 2024

STD: Annually

LTD: June 30, 2024

e. Work Site

N/A, unsure what this is.

7. How many of the County employees are enrolled in the following coverages:

a. Medical

346(April)

b. Dental

377(April)

c. Vision

352(April)

d. Life/Disability

Basic: 363

LTD: 276

STD: 283

Voluntary: EE: 250, Spouse: 89, Child: 93

e. Work Site

N/A

8. Is the County's medical plan self-funded or fully insured?

Level funded currently, may be going to partially self-funded based on renewal for July 2023.

a. If self-funded, how long has the County been self-funded?

N/A

9. This contract was issued last year, why is being reissued?

Having the benefits administered in-house is new to Sandoval County (began in July 2022). After the initial one year period, Sandoval County determined that a new RFP was necessary.

10. Is the plan paid by a consulting fee (Section III, Paragraph 2, Segment C – Cost Proposal) or by Commission (Cost Response Form)?

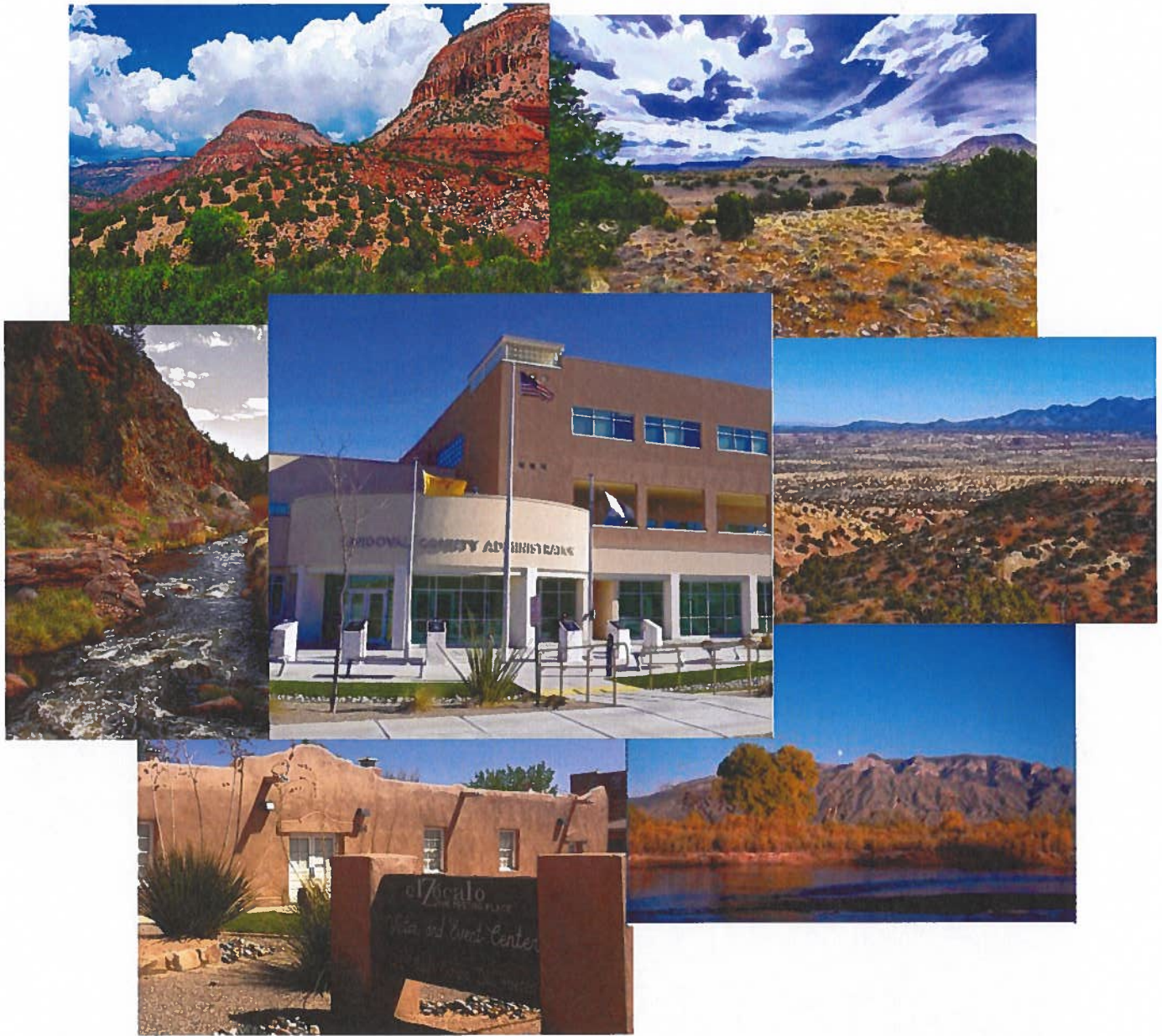
- **Section III, Paragraph 2, Segment C - Cost Proposal**

*C. Offeror should submit a proposal with a detailed schedule of total costs per task. Offeror should also provide unit cost estimated (hourly, etc.) and time schedule for each task within each task. The offeror shall quote hourly rates for additional consulting beyond the scope of the described tasks.*

- **Appendix F – Cost Response Form**

*The broker fee for Sandoval County is paid by each benefit plan on a commission fee basis (not a consulting fee).*

This is for a Commission fee basis.



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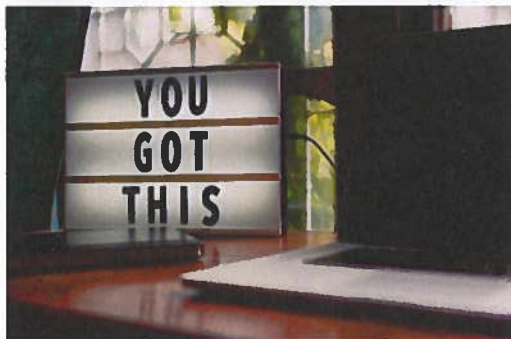
# Sandoval County

Contract Year: July 1, 2022 - June 30, 2023





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## Medicare Part D Notice:

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please see the Annual Notices section for more details.

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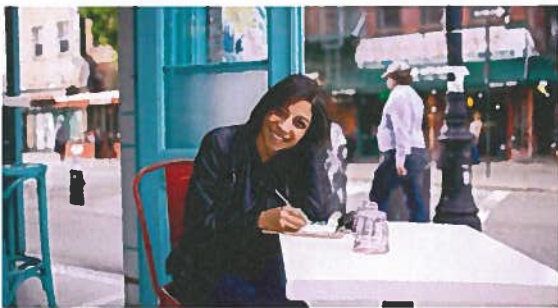


# WELCOME TO YOUR BENEFITS GUIDE

This guide is all about your benefits, but it's also about you and how to protect your health, your lifestyle, your future, and the people who are important to you.

You'll find details about your healthcare, life insurance, and disability benefits as well as tips on how to use your benefits.

The benefits in this summary are effective:  
**July 1, 2022 through June 30, 2023**



This is an overview and does not provide a complete description of all benefit provisions. For more detailed information, please refer to your plan benefit booklets or summary plan descriptions (SPDs). The plan benefit booklets determine how all benefits are paid.



We are excited to start the new plan year as we transition from the City of Albuquerque's group benefits plan to our own stand alone plan. This will give the County greater flexibility in our plan options as well as direct access to the insurance carriers for customer service needs.

Many of the benefits are not changing, but several enhancements have been made to the benefit plans effective July 1, 2022. We will review each of the benefits in this guide to recap each plan. We are confident you will find these changes to be beneficial for you and your family!

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## New Benefit Administration Portal



We are eliminating the paper enrollment forms and enhancing the process with a new benefits enrollment portal called Flock. You will be provided information on how to enroll yourself and your family OR if you need assistance, the HR department is standing by to assist you with the process.

Your current enrollment in each of the plans (with a few exceptions) will be rolled over into our new plans.

**Everyone will need to log into the Flock portal and confirm their benefit elections for the 2022-2023 plan year.**

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## Benefits Open Enrollment: May 9 - 20, 2022

This is your opportunity to change health plans, change from family to individual coverage, enroll if you had previously deferred coverage, cancel coverage for yourself or a dependent and more.

Open enrollment is available to all benefits eligible employees and dependents.

All changes will become effective July 1, 2022.

# WHAT'S NEW FOR 2022

## Medical

Our medical plan will remain with Presbyterian Healthcare. We have a new plan offering this year that will be a great option for many employees and their families.

**Everyone who is currently enrolled will be enrolled in the NEW SmartCare plan based on your current enrollment tier.**

If you wish to enroll in one of the MyCare plans you can do so by simply selecting another option as you go through the enrollment process in Flock. A side by side comparison is outlined later in this guide.

## Dental

Our dental plan will remain with Delta Dental NM with no change to the benefits or the rates!

## Vision

Our vision plan will remain with Davis Vision (now a division of MetLife) with very minor changes to the benefits, but no change to the rates!

## Flexible Spending Accounts

We will continue to utilize the P&A Group for the FSA plans.

**Expense Deadline:** For FY22, you must incur expenses by June 30, 2022.

**Claim Deadline:** For FY22, you must submit all reimbursements by September 30, 2022.

**Carryover:** Unused funds, up to \$570 can be rolled over into the FY23.

**Enrollment:** You must re-enroll each year to continue participation. Elections do not carry forward from year to year.

## Legal Plan

ARAG will continue to offer the legal plan with a minimal increase to the rates.

## Basic Life and AD&D

MetLife will be our new carrier for the Basic Life and AD&D plan. There is no change to the benefits, but the rates for this plan are **decreasing**. As you know, the cost of the plan is split between the County and the employee. The County covers 70% and the employee covers 30% of the cost. If you waived enrolling previously you will have an opportunity to enroll this year.

## Supplemental Life

MetLife is the new carrier for the Supplemental Life insurance. The rates for the life insurance will be the same or decreasing based on your age for the coming year. Employees currently enrolled in the Life plan will be grandfathered at the same benefit amounts currently elected.

In addition, MetLife is allowing employees who are currently enrolled in less than \$150,000 of coverage the opportunity to increase their benefit by two increments (\$20,000 or up to \$150,000) OR if you have been with the County less than 12 months you can enroll during open enrollment. All others wishing to enroll or increase coverage will need to go through underwriting.

Employees will be required to add their life insurance beneficiary information in Flock this open enrollment period. Please be prepared to enter the name, date of birth, social security number and contact information of your beneficiary.

## Disability (Short and Long Term)

The disability plans will also be provided by MetLife moving forward. The same benefits will be provided, but the rates for the disability coverage will be **decreasing**. If you haven't enrolled in the disability plans before, this year will be your opportunity to do so.

## Accident & Critical Illness

The Hartford will continue to offer the County the same Accident and Critical Illness plans at the same rates!



# WHO'S ELIGIBLE FOR BENEFITS?

## Employees

You are eligible if you are a regular full-time employee working 20 or more hours per week.

## Eligible dependents

- Your legal spouse.
- Your registered domestic partner.
- Your dependent children up to age 26 for medical, dental and vision plans regardless of student status or if they are married.
- Children over age 26 who are disabled and depend on you for support.
- Children named in a Qualified Medical Child Support Order (QMCSO).

## When you can enroll

### AS A NEW HIRE:

When you enroll as a new hire, your coverage begins on your hire date. You will have 31 days from your hire date to make your benefit elections. Benefit enrollment could be delayed if you do not enroll within your first week of hire. Enrollments for new hires is done online through our Benefits Administration portal Flock.

If you miss the enrollment deadline, you'll need to wait until the next open enrollment (the one time each year that you can make changes to your benefits for any reason) or if you have a qualifying life event.

### OPEN ENROLLMENT:

During the annual Open Enrollment period, you should consider your benefit plan choices carefully. All benefit elections done during the annual Open Enrollment will be effective on July 1st and will remain in effect until the end of the plan year.

### QUALIFYING LIFE EVENT:

If you have a qualifying life event you may be able to enroll or make changes to your benefit elections. Per IRS regulations, you can add or drop coverage for yourself or your dependents mid plan year, if you have a qualifying change in family status, such as:

- Change in legal marital status (marriage or divorce)
- Change in number of dependents or dependent eligibility status
- Change in employment status that affects eligibility for you, your spouse, or dependent child(ren)
- Change in your health coverage or your spouse's coverage due to your spouse's employment
- Change in an individual's eligibility for Medicare or Medicaid
- Court order requiring coverage for your child
- "Special enrollment event" under the Health Insurance Portability and Accountability Act (HIPAA), including a new dependent by marriage, birth or adoption, or loss of coverage under another health insurance plan
- Event allowed under the Children's Health Insurance Program (CHIP) Reauthorization Act (you have **60 days** to request enrollment due to events allowed under CHIP).

You must notify Human Resources of your qualified change of status within 31 days after the event.

**NOTE:** Any dependents added during New Hire, Open Enrollment, or a Qualifying Life Event will be subject to verification prior to approval of the enrollment. A social security number, Birth Certificate and/or Marriage License must be provided to Human Resources.

# DOMESTIC PARTNERS

A domestic partner is defined as a person of the same or opposite sex who lives with the employee in a long-term relationship of indefinite duration and has not been married to anyone during the previous 12 months. There must be an exclusive mutual commitment similar to that of marriage, in which the partners agree to be financially responsible for each other's welfare and share financial obligations. These benefits are also available to the domestic partner's children provided that the child meets the definition of eligibility.

The Affidavit of Domestic Partnership is a County form and legal document in which both the employee and the domestic partner swear that they have meet the following criteria:

- Both are unmarried and have been for at least 12 months
- Reside in the same residence for at least 12 months and intend to do so indefinitely
- Meet the age requirements for marriage in the State of New Mexico
- Are not related by blood to the degree prohibited in a legal marriage in the State of New Mexico
- Are financially responsible for each other's welfare and share financial obligations



In addition to the notarized affidavit, three of the following documents are also required:

- Joint lease/mortgage or ownership of property
- Jointly owned motor vehicle, bank or credit account (only one qualifies)
- Domestic partner named as beneficiary of the employee's life insurance
- Domestic partner named as beneficiary of the employee's retirement benefits
- Domestic partner named as primary beneficiary in the employee's will
- Both names on a utility bill
- Both names on an investment account

Please see Human Resources or the Sandoval County Intranet for the Affidavit of Domestic Partnership.

# TAKE ACTION STEPS

## STEP 1

### Review the Plan materials and attend an Open Enrollment meeting!

There is a lot of information in this Benefit Guide, be sure to review it carefully, share it with your family members and contact Human Resources with any questions. We will be holding Open Enrollment meetings the week of May 9th to discuss the new Presbyterian SmartCare plan and the new prescription plan, OptumRx. If you have any questions regarding the new plans, please be sure to attend one so you can hear first hand information from a Presbyterian representative on the new benefits and opportunities.

## STEP 2

### Determine if your current benefits are a fit.

Are your current elections still a good fit for your family and lifestyle? The new SmartCare medical plan with Presbyterian provides great benefits with lower copays and lower overall out-of-pocket cost.

With the cost of the disability plans going down, this is an opportunity to consider the security of knowing you would continue to have a paycheck should something happen and you became disabled and couldn't work for a period of time.

Do you want to set aside money, pre-tax, to pay for anticipated health care expenses for the coming year? The Flexible Spending Account might be a good option to review.

We highly encourage you to take the time during Open Enrollment to evaluate what your needs may be over the next year.

## STEP 3

### Log into Flock to review and update your elections.

Since we are moving away from paper enrollment forms and this is our first year utilizing the new benefits administration system, everyone is required to log into Flock to review what has been transferred into the portal. You will also need to add beneficiary information to the system and make any changes for the new plan year. The only other opportunity you will have to make changes is if you have a qualifying life event, which is outlined on page 6.

# MEDICAL

# MAKE TIME FOR HEALTH

## WORDS TO KNOW

Learn these terms to help understand how your plan works.

Click below to play video.



Or link at: [https://flimp.me/ASF\\_KeyTerms](https://flimp.me/ASF_KeyTerms)

- **DEDUCTIBLE:** The amount of healthcare costs you have to pay for with your own money before your plan will start to pay anything except for copay services.
- **OUT-OF-POCKET MAXIMUM:** Protects you from big medical bills. Once costs "out of your own pocket" reach this amount, the plan pays 100% of most eligible expenses for the rest of the calendar year.
- **COINSURANCE:** After the deductible (if applicable), you and the plan share the cost. For example, if the plan pays 80%, your coinsurance share of the cost is 20%. You are billed for your coinsurance after your visit.
- **COPAY:** A set fee you pay instead of coinsurance for some healthcare services, for example, a doctor's office visit. You pay the copay at the time you receive care.
- **IN-NETWORK / OUT-OF-NETWORK:** In-network services will always be the lowest cost option. Out-of-network services will cost more, or may not be covered. Check your plan's website to find doctors, hospitals, labs, and pharmacies that belong to the network.



## SmartCare at a Glance

Presbyterian SmartCare Health Plan		
		In-Network ONLY
<b>Plan Year Deductible</b>		
	<i>Individual</i>	\$500
	<i>Family</i>	\$1,000
<b>Coinsurance</b> <i>(you pay after deductible is met)</i>		30%
<b>Plan Year Maximum Out-of-Pocket</b>		<i>Includes ALL Copays and Deductible</i>
	<i>Individual</i>	\$3,000
	<i>Family</i>	\$6,000
<b>Office Visit Copays</b>		
	<i>Preventive Care</i>	No charge
	<i>PCP</i>	\$30
	<i>Specialist</i>	\$40
	<i>Maternity</i>	\$30 per visit up to \$200
<b>Lab &amp; X-ray</b>		No charge
<b>Advanced Imaging</b>		
	<i>CT</i>	\$50
	<i>MRI / PET</i>	\$50
<b>Facility Charges</b>		
	<i>Outpatient Care</i>	30%*
	<i>Inpatient Care</i>	30%*
	<i>Maternity</i>	30%*
<b>Virtual Visits</b>		No charge
<b>Urgent Care</b>		\$40
<b>Emergency Room</b>		\$100 (includes all services; copay is waived if admitted)
<b>Prescription Drugs</b>		
	<i>Tier 1</i>	\$10
	<i>Tier 2</i>	\$35
	<i>Tier 3</i>	\$55
<b>Mail Order:</b> <i>(90 day supply)</i>		\$20 / \$87.50 / \$165
<b>Specialty Medications</b>		20% up to \$400

\*The applicable deductible applies to these services.

Refer to page 24 to see your cost per pay period.



# MEDICAL



## MyCare at a Glance:

The premium you pay each month is the same for all three MyCare plan options, so it's important to understand which plan best fits your unique healthcare needs.

Presbyterian MyCare Health Plan					
	Active Option	Family Option		Independent Option	
		Adult	Child (dep to age 26)	In-Network	Out-of-Network
<b>Plan Year Deductible</b>					
<i>Individual</i>	\$175	\$175		\$175	\$500
<i>Family</i>	\$350	\$350		\$350	\$1,000
<b>Coinsurance</b> <i>(you pay after deductible is met)</i>	20%	20%		20%	40%
<b>Plan Year Maximum Out-of-Pocket</b>		<i>Includes ALL Copays and Deductible</i>			
<i>Individual</i>	\$6,350	\$6,350		\$6,350	\$12,700
<i>Family</i>	\$12,700	\$12,700		\$12,700	\$25,400
<b>Office Visit Copays</b>					
<i>Preventive Care</i>	No charge	No charge		No charge	40%*
<i>PCP</i>	\$35	\$40	\$10	\$40	40%*
<i>Specialist</i>	\$50	\$55	\$40	\$55	40%*
<i>Maternity</i>	\$35 per visit up to \$200	\$45 per visit up to \$300	N/A	\$40 per visit up to \$300	40%*
<b>Lab &amp; X-ray</b>	No charge	No charge		No Charge	40%*
<b>Advanced Imaging</b>					
<i>CT</i>	\$75*	Ded + \$125*	Ded + \$75*	Ded + \$75*	40%*
<i>MRI / PET</i>	\$125*	Ded + \$200*	Ded + \$100*	Ded + \$125*	40%*
<b>Facility Charges</b>					
<i>Outpatient Care</i>	20%* up to \$500	20%* up to \$500	20%* up to \$200	20%* up to \$500	40%*
<i>Inpatient Care</i>	\$500*	\$500*	\$350*	\$500*	40%*
<i>Maternity</i>	\$500*	\$500	N/A	\$500*	40%*
<b>Virtual Visits</b>	No charge	No charge	No charge	No charge	Not covered
<b>Urgent Care</b>	\$35	\$40	\$10	\$45	\$45
<b>Emergency Room</b>	\$200* (includes all services; copay is waived if admitted)				
<b>Prescription Drugs</b>					
<i>Tier 1</i>	\$10	\$10		\$10	Not covered
<i>Tier 2</i>	\$35	\$30		\$30	
<i>Tier 3</i>	\$55	\$50		\$50	
<b>Mail Order: (90 day supply)</b>	\$20 / \$87.50 / \$165	\$20 / \$75 / \$150		\$20 / \$75 / \$150	Not covered
<b>Specialty Medications</b>	20% up to \$400	20% up to \$400		20% up to \$400	Not covered

\*The applicable deductible applies to these services.

Refer to page 24 to see your cost per pay period.

# PRESBYTERIAN HEALTH CARE PERKS

## PresRN Nurse Advice Line

### Need some advice quickly?

Speak with a registered Presbyterian nurse for medical advice at no cost 24 hours a day, every day, including holidays.

Call **(505) 923-5570** or **(866) 221-9679**.



## Clickotine

### Trying to quit? You can do it!

Clickotine is an innovative program that uses clinically-driven app technology to help you create and stick to a quit plan and overcome nicotine cravings. Based on clinical trials and data, Clickotine has a high success rate by using these key features:

- Personalized messaging
- Controlled breathing
- Real-time social support
- Replacement distractions, and much more.

**Ready to get started?** Go to [clktx.com/join](http://clktx.com/join) and enter the Client ID code: **LNV20C**



## TruHearing



### Save \$\$ on Hearing Aids.

Hearing loss can have a huge impact on your quality of life. However, the cost of a pair of quality hearing aids usually costs more than \$5,000, and few people have coverage for hearing aids.

TruHearing provides Presbyterian members access to a national network of providers with copayments as low as \$699 per hearing aid. This makes addressing hearing loss more affordable.

Call TruHearing to learn more and schedule an appointment at **1-833-731-4167** (TTY 711).

## Free Gym Benefit

### Getting started is quick and easy.



As a Presbyterian Health Plan member, you and your enrolled dependents (ages 18 and up) have **free access** to more than 10,000 national, regional, and local fitness, recreation, and community centers.



These facilities include all Defined Fitness locations in Albuquerque, Rio Rancho, and Farmington, as well as the nationwide Prime Fitness Network.

If you elect a plan with a gym membership, you will not be able to change your medical election until the next plan year open enrollment.

You will be responsible for tax on the fair market value (FMV) of the Presbyterian Value-Added Gym Membership. The FMV is the same for all employees who elect the gym membership, regardless of participation by a spouse, domestic partner or children.

Visit [defined.com](http://defined.com) or [primemember.com](http://primemember.com) for a list of participating locations. After your enrollment with Presbyterian, you will receive detailed instructions on how to get started.

# PRESBYTERIAN PRESCRIPTION PLAN



## Pharmacy Network

Presbyterian Health Plan utilizes a Pharmacy Network with over 60,000 national and independent pharmacies which provide access to care when and where members need it.

You have the option to purchase up to a 90-day supply of medications under the 90-day at Retail Pharmacy benefit. Preferred Generic, Preferred Brand and Non-Preferred Drugs can be obtained from an In-network Pharmacy. If you choose the 90 days at retail option, you will be charged one copayment per 30 day supply up to a maximum of a 90-day supply.

- ◇ Take your prescription bottle(s) to a retail pharmacy of your choice.
- ◇ If you do not have refills available ask the Pharmacy staff at the retail location to contact your doctor for additional refills.
- ◇ If you would like to have your prescriptions filled through OptumRx Home Delivery ask your doctor to send your prescriptions to OptumRx Home Delivery.

*\*some medications can't be transferred*



Note that some drugs are required to be obtained through a specialty pharmacy provider.

## Home Delivery (Mail Order)

Under the mail order pharmacy benefit, Preferred and Non-Preferred medications can be obtained through the Mail Order Service Pharmacy. You may purchase up to a 90-day supply up to the maximum dosing recommended by the manufacturer. On July 1, 2022 you can get started with home delivery by registering online, by phone or mail. After you are registered with OptumRx, you can also ask your doctor to send your prescriptions to OptumRx using one of the following methods: Electronic Prescription, by fax at (800) 491-7997, or by phone at (800)791-7658.

## Specialty Pharmacy Network

The Specialty Care Pharmacy at Presbyterian is available to provide medications for people who have serious, chronic, or rare health conditions, such as hepatitis, multiple sclerosis, or growth or immune disorders.

On July 1, 2022, specialty prescriptions previously filled with your last Pharmacy Benefits Manager with available refills will need to be transferred to the Presbyterian Specialty pharmacy.

The Specialty Pharmacy team can provide you with the information, support, and tools you need to understand your treatment and manage your condition.

- Go over medication dosages and schedules with you
- Discuss how to manage any side effects you may have
- Help you stay on track with your treatment
- Make sure you are taking your medication safely and effectively
- Help you understand proper treatment guidelines for your condition Most prescriptions will be mailed to your home.

Specialty Pharmaceuticals are not available through the retail or mail order option and are limited to a 30-day supply.



# EMPLOYEE ASSISTANCE PROGRAM (EAP)



A division of Presbyterian Healthcare Services



## Access your EAP benefit today.

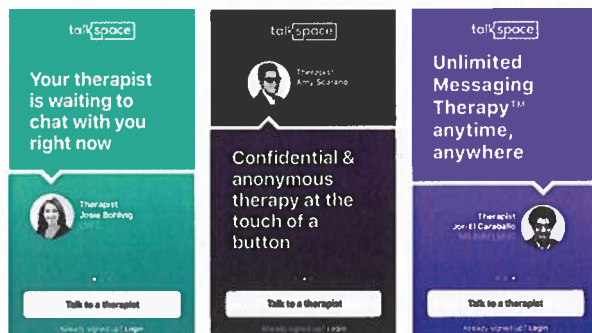
Call **1-866-254-3555** or **505-254-3555**, for personal and confidential assistance and to schedule an appointment.

Talk Space is a messaging therapy service which



offers members age 14 and older behavioral health counseling with licensed behavioral therapists via text, video or audio messaging at a time and place that is convenient for them.

Go to [www.talkspace.com/php](http://www.talkspace.com/php) to access the program.



## A Benefit at No Cost to You!

There are times when everyone needs a little help, advice, or assistance with a serious concern. The Employee Assistance Program (EAP) is a free and confidential counseling service designed to assist employees (and any member of your immediate household) with personal problems that might adversely affect their job performance, health and well-being.

The Solutions Group can help you handle a wide variety of personal issues such as emotional health and substance abuse; parenting and childcare needs; financial coaching; legal consultation; and eldercare resources.



## No cost EAP resources

The EAP is available around the clock to ensure you get access to the resources you need:

- Unlimited phone access to master's-level specialists 24/7.
- Up to 6 referrals for face-to-face counseling sessions. The national network includes 144,000+ clinicians.

Maintaining your privacy and confidentiality is of the greatest importance. All records, referrals and evaluations are kept private and confidential in accordance with federal and state laws.



# DENTAL

## OUR PLAN

Delta Dental of NM

### How your teeth affect your health.

Gum disease is a painless disease that causes bacteria and toxins to enter your blood, which may also be connected to:

- ✓ **Diabetes**
- ✓ **Heart disease**
- ✓ **Pregnancy complications**
- ✓ **Respiratory conditions**
- ✓ **Rheumatoid arthritis**

## Why sign up for Dental coverage?

It's important to go to the dentist regularly. Brushing and flossing are great, but regular exams catch dental issues early before they become more expensive and difficult to treat.

That's where dental insurance comes in. Dental insurance makes it easier and less expensive to get the care you need to maintain good oral health.

Dental insurance covers three types of treatments:

- Preventive care includes exams, cleanings and x-rays.
- Basic care focuses on repair and restoration with services such as fillings, root canals and gum disease treatment.
- Major care goes further than basic and includes bridges, crowns and dentures.

In addition, the plan provides orthodontia benefits for adults and children.





## Giving you freedom and choice

The PPO plan gives you the freedom to see any dentist you want, anywhere across the country. When you choose a dentist who is part of the plan's large network you may receive discounted rates only available to members.

- ✓ See any dentist and save by using the Delta Dental NM PPO network.
- ✓ The cost of your preventive care does not reduce your annual maximum!
- ✓ There's no need to get referrals to see a specialist.
- ✓ Preventive care is covered 100% when using an Delta Dental PPO provider.
- ✓ Get coverage for hundreds of services.

Visit [deltadentalnm.com](http://deltadentalnm.com) to find network providers in your area.

	Delta Dental PPO Dentist	Delta Dental Premier / Non-Participating Dentist*
<b>Calendar Year Deductible*</b>		
<i>Individual</i>	\$50	
<i>Family</i>	\$150	
<i>Waived for Preventive?</i>	Yes	
<b>Calendar Year Maximum</b>		
<i>Per covered Person</i>	\$1,500	
<b>Coinsurance</b>	<i>You pay:</i>	
<i>Preventive</i>	0%	20%
<i>Basic</i>	15%	15%
<i>Major</i>	50%	50%
<b>Coverage</b>		
<i>Preventive</i>	Oral Exams, Cleanings, X-rays Emergency Treatment, Sealants,	
<i>Basic</i>	Fillings, Extractions, Oral Surgery, Endodontics, Periodontics	
<i>Major</i>	Crowns, Dentures, Bridges, Inlays, Onlays, Implants	
<b>Ortho Benefits</b>	<b><i>Adult &amp; Child</i></b>	
Lifetime Maximum	\$1,200	
Deductible	None	None
Coinsurance	50%	50%*

\*When services are received from a Delta Dental Premier dentist or non-participating dentist, the patient's out-of-pocket costs may be higher because those dentists may balance bill patients for amounts over and above a benefits payment based on the Delta Dental PPO fee schedule.

Refer to page 23 to see your cost per pay period.

## Why sign up for Vision coverage?

Vision coverage helps with the cost of eyeglasses or contacts. But even if you don't need vision correction, an annual eye exam checks the health of your eyes and can even detect more serious health issues such as diabetes, high blood pressure, high cholesterol, and thyroid disease.

		Davis Vision	
		In-Network	Out-of-Network Allowance
<b>Exam</b>	Retinal Imaging	\$10 copay up to \$40 copay	up to \$45 N/A
<b>Frequency</b>	Exam Lenses Frames Contacts	1x every 12 months 1x every 12 months 1x every 24 months 1x every 12 months	
<b>Lenses*</b>	Single Vision Bifocal / Trifocal—lined Lenticular Progressives	\$15 copay \$15 copay \$15 copay Standard—covered in full Others: \$110—\$225 copay	up to \$30 up to \$50 up to \$100 up to \$50
	Standard Scratch Coating Polycarbonate Lenses	Covered in full Children: covered in full Adults: \$40 copay	N/A
<b>Frames</b>		\$160 Allowance (20% discount over allowance)	up to \$70
<b>Contact Lenses</b>		<b>Contacts are in lieu of frames and lenses.</b>	
	Contact Fitting & Evaluation	\$60	N/A
	Elective Contact Lenses	\$130 allowance	up to \$105
	Medically Necessary Contacts	Covered in full	up to \$210
<b>Lasik</b>		Discounts provided through nationwide network of laser vision correction providers.	

## IMPORTANT INFORMATION

- Your vision benefits are available every 12 months. The date of your initial service determines the date you are eligible for your next vision service. (**Example:** Eye exam is done March 13, 2020, your next eye exam can be done on, or after, March 13, 2021).
- Remember medical conditions of the eye, such as glaucoma, cataracts, and diabetic retinal exams are covered under your medical plan.

Refer to page 23 to see your cost per pay period.



## LIFE & DISABILITY

### **YOUR BENEFICIARY = WHO GETS PAID**

If the worst happens, your beneficiary—the person (or people) on record with the life insurance carrier—receives the benefit. Make sure that you name at least one beneficiary for your life insurance benefit, and change your beneficiary as needed if your situation changes.

### **Is your family protected?**

Life, Accidental Death & Dismemberment (AD&D) and disability insurance can fill a number of financial gaps for a family recovering from an illness, injury or worse. After a loss of income, many families have to reduce their standard of living. Consider what your family would need to cover:

- Medical bills and funeral expenses
- Living expenses (housing, food, clothing, utilities)
- Large expenses (rent or mortgage, education)
- Taxes and debts that need to be settled.

### **If you need additional coverage**

We offer supplemental (voluntary) coverage that you can purchase for yourself, your spouse, and your children. See the Supplemental Benefits section for details.

# LIFE AND AD&D COVERAGE



## GUARANTEED ISSUE

If you purchase life insurance coverage above a certain limit (the "guaranteed issue" amount) or after your initial eligibility period, you will need to submit an Evidence of Insurability with additional information about your health in order for the insurance company to approve the amount of coverage.

## For Open Enrollment 2022:

- **Employees already enrolled in the Supplemental Life coverage can increase their benefit by 2 increments as long as it doesn't exceed the guarantee issue of \$150,000.**
- **Employees hired within the last 12 months can elect up to the Guarantee Issue during this open enrollment without going through underwriting. All other employees electing new coverage during open enrollment will need to complete an Evidence of Insurability and be approved by underwriting for the coverage.**
- **New hires enrolling in the Supplemental Life can elect up to the Guarantee Issue during their initial eligibility period — if you wait until a later time to enroll you will be subject to underwriting approval.**

## Basic Life and AD&D

Basic Life Insurance pays your beneficiary a lump sum if you die. AD&D (Accidental Death & Dismemberment) coverage provides a benefit to you if you suffer from loss of a limb, speech, sight, or hearing, or to your beneficiary if you have a fatal accident.

## MetLife Basic Life and AD&D

The coverage is provided by MetLife and varies based on your annual salary. **The cost is split—Sandoval County pays 70% of the premium and the employee pays 30%.**

The benefit amounts above will begin to reduce by 50% at age 70 and older. Refer to the plan document for details.

## Supplemental Life

You can purchase additional life insurance to protect your family in the event of your death, especially if you have financial obligations such as a mortgage or children in college.

Coverage is available at VERY affordable rates for your spouse and/or child(ren) if you purchase coverage for yourself. **Employees pay 100% of the cost for this coverage.**

## MetLife Supplemental Life

<b>EMPLOYEE</b>	Increments of \$10,000 up to \$500,000 (not to exceed 5x base annual earnings). <b>Guarantee issue is \$150,000</b>
<b>SPOUSE</b>	Increments of \$5,000 up to \$100,000, not to exceed 100% of employee benefit. <b>Guarantee issue is \$50,000</b>
<b>CHILD</b>	Options include \$1,000, \$2,000, \$4,000, \$5,000 or \$10,000; - 15 days to 6 months: \$1,000 benefit - birth to 14 days: no benefit



# DISABILITY COVERAGE

## EXPECT THE UNEXPECTED

Most people underestimate the likelihood of being disabled at some point in their life. Disability insurance replaces part of your pay while you are unable to work so you have a continuing income for living expenses.



## Voluntary Short-term Disability (STD)

STD coverage pays you a benefit if you temporarily can't work because of an injury, illness, or maternity leave. Benefits may be reduced by income from other income sources such as paid time off. Your doctor and the insurance company will work together to determine how long benefits are payable, based on your condition. **Coverage is provided by MetLife and employees pay 100% of the cost for this coverage.**

**Weekly Benefit Amount:** Plan pays 60% of covered weekly earnings

**Maximum Weekly Benefit:** \$1,155

**Benefits Begin After:**

*Accident:* 30 days of disability

*Sickness:* 30 days of disability

**Maximum Payment Period\*:** 22 weeks

**Pre-existing Limitations:** 3/12—Limitations do apply, see the plan booklet for additional information.

## Voluntary Long-term Disability (LTD)

LTD insurance replaces part of your income for longer term issues such as:

- Debilitating illness (cancer, heart disease, etc.)
- Serious injuries (accident, etc.)
- Heart attack, stroke
- Mental disorders

If you qualify, LTD benefits begin after a waiting period. Payments may be reduced by state, federal, or private disability benefits you receive while disabled. **The coverage is provided by MetLife and the cost is split—Sandoval County pays 70% of the premium and the employee pays 30%.**

**Maximum Monthly Benefit:** 60% of salary up to \$5,000/month

**Elimination Period:** 180 days

**Maximum Benefit Period:** to age 65 or normal retirement age

**Minimum Benefit:** \$100/month

**Benefit Amount:** determined by your salary and age

**Survivor Benefit:** 3x monthly benefit

**Pre-existing:** 3/12—Limitations do apply, see the plan booklet for additional information.





# ACCIDENT INSURANCE



Your medical plan helps to cover the cost of illness, but a serious or long-lasting medical crisis often involves additional expenses and may affect your ability to bring home a full paycheck. With Accident insurance you'll receive a payment for a covered injury or related service that helps you pay for unexpected costs that can add up. If you or a covered family member has an accident, this plan pays a lump-sum, tax-free benefit. The payment will depend on the type and severity of your injury and can be used any way you choose from expenses not covered by medical insurance to day-to-day costs of living such as the mortgage or utility bills.

**The effective date for the Accident plan is the 1st day of the month following your date of hire or the 1st day of the month subsequent to a qualifying life event.**

PLAN INFORMATION		
Coverage Type		Off-Duty only
BENEFITS		
EMERGENCY, HOSPITAL & TREATMENT CARE		
Accident Follow-Up	Up to 3 visits per accident	\$75
Acupuncture/Chiropractic Care/PT	Up to 10 visits per accident	\$25
Ambulance - Air	Once per accident within 72 hours	\$900
Ambulance - Ground	Once per accident within 90 days	\$300
Daily Hospital Confinement	Up to 365 Days/lifetime (Total daily and ICU)	\$200
Daily ICU Confinement	Up to 30 days/accident (subject to 365 Days/lifetime)	\$400
Diagnostic Exam	Once per accident within 90 days	\$200
Emergency Room	Once per accident within 72 hours	\$200
Hospital Admission	Once per accident within 90 days	\$1,000
Initial Physician Office Visit	Once per accident within 90 days	\$75
Urgent Care	Once per accident within 72 hours	\$75
X-ray	Once per accident within 90 days	\$50
SPECIFIED INJURY & SURGERY		
Abdominal/Thoracic Surgery	Once per accident within 90 days	\$1,000
Burn	Once per accident within 72 hours	Up to \$15,000
Concussion	up to 3 per year within 72 hours	\$150
Dislocation	Once per joint per lifetime (open or closed)	Up to \$8,000
Fracture	Once/bone/accident within 90 days	Up to \$9,000
Knee Cartilage	Highest benefit once/accident within 72 hours	Up to \$750
CATASTROPHIC		
Accidental Death	Within 90 days; Spouse @50% and child @25%	\$50,000
Coma	Once per accident (>168 hours within 90 days)	Up to \$10,000
Dismemberment	Once per accident within 90 days	Up to \$30,000
FEATURES		
Ability Assist® EAP <sup>2</sup> - 24/7/365 access to help for financial, legal or emotional issues		Included
HealthChampion - Administrative & clinical support following serious illness or injury		Included

# CRITICAL ILLNESS Insurance



Critical Illness insurance helps to alleviate the financial strain in the event you experience a serious illness such as cancer, heart attack or stroke. Claim payments are made in lump sums for eligible conditions. The funds can help cover deductibles, copays and household expenses. You choose the benefit amount that fits your paycheck and can cover yourself and your family members if needed.

As part of The Hartford's Critical Illness insurance, you are also eligible for a \$50 benefit if you receive a covered wellness screening such as blood tests, stress tests, or a chest x-ray each year.

There are two options to choose from—a \$15,000 benefit or a \$30,000 benefit. Both are guaranteed when initially enrolling. **The effective date for the Critical Illness plan is the 1st day of the month following your date of hire or the 1st day of the month subsequent to a qualifying life event.**

COVERAGE AMOUNT	BENEFIT AMOUNTS
Employee Coverage Amount	\$15,000 or \$30,000
Spouse Coverage Amount	50% of your coverage amount
Child(ren) Coverage Amount	50% of your coverage amount
COVERED ILLNESSES	
CANCER CONDITIONS	
Benign Brain Tumor*	100% of coverage amount
Invasive Cancer	100% of coverage amount
Non-invasive Cancer	25% of coverage amount
VASCULAR CONDITIONS	
Heart Attack*; Heart Transplant*; Stroke*	100% of coverage amount
Aneurysm; Angioplasty/Stent; Coronary Artery Bypass Graft	25% of coverage amount
OTHER SPECIFIED CONDITIONS	
Coma*; End Stage Renal Failure; Loss of Hearing; Loss of Speech; Loss of Vision; Major Bone Marrow Transplant	100% of coverage amount 25% of coverage amount
VASCULAR CONDITIONS	
Advanced Multiple Sclerosis; Advanced Parkinson's; Amyotrophic Lateral Sclerosis (ALS)	100% of coverage amount
CHILD CONDITIONS	
Cerebral Palsy; Congenital Heart Disease; Cystic Fibrosis; Muscular Dystrophy; Spina	100% of coverage amount
ADDITIONAL BENEFITS	
Recurrence - Pays a benefit for a subsequent diagnosis of conditions marked with an	100% of original benefit amount
Health Screening Benefit	\$50 once per year per covered
FEATURES	
Coverage Maximum - Primary Insured & Spouse	500% of coverage amounts
Coverage Maximum - Child(ren)	300% of coverage amount
Ability Assist® EAP <sup>2</sup> - 24/7/365 access to help for financial, legal or emotional issues	
HealthChampion <sup>sm2</sup> - Administrative & clinical support following serious illness or injury	

# ADDITIONAL SUPPLEMENTAL PLANS

## Deferred Compensation

Supplemental Retirement Plans - 457 Deferred Compensation Program

What is Deferred Compensation?

- ◇ A voluntary, IRS-approved retirement savings plan
- ◇ Pre-Tax and Tax Deferred - build retirement savings for tomorrow and reduce today's taxes (income taxes are due in the year in which the money is withdrawn usually during retirement when you are in a lower tax bracket)
- ◇ You may defer up to \$20,500 in 2022. If you are 50 or older or within 3 years of normal retirement age you are allowed to make additional "catch-up" contributions in the amount of \$6,500
- ◇ Contributions are conveniently made through payroll deductions so your taxes are reduced each pay period
- ◇ Plans allow you to increase, decrease, stop and restart contributions monthly, without fees or penalties



Benefits of Deferred Compensation

- ◇ Reduce current income taxes while investing for retirement
- ◇ Convenient payroll deductions
- ◇ It's portable - if you change jobs you can consolidate your savings in another public sector employer's 457 plan, a qualified 401k plan, a tax sheltered 403b annuity plan, or traditional IRA
- ◇ If you retire or leave service early, there is no penalty for withdrawal. You will however, owe income tax on all withdrawals
- ◇ An active employee may borrow up to 50% of the balance in their Deferred Compensation Account - talk with your representative for more information.

Deferred Compensation Providers. See contact information for providers on page 25.

**PERA SmartSave** **MissionSquare**  
Deferred Compensation Plan  **RETIREMENT**  
Invest in a shared sense of service™



## Legal Insurance

Legal coverage isn't just for the serious issues, it's for your everyday needs too. Legal insurance helps you address common situations like creating wills, transferring property or buying a home. With an UltimateAdvisor® legal insurance plan from ARAG you can count on a wide range of coverage and services. See page 24 for the bi-weekly cost.

# YOUR BI-WEEKLY BENEFIT COST

## Medical Insurance Employee pays 20% ER pays 80%

### Presbyterian Health Plan - SmartCare

	Employee	County	Total
Single	\$ 53.95	\$ 215.80	\$ 269.75
Couple	\$ 109.77	\$ 439.07	\$ 548.84
S/Parent	\$ 86.66	\$ 346.64	\$ 433.30
Family	\$ 158.43	\$ 633.72	\$ 792.15

### Presbyterian Health Plan - Buy-Up Plans (MyCare)

	Employee	County	Total
Single	\$ 90.68	\$ 215.80	\$ 306.48
Couple	\$ 184.51	\$ 439.07	\$ 623.58
S/Parent	\$ 145.67	\$ 346.64	\$ 492.31
Family	\$ 266.29	\$ 633.72	\$ 900.01

## Dental Insurance Employee pays 20% ER pays 80%

### Delta Dental

	Employee	County	Total
Single	\$ 2.98	\$ 11.91	\$ 14.89
Couple	\$ 6.02	\$ 24.10	\$ 30.12
S/Parent	\$ 6.62	\$ 26.47	\$ 33.09
Family	\$ 8.96	\$ 35.84	\$ 44.80

## Vision Insurance Employee pays 100%

### Davis Vision

	Employee	County	Total
Single	\$ 2.18	\$ -	\$ 2.18
Couple	\$ 4.37	\$ -	\$ 4.37
S/Parent	\$ 4.67	\$ -	\$ 4.67
Family	\$ 7.60	\$ -	\$ 7.60

## Accident Insurance Employee pays 100%

### The Hartford Biweekly Rates

Single	\$3.78
Couple	\$5.95
S/Parent	\$6.45
Family	\$10.09

## Critical Illness Insurance Employee pays 100%

### The Hartford

Benefit Amount	\$15,000	\$30,000
Single	\$11.46	\$22.38
Couple	\$16.89	\$32.74
S/Parent	\$12.57	\$24.27
Family	\$18.18	\$34.93

## Legal Insurance Employee pays 100%

### ARAG Legal

Single	\$7.92
Employee +1	\$9.87
Family	\$10.13

## Basic Life and AD&D Employee pays 30% ER pays 70%

### MetLife

Minimum: \$6,000 to Maximum: \$50,000

	Employee	County	Total
Cost per \$1,000	\$ 0.0194	\$ 0.0452	\$ 0.0646

## Voluntary Term Life Employee pays 100%

### MetLife

Age Biweekly Rate per \$1,000

<30	\$0.0171
30 - 34	\$0.0230
35 - 39	\$0.0383
40 - 44	\$0.0462
45 - 49	\$0.0692
50 - 54	\$0.1062
55 - 59	\$0.1985
60 - 64	\$0.2935
65 - 69	\$0.4675
70+	\$0.7952

## Dependent Child Term Life Employee pays 100%

### MetLife

Coverage Biweekly Cost (AD&D added cost)

\$2,500	\$0.24
\$5,000	\$0.48
\$7,500	\$0.72
\$10,000	\$0.96

## Short Term Disability Employee pays 100%

### MetLife

Weekly Benefit = 60% base salary

Rate per \$10 of Weekly Benefit

All Ages	\$0.137
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## Long Term Disability Employee pays 30% ER pays 70%

### MetLife

Weekly Benefit = 60% base salary

Rate per \$100 of Weekly Benefit

Age	EE Rate	ER Rate	Total
<34	\$0.012	\$0.029	\$0.0415
35 - 39	\$0.037	\$0.086	\$0.1223
40 - 44	\$0.051	\$0.119	\$0.1699
45 - 49	\$0.069	\$0.161	\$0.2294
50 - 54	\$0.092	\$0.215	\$0.3074
55 - 59	\$0.106	\$0.248	\$0.3545
60 - 64	\$0.079	\$0.185	\$0.2649
65+	\$0.028	\$0.066	\$0.0937

\*\* Bi-weekly = monthly times 12 divided by 26



# PLAN CONTACTS

## HELPFUL RESOURCES

### Benefits Portal/App

Flock

[Www.](#)

Employer Key: ???

### MEDICAL

**Presbyterian Healthcare**

**Policy # TBD**

Customer Service

(505) 923-5678 or

(800) 356-2219 (TTY 711)

7:00 am—6:00 pm M-F

[phs.org/myPRES](https://phs.org/myPRES)

### Pharmacy

**OptumRx**

Customer Service

(800) 797-9791

[OptumRx.com](https://OptumRx.com)

### Mail-Order Pharmacy

**OptumRx**

Customer Service

(866) 528-5829

[OptumRx.com](https://OptumRx.com)

### Nurse Advice Line

**Presbyterian Healthcare**

Customer Service

(505) 923-5570 or

(866) 221-9679

[phs.org](https://phs.org) and search for “PresRN”

### The Hartford

**Accident / Critical Illness**

**Policy # TBD**

(866) 547-4205

[thehartford.com/benefits/myclaim](https://thehartford.com/benefits/myclaim)

[aragalegalcenter.com](https://aragalegalcenter.com)

### Online Visits

**Presbyterian Healthcare**

[phs.org/onlinevisits](https://phs.org/onlinevisits)

### Clickotline

[clktx.com/join](https://clktx.com/join)

Client ID code: LNV20C

### Assist America

Customer Service

(800) 872-1414 or

(609) 968-1234 (outside the USA)

Reference Number: 01-AA-PXI-10071

### TruHearing

Customer Service

(833) 731-4167 (TTY 711)

8:00 am—8:00 pm M-F

### EAP

**The Solutions Group**

Customer Service

(866) 254-3555 or (505) 254-3555

### Deferred Compensation

**PERA SmartSave (Voya)**

Paul Lium

(505) 699-8548 or

[Paul.Lium@voyacorp.com](mailto:Paul.Lium@voyacorp.com)

**MissionSquare (formerly ICMA-RA)**

Dennis Dexel

(505) 899-5011 or

[DDexel@missionsq.org](mailto:DDexel@missionsq.org)

### Employer Contact Information

Sandoval County Human Resources

1500 Idalia Road

Building D

Bernalillo, NM 87004

(505) 867-7505 (phone)

(505) 867-9365 (fax)

[humanresources@sandovalcountynm.gov](mailto:humanresources@sandovalcountynm.gov)

### DENTAL—PPO

**Delta Dental of NM**

**Policy # TBD**

Customer Service

(505) 855-7111 or

(877) 395-9420

5:00 am – 8:00 pm PST

[deltadentalnm.com](https://deltadentalnm.com)

### VISION

**Davis Vision**

**Policy # TBD**

Customer Service

(800) 638-3120

5:00 am – 8:00 pm PST

[davisvision.com](https://davisvision.com)

### LIFE / AD&D

**MetLife**

**Policy # TBD**

Customer Service

(888) 299-2070, prompt 3

(800) 980-0298 – Fax

### DISABILITY

**MetLife**

**Policy # TBD**

Customer Service

(888) 299-2070, prompt 2

(888) 505-8550 – Fax

### Legal

**ARAG**

**Policy # TBD**

(800) 247-4184

[aragalegalcenter.com](https://aragalegalcenter.com)



# Important Plan Notices and Documents

## CURRENT HEALTH PLAN NOTICES

Notices must be provided to plan participants on an annual basis and are provided in a separate document and include:

- **Medicare Part D Notice**  
Describes options to access prescription drug coverage for Medicare eligible individuals.
- **Women's Health and Cancer Rights Act**  
Describes benefits available to those that will or have undergone a mastectomy.
- **Newborns' and Mothers' Health Protection Act**  
Describes the rights of mother and newborn to stay in the hospital 48-96 hours after delivery.
- **HIPAA Notice of Special Enrollment Rights**  
Describes when you can enroll yourself and/or dependents in health coverage outside of open enrollment.
- **HIPAA Notice of Privacy Practices**  
Describes how health information about you may be used and disclosed.
- **Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)**  
Describes availability of premium assistance for Medicaid eligible dependents.

## COBRA CONTINUATION COVERAGE

You and/or your dependents may have the right to continue coverage after you lose eligibility under the terms of our health plan. Upon enrollment, you and your dependents receive a COBRA Initial Notice that outlines the circumstances under which continued coverage is available and your obligations to notify the plan when you or your dependents experience a qualifying event. Please review this Notice carefully to make sure you understand your rights and obligations.

## CURRENT PLAN DOCUMENTS

Important documents for our health plan and are posted on the Flock enrollment portal and include:

### Summary Plan Descriptions

A Summary Plan Description (SPD) and/or Certificates of Coverage are the legal documents for describing benefits provided under the plan as well as plan rights and obligations to participants and beneficiaries. The following documents are available:

- Presbyterian Medical Plan Certificates of Coverage
- Delta Dental of NM Plan Certificate of Coverage
- Davis Vision Certificate of Coverage
- MetLife Life/AD&D & Disability Certificates
- The Hartford Accident & Critical Illness Certificates
- ARAG Legal Certificate
- Flexible Spending Accounts SPD

### Summary of Benefits and Coverage

A Summary of Benefits and Coverage (SBC) is a document required by the Affordable Care Act (ACA) that presents benefit plan features in a standardized format. **The following SBCs are posted on the Flock enrollment portal and include:**

- Presbyterian Healthcare SmartCare plan
- Presbyterian Healthcare MyCare Active plan
- Presbyterian Healthcare MyCare Family plan
- Presbyterian Healthcare MyCare Independent plan

Paper copies of these documents and notices are available upon request. If you would like a paper copy, **please contact Human Resources.**

