



2023

Effective July 1, 2023 -
June 30, 2024

EMPLOYEE BENEFITS GUIDE





Eligibility

WELCOME!

Highlands Fire District offers you and your family a comprehensive and valuable benefits package! To get the most out of your benefits—please review this Guide and other details.

Are You Eligible?

Yes, if you're a full-time employee. Full-time employees work an average of 30 or more hours per week. New hires are eligible for benefits to be effective on the 1st of the month following your date of hire.

Covering Your Family Members

You can enroll the following family members for medical, dental and vision coverage at the same time you enroll:

- Your legal spouse
- Your Certified Domestic Partner
- Your child(ren), spouse's child(ren) or domestic partner's child(ren) to age 26

When & How to Sign Up

Open enrollment is held for a limited time each year. New hires' notification of eligibility includes sign-up deadline.

To enroll: Complete the registration material and return them to Jayme Jones.

Can I Change My Decisions Later?

Once you have enrolled, you cannot make changes to your benefits until the next open enrollment period—UNLESS you have a "Qualifying Event*", which includes things like:

- Marriage, divorce or legal separation
- Birth or adoption of a child
- Change in child's dependent status
- Death of a spouse, child or other qualified dependent
- Change in employment status or a change in coverage under another employer-sponsored plan

***If you qualify to change benefits, you must submit your request within 30 days of the qualifying event. Documentation (such as birth certificate or marriage license) may be required.**



Inside This Guide

2	Eligibility
3	Welcome
4-5	Medical Insurance
6	Health Savings Account (HSA)
7	Telemedicine
8	Where to Seek Care
9-10	Tips on Selecting Healthcare
11-12	How to Save Money
13	Dental Insurance
14	Vision Insurance
15	How to Find a Provider
16	Life and AD&D Insurance
17	Additional Kairos Benefits
18	Additional Optional Benefits
19	Health Plan Definitions
20	Contacts

This guide is not intended to be a complete description of the insurance coverage offered, nor is it a binding contract. Controlling provisions are provided in each benefit plan policy. Should there be a difference between this guide and the official plan documents, the official plan documents will govern.

More information about specific terms and conditions of each plan is included in the Summary Plan Description (SPD) and Summary of Benefits and Coverage (SBC).

Welcome to your Highlands Fire District 2023 Benefits!



Your needs, and those of your family, are unique to you. That's why Highlands Fire District provides a comprehensive and flexible benefits program that you can customize to fit your personal situation. Our program offers you and your family important healthcare coverage and financial security.

Some of the benefits we offer are paid for in full by Highlands Fire District. For others, it is a shared contribution between you and the Company.

Your benefits are an important part of your total compensation at Highlands Fire District. Please take the time to review and evaluate all the options available to you and your family.

This guide is not intended to be a complete description of the insurance coverage offered, nor is it a binding contract. Controlling provisions are provided in each benefit plan policy. This guide also serves as a Summary of Material Modifications ("SMM") and includes updates that affect Highlands Fire District's Summary Plan Descriptions. Please keep this guide with your Summary Plan Descriptions for future reference. If there is any discrepancy between this guide, the Summary Plan Descriptions and the Plan document, the Plan document will control. Highlands Fire District reserves the right to end, suspend, or amend their plans or the benefits provided thereunder, at any time, for any reason, in whole or in part.



Medical Insurance- Kairos/UMR/UHC

Highlands Fire District is pleased to offer all our eligible employees a choice of four quality health plans.

Benefit Highlights

NOTE: In-Network amounts are shown. See Summary of Benefits & Coverage (SBC) for out-of-network benefits and more details.	<u>Copay Plan - Buy Up Plan</u>	<u>\$1,500 HSA Plan - Buy Up Plan</u>
Deductible Calendar Year	\$750 Employee \$1,500 Employee +1 \$2,250 Family	\$1,500 Employee \$3,000 Family <i>*if insuring family members, the family deductible must be met first before coinsurance</i>
Coinsurance (after deductible is reached)	You pay 20% Plan pays 80%	You pay 20% Plan pays 80%
Out-of-Pocket Maximum Calendar Year Includes deductible, coinsurance and copays (that you pay)	\$5,000 Individual \$10,000 Family	\$3,500 Individual \$6,550 Family
Physician Office Visit Primary Care or Specialist	PCP- \$25 copay Specialist- \$50 copay	You pay 20% after deductible Plan pays 80% after deductible
Preventive Care	Covered At 100%	Covered At 100%
Inpatient & Outpatient Services	You pay 20% after deductible Plan pays 80% after deductible	You pay 20% after deductible Plan pays 80% after deductible
Telemedicine Physician services/Medical	\$0 copay	\$0 copay
Emergency Room & Urgent Care Facility	ER- You pay 20% after deductible Urgent Care- \$50 copay	You pay 20% after deductible Plan pays 80% after deductible
Prescription Drugs Retail: 30-day supply	Generic: \$10 copay Preferred: \$60 copay Non-preferred: \$100 copay	Generic: \$10 copay Preferred: \$60 copay Non-preferred: \$100 copay <i>*deductible must be met before Rx copays apply with the exception of preventative drugs</i>

Our offer of health insurance includes minimum value coverage and meets the affordability standards of the Affordable Care Act. This means that you would not qualify for a subsidy on the Health Insurance Marketplace. Your family members may qualify for a subsidy, depending on your total household income and the cost of coverage. Visit healthcare.gov to learn more.



Medical Insurance- Kairos/UMR/UHC

Highlands Fire District is pleased to offer all our eligible employees a choice of four quality health plans.

Benefit Highlights

NOTE: In-Network amounts are shown. See Summary of Benefits & Coverage (SBC) for out-of-network benefits and more details.	<u>\$2,500 HSA Plan - Base Plan</u>	<u>\$5,000 HSA Plan - Buy Down Plan</u>
Deductible Calendar Year	\$2,500 Employee \$5,000 Family <i>*if insuring family members, the family deductible must be met first before coinsurance</i>	\$5,000 Employee \$10,000 Family <i>*if insuring family members, the family deductible must be met first before coinsurance</i>
Coinsurance (after deductible is reached)	You pay 20% Plan pays 80%	You pay 20% Plan pays 80%
Out-of-Pocket Maximum Calendar Year Includes deductible, coinsurance and copays (that you pay)	\$3,450 Individual \$6,550 Family	\$6,450 Individual \$12,900 Family
Physician Office Visit Primary Care or Specialist	You pay 20% after deductible Plan pays 80% after deductible	You pay 20% after deductible Plan pays 80% after deductible
Preventive Care	Covered At 100%	Covered At 100%
Inpatient & Outpatient Services	You pay 20% after deductible Plan pays 80% after deductible	You pay 20% after deductible Plan pays 80% after deductible
Telemedicine Physician services/Medical	\$0 copay	\$0 copay
Emergency Room & Urgent Care Facility	You pay 20% after deductible Plan pays 80% after deductible	You pay 20% after deductible Plan pays 80% after deductible
Prescription Drugs Retail: 30-day supply	Generic: \$10 copay Preferred: \$60 copay Non-preferred: \$100 copay <i>*deductible must be met before Rx copays apply with the exception of preventative drugs</i>	Generic: \$10 copay Preferred: \$60 copay Non-preferred: \$100 copay <i>*deductible must be met before Rx copays apply with the exception of preventative drugs</i>

Our offer of health insurance includes minimum value coverage and meets the affordability standards of the Affordable Care Act. This means that you would not qualify for a subsidy on the Health Insurance Marketplace. Your family members may qualify for a subsidy, depending on your total household income and the cost of coverage. Visit healthcare.gov to learn more.



Health Savings Account (HSA)- HealthEquity

Only available for those enrolled in the HSA-QUALIFIED HDHP PLAN

A Health Savings Account (HSA) is a tax advantaged savings vehicle available to individuals covered by a High Deductible Health Plan (HDHP). Funds in the account are used to pay for qualified medical, dental and vision expenses. As of 1/1/2020, you can now use funds on over-the-counter medications (no doctor’s prescription needed) and menstrual products.

An HSA is a great way to save money on taxes and to budget for medical expenses. You can use HSA funds for medical expenses now or save for future medical costs, even into retirement. Your HSA belongs to you. You do not lose funds if you don’t spend them; funds remain in your account.

FUNDING YOUR HSA

Your account is funded in 2 ways:

1) **Employer Contributions:** Highlands Fire District will contribute \$1,300 into your HSA . You will also receive an additional one time off-set of \$972.00 if you elect the \$5,000 Buy Down Plan.

2) **Employee Contributions:** You can contribute on a tax-free basis, per paycheck. You can change your contribution amount at any time during the year, as long as you do not exceed the IRS limits. You also can make deposits directly to your HSA bank up until you file your tax return for the prior year, as long as you do not exceed the IRS limit.

	2023 HSA Contribution Limit	Highlands Fire District HSA Contribution	Employee 2023 HSA Contribution Limit
Individual	\$3,850	\$1,300	\$2,550
Family	\$7,750	\$1,300	\$6,450

Additional \$1,000 “catch-up” contribution allowed if you are 55 or older. Please note the limits are based on a calendar year and subject to change each year based on IRS regulations.

Important things to know about your HSA

- ◆ **Triple Tax Savings!** You do not pay federal tax* on:
 1. Contributions to the account
 2. Spending on qualified expenses
 3. Interest or investment earnings on your account
- ◆ You must be enrolled in an HSA-qualified health plan. You also cannot be covered by other health insurance, including through your spouse, Health Care FSA, or Medicare.
- ◆ To pay for qualified expenses, your HSA must be opened prior to incurring those expenses. For a full list of qualified expenses, go to irs.gov/publications/p502.
- ◆ If your child is under the age of 26, but does not qualify as a dependent on your tax return, she/he may be covered under your medical plan, but your HSA funds cannot be used for expenses for that child.
- ◆ Enrollment in Medicare Part A may be retroactive by up to 6 months when you begin taking Social Security retirement after your Social Security Normal Retirement Age (SSNRA). This may affect your HSA eligibility.

**Tax treatment of HSAs for state tax purposes may vary by state.*





Telemedicine- TelaDoc

Highlands Fire District provides a telemedicine benefit to all eligible employees at no additional cost through TelaDoc.

TelaDoc provides fast and economical access to board certified physicians that can diagnose illness, recommend treatment and prescribe medications **over the telephone or through video chat.**

Quality medical care is available **24 hours a day, 7 days a week and 365 days** per year throughout the United States.



For minor medical care, TelaDoc may be the least expensive and most convenient option. Now you don't have to spend hours traveling to and from or waiting in a hospital Emergency Room, Urgent Care or Pharmacy Clinic for minor medical needs.

TelaDoc is not intended to replace your relationship with your primary care provider, rather provides access to healthcare when reaching the doctor is difficult or inconvenient.

In most cases, TelaDoc is perfect for treatment of:

- Allergies
- Arthritic Pain
- Bronchitis
- Certain Rashes
- Cold/Flu Symptoms
- COVID-19
- Ear Infections
- Headaches/Migraine
- Insect Bites
- Sinus Infections
- Sprains/Strains
- Respiratory Infections
- Stomach Ache/Diarrhea
- Sore Throat
- Urinary Tract Infection
- Minor Burns
- And many more non-emergency medical conditions



Benefit Highlights

Physician services/Medical

\$0 copay

- How it Access
 - 1) Register you and your family online: www.teladoc.com
 - 2) Download the mobile app and click Activate account: www.teladoc.com/mobile
 - 3) Call to talk to a doctor: (800) 835-2362



Where to Seek Care

Emergency Care vs. Urgent Care

When you need help in a hurry, you have choices. Of course, when it's a **life-threatening problem**, you should call 911 or go straight to the nearest hospital emergency room (ER).

In the ER, true emergencies are treated first, so unless your life is in danger, you'll wait – sometimes for hours. The ER is also the most expensive option for care.

For non-life-threatening problems, call your doctor, call your nurse line or go to an urgent care center.



Go to Urgent Care

- Moderate fever
- Colds, cough or flu
- Bruises and scrapes
- Cuts and minor lacerations
- Minor burns and skin irritations
- Eye, ear or skin infections
- Sprains or strains
- Possible fractures
- Urinary tract infections
- Respiratory infections

OR

Go to Emergency Room or call 911

- Heart attack or stroke
- Chest pain or intense pain
- Shortness of breath
- Severe abdominal pain
- Head injury or other major trauma
- Loss of consciousness
- Major burns or severe bleeding
- One-sided weakness or numbness
- Open fractures
- Poisoning or suspected overdose



Tips on Selecting Healthcare

Be a consumer, not just a patient, in your healthcare.

Shop for quality and price. Know the costs before you buy (just like you would in purchasing a TV or a car).

Take control and don't be afraid to **ASK QUESTIONS**.



Use in-network providers

Use your online provider locator (see page 13) or call the phone number on the back of your health plan ID card to find a physician or medical facility in your network.

- Why?**
- The billed amount usually will be significantly lower.
 - The amount you pay in out-of-pocket costs will be significantly lower.

Compare costs of in-network providers

Use any cost comparison tools available to you, and you can always call the providers yourself.

- Why?**
- Costs can vary greatly among in-network providers.

EXAMPLES*	Range of Price In-Network	Price Variance
Primary Care (1st visit, adult)	\$45 ----- \$170	3X
Lab test– Lipid panel	\$10 ----- \$392	39X
X-ray (wrist, foot, pelvis)	\$15 ----- \$626	41X
MRI– lower back	\$182 ----- \$2,121	11X

**For illustrative purposes only. Costs in your area will vary.*

Use the Estimate Healthcare Cost page at www.umar.com to:

- Find a doctor or service
- Estimate healthcare costs
- Compare Rx prices...and more

Your UMR Mobile App also provides access to info you can use:

- Deductible balances
- Find doctor & services
- Search claims

Confirm that the provider is still in-network & accepting new patients

Check with the provider and/or your health plan network before you make an appointment.

- Why?**
- Occasionally, there are network changes; providers may move in– or out-of-network.
 - There are times when a provider is part of the network, but may not be accepting new patients for services.



Tips on Selecting Healthcare (cont'd)

Use appropriate medical facilities for care needed

Use a hospital emergency room only for real emergencies/critical care. Otherwise, use urgent care or convenience care facilities, or contact TelaDoc.

Why? • The cost differences can be tremendous.

EXAMPLES– Facility Costs*

Average convenience care clinic cost:	\$62
Average urgent care center cost:	\$152
Average hospital emergency room cost:	\$1,757
Facility/Radiology Services (CT/MRI)-	
Average independent radiology facility cost:	\$457/\$706
Average outpatient hospital cost:	\$1,376/\$1,676
Colonoscopy, endoscopy or arthroscopy-	
Average freestanding surgery center cost:	\$1,100
Average outpatient hospital cost:	\$2,821

Use generic prescription medicines when possible & check prices at pharmacies before you buy

Why? • The cost differences can be tremendous.
• Where you shop can mean savings, too.

EXAMPLES– Generics*

Condition & Brand Name	Brand Cost	Generic Cost	Savings
Diabetes: Starlix	\$289.83	\$45.58	\$244.25
Cholesterol: Lipitor	\$138.00	\$20.00	\$118.00
High Blood Pressure: Inderal	\$665.90	\$70.59	\$595.31

EXAMPLES– Pharmacy Choice*

Prescription Drug	Home Delivery	Local Network Pharmacy
Metformin (generic diabetes drug)	\$2.72	\$3.22
Fluoxetine (generic of Prozac)	\$2.10	\$2.60

Check your bills and insurance explanation of benefits (EOB)

Why? • Mistakes can happen, even when you have had excellent medical care.
ALWAYS check to assure:

- You are billed for actual services received
- No errors in type of care or amount of care received
- In-network discounts are applied
- Deductible and any copays or coinsurance are applied correctly.

**For illustrative purposes only. Costs in your area will vary.*



How to Save \$\$\$!

When Using Your Medical and Prescription Plans:

Use In-Network Doctors

To pay the lowest cost for care, use in-network doctors, clinics, hospitals and pharmacies, and use your online Healthcare Cost Estimator to compare in-network provider costs. When you visit out-of-network doctors, our health plan covers less of the cost.

Choose the Right Type of Care

When you need care, know your options. Urgent care centers, online doctor visits or a call to the medical plan nurse line can help save time and money.

Use freestanding imaging centers for MRIs, CT Scans and other imaging.

Use Your Preventive Care Benefits

Most preventive care services are covered at 100% when you use in-network providers. Getting regular exams, screenings and immunizations can save you a lot of money in the long run by catching problems early or preventing them altogether.

Use MaxorPlus Home Delivery

Rather than visiting a pharmacy month after month, save time by having the medication delivered to your home.

Through MaxorPlus Home Delivery, you can also save money by getting up to a 90-day supply for less than what you would pay through a retail pharmacy. And because shipping is free, you'll also save on gas money!



Ask Your Doctor for Generic Drugs

The next time you need a prescription, ask your doctor if it is appropriate to use a generic drug rather than a brand name drug. Generic drugs contain the same active ingredients, are identical in dose, form and administrative method AND are less expensive than their brand name counterparts.

If you must take a brand name drug, ask your doctor for samples or coupons. Also check the drug manufacturer's website for available rebates and discounts.

Search Cheaper Rx Prices

Drug prices sometimes vary significantly between pharmacies. Clever RX collects and compares prices for FDA approved prescription drugs, saving you up to 80% off retail cost.

Access Clever RX at www.cleverrx.com to find the lowest price pharmacy near you. You can also download your Clever RX card or app to unlock exclusive savings. (Please note, Clever RX is a separate entity and does not go through your medical plan; this will not apply towards your deductible).



How to Save \$\$\$!

Preventive Care

Did you know that if you are covered under ANY of our medical plans, your in-network preventive care is covered at 100%? That's right! \$0 cost for your annual physicals and preventive exams and screenings.

These exams and screenings help identify health risks early on, and help you keep out-of-pocket expenses in-check. When was the last time you had your total cholesterol and glucose levels checked? Knowing these critical numbers is one of the most important parts of the visit.

\$0 OUT OF POCKET



TESTS

BLOOD PRESSURE, DIABETES, CHOLESTEROL



SCREENINGS

MAMMOGRAMS, COLONOSCOPIES, SEXUALLY TRANSMITTED INFECTIONS



INTERVENTIONS

QUIT SMOKING, LOSE WEIGHT, EAT HEALTHY, IDENTIFY DEPRESSION, REDUCE ALCOHOL USE



VACCINATIONS

FLU, PNEUMONIA, MEASLES, POLIO, MENINGITIS, & OTHER DISEASES



REGULAR VISITS

WELL-WOMAN, WELL-BABY, WELL-CHILD



CARE

FOR HEALTHY PREGNANCIES

Shopping for Healthcare

- **Use In-Network Providers** Use your online provider locator or call the phone number on the back of your health plan ID card.
- **Compare costs of in-network providers** Costs can vary greatly among in-network providers.
- **Use appropriate medical facilities for care needed** Use a hospital emergency room only for real emergencies/critical care. Otherwise, use urgent care, convenience care facilities or telehealth.
- **Use generic prescription medications when possible & check prices at pharmacies before you buy**
- **Check your bills & insurance explanation of benefits (EOB)** Always check:
 - You are billed for actual services received
 - No errors in type of care or amount of care received
 - In-network discounts are applied
 - Deductible and any



Dental Insurance- Delta Dental of AZ

Highlands Fire District offers a dental plans through Delta Dental of AZ. Your choice of dentists can determine the cost savings you receive. In-Network providers are paid directly by Delta Dental of AZ and agree to accept negotiated fees as “payment in full” for services rendered.

When you use out-of-network providers, Delta Dental of AZ will apply the applicable percentage of the allowed amount and you are responsible for paying the balance of the bill.

In-Network coverage is provided when you use Delta Dental of AZ providers. To search for providers, go to www.deltadentalaz.com and click on Need a Dentist.

In addition to protecting your smile, dental insurance helps pay for dental care and includes regular checkups, cleanings and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

Dental Benefit Highlights	
(In-Network Benefits Shown)	<u>Base Plan</u>
Preventive Services- (Type I)	Covered at 100%
Calendar Year Deductible	\$50 Individual \$150 Family
Basic Services- (Type II)	You pay 20% after deductible Plan pays 80% after deductible
Major Services- (Type III)	You pay 50% after deductible Plan pays 50% after deductible
Annual Maximum (per member)	\$1,500
Orthodontia- (Type IV) (to age __)	You pay 50% after deductible Plan pays 50% after deductible
Orthodontia Lifetime Maximum	\$1,500





Vision Insurance- VSP

Routine eye exams are important for maintaining good vision and can also provide early warning of other health conditions. The VSP vision plan provides coverage for exams, glasses and contact lenses, as shown below.

In-network coverage is provided when you use VSP providers. To search for providers, log onto www.vsp.com and select Find a Doctor.

Driving to work, reading a news article and watching TV are all activities you likely perform every day. Your ability to do all of these activities, though, depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

Vision Benefit Highlights		
(In-Network Benefits Shown)	<u>Frequency</u>	<u>You Pay</u>
Eye Exam	Once every 12 months	\$10 copay
Prescription Glasses	Once every 12 months	\$25 copay
Lens (Single, lined bifocal, trifocal)		Included in Prescription Glasses copay
Frames		\$180-\$200 allowance, 20% off balance over \$180-\$200
Progressive Lenses (Standard)		\$0 copay
Contacts (instead of glasses)	Once every 12 months	\$150 allowance, up to \$60 copay for contact fitting and evaluation





How to Find a Provider

Finding an in-network provider is very important and can end up saving you a lot of money out-of-pocket. Outlined below are the steps to find an in-network provider for medical, dental and vision benefits.



HOW TO FIND A MEDICAL PROVIDER

- 1 Go to www.umr.com
- 2 Click on Find a Provider
- 3 Select UnitedHealthcare Choice Plus for the provider network
- 4 Click View Providers
- 5 You can search for a specific provider or
- 6 Click on a Category
- 7 Each Category has additional categories to narrow the search
- 8 Once you have selected the category, you will see the



HOW TO FIND A DENTAL PROVIDER

- 1 Go to www.deltadentalaz.com
 - 2 Scroll to the section that says "Need a Dentist?"
 - 3 Choose a specialty and your plan type from the drop-down menus . Your Plan type is Delta Dental PPO Plus Premier
 - 4 In the Search By Current Location question, choose **Yes or No**
Yes will use the location data from your web browser
You will need to enter a zip code if you choose **No**
 - 5 Click Find Dentists to see a list of nearby dentists meeting your search criteria
- OR** Call 800-352-6132 and select option 5.



HOW TO FIND A VISION PROVIDER

- 1 Go to www.vsp.com
- 2 Click on Find a doctor
- 3 Select to search by Location, Office, or Doctor
- 4 Enter the appropriate information based on your search option
- 5 You can also narrow your search for Premier Program providers
- 6 Click Search to see the list of providers that match



Life and AD&D Insurance- MetLife

How much life insurance do you need?

Protecting your family's financial security is important. Life insurance helps you plan ahead for your financial responsibilities.

Your family has a lot of expenses to consider:

- Monthly mortgage or rent payments
- Car payment and other loans
- Daily living expenses (utilities, food, transportation)
- Education costs for children/grandchildren

Your list is probably even longer than this. You can search online for a "life insurance calculator" to help you decide how much life insurance you need. Knowing your loved ones have a financial safety net is important for your own peace of mind.



Basic Life and AD&D*— *COST FOR EMPLOYEE IS FULLY PAID BY Highlands Fire District*

It's important that our employees have some level of financial protection. That's why we provide eligible employees with Basic Life and AD&D coverage at no cost to you.

All eligible employees receive guaranteed coverage in the amount of : \$ 50,000.

*AD&D– Accidental Death & Dismemberment

Important Note: Be sure HR has your up-to-date beneficiary information.



Additional Kairos Benefits



Employee Assistance Program (EAP)

We understand how challenging it can be to balance your work and personal life, and we are committed to helping you do just that.

Offered through Public Safety Crisis Solutions (PSCS), the **EAP** can provide you and your family and household members with information and assistance on a wide range of topics and issues including work stress, debt problems, family issues, relationship worries, parenting challenges, anxiety, grief and much more.

Provided at **no cost to you**, your benefit includes 12 one-on-one counseling sessions per family member, per year by contacting (602) 466-9456.

Online resources are also available by logging onto pscrisissolutions.com

Clinical Advocacy Program

Navigating health care and insurance can be complicated and leave you feeling overwhelmed.

That's where we come in. Through the Kairos Clinical Advocacy Program, our dedicated inhouse nurses help guide you through the health care system, choose the best treatment, and keep your costs to a minimum.

With this program, you have:

- a champion in your corner who not only has a clinical background but understands your insurance coverage and genuinely wants to help
- a concierge to compare costs for you and help you get the best value





Additional Optional Benefits



Identity Theft Protection

Identity theft is when thieves steal your personal information in order to take over or open new accounts, file fake tax returns, rent or buy properties or commit other crimes in your name. Aura Identity Guard can help you avoid identity theft and, in the worst-case scenario, get your life back after a breach of your secure personal information. Highlands Fire District offers 3 plan options for purchase.

Prepaid Legal Plan

The Hyatt legal plan, available through MetLife, gives you convenient access to attorneys by phone, or online for a wide variety of legal services.

Common legal services include estate documents (wills and trusts), real estate matters, identity theft defense, traffic offenses, document review, adoptions, name changes and debt collection defense.

For the services included, you pay only your monthly premium of \$7.50 for the low plan or \$15.00 for the high plan through pre-tax payroll deductions; there are no copays and no deductibles.

Pet Insurance

My Pet Protection, offered through Nationwide, makes it a little easier to be financially prepared for the costs of your pet's healthcare needs.

Nationwide pet insurance provides reimbursement for veterinary treatments related to accidents and illnesses.

Rates for this insurance are based on your reimbursement level, pet's species and location.

You can enroll by contacting www.petinsurance.com/kairoshealthaz





Health Plan Definitions

It's important to understand how your medical insurance works. That's how you can decide which plan(s) are right for you and your family. *All of the following terms are about money you pay.*

What is a premium?

This is the cost to be insured on a health plan. Usually your employer pays for part of this cost and you pay part of this cost. The amount you pay every month or every payday is your premium; it is sometimes called your "employee contribution."

The amount you pay depends on:

- whether you are covering yourself or yourself and other family members
- how much your deductible, copay or coinsurance and out-of-pocket maximums are. In general, the higher those amounts are, the lower your premium is, because you are paying more out of your own pocket for your medical expenses.
- [the medical network you select]

You pay the premium or contribution amount whether you have medical expenses or not. That's one reason it is important to use the preventive care benefits that are fully covered by your medical plan.

Using preventive care also helps you stay healthy and find any medical problems early, when they are easier to treat.

These terms are about money you pay when you have medical expenses that are covered by your plan:

What is a deductible?

This is the amount you pay for your covered medical expenses each calendar year (or plan year) BEFORE your insurance plan begins to pay.

What does coinsurance mean?

If your plan has coinsurance, this is the percentage of the medical costs that you pay. For example, if your coinsurance is 20% (also called an 80/20 plan), you pay 20% and the insurance pays 80% until you reach your out-of-pocket maximum. Most plans have a deductible amount that you pay before you pay coinsurance.

What does a copay pay for?

Some plans have a dollar amount that you pay for doctor appointments, certain procedures or prescription drugs. Once you have paid this "copay" amount, the plan pays the rest of the cost for that service. There may be a deductible amount or coinsurance you pay before copays kick in (especially for prescription drugs).

What counts towards my out-of-pocket maximum?

If you have a lot of medical expenses during the year, you may reach the maximum you pay for covered medical costs that year. Your out-of-pocket maximum includes what you pay in deductibles, coinsurance and copays. After you have paid your maximum, your plan will pay 100% of covered expenses for the rest of the calendar year (or plan year). There may be a separate maximum for out-of-network expenses.

Example: \$3,000 deductible, 20%

You Pay*		
Medical Expenses 1st month	\$500	Counts toward deductible
Medical Expenses 2nd month	\$2,000	Counts toward deductible
Medical Expenses 3rd month	\$500	Counts toward deductible
Total	\$3,000	Deductible Met
Additional Medical Expenses	20% of expenses until you pay another \$3,000	Counts toward Out-of-Pocket Maximum
Total	\$6,000	Out-of-Pocket Maximum Met
Remaining Medical Expenses	\$0	Health Plan pays 100%

**For illustrative purposes only*

For medical expenses that are not covered by your plan, you must pay the full cost of services. That's why it is important to ask and be sure what your plan pays, especially on higher cost services.



Contacts

	<u>Contact</u>	<u>Phone Number</u>	<u>Email/Website</u>
Human Resources	Jayne Jones	(928) 525-1717 Ext 110	jjones@highlandsfire.org
Client Manager	Bobby Fendley	(928) 779-4107 Ext 113	bobby.fendley@benefitcommerce.com
Assistant Client Manager	Kat Snyder	(480) 536-7024	kat.snyder@benefitcommerce.com
Medical Plan Administrator	Kairos	(888) 331-0222	svc.kairoshealthaz.org
Medical Plan TPA Administrator	UMR	(800) 826-9781	www.umar.com
Medical Provider Network	United Healthcare	(844) 817-4115	http://go.umar.com/ KairosHealthArizona
Mayo Clinic	Kairos Specialty Services	(480) 301-1735	http://mayoclinic.org.arizona
Pharmacy Benefit Provider	MaxorPlus	(800) 687-0707	www.maxorplus.com
EAP	Public Safety Crisis Solutions (PSCS)	(602) 466-9456	pscrisissolutions.com
Dental	Delta Dental	(602) 938-3131	deltadentalaz.com
Vision	VSP	(800) 877-7195	www.vsp.com
Life and AD&D	MetLife	(800) 638-5433	www.metlife.com

Benefits provided through



*This Guide serves as your Summary of Material Modifications (SMM) to Highlands Fire District benefit plan effective 7/01/2023.