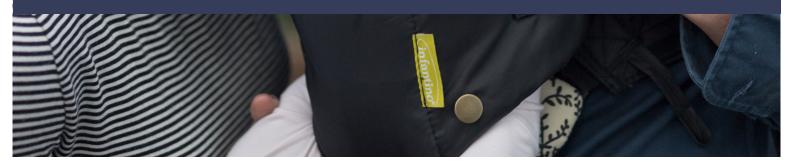


EMPLOYEE BENEFITS

Benefit plans effective January 1, 2021-December 31, 2021





Full-Time Employees



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Your Benefits

Mental Health Center of Denver offers a comprehensive benefits package consisting of:

- Medical insurance
- Dental insurance
- Vision insurance
- Flexible spending accounts
- Basic life and AD&D insurance
- Supplemental life and AD&D insurance
- Disability insurance
- 403(b) Retirement Plan
- Paid Time Off



Employee Benefits Overview

Benefits are an integral part of the overall compensation package provided by Mental Health Center of Denver. Within this Benefits Guide you will find important information on the benefits available to you for the 2021 plan year (through December 31, 2021). Please take a moment to review the benefits Mental Health Center of Denver offers to determine which plans are best for you.

Benefits Eligibility

Employees scheduled to work at least 30 hours per week are eligible for benefits on the first day of the month following 60 days of employment. The eligibility waiting periods will not exceed 90 days.

Many of the plans offer coverage for eligible dependents, including:

- Your legal spouse or domestic partner (we are an inclusive organization)
- Your children to age 26, regardless of student, marital, or tax-dependent status (including a stepchild, legally-adopted child, a child placed with you for adoption, or a child for whom you are the legal guardian)
- Your dependent children of any age who are physically or mentally unable to care for themselves

Enrollment

You can sign up for benefits or change your benefit elections at the following times:

- Within 30 days of your initial eligibility date (as a newly-hired employee)
- During the annual benefits open enrollment period
- Within 30 days of experiencing a qualifying life event

The choices you make at this time will remain the same through December 31, 2021. If you do not sign up for benefits during your initial eligibility period or during the open enrollment period, you will not be able to elect coverage until the following plan year.

Changing Your Benefits During the Year

Mental Health Center of Denver allows you to pay your portion of the medical, dental, and vision plan costs, and fund flexible spending accounts (FSA), on a pre-tax basis. Due to IRS regulations, once you have made your elections for the plan year, you cannot change your benefits until the next annual open enrollment period. The only exception is if you experience a qualifying life event. Election changes must be consistent with your life event.

To request a benefits change, notify Human Resources within 30 days of the qualifying life event. Change requests submitted after 30 days cannot be accepted.

Qualifying life events include, but are not limited to:

- Marriage, divorce, or legal separation
- Birth or adoption of an eligible child
- Death of your spouse or covered child
- Change in your spouse's work status that affects his or her benefits
- Change in your child's eligibility for benefits
 - College student loses existing health coverage (student plan) and is under age 26.
 - Child loses eligibility for Medicaid or CHIP.
 - Child turns 26 and loses coverage through their parent's plan.
- Qualified Medical Child Support Order

Medical Insurance Plan

Mental Health Center of Denver offers a medical plan through Cigna using the LocalPlus provider network. This plan offers in- and out-of-network benefits, providing you the freedom to choose any provider. However, you will pay less out of your pocket when you choose a network provider. Locate a Cigna network provider at www.myCigna.com or via the myCigna app (and selecting the LocalPlus network).

The table below summarizes the key features of the medical plan. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan document for additional information on coverage and exclusions.

Owner of Owner I Barrette	Cigna LocalPlus Medical Plan			
Summary of Covered Benefits	LocalPlus Network	Out-of-Network		
Plan Year Deductible				
Individual/Family	\$1,250/\$3,750	\$2,500/\$7,500		
Out-of-Pocket Maximum				
Includes deductible, copays, and coinsurance				
Individual/Family	\$4,200/\$8,400	\$16,800/\$33,600		
Preventive Care	Plan pays 100%	50% after deductible		
Physician Services				
Primary Care Physician (includes	* 05			
Mental Health)	\$25 copay	50% after deductible		
Telehealth	\$25 copay	50% after deductible		
Specialist	\$40 copay	50% after deductible		
Urgent Care/Dispatch Health	\$75 copay	50% after deductible		
Lab/X-Ray				
Diagnostic Lab/X-Ray	Plan covers 100%	50% after deductible		
High-Tech Services (MRI, CT, PET)	20% after deductible	50% after deductible		
Hospital Services				
Inpatient	20% after deductible	50% after deductible		
Outpatient	20% after deductible	50% after deductible		
Emergency Room	\$250 copay			
Occupational and Speech Therapy (20 visits/year per therapy)	\$40 copay	50% after deductible		
Chiropractic Care and Physical Therapy	\$40 copay	50% after deductible		
Prescription Drugs	Mental Health Center of Denver's in-house pharmacy copay is \$2 less.			
Generic	\$10 copay*			
Preferred Brand	\$35 copay*	Applicable copay then 50% reimbursement		
Non-Preferred Brand	\$90 copay*			
Specialty Drugs	20% up to \$150 maximum per script			
Mail Order (up to 90-day supply)	2x retail copay	Not covered		

^{*}Mandatory generic dispensing. When a generic equivalent is available, your prescriptions will be filled with the generic version. if you choose to receive the brand name drug, you will be responsible for the generic copay plus the cost difference between the generic drug and the brand name drug.

Medical Insurance Plan

Preventive Care

The Cigna medical plan covers in-network age-appropriate preventive care at 100%. This includes routine screenings and checkups, as well as counseling to prevent illness, disease, or other health problems.

Talk to your primary care physician to find out which screenings, tests, and vaccines are right for you, when you should get them, and how often. Please be aware that you will be responsible for the cost of any non-preventive care services you receive at your preventive care exam. Learn more about preventive care at www.myCigna.com.

You won't have to pay anything—no deductible, copay, or coinsurance—for preventive services when:

- You get them from a doctor or other health care provider in the Cigna network.
- The main purpose of your visit is to get preventive care.

Women's Preventive Care Services

The medical plan offers additional no-cost preventive care/services for women.

Pharmacy Benefit Features

Cigna Home Delivery Pharmacy is designed for individuals who take prescription medications on an ongoing basis. When you sign up for home delivery you will receive up to a 90 day supply or your prescription at a reduced cost. Call (800) 835-3784 or visit Cigna.com/Home-delivery-pharmacy to sign up for home delivery.

As part of your pharmacy benefits plan you have access to Cigna 90 Now Pharmacies. When you want to fill a 90 day prescription you need to go to a specified 90-day retail pharmacy such as CVS pharmacy at Target, Walmart or King Soopers. For more information about your pharmacy network visit Cigna.com/Rx90network, to find a 90 day pharmacy near you. When your doctor prescribes a specialty medication, they'll call in or fax the prescription to:

Cigna Specialty Pharmacy Services: (800) 351-3606 (phone), (800) 351-3616 (fax)

Cigna Telehealth Connection

Cigna provides access to telehealth services through MDLIVE. You can register to get immediate access to doctors 24/7 by video or phone! Cigna Telehealth Connection lets you get the care you need for a wide range of minor conditions. You can connect with a board-certified doctor via secure video chat or phone, without leaving your home or office. You will only pay a \$25 copay when you use the telehealth connection.

Register online at www.myCigna.com or MDLIVEforCigna.com, download the mobile app, or call (888) 726-3171.

Dispatch Health

Dispatch Health provides on-demand health care in the convenience of your home. They can treat many of the same illnesses and injuries that are treated at an urgent care, therefore, if you are enrolled in the MHCD medical plan, you will only pay a \$75 copay when you receive services through Dispatch Health.

Learn more at www.dispatchhealth.com or download the mobile app.

Dental Insurance Plan

Mental Health Center of Denver offers a dental insurance plan through Cigna. The plan offers in- and out-of-network benefits, providing you the freedom to choose any provider. However, you will pay less out of your pocket when you choose a network provider. Locate a Cigna network provider at www.myCigna.com.

The table below summarizes the key features of the dental plan. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

	Dental Plan		
Summary of Covered Benefits	In-Network	Out-of-Network	
Plan Year Deductible			
Individual/Family	\$55/\$	\$165	
Orthodontia	\$100		
Plan Year Benefit Maximum	\$1,500		
Preventive Care Oral exams, cleanings, x-rays	Plan pays 100%		
Basic Services Periodontal services, oral surgery, fillings	20% after deductible		
Major Services Endodontic services, Bridges, crowns (inlays/onlays), dentures (full/partial)	50% after deductible		
Orthodontia Services (children to age 19)	50% after deductible		
Orthodontia Lifetime Maximum	\$2,500		

Vision Insurance Plan

Mental Health Center of Denver offers a vision insurance plan through Cigna. You have the freedom to choose any vision provider. However, you will maximize the plan benefits when you choose a network provider. Locate a Cigna network provider at www.myCigna.com.

The table below summarizes the key features of the vision plan. Please refer to the official plan documents for additional information on coverage and exclusions.

0 10 10 50	Vision Plan		
Summary of Covered Benefits	In-Network	Out-of-Network	
Eye Exam (every 12 months)	Reimbursement up to \$100		
Standard Plastic Lenses (every 12 months)			
Single/Bifocal/Trifocal	e/Bifocal/Trifocal		
Frames (every 12 months)	Reimbursement up to \$300		
Contact Lenses (every 12 months in lieu of standard plastic lenses)			
Elective			
Medically Necessary			

Flexible Spending Accounts

Mental Health Center of Denver offers two flexible spending account (FSA) options—the health care FSA and the dependent care FSA—which allow you to pay for eligible health care and dependent care expenses with pre-tax dollars. The FSAs are administered by Cigna. Log into your account at www.myCigna.com to view your account balance(s), calculate tax savings, view eligible expenses, download forms, view transaction history, and more.

Health Care FSA

The health care FSA allows you to set aside money from your paycheck on a pre-tax basis (before income taxes are withheld) to pay for eligible out-of-pocket expenses, such as deductibles, copays, and other health-related expenses, that are not paid by the medical, dental, or vision plans. Over-the-counter (OTC) medications are not eligible for reimbursement without a prescription.

The health care FSA maximum contribution is \$2,750 for the 2021 plan year.

How Does an FSA Work?

You decide how much to contribute to each FSA on a plan year basis up to the maximum allowable amounts. Your annual election will be divided by the number of pay periods and deducted evenly on a pre-tax basis from each paycheck throughout the year.

You will receive a debit card from Cigna, which can be used to pay for eligible health care expenses at the point of service. If you do not use your debit card, or if you have dependent care expenses to be reimbursed, submit a claim form and a bill or itemized receipt from the provider to Cigna. Keep all receipts in case Cigna requires you to verify the eligibility of a purchase.

Dependent Care FSA

The dependent care FSA allows you to set aside money from your paycheck on a pre-tax basis for day care expenses to allow you and your spouse to work or attend school full time. Eligible dependents are children under 13 years of age, or a child over 13, spouse, or elderly parent residing in your house who is physically or mentally unable to care for himself or herself. Examples of eligible expenses are day care facility fees, before- and after-school care, and in-home babysitting fees (income must be reported by your care provider).

You may contribute up to \$5,000 to the dependent care FSA for the 2021 plan year if you are married and file a joint return or if you file a single or head of household return. If you are married and file separate returns, you can each elect \$2,500 for the 2021 plan year.

Things to Consider Before Contributing to an FSA:

- For the health care FSA, at the end of the plan year, you can roll over up to \$550 from your health care FSA to use
 in future years. Any amount in excess of \$550 will be forfeited.
- Dependent care FSA dollars are use it or lose it (no roll over allowed). However, you have 75 days to incur and be reimbursed for expenses after the end of the plan year.
- If you or your spouse are enrolled in another medical plan that is a qualified HDHP and fund an HSA, you are not eligible to fund a healthcare FSA.
- You cannot take income tax deductions for expenses you pay with your FSA(s).
- You cannot stop or change your FSA contribution(s) during the plan year unless you experience a qualifying life event.



Life and AD&D Insurance

Basic Life and AD&D Insurance

Life and accidental death and dismemberment (AD&D) insurance is an important element of your income protection planning, especially for those who depend on you for financial security.

Please be sure to keep your beneficiary designations up to date.

For your peace of mind, Mental Health Center of Denver automatically provides basic life and AD&D insurance through Cigna to all benefits-eligible employees **at no cost to you**. If you die as a result of an accident, your beneficiary would receive both the life benefit and the AD&D benefit. You have the option to purchase supplemental life and AD&D insurance.

- Employee life benefit: 1x annual earnings up to a maximum of \$100,000
- Employee AD&D benefit: 1x annual earnings up to a maximum of \$100,000

Supplemental Life and AD&D Insurance

Mental Health Center of Denver provides you the option to purchase supplemental life and AD&D insurance for yourself, your spouse, and your dependent children through Cigna. You must purchase supplemental coverage for yourself in order to purchase coverage for your spouse and/or dependents. Supplemental life rates are age-rated (listed on page 10). Benefits will reduce to 65% at age 65, to 45% at age 70, to 30% at age 75, to 20% at age 80, and to 15% at age 85. Spouse supplemental AD&D insurance terminates at age 70.

If you elect coverage when first eligible, you may purchase up to the guarantee issue amount(s) without completing a statement of health (evidence of insurability). Cigna offers a unique guaranteed issue protection benefit—if you enroll in coverage, even at the minimum amounts for employees and spouses, you can increase that coverage at future annual enrollments up to the guarantee issue amount without having to submit evidence of insurability. If you do not enroll when first eligible, and choose to enroll during a subsequent annual open enrollment period, you will be required to submit evidence of insurability for any amount of coverage. Coverage will not take effect until approved by Cigna.

- Employee: \$10,000 increments up to \$400,000 or 5x annual salary, whichever is less Guarantee issue: \$200,000 (during initial eligibility)
- **Spouse:** \$10,000 increments up to \$250,000 or 100% of the employee's election, whichever is less Guarantee issue: \$30,000 (during initial eligibility)
- **Dependent children:** Birth to 6 months: \$2,500; 6 months to age 26: \$2,500 increments up to \$10,000 Guarantee issue: \$10,000 (during initial eligibility)



Disability Insurance

Short-Term Disability Insurance

Mental Health Center of Denver automatically provides short-term disability (STD) insurance through Cigna to all benefitseligible employees **at no cost to you**. STD insurance is designed to help you meet your financial needs if you become unable to work due to an illness or injury. Benefits will be reduced by other income, including state-mandated short-term disability plans.

• Benefit: 50% of base weekly pay up to \$1,250

• Elimination period: 30 days

• Benefit duration: Up to 9 weeks

Long-Term Disability Insurance

Mental Health Center of Denver automatically provides long-term disability (LTD) insurance through Cigna to all benefitseligible employees **at no cost to you**. LTD insurance is designed to help you meet your financial needs if your disability extends beyond the short-term disability period.

• Benefit: 60% of base monthly pay up to \$10,000

• Elimination period: 90 days

• Benefit duration: Social security normal retirement age

Benefit Plan Premiums

Medical and Vision Insurance

Listed below are the semi-monthly (per pay period) costs for medical and vision insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis. Premiums are calculated according to the number of hours you are scheduled to work.

Coverage Level	Medical and Vis	ion 40 hours/week	Medical and Vision 35 hours/week		Medical and Vision 30 hours/week	
Coverage Level	Standard Rate	Tobacco Free Rate*	Standard Rate	Tobacco Free Rate*	Standard Rate	Tobacco Free Rate*
Employee Only	\$110.00	\$35.00	\$121.55	\$46.55	\$138.35	\$63.35
Employee + Spouse	\$233.00	\$158.00	\$285.14	\$210.14	\$360.98	\$285.98
Employee + Child(ren)	\$214.00	\$139.00	\$259.87	\$184.87	\$326.59	\$251.59
Employee + Family	\$317.00	\$242.00	\$396.86	\$321.86	\$513.02	\$438.02

^{*}Tobacco/Nicotine Free Premium Discount: Each Employee who certifies that he/she is (and has been for the last 120 days) a non-tobacco user (or has completed the MHCD smoking cessation program and created a smoking cessation plan with his/her medical provider within 120 days from date of hire or January 1) shall receive a bi-weekly discount in the amount of \$75.00. *The amount of the discount shall be \$75 per each pay period in which the employee has a health insurance deduction. As the \$75 discount is tied to the individual employee utilizing the health insurance, \$75 is the maximum discount applied to the health insurance premium per pay period.

Your health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program, including tobacco attestation, are available to all employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact Human Resources and we will work with you (and, if you wish, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.

Dental Insurance

Listed below are the semi-monthly (per pay period) costs for dental insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis. Premiums are calculated according to the number of hours you are scheduled to work.

Coverage Level		Dental Plan			
Coverage Level	40 hours/week 35 hours/week 30 hours/week				
Employee Only	\$6.68	\$8.16	\$10.01		
Employee + Spouse	\$13.35	\$16.70	\$20.03		
Employee + Child(ren)	\$13.35	\$16.70	\$20.03		
Employee + Family	\$20.03	\$25.22	\$30.05		

Supplemental Life and AD&D Insurance Costs

Listed below are the monthly rates for supplemental life and AD&D insurance. The amount you pay for supplemental life and AD&D insurance is deducted from your paycheck on a post-tax basis. Spouse AD&D ends at age 70.

Supplemental Life and AD&D Rates				
Age	Employee Rate Per \$1,000 of coverage	Spouse Rate Per \$1,000 of coverage		
<29	\$0.075	\$0.090		
30–34	\$0.095	\$0.110		
35–39	\$0.115	\$0.130		
40–44	\$0.175	\$0.190		
45–49	\$0.275	\$0.290		
50-54	\$0.435	\$0.450		
55–59	\$0.685	\$0.700		
60–64	\$0.905	\$0.920		
65–69	\$1.435	\$1.450		
70–74	\$2.515	\$2.500		
75+	\$4.515	\$4.500		

Supplemental Child Life and AD&D Rates			
Per \$2,500 of coverage	\$0.575		
Per \$5,000 of coverage	\$1.15		
Per \$7,500 of coverage	\$1.725		
Per \$10,000 of coverage	\$2.30		

403(b) Retirement Plan—Voya Financial

The retirement plan features a 3.5% employer match after one year! You may choose pre-tax or post tax (Roth) retirement savings plans. Financial Wellness and Retirement on-demand and live sessions are available at Voya.com/VoyaLearn.

2021 Paid Holidays:

- New Years Day—Friday, January 1
- Martin Luther King Day—Monday, January 18
- Memorial Day—Monday, May 31
- Juneteenth—Friday, June 18

- Independence Day—Monday, July 5
- Labor Day—Monday, September 6
- Thanksgiving—Thursday, November 25 and Friday, November 26
- Christmas—Friday, December 24

Paid Time Off:

Excellent PTO Leave: PTO can be used for *any* reason an employee wants time off, such as: vacation, birthdays, feeling under the weather/minor illness/sickness, volunteering, religious observance or holidays, personal business/errands, well-being day, or any other personal reason.

Accrual Rates for Full-Time Employees	Accrual Per Pay Period	Accrual Per Month	Days Per Year	Maximum Accrual
6 to 12 months	5.538	12 hours	18 days	180 hours
13 to 36 months	6.461	14 hours	21 days	210 hours
37 to 60 months	7.385	16 hours	24 days	240 hours
Over 60 months	8.308	18 hours	27 days	270 hours

Serious Illness Bank:

- 4 days per year which may be accessed with FMLA eligibility, immediately upon admission to a hospital, or after the use of 24 consecutive work hours of PTO for illness. Serious Illness Bank days are banked from year to year up to a 520 hour maximum.
- For 2021, due to the ongoing COVID-19 pandemic, SIB may also be used for COVID-related illness/guarantine.

Healthy Families & Workplaces Act and COVID-Related Leave:

For 2021, due to the ongoing COVID-19 pandemic, in addition to the leave categories described above, we are providing additional paid leave to ensure all employees have access to paid leave for illness, quarantine, and other COVID-related issues.

EMPLOYEE BENEFITS

Benefit plans effective January 1, 2021-December 31, 2021

Additional Benefits

Excellent Training Program:

- Internal Training Clinical and professional continuing education.
- External Conferences Training seminars and educational leave.

Educational Leave:

Approved leave to attend job-related seminars or trainings.

EcoPass

Free pass for unlimited public transportation (bus, light rail).

Loan Forgiveness Options:

 Mental Health Center of Denver employees may be eligible for a variety of loan forgiveness options: National Health Service Corps, Colorado Health Service Corps and Public Student Loan Forgiveness eligibility.

Other Valuable Benefits:

- Tuition Assistance Program—Financial assistance for job-related college-level educational courses.
- Employee Referral Bonus Program—\$500 to \$1,000 for referring newly-hired staff!
- WAY TO GO! Program—Earn prizes for peer recognition.
- Automatic Payroll Deposit
- Employee Assistance Program—Free confidential counseling and resource for referral services.

Important Contact Information

If you have any questions regarding your benefits or the material contained in this guide, please contact Human Resources.

Mental Health Center of Denver Human Resources

Phone: (303) 504-6515 Fax: (303) 758-5793 Email: deanna.king@mhcd.org

Provider/Plan	Contact Number	Website
Medical, Dental, and Vision—Cigna	(866) 494-2111	www.mycigna.com
Flexible Spending Accounts—Cigna	(866) 494-2111	www.mycigna.com
Life and Disability Insurance—Cigna		
To file a claim	(800) 362-4462	www.cigna.com/lifeclaimform
Evidence of Insurability	(800) 732-1603	
Life Assistance Program	(800) 538-3543	www.cignabehavioral.com/cgi
403(b) Retirement Plan—Voya Financial	(800) 584-6001	www.VoyaRetirementPlans.com Search Voya Retire on your favorite app store

This summary of benefits is subject to ongoing collective bargaining process, and is not intended to be a complete description of the terms and Mental Health Center of Denver insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan. In the event of any conflict between a summary of the plan and the official document, the official document will prevail.

Although Mental Health Center of Denver maintains its benefit plans on an ongoing basis, Mental Health Center of Denver reserves the right to terminate or amend each plan, in its entirety or in any part at any time.