



Benefits Guide



City Staff
(BMEA and Non-Union)

2025



Overview

The City of Boulder recognizes the importance of your Total Rewards experience as an employee—including benefits, compensation, and perks—to ensure the health and well-being of you and your family.

This Benefits Guides provides you with:

- Important Open Enrollment dates
- Eligibility criteria
- Benefit descriptions and rates
- Resources and additional sources of information

Use the Quick Links in the left panel to jump to a specific section.

Additional information about your Total Rewards is available on Boulder@Work; please visit the **[Benefits Hub](#)** or **[Benefit Resources pages](#)**. In addition, BMEA employees can access information about the current contract and official documents on the **[Labor Relations- BMEA page](#)**.

Disclaimer: This guide is intended to be a brief summary of employee benefits for your reference and is not an official city policy document. If there is a discrepancy between information in this guide and an official document (benefit plan document, policy, or collective bargaining agreement), the official document prevails.



2025 Total Rewards



Medical Benefits

Cigna Preferred Provider Organization Plan (PPO)
Cigna High Deductible Health Plan (HDHP)



Pre-Tax Spending Accounts

Alerus Health Savings Account (HSA)
Alerus Flexible Spending Account (FSA)



Dental Benefits

Delta Dental Low Plan
Delta Dental High Plan



Vision Benefits

VSP Base Plan
VSP Buy Up Plan



Additional Benefits

Life Insurance and Disability
Supplemental Benefit Programs
Well-Being@Work
Employee Assistance Program (EAP)
RTD EcoPass
Rec Pass



Retirement Benefits

PERA Pension Plan
Supplemental Retirement Savings Plans
(401k, 457, Roth IRA)



Eligibility

Who is eligible?

City of Boulder BMEA & Non-Union Employees

Benefit eligibility is determined by hours worked and employment type. All Boulder Municipal Employees Association (BMEA) and Non-Union Regular employees are eligible for benefits, if they work 20 or more hours per week. Part-time employees (20 - 29 hours/week) are eligible for the same benefits as full-time employees (30 - 40 hours/week), but pay at a different rate. BMEA and Non-Union Regular employees that work 19 hours or less a week are not eligible for health insurance benefits.

Dependents

If you are eligible to elect coverage for yourself, you may also elect coverage for eligible dependents.

- Your spouse or partner
- Child(ren) under the age of 26 (your children, your spouse or partner’s children, and children in your legal custody)

What am I eligible for?

Use the table below to determine what you are eligible for:

Benefit	Employee Type		
	BMEA Employees (20+ Hours)	Non-Union Full-Time (30+ Hours) & Part-Time (20-29 Hours)	BMEA & Non-Union (19 or Less Hours)
Medical	✓	✓	
Dental	✓	✓	
Vision	✓	✓	
Supplemental Benefit Programs	✓	✓	
City Paid Life Insurance	✓	✓	
Voluntary Life Insurance	✓	✓	
Wellness Program	✓	✓	✓
EAP	✓	✓	✓
EcoPass	✓	✓	✓
Recreation Pass	✓	✓	✓
Retirement Benefits	✓	✓	✓
Vacation Leave	✓	✓	✓
Sick Leave	✓	✓	✓
Floating Holidays	✓	✓	✓



Enrollment

When can I enroll?

When You Are Hired

For newly hired employees, benefit enrollment must be completed within 30 days from your date of hire. Enrollment takes place in Workday. City benefits, and any Supplemental Benefit Programs (Cigna, LegalShield, and IDShield programs), are effective on the 1st of the month, following your date of hire.

During Open Enrollment

Current employees elect benefits for themselves and eligible dependents in Workday during Open Enrollment.

Please keep in mind that if you do not participate in Open Enrollment, you are voluntarily waiving your benefits for the entire next calendar year.

2025 Open Enrollment

Open enrollment for the 2025 plan year runs from October 21 to November 4, 2024 in Workday. During this time, you must enroll and/or decline coverage for the upcoming year. The effective date of benefits selected is January 1, 2025.

Can I Change My Benefits?

After Open Enrollment ends on November 4, 2024, the benefits you chose will be in place from January 1 to December 31 next year. You cannot change your benefits during this time unless you have a **Qualifying Life Event**.

Examples of Qualifying Life Events include:

- Marriage, civil union, legal separation, or divorce
- Birth or adoption of a child
- Death of your spouse, civil union partner, or dependent child
- Spouse, civil union partner, or dependent children losing or gaining coverage
- Change in employment status for you or your spouse/civil union partner
- Change in residence (only if our current coverage isn't available in the new location)

Questions?

We encourage you to submit questions to the Benefits Team through **Service Depot** (use **Benefits** as your **Type of Request**). It is the quickest way to ensure questions and issues are addressed by the appropriate person.

If you are new to Workday or need to refresh on the enrollment process, check-out our **Open Enrollment How-To Guide**.



Enrollment (continued)

How am I taxed on my benefits?

The Internal Revenue Service (IRS) rules allow employees to use pre-tax dollars to pay for eligible benefit plans. Boulder annually processes medical, dental and vision premiums on a pre-tax basis for you. Pre-tax premiums are deducted from your paycheck prior to the calculation and deduction of taxes, resulting in a reduced taxable income. For more information on regulations, contact the [IRS](#).

Benefit taxation can only be changed from pre-tax to post-tax at initial election or during Open Enrollment; it cannot be changed mid-year.

What is Domestic Partner Imputed Income?

The IRS requires employers to report and withhold taxes on the fair market value (FMV) of a domestic partner's health coverage to the extent the coverage is paid for by the employer. Following IRS regulations, the difference in the total monthly premium for domestic partnership coverage is taxable to the employee, and the employer portion of the premium will be reflected on the employee's W-2. This is referred to as **Imputed Income**.

To enroll a Domestic or Civil Union Partner, please complete the city's [Affidavit](#). Please consult a tax advisor regarding details of the tax implications of adding a Domestic or Civil Union Partner.





Medical

What medical plans are available?

The City of Boulder offers two different medical plans: Cigna Preferred Provider Organization (PPO or “Copay”) Plan and Cigna High Deductible Health Plan (HDHP). The plan designs differ based on factors such as deductibles, out-of-pocket maximums, and coinsurance, but the plan you choose has no effect on the quality of care you receive.

Medical Plan Options:

- Cigna Preferred Provider Organization (PPO) Plan (“Copay”)
- Cigna High Deductible Health Plan (HDHP)

What you can expect

100% Coverage for Your Preventive Care.

All of our medical plans pay 100% for preventive care when you use in-network providers, even before you meet your annual deductible.

Employer HSA Contribution

- Our high deductible health plan (HDHP) is eligible for a health savings account (HSA), which lets you save money for medical expenses
- The City of Boulder will contribute up to **\$500 for individuals** and up to **\$1,000 for families** if you enroll in the city HDHP, enroll in HSA, and meet the qualifications to have an HSA

Transgender Health

Cigna provides transgender health services as part of our standard coverage. Participating in our insurance also provides access to case managers who can assist with navigating services. To learn more, please review the [Transgender Health flyer](#).





PPO "Copay" Plan

How it Works

Copay: A copay is the fixed dollar amount you pay when you use medical services. For example, your plan could require you to pay \$25 for primary care doctors, \$50 for specialists, and \$15 for generic prescription drugs. When you go to the doctor or fill a prescription, this is the amount you'll pay.

Deductible: The city's copay plan has a deductible. For medical services for which a deductible applies, you will be required to pay the full cost of services until you meet your deductible. For example, if you visit your primary care physician, you pay a \$25 copay for the visit. If you receive services during the visit, such as lab work or diagnostic testing, the cost of service is subject to your deductible. Copays do not count toward your deductible.

Coinsurance: The copay plan has coinsurance (the cost sharing with Cigna). Once you meet your deductible, you pay coinsurance for medical services received until you satisfy your annual out-of-pocket maximum.

Annual Out-of-Pocket Maximum: The copay plan has an annual out-of-pocket maximum. Copays, deductible, and coinsurance count toward your out-of-pocket maximum. If you reach your out-of-pocket maximum, the insurance company pays 100% of covered medical services for the remainder of the plan year.

Advantages

- You'll have a set dollar amount, or copay, when you visit the doctor and pharmacy
- Works well for people who do not want to pay the full cost of a medical bill or prescription out-of-pocket and prefer the predictability of copays
- Makes sense for people who are willing to pay a higher premium each month for the security of knowing how much they will pay when they visit the doctor
- 100% coverage for preventive care when you use in-network providers
- Telehealth, Dispatch Health, Behavioral Health coverage, and other comprehensive options are available with this plan



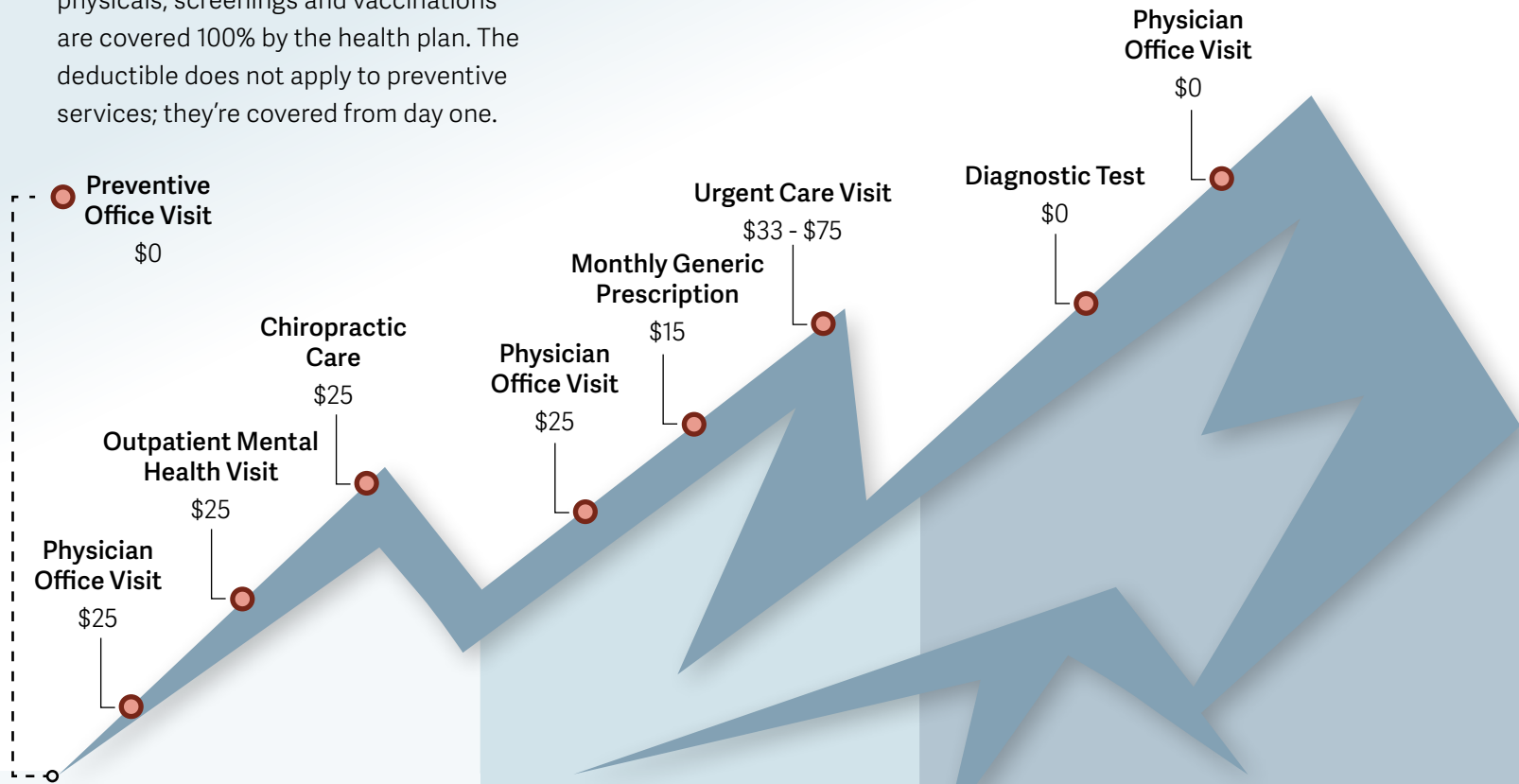


How Deductible Copay Plans Work

Medical

Free Preventive Care

Preventive Services, such as routine physicals, screenings and vaccinations are covered 100% by the health plan. The deductible does not apply to preventive services; they're covered from day one.



Annual Deductible

Most diagnostic services are billed on top of your copay and are applied to your annual deductible. Your copays are not subject to deductible but go toward your out-of-pocket maximum. Until your out-of-pocket maximum is met, you will pay set copays determined by your health plan.

Coinsurance

Once your deductible has been met, you pay 20% while Cigna pays 80% for in-network medical services. Each covered individual is subject to an individual deductible limit.

Out-of-Pocket Maximum

When you have reached your out-of-pocket maximum, your health plan pays 100% of any additional health cost. Cigna's out-of-pocket maximums are \$4,500 individual/\$9,000 family.



High Deductible Health Plan (HDHP)

How it Works

High deductible health plans are designed to help keep premium costs low for you and your family. How much you pay out-of-pocket depends on two things: your deductible and out-of-pocket maximum.

Deductible: You are expected to pay the full charges for services and prescriptions until you meet the deductible.

HSA Helps You Pay Your Deductible: Your HDHP with the City of Boulder is HSA qualified and eligible for an employer contribution of up to \$500 per year for employee only coverage or up to \$1,000 per year for family coverage. You can use your HSA to cover eligible medical expenses.

Coinsurance: Once you meet your deductible, you share in coinsurance with Cigna, meaning, Cigna will pay 80% of your in-network medical costs and 60% of your out-of-network costs.

Annual Out-of-Pocket Maximum: You'll continue to pay coinsurance until you meet your out-of-pocket maximum. If you reach your out-of-pocket maximum, the insurance company pays 100% of medical services.

Advantages

- The monthly premiums are lower than the PPO plan
- If you enroll in the HDHP, you're eligible for an HSA to help pay for eligible medical expenses while also lowering your taxable income
- HSA funds roll over from year-to-year and are portable
- Works well for those who are not anticipating frequent or significant medical expenses for the upcoming year
- 100% coverage for preventive care when you use in-network providers
- Telehealth, Dispatch Health, Behavioral Health coverage, and other comprehensive options are available with this plan



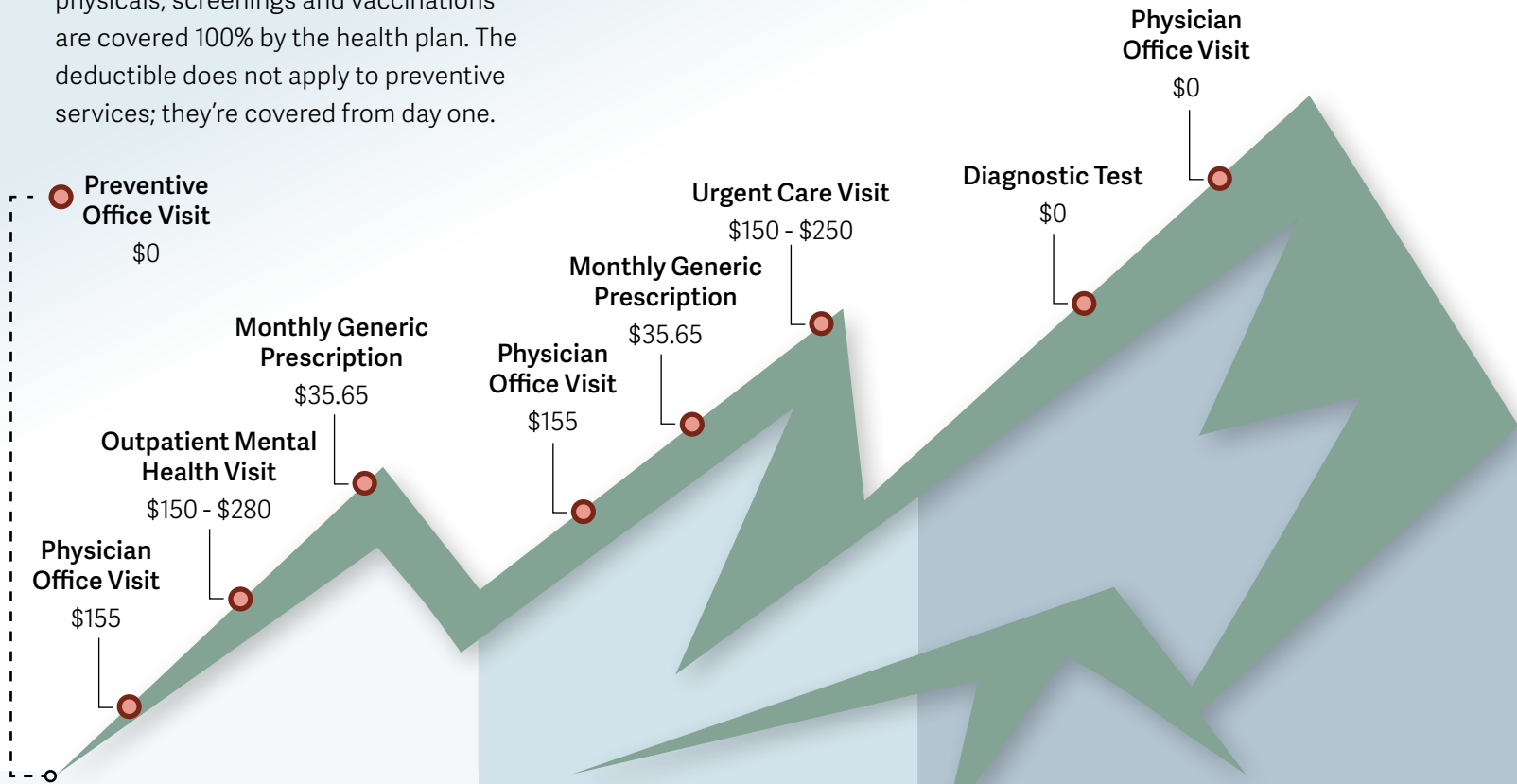


How High Deductible Health Plans Work

Medical

Free Preventive Care

Preventive Services, such as routine physicals, screenings and vaccinations are covered 100% by the health plan. The deductible does not apply to preventive services; they're covered from day one.



Annual Deductible

For services other than preventive care, you are responsible for the full cost of services until your deductible is met.

Coinsurance

Once your deductible has been met, you pay 20% while Cigna pays 80% for in-network medical services. For those with family coverage, the full family deductible must be met before any individual coinsurance applies.

Out-of-Pocket Maximum

When you have reached your out-of-pocket maximum, your health plan pays 100% of any additional health cost. Cigna's out-of-pocket maximums are \$5,000 individual/\$10,000 family.



A Little Help to Make the Decision Easier

Please note that these examples below are for illustrative purposes only and that cost of care can vary based on procedure, physician billing, and location of services.



Meet Alissa

Employee only coverage
with low utilization

Alissa is relatively healthy and someone who experiences anxiety. Alissa does not have a partner or dependents to cover and is looking for the most cost-effective medical plan with low monthly payments that still provides coverage in case unexpected health incidents occur. During the year, Alissa receives the following care:

Type of Cost	PPO "Copay" Plan	HDHP
Yearly Premium	\$1,862.64	\$1,572.22
Medical Expenses		
Preventive Care Visit(s)	\$0	\$0
Sick Visit to Primary Care Physician	\$25 copay	~\$170
Two Outpatient Mental Health Visits	\$25 copay x 2 = \$50	\$185 x 2 = \$370
Monthly Generic Tier 1 Anti-Anxiety Prescription	\$15 copay x 12 = \$180.00	\$9 x 12 = \$108
Savings		
City of Boulder Wellness Premium Credit	\$360	\$360
City of Boulder HSA Contribution	N/A	\$500
Total Cost to Alissa:	\$1,757.64	\$1,432.22



Meet Diane

Employee plus One
with high utilization

Diane is an expectant mother and also covers her son on her plan. Her son has asthma and was given a prescription inhaler. Below are the medical expenses they are anticipating this year:

Type of Cost	PPO "Copay" Plan	HDHP
Yearly Premium	\$4,011.28	\$3,385.98
Medical Expenses		
Preventive Care Visit(s)	\$0	\$0
Hospital Stay for Labor and Delivery (\$12,000)	\$3,400	\$5,600*
Tier 2 Asthma Prescription (30 Day Supply)	\$45 copay x 12 = \$540	\$600 x 12 = \$7,200
Savings		
City of Boulder Wellness Premium Credit	\$360	\$360
City of Boulder HSA Contribution	N/A	\$1,000
Total Cost to Diane:	\$7,591.28	\$8,465.98

***Note:** With this high utilization example, the deductible and out-of-pocket maximum is reached under the HDHP Plan, but not the PPO Plan. Using this example, moving forward in-network care would be covered at 100% for Diana on the HDHP Plan. For the PPO Plan, the out-of-pocket maximum would still need to be met by both Diana and her son.



Meet Robert

Employee plus Family
with moderate utilization

Robert is seeking medical coverage for himself and his family. Robert's child has severe allergies and is on routine care with a prescription. His partner has a sunspot that seems abnormal that they want to get checked by a doctor. Their yearly care is as follows:

Type of Cost	PPO "Copay" Plan	HDHP
Yearly Premium	\$5,602.22	\$4,728.88
Medical Expenses		
Preventive Care Visit(s)	\$0	\$0
Six Pediatric Visits	\$25 copay x 6 = \$150	~\$165 x 6 = \$990
One Specialist Visit	\$50	\$230
Monthly Tier 2 Allergy Prescription	\$45 copay x 12 = \$540	\$20 x 12 = \$240
Savings		
City of Boulder Wellness Premium Credit	\$360	\$360
City of Boulder HSA Contribution	N/A	\$1,000
Total Cost to Robert:	\$5,982.22	\$4,738.88





Cigna Medical Plans
Open Access Plus Network



NETWORK:	Copay PPO Plan		HDHP/HSA Plan	
	In Network	Out-of-Network	In Network	Out-of-Network
Calendar Year Deductible	\$1,250 Individual \$2,500 Family	\$2,500 Individual \$5,000 Family	\$2,000 Individual \$4,000 Family	\$4,000 Individual \$8,000 Family
Deductible Basis	Each covered individual is subject to individual deductible limit		Full family deductible must be met before any individual coinsurance applies	
Coinsurance Split (after deductible - Plan Pays/You Pay)	80% / 20%	60% / 40%	80% / 20%	60% / 40%
Calendar Year Out-of-Pocket Max	\$4,500 Individual \$9,000 Family	\$10,000 Individual \$20,000 Family	\$5,000 Individual \$10,000 Family	\$10,000 Individual \$20,000 Family
Out-of-Pocket Basis	Each covered individual is subject to individual out-of-pocket limit		Each covered individual is subject to individual out-of-pocket limit	
Physician Office Visit	\$25 Copay/\$50 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Preventive Visit	100% Covered	40% Coinsurance	100% Covered	40% Coinsurance
Inpatient Hospital	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Emergency Room	20% Coinsurance		20% Coinsurance	
Urgent Care	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Ambulance	20% Coinsurance		20% Coinsurance	
X-Ray	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Laboratory	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Maternity	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Outpatient Physical Therapy	\$25 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Speech, Hearing, and Occupational Therapy	\$25 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Durable medical equipment	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Home health care	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Hospice	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Skilled nursing	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Hearing aids (testing & fitting)	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Chiropractic care (20 Days)	\$25 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Mental health/substance (inpatient)	20% Coinsurance	40% Coinsurance	20% Coinsurance	40% Coinsurance
Mental health/substance (outpatient)	\$25 Copay	40% Coinsurance	20% Coinsurance	40% Coinsurance
Fertility Coverage	Cost share, subject to place of service & treatment administered. \$50,000 lifetime max		Cost share, subject to place of service & treatment administered. \$50,000 lifetime max	
Prescription Drugs Administered by Cigna				
Generic Brand/Tier 1	\$15 Copay	Not Covered	20% Coinsurance	Not Covered
Formulary Brand/Tier 2	\$45 Copay		20% Coinsurance	
Non-Formulary Brand/Tier 3	\$60 Copay		20% Coinsurance	
Mail Order (90 day supply)	\$37 / \$112 / \$150		20% Coinsurance	
Preventive Maintenance Medication	\$0		\$0	



Medical Continued

Homethrive

Continuing in 2025, Homethrive is available to all employees at no cost, regardless of medical insurance enrollment. If you care for someone due to age, disability, or a medical condition, consider using Homethrive.

This service is open to you, those you support and others in your care circle - not just your household or immediate family.

Ways Homethrive can help:

- Medicare insurance options & coverage
- Finding the right provider
- Senior living options and in-home care
- Community and government-based benefits
- Hospital and rehab discharge support
- Disease education
- Social/emotional support and family dynamics
- Advanced directives and wills

To sign-up, please visit Homethrive's [website](#) and use the Company Code: **cityofboulder**. Learn more on our [Homethrive page](#) on Boulder@Work.

Origin Healthcare

Origin Healthcare is an in-network provider for employees needing advanced medical care at home. This service offers hospital-level care in a comfortable and safe environment.

With Origin Healthcare, you can receive regular treatments at home instead of a hospital, as well as acute care typically provided at urgent care. They also offer transitional care after hospital discharge and infusion therapy (IV treatments).

Origin Healthcare is available to Boulder employees on the city's medical insurance (PPO or HDHP), age 18 and older. Services are offered seven (7) days a week from 9 AM to 5 PM. For more information, call 888-777-2718 or visit the [Origin Healthcare website](#). Additional resources can be found on the Boulder@Work [Origin Healthcare page](#).





Dental

The city's Delta Dental plans allow you to use an extensive network of providers and offers flexibility based on where you choose to access care. The city offers two (2) dental plans through Delta's PPO Plus Network:

- Low Plan
- High Plan

The table below summarizes Dental Plan benefits. For more detailed information, visit the [Boulder@Work Health Plans page](#).

Delta covers two (2) dental cleanings per year, on an annual calendar basis. This is a change from the 2024 plan. If you need to confirm your eligibility, please contact Delta directly. To find a network provider and download your ID cards, visit deltadentalco.com or call 800-610-0201.



Delta Dental Benefits				
Delta PPO plus Delta Premier Network				
NETWORK:	Low Plan		High Plan	
	PPO Provider	Premier or Non-Network Provider	PPO Provider	Premier or Non-Network Provider
Calendar Year Deductible	\$50 / Individual \$150 / Family		\$50 / Individual \$150 / Family	
Calendar Year Maximum Benefit	\$1,000 per Individual		\$2,000 per Individual	
Diagnostic/Preventive Care (X-ray/Oral Exams/Cleanings)	100% Covered, no deductible	80% Covered after deductible	100% Covered, no deductible	100% Covered, no deductible
Restorative Services (Fillings/Extractions)	80% Covered after deductible	50% Covered after deductible	80% Covered after deductible	80% Covered after deductible
Endodontics (Root Canal Therapy)	80% Covered after deductible	50% Covered after deductible	80% Covered after deductible	80% Covered after deductible
Periodontics (Treatment of the gums)	80% Covered after deductible	50% Covered after deductible	80% Covered after deductible	80% Covered after deductible
Oral Surgery (Extracts)	80% Covered after deductible	50% Covered after deductible	80% Covered after deductible	80% Covered after deductible
Major Services (Dentures/Partials/Crowns)	50% Covered after deductible	50% Covered after deductible	50% Covered after deductible	50% Covered after deductible
Orthodontic Treatment (Dependents up to age 19)	Not Covered	Not Covered	50% Coinsurance	50% Coinsurance
Orthodontic Lifetime Maximum	Not Covered		\$2,000 per Individual Age 19 or Younger	





Vision

VSP

The city's VSP Vision plans allow you to determine your need for corrective eyewear and to detect any general vision problems in their earliest stages. The city offers two (2) vision plans through VSP:

- Base Plan
- Buy Up Plan

The table on the following page summarizes Vision Plan benefits. For more detailed information, visit the [Boulder@Work Health Plans page](#).

VSP coverage for exams, contacts, lenses and frames are on an annual calendar basis — meaning the year you last had your exam, got frames, etc., determines when you are next eligible, either 12 or 24 months on an annual calendar basis. To find a network provider and download your ID cards, visit vsp.com or call 800-877-7195.





Vision Service Plan (VSP) Vision Benefits

VSP Choice Network



NETWORK:	Base Plan		Buy-Up Plan	
	In Network	Out-of-Network	In Network	Out-of-Network
Eye Exam	\$20	Up to \$45 reimbursement	\$20	Up to \$45 reimbursement
Lenses Single Vision Bifocal Trifocal	100% after \$20 Copay	Reimbursement: Up to \$30 Up to \$50 Up to \$65	100% after \$20 Copay	Reimbursement: Up to \$30 Up to \$50 Up to \$65
Frames	100% up to \$130 allowance for wide selection of frames 100% up to \$150 allowance for featured frames 20% discount on the amount over the allowance	Up to \$70 reimbursement	100% up to \$150 allowance for wide selection of frames 100% up to \$170 allowance for featured frames 20% discount on the amount over the allowance	Up to \$70 reimbursement
Contact Lenses (instead of glasses)	\$130 allowance; copay does not apply	Up to \$105 reimbursement	\$150 allowance; copay does not apply	Up to \$105 reimbursement
Diabetic Eyecare Plus Program	\$20 Copay	N/A	\$20 Copay	N/A
Additional Glasses and Sunglasses	Extra \$20 to spend on featured frames 20% savings on additional glasses and sunglasses, including lens enhancements	N/A	Extra \$20 to spend on featured frames 20% savings on additional glasses and sunglasses, including lens enhancements	N/A
Retinal Screening	No more than a \$39 copay on routine screening as an enhancement to a WellVision Exam	N/A	No more than a \$39 copay on routine screening as an enhancement to a WellVision Exam	N/A
Laser Vision Correction	15% off the regular price or 5% off the promotional price	N/A	15% off the regular price or 5% off the promotional price	N/A
Benefit Frequency Examinations/ eyeglass lenses/ contacts Frames	12 months from year of last service (annual calendar) 24 months from year of last service (annual calendar)		12 months from year of last service (annual calendar) 12 months from year of last service (annual calendar)	



HSA

How does the HSA work?

A Health Savings Account (HSA) is a type of employee-owned savings account that allows you to set aside money on a pre-tax basis to pay for qualified medical expenses. Please consult the IRS publication for a [list of eligible expenses](#).

HSA funds roll over year-to-year if you do not spend them and are portable if you leave employment with Boulder.

Eligibility

- You must be enrolled in the City's High Deductible Health Plan (HDHP)
- You cannot have any other first-dollar coverage
 - Military, Medicare, or Tricare coverage
 - A spouse's or parent's PPO plan
- You cannot be claimed as a dependent on someone else's tax return

Your Contribution

Per IRS regulations, the maximum amount you can contribute for 2025 is as follows:

- \$4,300 if you are enrolled in Employee Only (Single) coverage
- \$8,550 if you are enrolled in Family (Two Person or Family) coverage
- **Catch-up contributions:** Employees who turn 55 during the plan year may contribute an additional \$1,000 per year until enrollment into Medicare

Please note that contribution limits reflect the total amount that both you and the city can contribute in a calendar year.

City of Boulder Contribution

If you elect the Cigna HDHP and open and maintain an Alerus HSA, the city will make HSA contributions to assist with your plan costs. City contributions begin in the pay period after you have established your Alerus account, and the total amount of contribution will be prorated based on this start date.

If both you and your spouse are city employees, you are only eligible for a combined maximum HSA contribution of \$1,000.

City contributions are made evenly, over 26 pay periods. Eligible contribution amounts for 2025 are:

- **Employee Only (Single) HDHP Coverage:** up to \$500 per year
- **Family Coverage (Single +1 or Family):** up to \$1,000 per year

Set-Up your HSA

Enrollment in an HSA takes place in Workday.

Once the account has been established with Alerus, you will receive a welcome email to your City of Boulder email address, containing instructions on registering your online profile. This will allow you to authorize how you will be reimbursed. Registration must be completed within 30 days of HSA enrollment.

After your account is active, HSA debit cards will be mailed to your address on file.

Questions? Contact Alerus directly: alerusrb.com, info@alerus.com or 877-661-4727.





FSA

How does the FSA work?

A Flexible Spending Account (FSA) allows you to set aside pre-tax money from your paycheck to pay for eligible out-of-pocket expenses for healthcare and dependent care. Please keep in mind that FSA monies can only be spent while you are an active employee at the city.

Healthcare Flexible Spending Account (HCFSA)

Contribute up to \$3,200 per employee (per calendar year) for reimbursement of health-related expenses you may need to pay for out-of-pocket. Expenses can be incurred from January 1, 2025 through March 15, 2026, as long as you are an active plan participant. You have access to your full plan year election amount of FSA funds immediately. This plan is a “use it or lose it” as any funds not used in the plan year will be forfeited. There is a grace period to submit for reimbursement through March 31, 2026.

Examples of Eligible Expenses:

- Copays, coinsurance, and deductibles
- Dental and orthodontia expenses
- Contact lenses, eyeglasses, vision surgery
- Hearing aids
- Chiropractic care
- Over the counter medications, with a prescription

Review [IRS guidance](#) on eligible expenses.

Dependent Care Flexible Spending Account (DCFSA)

Contribute up to \$5,000 per household (per calendar year) towards out-of-pocket dependent care expenses for children under age 13 and disabled dependents of any age. Expenses can be incurred from January 1, 2025 to March 15, 2026, as long as you are an active plan participant. Dependent care expenses are only reimbursable up to what has been deducted from payroll and deposited to your account.

Examples of Eligible Expenses:

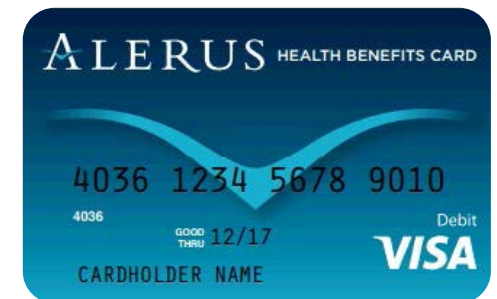
- Licensed day care centers for children and disabled dependents
- Costs for family or adult day care facilities
- Babysitters outside or inside your home while you are working
- Day camp expenses (but not overnight camp)

Review [IRS guidance](#) on eligible expenses.

How the Alerus Health Benefits Card Works

The Alerus Health Benefits Card draws funds directly from your account to pay for eligible expenses. It can only be used at places where you might obtain medical, dental, vision, or dependent care services with providers accepting Visa. You will use your debit card for the life of your Healthcare Flexible Spending Account. If you lose or misplace your debit card, you will need to contact Alerus at 800-837-4817 to be issued a new card.

For more information, refer to the [FSA Tab](#) on Boulder@Work.





HSA — vs — FSA

An employer-sponsored Alerus HSA account



An employer-sponsored FSA Alerus account

The City of Boulder contributes \$500 individual/\$1,000 family to an HSA through your Alerus account. Remember that Boulder's contributions are calculated as part of the total allowed IRS contributions (see below).



City of Boulder does not contribute to an FSA.

Must be paired with an HDHP. If you have an HSA, you cannot have a Healthcare FSA. You may have a Dependent Care FSA with an HSA.



Only compatible with PPO Plan. The Healthcare FSA cannot be paired with an HSA. You may have a Dependent Care FSA with an HSA.

Unused money will be rolled over into the next year. You can invest HSA funds and use earned interest for medical health expenses.



Funds not used by the end of the year are forfeited.

IRS Employee Contribution Limits:
 \$4,300 individual
 \$8,550 family
 \$1,000 55+ Catch-Up



IRS Employee Contribution Limits:
 \$3,200 individual/family
 \$5,000 Dependent Care

Shared benefits: Health Savings Accounts (HSA) and Healthcare Flexible Spending Accounts (FSA) are tax-advantaged accounts that can be used to pay for qualified out-of-pocket medical expenses.

For more Alerus HSA and FSA resources, visit the [Health Plans page on Boulder@Work](#).



Life & Disability

Life & Disability insurance provides loss of income protection to employees and their families in the event of a serious injury, illness, or death.

City-Paid Short Term and Long Term Disability Benefits (STD and LTD)

Employees must exhaust all accrued, but unused, sick time before coverage for this city benefit begins. Both BMEA and Non-Union employees receive 60% of wages for STD and 50% of wages for LTD.

BMEA employees receive city-paid STD coverage for the first five (5) years of employment.

Non-Union employees, hired in 2013 or after, receive city-paid STD coverage.

Additional information can be found on the [City's Leave Benefits](#) website.

Public Employee's Retirement Association (PERA) Disability Program

Once you have achieved vesting (5 years of service credit) with PERA, you may be eligible for their short-term disability coverage and/or disability retirement. Please review the [Colorado PERA Disability Program brochure](#).

Life & Accidental Death & Dismemberment (AD&D) Coverage

BMEA Employees

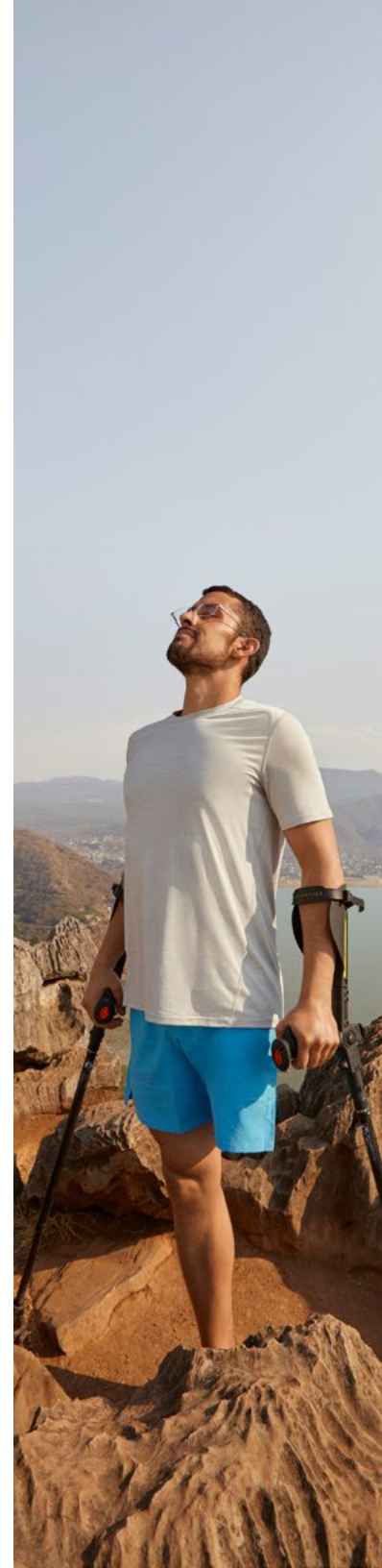
The city provides \$50,000 of coverage through age 69, which is reduced to 50% coverage for employees age 70+. The total premium is paid for BMEA employees working 20+ hours weekly.

Non-Union Employees

The city provides, at no cost to you, Basic Life and AD&D insurance to non-union employees working 20+ hours weekly, at 1.5 times your annual salary.

**It is important to keep your beneficiaries up-to-date!
You can change this information at any time in Workday; please use
our [How-To Guide](#) for step-by-step instructions.**

Supplemental Benefits





Voluntary Life Insurance

The Hartford is the city's provider for Voluntary Life Insurance. If you are happy with your current level of insurance, you do not need to take any action for this during Open Enrollment, but you can change or elect this type of coverage at any time. Please use the [Change or Elect Voluntary Life Insurance How-To Guide](#) for specific steps on this process in Workday.

Employees may elect to purchase Voluntary Life Insurance, up to \$300,000 in total coverage, to supplement benefit offerings. The Hartford guarantees coverage up to \$120,000 for yourself and for yourself and a spouse/partner. You may choose up to 100% of your own coverage amount for your spouse and up to \$10,000 for your children.

New employees may enroll into the Voluntary Life insurance within 30 days of their hire date to receive the guaranteed issue amount without submitting additional documentation.

Please keep in mind that changing coverage amounts generally requires completing an Evidence of Insurability (EOI), which is a medical underwriting form to be approved for additional insurance coverage. Payroll deductions for the coverage do not begin until the city is notified the coverage is approved. Premiums are determined by your (or spouse/partner's) age.

Please refer to the [Supplemental Benefits page on Boulder@Work](#) for more information.

Group Term Life Imputed Income (Non-Union employees only)

The IRS considers group-term basic life (GTL) insurance provided by the city to be a tax-free benefit so long as the policy's death benefit is less than \$50,000. However, there are tax implications if an employee is provided over \$50,000 in life insurance coverage. In this situation, the value of the life insurance policy above \$50,000 of what an employee pays in premiums is referred to as **Imputed Income**, which is subject to income taxes. More details about this and the calculation for the taxes charged can be found on the [IRS website](#).



Supplemental Benefits





Supplemental Benefit Programs

Supplemental Benefits can be elected at the time of hire or during Open Enrollment. These supplemental benefits are designed to work together to help make it easier for you and your family to get the benefits you deserve. You do not need to be on the city's Cigna medical insurance to enroll in their supplemental plans.

Supplemental offerings for Boulder employees include:

- Cigna Critical Illness
- Cigna Accidental Injury
- Cigna Hospital Indemnity
- LegalShield
- IDShield



The partnership with Cigna on both medical and supplemental benefits streamlines the ability to process claims and obtain holistic benefits coverage. Through Cigna's Auto Compare program, if you are enrolled in both medical insurance and a supplemental plan, you will be reminded by Cigna to submit your eligible claim upon filing a qualifying medical claim. This perk also automatically pays-out your Wellness benefits, up to a \$50 value for flu shots and wellness exams, after claim processing.

The same coverage remains available from LegalShield & IDShield, and the rates remain the same for 2025.

Detailed information about these benefits, including rates, are available in the [Supplemental Benefits Booklet](#).

IDShield



IDShield will monitor your Social Security number, credit cards, bank accounts, and more. Specialists are available 24/7 to answer your questions and walk you through the steps you can take to protect yourself. If any change in your status or compromise occurs, you receive an e-mail update immediately.

LegalShield



LegalShield provides legal advice and representation in the event you have need for an attorney. Services include:

- Name Changes
- Bankruptcy
- Foreclosure
- Landlord/Tenant Issues
- Driver's License Restoration
- Traffic Ticket Violations
- Living Wills
- Power of Attorney
- and more

NOTE: If you elect any of these supplemental benefits, premiums will be paid through convenient payroll deductions.



Total Rewards

Total Rewards is a way to think about the total package of benefits, compensation, programs, and perks you receive as an employee of the City of Boulder. While your paycheck or using your medical insurance may be the most visible aspects of your Total Rewards, it is a top priority for the city to continually monitor updates and innovations we can make to improve the value of your career at Boulder.

Want to learn more about your Total Rewards? Download the Workday Benefits and Pay app, with instructions from our [How-To Guide](#). Then open the Benefits and Pay app and scroll down to click View Total Rewards. A graph will show your Total Rewards and individual tables also break-down your pay and benefit components. More information on city offered programs are summarized below.

Educational Assistance Program (EdAP)

The Educational Assistance Program provides financial support to encourage employees to further develop skills and competencies that positively impact the organization and community.

Educational Assistance can be approved as pre-paid or reimbursement for employees to pursue goals, including:

- Degree
- Certifications in a career field
- Test taking for career certifications
- Continuing education credits
- Language immersion programs

The type of assistance that will be approved may not relate to the requirements of an employee's current job — meaning that the intent is not to provide funding for you to meet requirements of your current job but to help you advance your professional development or ability to fill a future role. Educational Assistance is approved by an employee's manager, Department Director, an Educational Assistance Program Committee, and the HR Compensation Team.

All regular full-time and part-time employees are eligible for this program. Learn more on the [Educational Assistance Program page](#).

Total Rewards Discounts & Perks

The city partners with different vendors to provide exciting benefit offerings to enhance your Total Rewards. These discounts and perks are supplemental opportunities - meaning they are not administered or maintained programs by the city.

Discounts & Perks Currently Offered:

- **Spot Pet Insurance:** Enroll your pet to receive a 10% discount or enroll multiple pets to receive an additional 10% discount (up to 20% total) off their insurance.
- **CorePower Yoga:** Employees are eligible for a 20% discount on yoga classes and memberships, even if you are already a frequent user.

Learn more about the current offerings and new partnerships on the [Discounts & Perks page](#).



Employee Recreation Pass

All BMEA and Non-Union employees, including existing staff and new hires, are eligible for a free Well-Being@Work Rec Pass! This pass provides access to all three (3) of Boulder's Recreation Centers, as well as Scott Carpenter Pool, Spruce Pool, and Boulder Reservoir. You can elect this benefit at time of hire, during Open Enrollment, or at any time during the year through Workday. See the [Recreation Pass Enrollment Change How-To Guide](#) for step-by-step instructions.

Please keep in mind that although this is a free benefit, it is taxable. If you elect the Pass, you will be taxed on the value of \$12.74 per pay period. The amount of tax you pay depends on your tax bracket.

You can also register a family member to participate in your Rec Pass for a discounted rate of \$120 per person. The amount is prorated based on time of purchase. Please complete a [Family Add-On Form](#) and submit it at a Recreation Center to get started.

It takes approximately seven (7) business days for your Rec Pass to become active after enrollment. You will receive an e-mail from Parks & Recreation to advise you when your pass is active. For more information, visit the [Well-Being@Work page](#) and select the **Employee Recreation Pass** tab.

EcoPass Program

All city employees are eligible for the EcoPass Benefit. The EcoPass provides unlimited, free rides on most RTD transit services, including the N to Eldora Mountain Ski Resort and the Skyride Service to Denver International Airport (DEN).

The EcoPass is no longer a physical card. Eligible employees can download the RTD MyRide app at any time on their mobile device. By establishing an account with your Boulder work e-mail address, the city will issue the EcoPass directly to your app. Once the city has issued the EcoPass you can begin riding RTD for free!

Read our [EcoPass MyRide App Instructions How-To Guide](#) for additional information on getting your mobile EcoPass!





Wellness Program



Well-Being@Work

The City of Boulder's Well-Being@Work program offers the best-in-class Wellable app with challenges, events, and curated health, wellness and mind/body content focused on the 8 Dimensions of Well-Being: Physical, Emotional, Intellectual, Social, Purpose, Financial, Occupational, and Environmental. It is free for employees, as well as their spouses and partners. Employees can earn gift cards monthly, delivered directly to their e-mail and specialty challenge prizes throughout the year. Log-in to the [Well-Being@Work Portal](#) to begin accessing learning, events, programs, and much more.

In addition to our Wellable app, we offer onsite biometric screenings throughout the year, an annual Well-Being Fair, an employee Rec Pass, and a robust Employee Assistance Program (EAP) to support mental/emotional health of employees and anyone living at their home address. Visit the [Well-Being@Work page](#) today to learn more.

Premium Wellness Credit

You are eligible to receive an insurance premium credit of up to \$360 per year if you are an existing employee or a new hire with the city and enrolled in the Cigna PPO or HDHP medical plans. The credit is paid evenly over 26 pay periods, for a \$13.85 credit each paycheck.

Premium Wellness Credit Requirements

It's never too early in the year to take steps to secure your Premium Wellness Credit (PWC). In 2025, the requirements outlined below need to be met to receive the 2026 credit.

Current employees and new hires (1/1 through 9/30/25) must complete biometrics (lab work) either through Quest Diagnostics or your medical provider AND complete an annual preventative exam through your primary care provider or MDLive (telehealth visit). Both the biometrics and the visit are required, but you can complete biometrics first or have it ordered by your doctor at your exam/visit.

New hires who join the city after 10/1/25 must complete only a Health Risk Assessment (HRA) through [MyCigna.com](#).

For additional information on the 2026 PWC requirements, please read the [timeline](#) or check-out the [How-To Guide](#).





Valuable Services through the Employee Assistance Program (EAP)

EAP is a 24/7/365 program that supports employees with a variety of issues they may be facing.

This is a free benefit, available to all employees, regardless of employment type or group. Any members of the employee's household are also eligible to use the EAP.

You do not need to be enrolled in the city's Cigna insurance plan (PPO or HDHP) to participate, although Cigna is the city's EAP provider.

Take advantage of a wide range of services offered at no cost to you:

- **10** face-to-face or video-based counseling sessions with a counselor in your area.
- **Onsite Therapy:** 3 to 4 face-to-face counseling sessions at the OSMP HUB, for employees only.
- **Legal Assistance:** 30-minute consultation with an attorney, face-to-face or by phone.
- **Financial Assistance:** 30-minute telephone consultation with qualified specialist on topics such as debt counseling or planning for retirement.
- **Identity Theft:** 60-minute consultation with a fraud resolution specialist.
- **Parenting:** Resources and referrals for childcare providers, before and after school programs, camps, adoption organizations, child development, prenatal care and more.
- **Eldercare:** Resources and referrals for home health agencies, assisted living facilities, social and recreational programs and long-distance caregiving.
- **Pet Care:** Resources and referrals for pet sitting, obedience training, veterinarians and pet stores.

EAP personal advocates will work with you and your household family members to help you resolve issues you may be facing, connect you with the right mental health professionals, and direct you to a variety of helpful resources in your community and more.

Remember: EAP is completely confidential. The city does not receive information about who accesses which services through EAP. It is as confidential and personal as visiting your family doctor.

Resources for Accessing EAP:

- Using the **EAP How-To Guide**
- Access to the **Employee Assistance Program (EAP) for Non-Cigna Members**
- Using the **Onsite Therapy Program How-To Guide**

Connect with EAP Today!

Call 1-877-622-4327 or
Log-in to myCigna.com (web or app)

Employee ID: cityofboulder

If you are already registered with myCigna.com, simply log-in and visit the EAP section under the Coverage tab. You can use our [How-To Guide](#) for step-by-step instructions accessing services from the website.

If you are not currently a Cigna member, these services are still available to you and your household members. Follow our [instructions for Non-Cigna members](#) to register and begin using EAP.





Retirement

Employee Pension Plan

BMEA and Non-Union employees participate in the **Public Employees' Retirement Association (PERA)** pension plan. Pensions are a retirement benefit that the city contributes to on your behalf to assist you in your post-career life. Participation in a pension plan is not voluntary and you cannot opt-out.

The city enrolls you in PERA, but once you are a PERA member you are responsible for becoming educated about the two (2) types of plans offered and determine what best fits your anticipated needs. You have 60 calendar days from your start date with the city to elect either the Defined Benefit Plan or Defined Contribution Plan. If you do not make a formal election, you are automatically enrolled in the Defined Benefit Plan. Learn more about the plan types from [PERA](#).

Supplemental Retirement Savings Plans

Boulder also offers several Supplemental Retirement Savings Plans; you are not required to enroll in these plan options but they can assist you in accumulating additional retirement savings through efficient paycheck deductions. All plans outlined below are plans to which only employees contribute; the city does not match or make contributions.

Learn more about your eligibility to enroll in different plan types in our [Employee Retirement Plan Options guide](#).

- **MissionSquare 457(b) Plan:** Deferred compensation retirement plan, including both pre-tax and post-tax (Roth) options for contributions.
- **MissionSquare Roth IRA Plan:** A post-tax deferral where your contributions grow tax free in a retirement account.
- **PERA 401(k) Plan:** A retirement savings plan with a wide variety of investment options, including pre-tax and post-tax (Roth) options for contributions.

Need more information on plan types or looking for resources as you prepare for retirement? Check-out our [Retirement Benefits page on Boulder@Work](#).



Changing or Electing Retirement Benefits

Employees may elect or change contributions to Supplemental Retirement Savings Plans at any time during the year, through Workday.

For detailed instructions, see our

[Change or Elect Supplemental Retirement Plans How-To Guide](#).



BMEA Leave Benefits

City (Observed) Holidays

BMEA members receive ten (10) full and two (2) half days of holidays each year. The city annually establishes a calendar of its observed holiday dates, including:

- New Year’s Eve (½ day)
- New Year’s Day
- Martin Luther King Jr. Day
- President’s Day
- Memorial Day
- Juneteenth Day
- Independence Day
- Labor Day
- Veterans Day
- Thanksgiving Day
- Christmas Eve (½ day)
- Christmas Day

BMEA members who work on a holiday receive premium pay. This premium pay is paid for the city holiday observances, except for Christmas Eve (12/24), Christmas Day (12/25), New Year’s Eve (12/31), New Year’s Day (1/1) and 4th of July (7/4) which are always recognized and paid on the listed days.

Floating Holidays

Current employees accrue Floating Holiday hours in Pay Period (PP) 1. New hires accrue prorated hours at time of hire. Employees can use this time for any purpose. Floating Holiday hours must be used by the end of the payroll year during which hours are granted. Hours are “use it or lose it” and cannot be carried over.

Floating Holiday Accrual (based on weekly scheduled hours)				
Pay Period (PP)	40 hrs.	30 – 39 hrs.	20 – 29 hrs.	Less than 20 hrs.
Before PP #1	24	18	12	6
PP #1 - #7	18	13.5	9	4.5
PP #8 - #13	12	9	6	3
PP #14 - #20	6	4.5	3	1.5
PP #21 - #26	Employees hired after PP #20 are not eligible for floating holidays in that year			





Vacation Leave

Regular BMEA employees who have been on active payroll continuously for six (6) months are eligible to take vacation. Vacation Leave accrues each pay period and is based on years of continuous service and weekly scheduled hours. These hours can roll over into each subsequent year with a maximum carryover balance of 280 hours. Please refer to the [BMEA CBA](#) for additional information.

Vacation Leave Accrual (based on weekly scheduled hours)				
Years of Service	40 hrs.	30 – 39 hrs.	20 – 29 hrs.	Less than 20 hrs.
Less than 2.0 years	3.99	2.99	2.00	1.00
At least 2.0 & less than 7.0 years	4.93	3.70	2.47	1.23
At least 7.0 & less than 10.0 years	5.24	3.93	2.62	1.31
At least 10.0 & less than 15.0 years	6.47	4.85	3.24	1.62
At least 15.0 & less than 18.0 years	7.08	5.31	3.54	1.77
18.0 or more years	7.39	5.54	3.70	1.85
Maximum carryover balance: 280 hours				

Sick Leave

Sick Leave accrues each pay period and can roll over into each subsequent year without limit. The city complies with the Healthy Families & Workplaces Act (HFWA); more information is available on the [Leave Benefits page](#). Please refer to the [BMEA CBA](#) for additional information.

Sick Leave Accrual (based on weekly scheduled hours)				
Years of Service	40 hrs.	30 – 39 hrs.	20 – 29 hrs.	Less than 20 hrs.
Hours Earned	4.31	3.24	2.16	1.08

Under HFWA, employees who are re-hired at the city within six (6) months of their last date of employment will have their ending sick leave balance re-instated. The balance is loaded at time of re-hire, and there is no change to the accrual rate or sick leave cap.

Additional Leave Benefits Available

BMEA employees may be eligible for additional leave benefits such as Paid Parental Leave, Family Medical Leave Act (FMLA), Emergency Leave, Short-Term Disability and Long-Term Disability. Visit the [Leave Benefits page on Boulder@Work](#) for additional information.



Non-Union Leave Benefits

City (Observed) Holidays

Regular employees receive ten (10) full and two (2) half days of holidays each year. The city annually establishes a calendar of its observed holiday dates, including:

- New Year’s Eve (½ day)
- New Year’s Day
- Martin Luther King Jr. Day
- President’s Day
- Memorial Day
- Juneteenth Day
- Independence Day
- Labor Day
- Veterans Day
- Thanksgiving Day
- Christmas Eve (½ day)
- Christmas Day

Floating Holidays

Current employees accrue Floating Holiday hours in Pay Period (PP) 1. New hires accrue prorated hours at time of hire. Employees can use this time for any purpose. Floating Holiday hours must be used by the end of the payroll year during which hours are granted. Hours are “use it or lose it” and cannot be carried over.

Floating Holiday Accrual (based on weekly scheduled hours)				
Pay Period (PP)	40 hrs.	30 – 39 hrs.	20 – 29 hrs.	Less than 20 hrs.
Before PP #1	24	18	12	6
PP #1 - #7	18	13.5	9	4.5
PP #8 - #13	12	9	6	3
PP #14 - #20	6	4.5	3	1.5
PP #21 - #26	Employees hired after PP #20 are not eligible for floating holidays in that year			





Vacation Leave

Vacation Leave accrues each pay period and is based on years of continuous service and weekly scheduled hours. These hours can roll over into each subsequent year with a maximum carryover balance of 320 hours. Please refer to the city's [Vacation Leave Policy](#) for additional information.

Accruals for 56-hour Battalion Chiefs can be found in the city's [Vacation Leave Policy](#).

Vacation Leave Accrual (based on weekly scheduled hours)				
Years of Service	40 hrs.	30 – 39 hrs.	20 – 29 hrs.	Less than 20 hrs.
Less than two (2) years	3.39	2.54	1.7	0.85
At least two (2) and less than (five) 5 years	5.24	3.93	2.62	1.31
At least five (5) and less than 14 years	7.08	5.31	3.54	1.77
14 years or more	8.93	6.7	4.47	2.24
Maximum carryover balance: 320 hours				

Sick Leave

Sick Leave accrues each pay period and can roll over into each subsequent year without limit. The city complies with the Healthy Families & Workplaces Act (HFWA); more information is available on the [Leave Benefits page](#). Please refer to the city's [Sick Leave Policy](#) for additional information.

Sick Leave Accrual (based on weekly scheduled hours)				
Years of Service	40 hrs.	30 – 39 hrs.	20 – 29 hrs.	Less than 20 hrs.
Hours Earned	4.31	3.24	2.16	1.08

Under HFWA, employees who are re-hired at the city within six (6) months of their last date of employment will have their ending sick leave balance re-instated. The balance is loaded at time of re-hire, and there is no change to the accrual rate or sick leave cap.

Additional Leave Benefits Available

City employees may be eligible for additional leave benefits such as Paid Parental Leave, Family Medical Leave Act (FMLA), Emergency Leave, Short-Term Disability and Long-Term Disability. Visit the [Leave Benefits page on Boulder@Work](#) for additional information.



Glossary

Coinsurance

The percentage of costs of a covered health care service you pay after you've paid your deductible. For example, after the deductible is met, the plan may pay 80% and you may pay 20% until the Out-of-Pocket Max is reached.

Copayment (Copay)

A copay is a flat dollar amount you pay for specific covered services upon each visit to the provider. It is not impacted by the plan deductible, coinsurance, or out-of-pocket maximum.

Deductible

The amount you must pay out of pocket for covered expenses before the insurance company starts to pay.

Embedded Deductible (PPO Plan)

In an embedded deductible health plan, the policy will have two deductibles: the individual deductible for each family member and the family deductible. When one family member accrues enough medical expenses to meet the individual deductible, coinsurance and cost-sharing will be provided by the insurer for that specific family member. Once multiple family members' medical expenses surpass the family deductible, the insurer begins to provide cost sharing for all members of the family.

Evidence of Insurability (EOI)

This is documentation that provides a record of a person's past and current health events; it is used by insurance companies to verify whether a person meets the definition of good health. It is only required in certain circumstances.

Explanation of Benefits (EOB)

After you receive medical services, your insurance will provide you with an EOB. It will outline details regarding how your insurance processed your medical claim, including what portion of the charges your insurance paid and what portion, if any, you are responsible for paying.

Flexible Spending Account (FSA)

An FSA is a tax-advantaged account that lets you put money aside on a pre-tax basis to pay for a wide range of health and/or dependent care expenses (as defined by the IRS). Unlike the HSA, any unused funds remaining after the plan year ends will be forfeited.

Formulary

A formulary is a list of drugs (both generic and brand name) selected by the health plan as the drugs preferred to treat certain health conditions.

Health Savings Account (HSA)

An HSA is a tax-advantaged medical savings account available to enrollees in a Qualified High Deductible Health Plan (HDHP). Pre-tax contributions are made to the member's account and can be used for a variety of IRS qualifying medical, dental, vision, and prescription expenses. The HSA is a member-owned account and funds roll over from year to year. The HSA is subject to the IRS contribution limits.

In- and Out-of-Network Providers

Benefit plans develop networks by contracting with doctors, hospitals, labs, etc., who have agreed to provide health care services to members at negotiated rates. You generally pay less out of pocket when you use in-network providers.

Non-Embedded Deductible (HDHP Plan)

There is no individual deductible. This means that the overall family deductible must be reached, either by an individual or by the family, in order for the insurance carrier to begin paying benefits.

Out-of-Pocket Maximum

The maximum amount you will pay out of pocket for covered medical expenses per calendar year, including your deductible. After your share of covered expenses reaches this annual limit, the plan pays 100 percent for eligible network services for the remainder of the calendar year.



Resources

For Questions About...	Contact	Phone #	Web/E-Mail
Medical & Prescription Plan Group # 3338899	Cigna	800-244-6224	www.mycigna.com
TeleHealth	MDLive	888-726-3171	www.mycigna.com
DispatchHealth	Dispatch Health	720-647-6419	www.dispatchhealth.com
Healthcare Exchange	Connect for Health Colorado	855-752-6749	www.connectforhealthco.com
Medicaid	Colorado Medicaid	800-221-3943	www.colorado.gov/peak
Employee Assistance Program (EAP) Employee ID: cityofboulder	Cigna	877-622-4327	www.mycigna.com
Dental Plan Group #W2274	Delta Dental	800-610-0201	www.deltadentalco.com
Vision Plan Group #12106494	Vision Service Plan (VSP)	800-877-7195	www.vsp.com
Health Savings and Flexible Spending Accounts	Alerus	800-837-4817	www.alerusb.com
Cigna Supplemental Health Claims Accidental Injury: 111050 Critical Illness: 111011 Hospital Indemnity: 110825	Cigna	800-754-3207	www.suphealthclaims.com suphealthclaims@cigna.com
Voluntary Life, Disability, and Absence/Leave Management	The Hartford	888-301-5615	www.thehartford.com/mybenefits
Retirement	PERA Defined Benefit– City of Boulder	303-832-9550	www.copera.org
	Supplemental 401(k)	303-832-9550	www.copera.org
	Supplemental 457(b) or Roth IRA	MissionSquare 800-669-7400	www.missionsq.org
Wellable	Support@wellable.co		www.boulder.wellable.co
EcoPass	RTD Customer Care	303-299-6000	www.rtd-denver.com
Legal Services Group #203798	LegalShield	888-807-0407	www.legalshield.com
Homethrive	Homethrive		Company Code: cityofboulder app.homethrive.com/email
Origin Healthcare	Origin Healthcare	888-777-2718	www.originhc.com
Identity Theft Protection Group #203798	IDShield	888-807-0407	www.idshield.com
Additional Questions or Escalated Claims Issues	HUB Advocacy	888-795-0300	boulderadvocacy@hubinternational.com



2025 Rates

Medical Rates					
Health Plan	Coverage	Total Pay Period Premium	City Pay Period Cost	Employee Pay Period Cost	
				With NO Wellness Credit	With Wellness Credit - \$13.85 per Pay Period
Full-Time Employees					
PPO	Employee	\$358.18	\$286.54	\$71.64	\$57.79
	Employee +1	\$771.40	\$617.12	\$154.28	\$140.43
	Family	\$1,077.36	\$861.89	\$215.47	\$201.62
HDHP	Employee	\$302.35	\$241.88	\$60.47	\$46.62
	Employee +1	\$651.17	\$520.94	\$130.23	\$116.38
	Family	\$909.42	\$727.54	\$181.88	\$168.03
Part-Time Employees (See Eligibility for Part-Time Hour Determinations)					
PPO	Employee	\$358.18	\$143.27	\$214.91	\$201.06
	Employee +1	\$771.40	\$308.56	\$462.84	\$448.99
	Family	\$1,077.36	\$430.94	\$646.42	\$632.57
HDHP	Employee	\$302.35	\$120.94	\$181.41	\$167.56
	Employee +1	\$651.17	\$260.47	\$390.70	\$376.85
	Family	\$909.42	\$363.77	\$545.65	\$531.80



Dental Rates				
Dental Plan	Coverage	Total Pay Period Premium	City Pay Period Cost	Employee Pay Period Cost
Full-Time Employees				
Low PPO	Employee	\$12.11	\$9.69	\$2.42
	Employee +1	\$24.23	\$19.38	\$4.85
	Family	\$41.58	\$33.27	\$8.32
High PPO	Employee	\$20.61	\$16.49	\$4.12
	Employee +1	\$41.72	\$33.37	\$8.34
	Family	\$71.38	\$57.10	\$14.28
Part-Time Employees (See Eligibility for Part-Time Hour Determinations)				
Low PPO	Employee	\$12.11	\$4.84	\$7.27
	Employee +1	\$24.23	\$9.69	\$14.54
	Family	\$41.58	\$16.63	\$24.95
High PPO	Employee	\$20.61	\$8.24	\$12.36
	Employee +1	\$41.72	\$16.69	\$25.03
	Family	\$71.38	\$28.55	\$42.83

Vision Rates				
Vision Plan	Coverage	Total Pay Period Premium	City Pay Period Cost	Employee Pay Period Cost
Full-Time and Part-Time Employees				
Base	Employee	\$3.70	\$-	\$3.70
	Employee +1	\$5.26	\$-	\$5.26
	Family	\$9.44	\$-	\$9.44
Buy-Up	Employee	\$7.80	\$-	\$7.80
	Employee +1	\$11.10	\$-	\$11.10
	Family	\$19.90	\$-	\$19.90