

LARIMER COUNTY

Employee Benefits Summary



When do my benefits become effective?

- If you were hired between the 1st and the 15th of the month, your benefits begin the 1st day of the next full month.
- If you were hired between the 16th and the 31st of the month, your benefits begin the 1st day of second full month.

VACATION ACCRUALS

(per biweekly pay period)

# Scheduled Work Hours	Regular & Limited Term Employees				Appointed Officials			
	0 to <5 years	5 to <10 years	10 to <15 years	15+ years	0 to <5 years	5 to <10 years	10 to <15 years	15+ years
20-29 Hours	3.00	3.25	4.00	4.50	3.25	4.00	4.50	5.00
30-39 Hours	4.00	4.50	5.50	6.25	4.50	5.50	6.25	7.00
40 Hours	4.50	5.25	6.25	7.25	5.25	6.25	7.25	8.25

SICK ACCRUALS

Employment Status	Biweekly	Annual
Part-Time: 20-29 Hours	2.50	65.00
Part-Time: 30-39 Hours	3.50	91.00
Full-Time: 40 Hours	4.00	104.00

HOLIDAY ACCRUALS

Employment Status	Each Calendar Holiday
Part-Time: 20-29 Hours	5.00
Part-Time: 30-39 Hours	7.00
Full-Time: 40 Hours	8.00

MEDICAL INSURANCE

We have 3 insurance plans:

1. Standard PPO
2. Choice PPO
3. High Deductible Health Plan (HDHP)

Network: Aetna Choice POS II



	STANDARD PPO	
	In-Network	Out-of-Network
Deductible Individual	\$1,000	\$2,000
Deductible Family	\$2,000	\$4,000
Coinsurance	20%	40%
Office Visit	\$25 copay	40%
Specialist Visit	\$50 copay	40%
Prescriptions		
Generic	\$10 max copay	Network Copay/Coinsurance
Preferred	20% coinsurance/\$50 max	+ 50% of remaining cost
Non-Preferred	50% coinsurance/\$100 max	
Mail Order	2x retail copay	
Specialty	\$100	

	CHOICE PPO	
	In-Network	Out-of-Network
Deductible Individual	\$500	\$1,000
Deductible Family	\$1,000	\$2,000
Coinsurance	10%	30%
Office Visit	\$25 copay	30%
Specialist Visit	\$50 copay	30%
Prescriptions		
Generic	\$10 max copay	Network Copay/Coinsurance
Preferred	20% coinsurance/\$50 max	+ 50% of remaining cost
Non-Preferred	50% coinsurance/\$100 max	
Mail Order	2x retail copay	
Specialty	\$100	

	HDHP with HSA	
	In-Network	Out-of-Network
Deductible Individual	\$3,000	\$6,000
Deductible Family	\$6,000	\$12,000
Coinsurance	20%	40%
Office Visit	20%	40%
Specialist Visit	20%	40%
Prescriptions		
Generic	\$10 max copay	Deductible, then Network Copay/Coinsurance
Preferred	20% coinsurance/\$50 max	+ 50% of remaining cost
Non-Preferred	50% coinsurance/\$100 max	
Mail Order	2x retail copay	
Specialty	\$100	

See Benefits Resource Guide for full plan details.

ADDITIONAL BENEFITS AVAILABLE THROUGH THE MEDICAL INSURANCE:



TELADOC

Provides access to a US board-certified doctor anytime, anywhere, by web, phone, or mobile app. Talk to a Teladoc doctor 24/7/365.

All 3 Plans: \$10 per visit



2ND.MD

Free expert medical advice for you and your family. Find a physician, get second opinions, schedule appointments, and more.



WELLNESS CLINIC

For employees, spouses, & dependents (ages 2+) enrolled in the County medical plan for primary care services, chronic conditions, prevention, and onsite medication distribution.

Standard & Choice Plans: FREE
HDHP: \$45 per visit



DENTAL INSURANCE

The Delta Dental of Colorado PPO Plus plan covers services at the following rates:

- Type A: Diagnostic & Preventative (Plan pays 100%)
- Type B: Basic Services (You pay 20%)
- Type C: Major Services (You pay 50%)

Employees will see greater savings when using a participating dentist, but are welcome to visit any dentist.



VISION INSURANCE

VSP is an employee paid supplemental vision care plan, separate from the one eye exam a year available through the medical insurance.



DISABILITY INSURANCE

Short-Term and Long-Term Disability are both 100% Employer Paid.

VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT

Pays your beneficiary a death benefit if you die due to a covered accident, and certain accidental losses.

BASIC LIFE INSURANCE

Basic Life and AD&D is 100% employer paid. You may also purchase additional life insurance for your dependents.

SUPPLEMENTAL LIFE INSURANCE

This is a voluntary, employee-paid supplemental term life insurance policy. Coverage amounts range from \$10,000-\$500,000.

ACCIDENT INSURANCE

This is a voluntary, employee-paid supplemental insurance. Pays for when you have minor or major accidents.

CRITICAL ILLNESS

This is a voluntary, employee-paid supplemental insurance. Benefits pay under specific conditions.



FLEXIBLE SPENDING ACCOUNTS

There are two types of Flexible Spending Accounts (see chart). The plan year runs from January 1st through December 31st.

	Health Care	Dependent Care
What It Covers	Expenses must be incurred for medical, dental, and vision care that is not reimbursed from another source.	Work related daycare expenses for a qualifying dependent.
Contribution Maximums	\$2,750	Depends on tax filing status.

RETIREMENT PLAN 401(a)

You are automatically enrolled in the mandatory 401(a) Retirement Plan on your first day of employment. Regular employees will be automatically enrolled to contribute the following amounts.

	Employee	Employer Match
Years 1-5 in the Plan	5%	5%
Years 6-10 in the Plan	7%	7%
Years 10+ in the Plan	8%	8%

457(b) DEFERRED COMPENSATION

Larimer County's voluntary 457(b) Deferred Compensation Plan lets you set aside additional funds to help prepare for retirement.

- Convenient, Automatic Savings
- Save with Pre-Tax Dollars
- Roth option available
- Flexible Contributions
- Diverse Investment Options



HEARING SERVICE PLAN

EPIC is a free benefit that offers you a national alliance of independent ear physicians and audiologists. Your EPIC benefit ensures substantial savings - between 30-60% - to protect and improve your hearing.



EMPLOYEE ASSISTANCE PROGRAM

GuidanceResources is free and confidential for employees, spouses, and dependents. They can help with confidential counseling, financial information, legal support, and work-life solutions.



PAGES TO BOOKMARK

HUMAN RESOURCES

www.larimer.org/hr

BENEFITS

www.larimer.org/hr/benefits

POLICIES & PROCEDURES

www.larimer.org/hr/hr-policies-and-procedures



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