

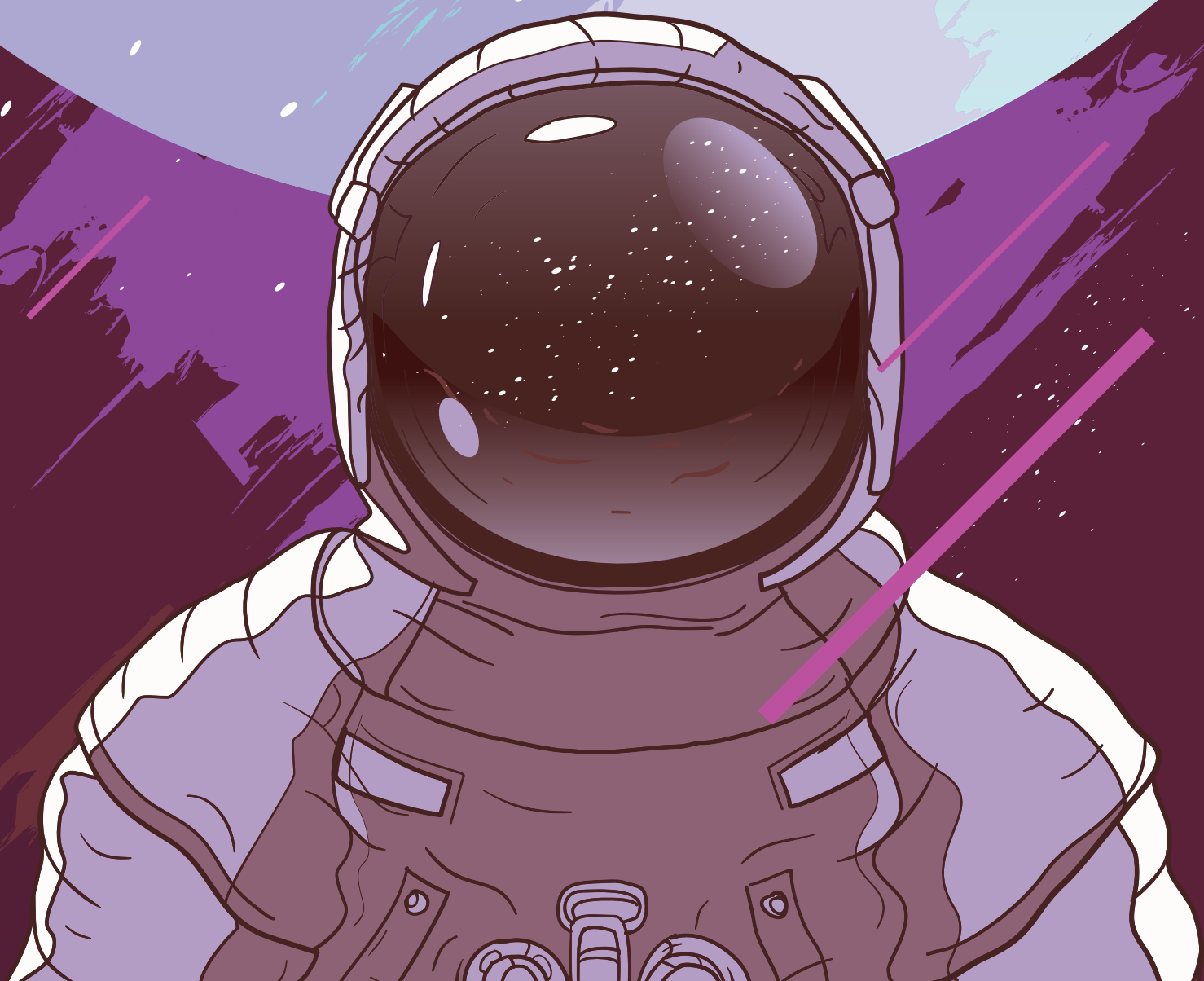
El Paso County

BENEFITS

OPEN ENROLLMENT GUIDE

Benefits Effective 1/1/25 - 12/31/25

Explore benefits that
are out of this world.





**Let's
explore
your stellar
benefit
options
and protect
what's most
important.**

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Welcome to the universe of employee benefits.

El Paso County has worked hard to put together a benefits package that will help you thrive and will support your financial stability.

Each year, El Paso County strives to offer comprehensive benefit plans to our employees. In the employee benefit guide you will learn more about the benefits offered for the 2025 plan year and how to use them to your benefit.

Throughout this guide you will find interactive QR codes that will take you deeper into your employee benefit plan documents and give you quick access to needed

documents. To access, scan with a camera on your personal device, cell phone, or by clicking, if viewing electronically.

The benefits you elect during this period will be effective from January 1st, 2025 until December 31st, 2025. Please review your open enrollment materials thoroughly before making your elections.

Eligibility

The group insurance coverage described in this guidebook is available to all full-time, regular employees as defined by your employer.

Part-time employees are eligible ONLY for Medical, Dental and Cafeteria 125 benefits.

The coverage effective date will begin on the first of the month following employee date of hire. All benefit elections must be made within 30 days from your date of hire. Once your enrollment window has closed, you may not make any changes to your elections unless you experience a Qualified Life Event (QLE).



Dependent Eligibility

If you apply for coverage for yourself, you may also elect coverage for any of your eligible dependents. Eligible Dependents include one or more of the following:

- Your legal spouse
- A child through the age of 26
- A child is defined as your natural child, legally adopted child, stepchild, and any child for whom you are the court-appointed guardian
- A custodial grandchild
- A child of any age who is medically certified as disabled and dependent on the parent for support and maintenance



Documentation

If you are going to add a dependent to your insurance for the first time, you will need to provide proof of your dependent's relation to you. This can be in the form of:

- Marriage Certificate
- Birth Certificate/Verification of Birth Facts (only valid until birth certificate is issued)
- Court Order
- Adoption Certificate/Placement Agreement
- Marriage Certificate + Birth Certificate - Stepchildren

Does your spouse also work for the County of El Paso? If your spouse works for the County of El Paso and is eligible for County health coverage, both may choose "employee only" for medical, dental or vision but may not be added to each other's health plan. This also applies to shared dependents. Dependents may only be added to one of the employee's health plans.

Qualified Life Event

Generally, benefit changes are limited to open enrollment.

There are some exceptions to this. If you have a Qualifying Life Event (QLE), then you will be able to make changes to your benefits within 30 days of the event.

- Benefit Elections must be consistent with the event
- You can only make changes to the specific plans where dependents will be affected
- Benefits and new rates become effective the date of the event for birth, adoptions, marriage, divorce, and death; or the day after benefits end, when the event is loss of coverage
- The event date must be consistent with the information in the Supporting Documentation

Qualifying Event	Acceptable Documentation
Birth Adoption Legal Guardianship	Birth Facts or Birth Certificate, Adoption Record. Legal Guardianship document court order or Child Support order.
Marriage	Marriage License
Loss of Employer Sponsored Group Coverage	Letter of documentation from previous coverage stating that coverage end date and employee, spouse or dependent covered.
Divorce or Legal Separation	Divorce or annulment papers including displaying the coverage type, employee, spouse, or dependent covered and the end date of coverage.
Loss of Medicaid/Chip	Documentation displaying coverage type, employee, spouse, or dependent covered and end date of coverage.
Plus One	Must have resided together in the same residence for at least 12 consecutive months and continue to do so for the Plus One Qualifying Dependent to remain eligible. Please contact us regarding approved eligibility documentation that is acceptable.

Key Terms

Deductible

The amount you pay for covered healthcare services before your insurance plan starts to pay. For example, with a \$2,000 deductible, you pay the first \$2,000 of covered services yourself. After you pay your deductible, you usually pay only a co-payment or co-insurance for covered services. Your insurance company pays the rest.

Co-pay

The set amount you pay for a covered service at the time you receive it. The amount can vary based on the type of service.

Coinsurance

The percentage of costs of a covered healthcare service you pay after you've paid your deductible.

Out-of-Pocket Maximum/Limit

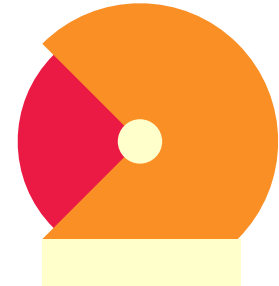
The maximum dollar amount you have to pay for covered services in a plan year. After you spend this amount on deductibles, co-payments, and coinsurance for in-network care and services, your health plan pays 100% of the costs of covered benefits.



Blue Cross Blue Shield Medical

Core Plan

Deductible Employee Only	\$1,500
Deductible Employee & Family	\$3,000
Office Visit Co-payment	\$45
Free-standing ER Copay	\$500

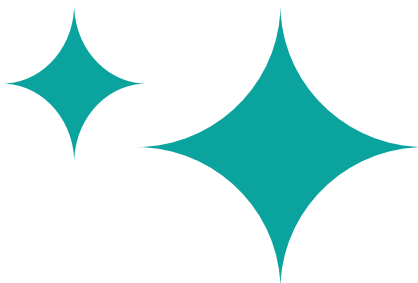


Plan Features	In-Network	Out-of-Network
Calendar Year Deductible		
Individual	\$1,500	\$2,750
Family	\$3,000	\$5,500
Annual Out-of-Pocket Maximum		
Individual	\$5,000	No Limit
Family	\$10,000	No Limit
Coinsurance Percentage	Plan pays 80% after deductible	Plan pays 50% after deductible
Coinsurance Percentage: Preferred Hospitals	Plan pays 95% after deductible	N/A
Copays (Copays are applied to your Annual Out-of-Pocket Maximum on this plan)		
Office Visit (Physician or Specialist)	\$45	65%
Emergency Room	\$250	\$250
Freestanding ER	N/A	\$500
Hospital Admission	\$200	N/A
Hospital Outpatient	\$150	N/A
Prescription Drug Coverage		
RX - 30 Day Supply Tier 1/ Tier 2/ Tier 3	\$15/ \$30/ \$45	65% after deductible
RX - 90 Day Supply Tier 1/ Tier 2/ Tier 3	\$30/ \$60/ \$90	Not Covered
Other Benefits		
Maximum Lifetime Benefit	Unlimited	Unlimited
Preventative Care	100%; No deductible	Not Covered



Consumer Driven Health Plan (CDHP)

Plan Features	In-Network	Out-of-Network
Calendar Year Deductible		
Individual	\$3,500	\$5,000
Family	\$7,000	\$10,000
Annual Out-of-Pocket Maximum (Co-insurance and deductible combined)		
Individual	\$3,500	\$8,000
Family	\$7,000	\$16,000
Coinsurance Percentage	Plan pays 100% after deductible	Plan pays 65% after deductible
Coinsurance Percentage: Preferred Hospitals	Plan pays 100% after deductible	N/A
Copays (There are no copays for office visits on this plan; members will instead pay a <i>negotiated rate</i> for office visits)		
Office Visit (Physician or Specialist)	100% after deductible	65% after deductible
Emergency Room	100% after deductible	65% after deductible
Hospital Admission	100% after deductible	65% after deductible
Hospital Outpatient	100% after deductible	65% after deductible
Prescription Drug Coverage		
RX - 30 Day Supply Tier 1/ Tier 2/ Tier 3	100% after deductible Preventative medications: \$15/ \$30/ \$45	No Coverage
RX - 90 Day Supply Tier 1/ Tier 2/ Tier 3	100% after deductible Preventative medications: \$30/ \$60/ \$90	No Coverage
Other Benefits		
Maximum Lifetime Benefit	Unlimited	Unlimited





Medical Plan Rates

Consumer Driven Health Plan (CDHP)

Employee Bi-Weekly Contribution for the Consumer Driven Health Plan					
	County Contribution	No Discount Deduction	Tobacco Free (2%)	Wellness (4%)	Both Discounts Combined (6%)
Employee Only	\$384.31	\$5.34	\$5.24	\$5.14	\$5.04
Employee + Spouse	\$577.61	\$145.30	\$142.39	\$139.49	\$136.58
Employee + Child(ren)	\$530.05	\$101.93	\$99.89	\$97.85	\$95.81
Employee + Family	\$762.40	\$238.07	\$233.31	\$228.55	\$223.79

Core Plan

Employee Bi-Weekly Contribution for the Core Plan					
	County Contribution	No Discount Deduction	Tobacco Free (2%)	Wellness (4%)	Both Discounts Combined (6%)
Employee Only	\$393.34	\$35.70	\$34.98	\$34.26	\$33.56
Employee + Spouse	\$626.42	\$226.41	\$221.88	\$217.35	\$212.83
Employee + Child(ren)	\$573.97	\$174.96	\$171.46	\$167.96	\$164.46
Employee + Family	\$834.92	\$358.61	\$351.44	\$344.27	\$337.09





Aetna Dental

- The County of El Paso provides the option to enroll in dental coverage through Aetna.
- Employees do not pay for dental premiums if enrolled in a medical plan.
- Extended network to Mexico
- Please Note: Sheriff's Office Union employees are not eligible to enroll due to the Union agreement.

Preferred Provider Organization (PPO) Dental Plan		
Summary of Benefits	In-Network	Out-of-Network
Coverage for Dental Services		
Type A Expenses: Preventative & Diagnostic	100%	100% of recognized charges
Type B Expenses: Maintenance, Simple Restorative, Oral Surgery, Periodontics and Endodontics	80%	80% of recognized charges
Type C Expenses: Complex Restorative	50%	50% of recognized charges
Type D Expenses: Orthodontic Dentistry	50%	50% of recognized charges
Maximum Benefits		
Calendar Year Maximum Benefit		\$1,500
Orthodontic Lifetime Maximum Benefit		\$1,000

Dental With Medical Plan: Bi-weekly Premium	
Employee Only	\$0.00
Employee + Spouse	\$13.63
Employee + Child(ren)	\$27.25
Employee + Family	\$40.88

Dental Only: Bi-weekly Premium	
Employee Only	\$13.63
Employee + Spouse	\$27.25
Employee + Child(ren)	\$40.88
Employee + Family	\$54.21

Summary of Benefits	In-Network	Out-of-Network
Exam (Use your Exam Coverage once every Calendar Year)		
Eye Exam with Dilation as Necessary	\$0 Copay	\$30 Reimbursement
Retinal Imaging	Member pays discounted fee of \$39	Not Covered
Standard Contact Lens Fit/Follow Up	Member pays discounted fee of \$40	Not Covered
Premium Contact Lens Fit/Follow Up	Member pays 90% of retail	Not Covered
Frames (Use your Frame Coverage once every Calendar Year)		
Any frame available, including frames for prescription sunglasses	\$0 Copay; \$100 Allowance, 20% off balance over allowance	\$70 Reimbursement
Standard Plastic Lenses (Use your Lens/Lens Option Coverage once every Calendar Year to purchase 1 pair of eyeglass lenses OR 1 order of contact lenses)		
Single Vision	\$0 Copay	\$25 Reimbursement
Bifocal	\$0 Copay	\$35 Reimbursement
Trifocal	\$0 Copay	\$45 Reimbursement
Lenticular	\$0 Copay	\$80 Reimbursement
Standard Progressive Lens	\$65 Copay	\$35 Reimbursement
Premium Progressive Lens	\$65 Copay; 80% of Charge less \$120 allowance	\$35 Reimbursement
Lens Options		
UV Treatment	Member pays discounted fee of \$15	Not Covered
Tint (Solid and Gradient)	Member pays discounted fee of \$15	Not Covered
Standard Plastic Scratch Coating	Member pays discounted fee of \$15	Not Covered
Polycarbonate Lenses - Adult	Member pays discounted fee of \$40	Not Covered
Polycarbonate Lenses - Children to age 19	\$0 Copay	\$7 Reimbursement
Standard Anti-Reflective Coating	Member pays discounted fee of \$45	Not Covered
Photochromic/Transitions Plastic - Adult	20% off Retail	Not Covered
Other Add-Ons	20% off Retail Price	Not Covered



Aetna Vision

Contact Lenses (Use your Contact Lens Coverage once every Calendar Year to purchase 1 pair of eyeglasses OR 1 order of contact lenses)

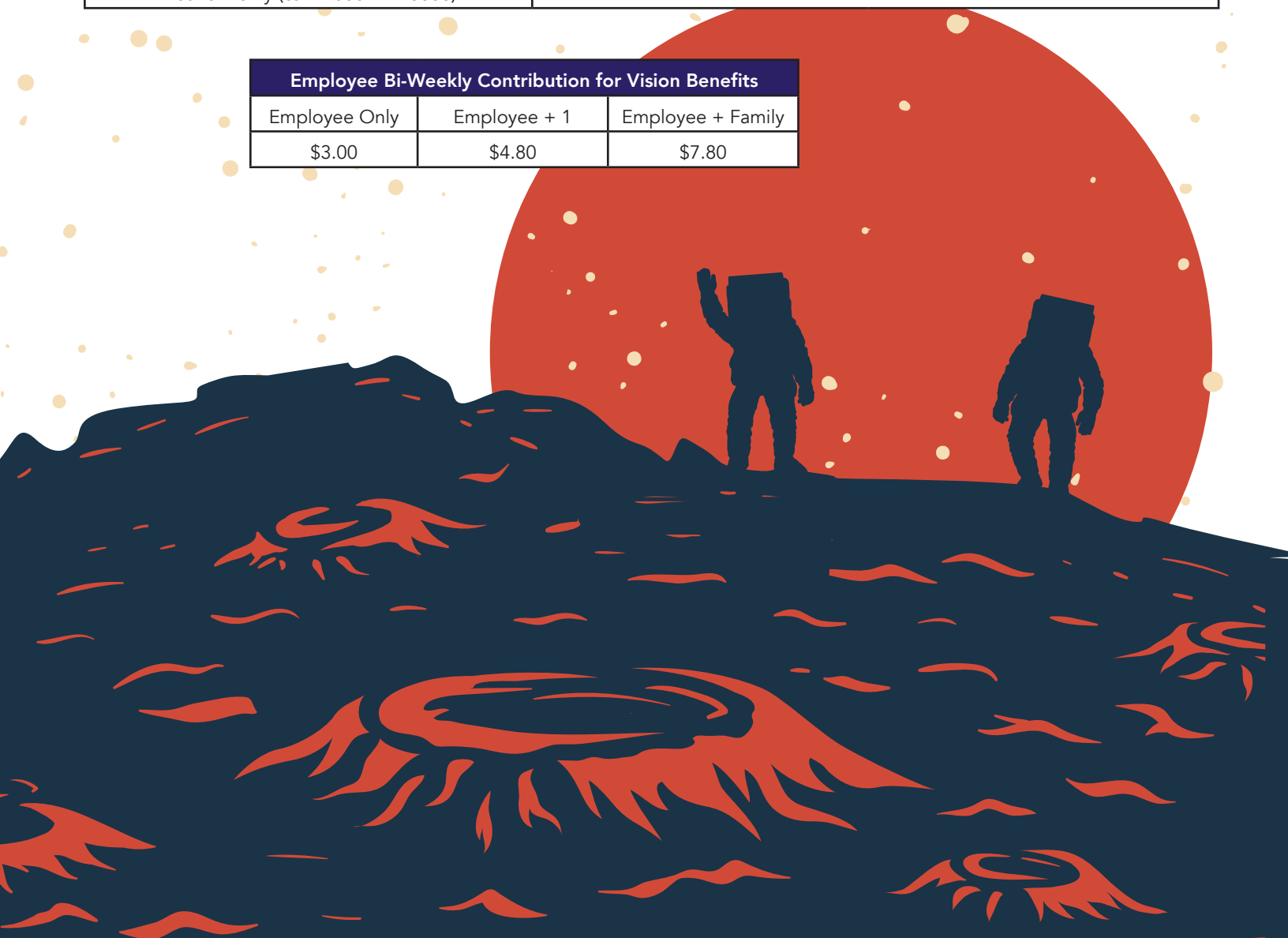
Conventional	\$0 Copay; \$135 Allowance, 15% off balance over allowance	\$100 Reimbursement
Disposable	\$0 Copay; \$135 Allowance	\$100 Reimbursement
Medically Necessary	Covered in Full	\$200 Reimbursement

In-Network Discounts (Discounts cannot be combined with any other discounts or promotional offers and may not be available on all brands)

Additional pairs of eyeglasses or prescription sunglasses	Up to a 40% discount
Non-covered Items	20% discount
Laser vision correction or PRK from U.S. Laser Network only (call 1-800-422-6600)	15% discount off retail or 5% discount off promotional price

Employee Bi-Weekly Contribution for Vision Benefits

Employee Only	Employee + 1	Employee + Family
\$3.00	\$4.80	\$7.80



Look out for
your health with
an HSA, FSA or
DCFSA.



Let's Compare:

HSA vs FSA vs DCFSA

Medical expenses can be unexpected and expensive. Going to the doctor and paying for medication if you have a chronic condition can get expensive quick, and accidents that require medical attention can happen when you least expect it. Health Savings Accounts (HSA), and Flex Spending Accounts (FSA) give you the opportunity to put money aside pre-tax to use to cover you and your dependent's qualified medical

expenses. These two options come with different qualifications and different incentives, but the goal is the same; to provide you with peace of mind.

The FSA also has a Dependent Care option. This allows you to put money aside pre-tax for dependent care so that you can get reimbursed for that care. The Dependent Care FSA is **not** for your dependent's medical expenses.



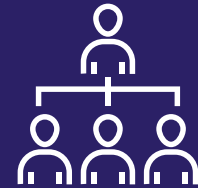
Health Savings Account (HSA)

If you are enrolled in the HDHP you can enroll in the HSA. Your HSA can be used for qualified expenses for you, your spouse, and/or tax dependents, even if they are not covered by your medical plan. An HSA is like a 401(k) for healthcare. It's yours for life, regardless of your employment or health plan. Unlike an FSA, there is no "use it or lose it" rule. With more tax advantages than any other savings vehicle, an HSA is one of the most efficient ways to manage healthcare costs.



Healthcare Flex Spending Account (FSA)

An FSA is a great way to pay for medical expenses with pre-tax dollars. You will be able to enjoy significant tax savings with pre-tax contributions and tax-free reimbursements for qualified plan expenses.



Dependent Care Flex Spending Account (DCFSA)

In addition to the healthcare FSA, you may opt to participate in the Dependent Care FSA. Set aside pre-tax funds into a DCFSA for expenses associated with caring for elderly or child dependents. The Dependent Care FSA is not for medical expenses for your dependents. Unlike the healthcare FSA, reimbursement from your DCFSA is limited to the total amount that is currently deposited in your account. You can set aside up to \$5000 to pay for child or elder care expenses.



Health Savings Account (HSA)

A Health Savings Account allows employees to pay for their current healthcare expenses on a pre-tax basis. What is Pre-tax? The funds that are deposited into an HSA are not taxed.

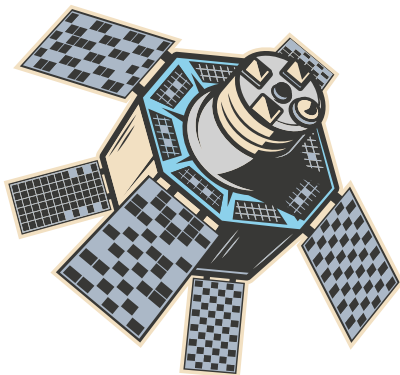
- Minimum Contribution of \$10/bi-weekly.
- Elect bi-weekly pre-tax deduction for HSA. Employees may change their contribution amount once a month
- Any unused funds roll over to the following year.
- HSA funds can be used to pay for qualified expenses of IRS tax dependents, even if the dependent is not enrolled in the health plan.



Qualified Medical Expenses Include:

- Pain relievers
- Eyeglasses/contacts
- Doctor visits
- Cold/cough medicine
- Dental cleaning
- Chiropractic care
- Sleep aids
- Insulin testing supplies

- Employees may not enroll in an HSA if they are enrolled in a non-high deductible plan.
- ***El Paso County will make a one-time \$1,200 contribution to your Health Savings Account***
- If 55 or Older, you can contribute an additional \$1,000 to your HSA annually
- Employees need to ensure they review IRS guidelines to determine if they are eligible to contribute to an HSA before enrolling in the Consumer Driven Health Plan (CDHP).



Annual Tax-Saving Potential

Family Plan - \$1,710
Individual Plan - \$860

2025 IRS Contribution Limits

Family Plan - \$8,550
Individual Plan - \$4,300





Flex Spending Accounts

FSA

The IRS allows employees to set pre-tax dollars aside to utilize on qualified medical expenses.

- Minimum contribution of \$10 bi-weekly
- The contribution amount elections are made during open enrollment and are effective January 1, 2025 – December 31, 2025.
- The full amount that is elected will be deducted in equal amounts over the remaining pay periods. For example: Employee elects to have \$1,200 for the year (The \$1,200 will be divided by 26 pay periods. $\$1,200/26 = \$46.15 =$ Bi-weekly deduction.)
- If employees do not use all of the contributed funds by December 31, 2025, the funds will be forfeited to the County.
- Employees may enroll in an FSA even if not enrolled in a County medical plan.



Qualified Medical Expenses Include:

- Office visit
- Prescription
- Dental
- Vision

Dependent Care FSA

Employee may set pre-tax dollars aside for dependent care expenses.

- The money that is set aside may be used to pay themselves back for dependent care expenses.
- Dependent care FSA may only be used for eligible expenses related to caring for a dependent child under age 12.
- Employees may set aside up to \$5,000 during 2025 in a Dependent care FSA.



Qualified Dependent Care Expenses Include:

- Daycare
- Babysitting
- Before & after school care
- Pre-K
- Summer day camps
- Care for older dependents in need of assistance

Maximum Annual Election for 2025

Healthcare FSA - \$3,200
 Dependent Care FSA - \$5,000
 or \$2,500 if married and filing separate income tax returns

- All eligible expenses must occur before December 31, 2025.
- Employees have until March 31 of the following year to submit any claim reimbursements. Possible changes may occur by IRS regulations.
- Any election contributions for FSA and Dependent Care FSA **cannot** be changed during the plan year.



The Standard Life Insurance



Basic Life and AD&D - Employer Paid

Basic Life insurance is an employer paid benefit by the County of El Paso through The Standard. Full time, regular employees automatically receive basic life insurance coverage.

Below is the employee and dependent coverages offered through the County.

Basic Life Insurance			
Employee	Spouse	Child(ren) 14 days to 6 months	Child(ren) 6 months to age 26
\$40,000	\$2,000	\$500	\$1,000

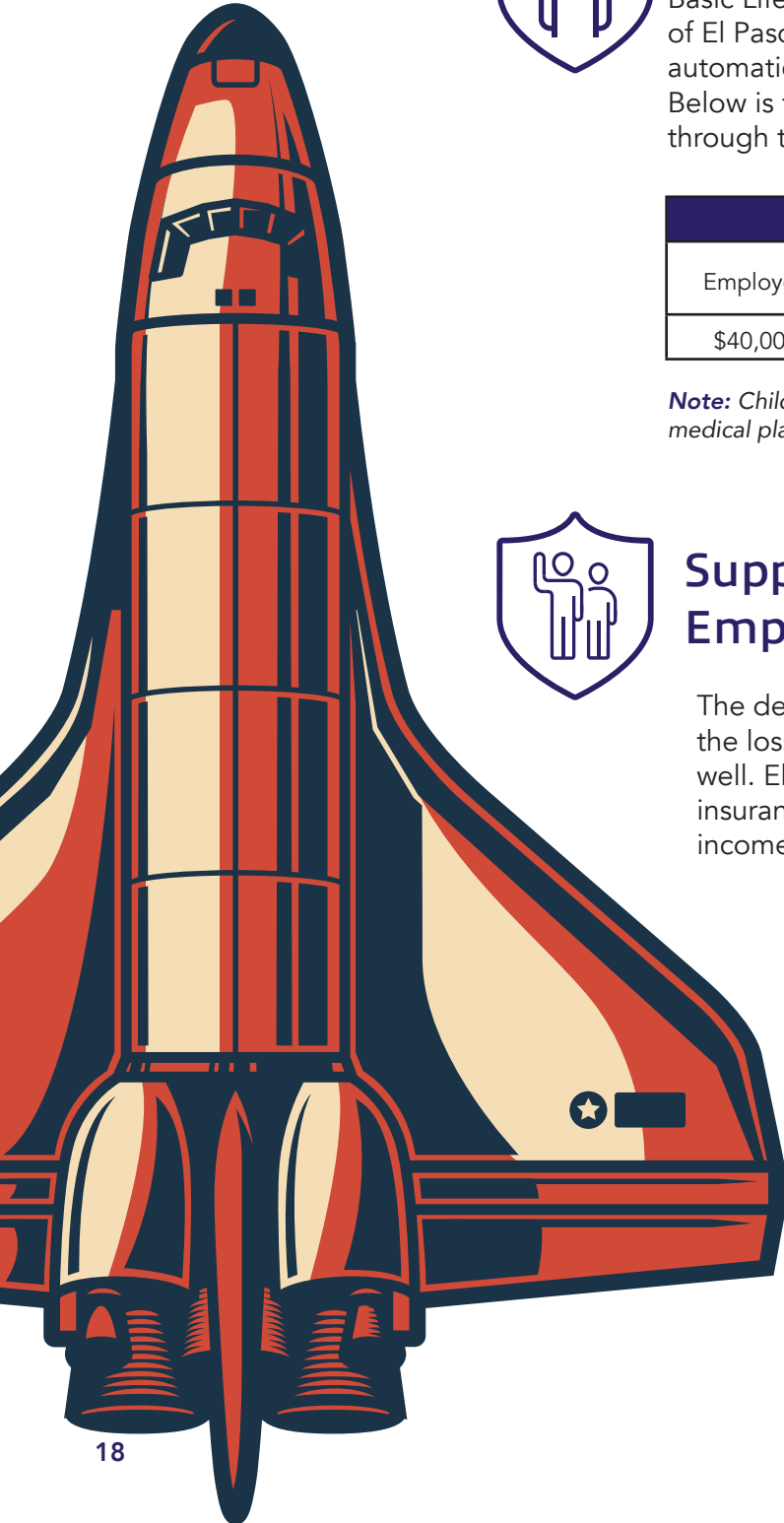
Note: Children covered only if they are covered as a part of the employee's medical plan.



Supplemental Life and AD&D - Employee Paid

The death of a family member can mean not only dealing with the loss of a loved one, but the loss of financial security as well. Eligible County employees may purchase additional life insurance coverage for loved ones who may depend on their income support.

Supplemental Life Insurance		
Employees	Spouse	Child(ren)
Up to \$200,000	Up to \$40,000	Up to \$10,000





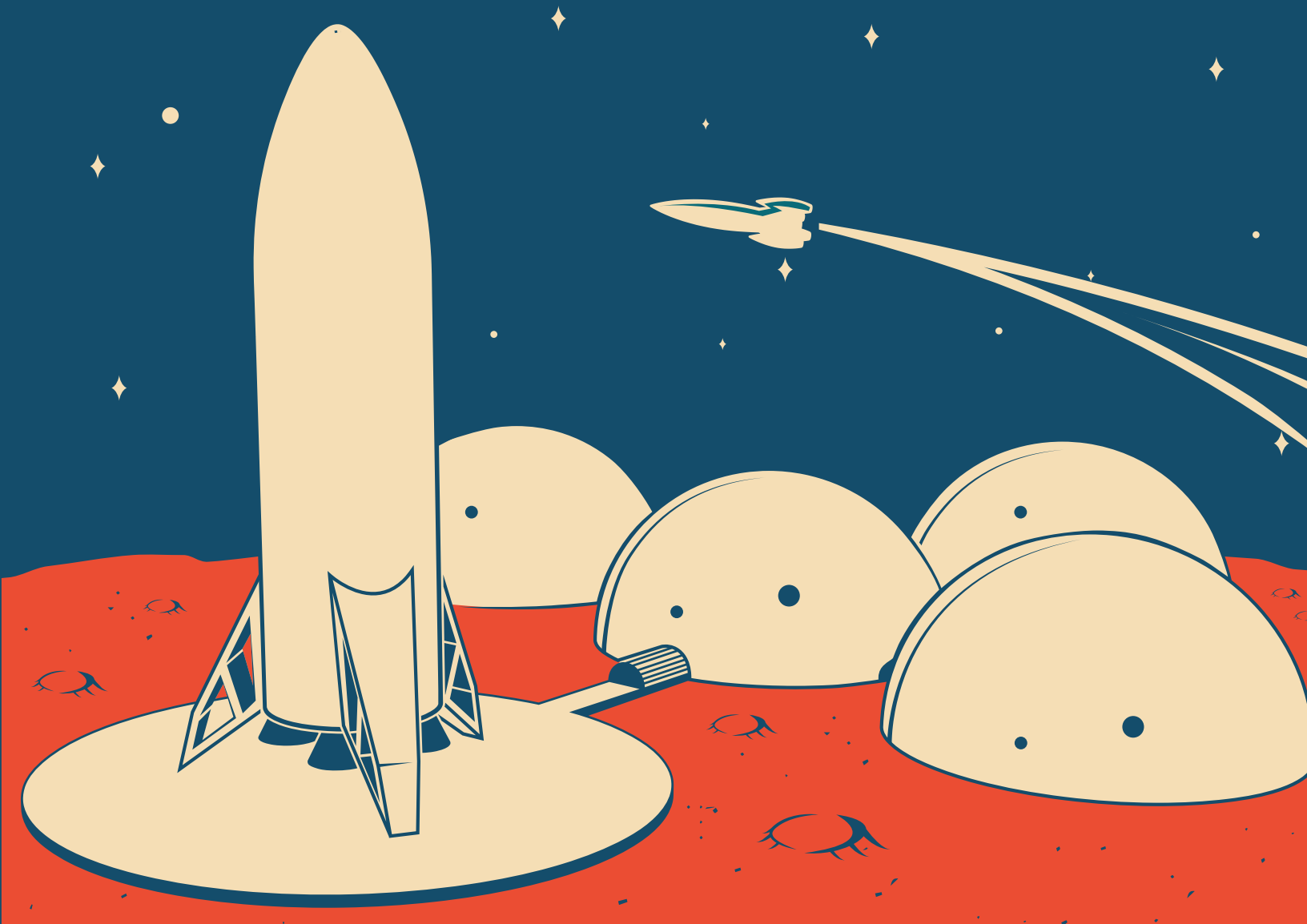
The Standard Accidental Death & Dismemberment (AD&D)

Accidental death and dismemberment (AD&D) insurance is insurance—usually added as a rider or addition to the life insurance policy—that covers the unintentional death or dismemberment of the insured. Dismemberment includes the loss—or the loss of use—of body parts or functions (e.g., limbs, speech, eyesight, and hearing).



- AD&D is an employer paid benefit by the County of El Paso through Blue Cross Blue Shield Dearborn National Life Insurance Company. Full time-regular employees, automatically receive the coverage

You may access the full Supplemental Life Information by clicking [HERE](#) or going to:
<https://epcounty.com/hr/benefits/documents/lifeInsurance.pdf>





MetLife Accident

Nobody plans to have an accident - and most people don't budget for one, either. Accident insurance pays benefits directly to you, not to your healthcare provider, so you can use the money however you want. The amounts you see below are what is paid to you.

Plan Type	Low Plan	High Plan
Accident Injury Benefit		
Emergency Room Treatment	\$100	\$200
Physician Office	\$100	\$200
Urgent Care	\$100	\$200
Ambulance	Ground: \$300 Air: \$1,000	Ground: \$400 Air: \$1,250
Hospital Admission	\$1,000	\$2,000
Hospital Daily Confinement (up to 15 days per accident)	\$200	\$400
ICU Supplemental Admission (Paid in addition to Hospital Admission)	\$1,000	\$2,000
Hospital Daily ICU Confinement (up to 15 days per accident; paid in addition to Confinement)	\$200	\$400
Physician Follow-Up Office Visit	\$100; (2x per accident, 6x per year)	\$200; (2x per accident, 6x per year)
Therapy Services	Up to \$50 (10x per accident)	Up to \$100 (10x per accident)
Fracture (Open Reduction)	Up to \$6,000	Up to \$10,000
Fracture (Closed Reduction)	Up to \$3,000	Up to \$5,000
Dislocation (Open Reduction)	Up to \$6,000	Up to \$10,000
Dislocation (Closed Reduction)	Up to \$3,000	Up to \$5,000
Laceration	Up to \$400	Up to \$800
Burns	Up to \$7,500	Up to \$15,000
Coma	\$10,000	\$20,000
Medical Testing (X-rays, MRI/MR, Ultrasound, NCV, CT/CAT, EEG)	\$125 (2x per accident)	\$250 (2x per accident)
Family Lodging (Up to 15 days per calendar year)	\$200	\$400
Childcare (5 days per accident, 10 days per year)	\$50	\$100
Medical Device	Up to \$1,000	Up to \$2,000
Prosthesis	One device: \$500 More than one device: \$1,000	One device: \$1,000 More than one device: \$2,000
Surgery	Up to \$1,250	Up to \$2,500
Transportation (One time per accident, 2x per year)	\$300	\$600

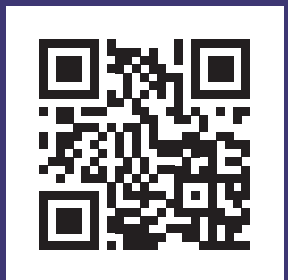
Plan Type	Low Plan	High Plan
Accidental Death & Dismemberment (AD&D)		
Accidental Death	Employee: \$25,000 Spouse: \$12,500 Child(ren): \$5,000	Employee: \$50,000 Spouse: \$25,000 Child(ren): \$10,000
Accidental Death Common-Carrier	Employee: \$75,000 Spouse: \$37,500 Child(ren): \$15,000	Employee: \$150,000 Spouse: \$75,000 Child(ren): \$30,000
Catastrophic Dismemberment	Up to \$15,000	Up to \$40,000
Guaranteed Issue	Yes	Yes
Portable Coverage	Yes	Yes

Plan Type	Low Plan	High Plan
Monthly Premiums		
Employee	\$8.89	\$16.11
Employee + Spouse	\$17.56	\$31.80
Employee + Child(ren)	\$21.09	\$38.20
Employee + Family	\$24.92	\$45.12



Don't forget your Health Screening Benefit!
As a part of this plan, you can receive a one-time \$50 benefit from MetLife for completing certain health screenings!

Want more info?



Scan or click.



MetLife Critical Illness

A major illness can blindside anyone, even an employee with medical insurance. Co-pays, deductibles, alternative treatments and other out-of-pocket expenses

can add up quickly. Critical Illness insurance pays cash benefits directly to you to help reduce the financial burden that can come with a serious illness.

Want more info?



Scan or click.



Don't forget your Health Screening Benefit!

As a part of this plan, you can receive a one-time \$50 benefit from MetLife for completing certain health screenings!

Benefit Amounts		
Employee	\$10,000, \$20,000, or \$30,000	
Spouse	100% of employee election	
Child	50% of employee election	
Guaranteed Issue	Yes	
Benefit Type		
Covered Conditions	Initial Benefit	Recurrence Benefit
Heart Attack	100%	100% of initial benefits
Stroke	100%	100% of initial benefits
Cancer (Invasive)	100%	50% of initial benefits
Coronary Artery Bypass Graft (CABG) <i>where surgery involving a median sternotomy is performed</i>	100%	100% of initial benefits
Major Organ Transplant	100%	NONE
Benefit Waiting Period	None	
Portable Coverage	Yes	
Pre-Existing Condition Limitation	Not Included	

Plan Cost				
Monthly Premium per \$1,000 of Coverage				
Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Age 25	\$0.50	\$0.99	\$0.67	\$1.16
Age 35	\$0.87	\$1.73	\$1.04	\$1.90
Age 45	\$1.59	\$3.19	\$1.76	\$3.35
Age 55	\$2.81	\$5.67	\$2.97	\$5.83

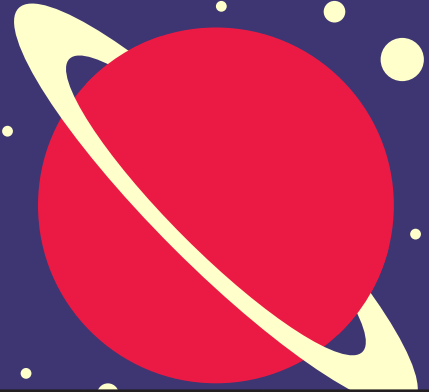


MetLife

Hospital Indemnity



Hospital Indemnity coverage pays you cash benefits directly if you are admitted to the Hospital or an Intensive Care Unit (ICU) for a covered stay. You can use the benefits to help pay for your medical expenses such as deductible and co-pays, travel costs, food and lodging, or everyday expenses such as groceries and utilities. The amounts you see below are what is paid to you.



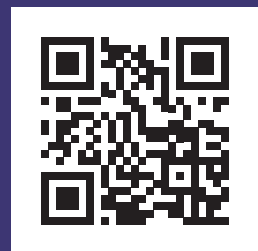
Benefits Type	Low Plan	High Plan
Hospital Admission	\$750	\$1,500
Hospital Confinement	\$100	\$200
ICU Supplemental Admission (paid concurrently with the Admission benefit when a covered person is admitted to ICU)	\$750	\$1,500
ICU Supplemental Confinement (paid concurrently with the confinement benefit when a covered person is admitted to ICU)	\$100	\$200
Plan Provisions		
Benefit Waiting Period	None	
Guaranteed Issue	Yes	
Pregnancy Limitation	No	
Portable Coverage	Yes	
Pre-existing Condition Limitation	Not Included	
Monthly Rates		
	Low Plan	High Plan
Employee	\$11.30	\$20.58
Employee + Spouse	\$23.08	\$42.03
Employee + Child(ren)	\$17.66	\$32.04
Employee + Family	\$29.44	\$53.48



Don't forget your Health Screening Benefit!

As a part of this plan, you can receive a one-time \$50 benefit from MetLife for completing certain health screenings!

Want more info?



Scan or click.

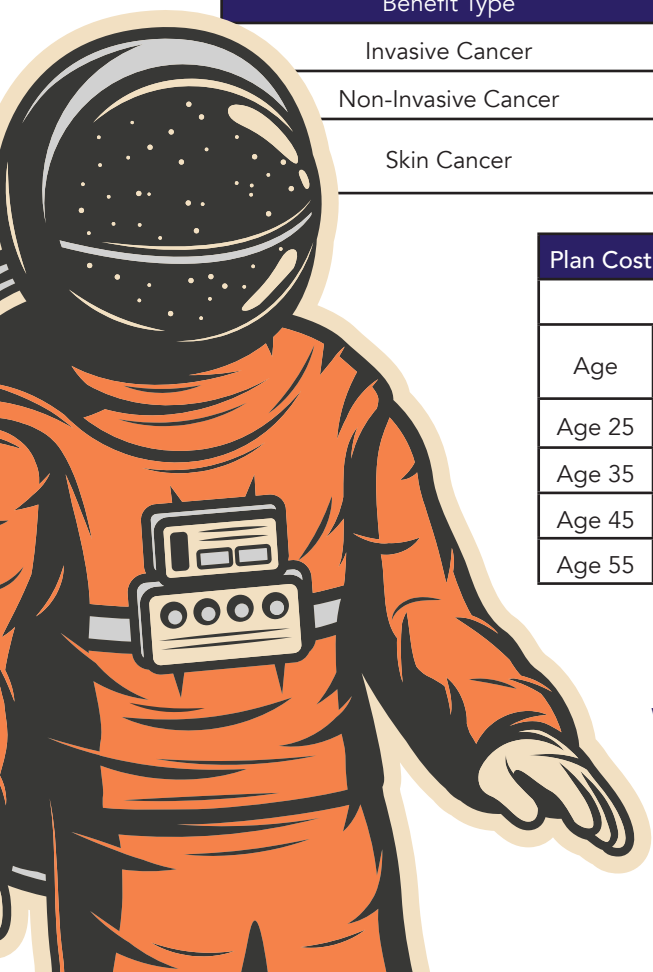


MetLife Cancer Insurance

Cancer insurance provides financial support in the event of a cancer diagnosis, helping to cover the costs of treatment and associated expenses that regular

health insurance might not fully address. This coverage can offer peace of mind by assisting with medical bills, travel for treatment, and more during recovery.

Cancer Benefits		
Initial Diagnosis Benefit	Employee: \$15,000 -OR- \$30,000 Spouse: 50% of Employee Amount Child(ren): 50% of Employee Amount	
Total Benefit Amount	The Total Benefit Amount cap is 500% of the benefit amount elected.	
Initial Benefit Separation Period	90 days	
Recurrence Benefit Separation Period	90 days	
Pre-Existing Condition Limitation	None	
Benefit Reduction Due to Age	None	
Portability	Included	
Health Screening Benefit	\$50	
Benefit Type	Initial Benefit	Recurrence Benefit
Invasive Cancer	100% of Benefit Amount	50% of Initial Benefit
Non-Invasive Cancer	25% of Benefit Amount	50% of Initial Benefit
Skin Cancer	5% of Benefit Amount, but not less than \$250	50% of Initial Benefit, but not less than \$250



Plan Cost				
Monthly Premium per \$1,000 of Coverage				
Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Age 25	\$0.28	\$0.46	\$0.40	\$0.58
Age 35	\$0.50	\$0.78	\$0.61	\$0.89
Age 45	\$0.92	\$1.40	\$1.03	\$1.52
Age 55	\$1.61	\$2.46	\$1.72	\$2.57

Want more info?



Scan or click.



The Standard

Disability

If an employee becomes disabled or unable to work, financial security may be at risk. Short & Long term disability can help protect the employee's income if they cannot work and get a regular paycheck.

Sick hours must be exhausted prior to receiving benefit.

Short-Term Disability

Short Term disability insurance can help pay the bills if employee becomes disabled and can't work for a short amount of time. Two plan options are offered; however only one may be selected.

Plan	Option 1	Option 2
Percent of Eligible Earnings Covered	60%	
Weekly Maximum Benefit	\$1,200	
Weekly Minimum Benefit	\$15	
Elimination Period	14 days injury 14 days illness	30 days injury 30 days illness
Maximum Benefit Period	90 days	

Long-Term Disability

Long Term Disability benefits are available to you. This insurance replaces 60% of your income if you become partially or totally disabled for an extended time. See your plan document for additional details.

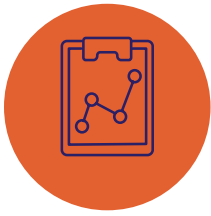
Percent of Eligible Earnings Covered	60%
Monthly Maximum Benefit	\$5,000
Monthly Minimum Benefit	\$100
Waiting Period	90 days
Maximum Benefit Period	Until age 65 for a continuous disability



We want to help you reach for the stars

when it comes to your current and future well-being.

El Paso County offers you a variety of additional benefits to support your well-being physically, financially, and beyond. Learn about these benefits and incentives available to you!



Healthy Lifestyle Reimbursement & Gym Enrollments

According to the American Heart Association, physical inactivity is considered a major risk factor in the development of the coronary artery disease. Even a small amount of aerobic exercise can help you stay healthy. To encourage increased physical activity, the Healthy Lifestyle Reimbursement Program offers an incentive to get you to exercise regularly.

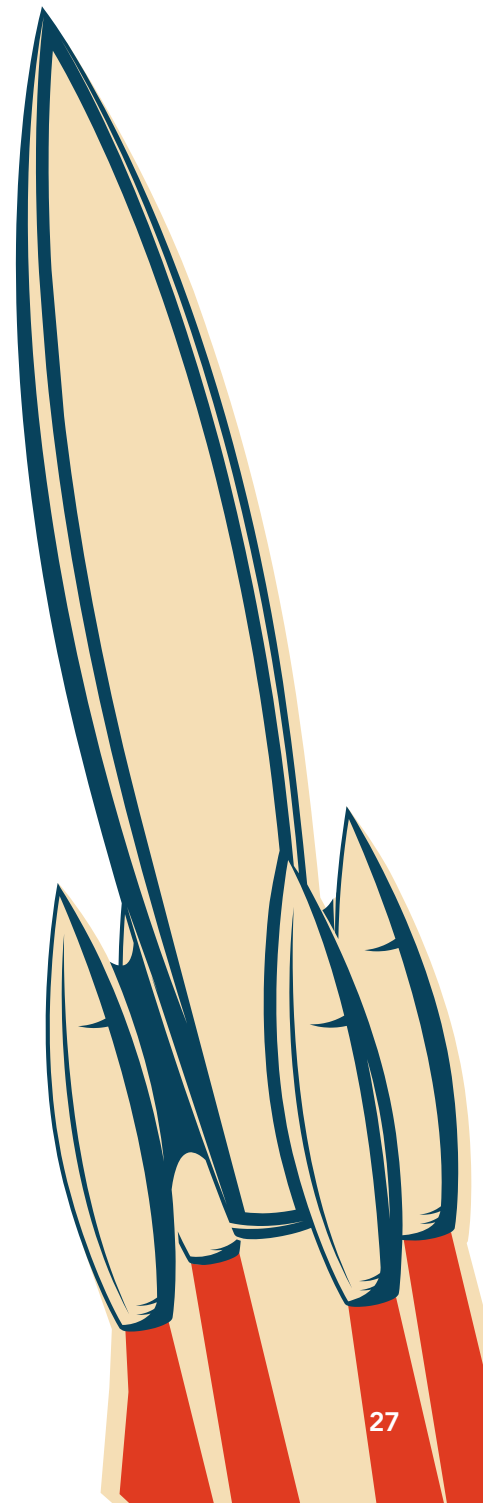
Get reimbursed for staying active!

Contact the wellness team for additional info at hrwellness@epcountytexas.gov

County Employee Fitness and Wellness Center

Come and join us at the Fitness and Wellness Center located on the Lower Level of the County Courthouse. Our state of the art fitness equipment is available for all fitness levels. Offering exercise classes, trainings, and much more! Sign up today for just \$5 per month through payroll deduction.

Contact your Wellness team for any questions at:
hrwellness@epcountytexas.gov





Texas County & District Retirement System (TCDRS)



Who manages the Pension Funds?

Texas County & District Retirement System, commonly known as TCDRS

How does it work?

Every paycheck, 7% of your total paycheck is deposited into your TCDRS pension account. Upon retirement, the County will match your contribution at 250%

Does it earn interest?

Yes, your account earns 7% compound interest each year.

Naming a beneficiary:

In the event that a member passes away, TCDRS will pay his or her beneficiary the balance in that member's TCDRS account as soon as possible. **We encourage employees to update their beneficiary information after any life-changing event, such as marriage, birth of a child, divorce or death of a spouse.** Members may change their beneficiaries at any time by signing in online or by completing a Beneficiary Designation Form (TCDRS-06) and sending it to TCDRS or the Human Resources office.

Vesting/Retirement Eligibility:

To be considered vested in your plan, you must have 8 years of service time. Once vested, you have a right to a lifetime monthly benefit that will include employer matching when you reach retirement eligibility.

Age 60 (Vesting)	8 years of service
Rule of 75	75-year total age plus service
At any age	20 years of service

A registered user employee can do the following:
Estimate benefits, upload forms & documents, view account balances, update beneficiaries and contact info (most importantly)!

Contact the today!

www.TCDRS.org
1-800-823-7782



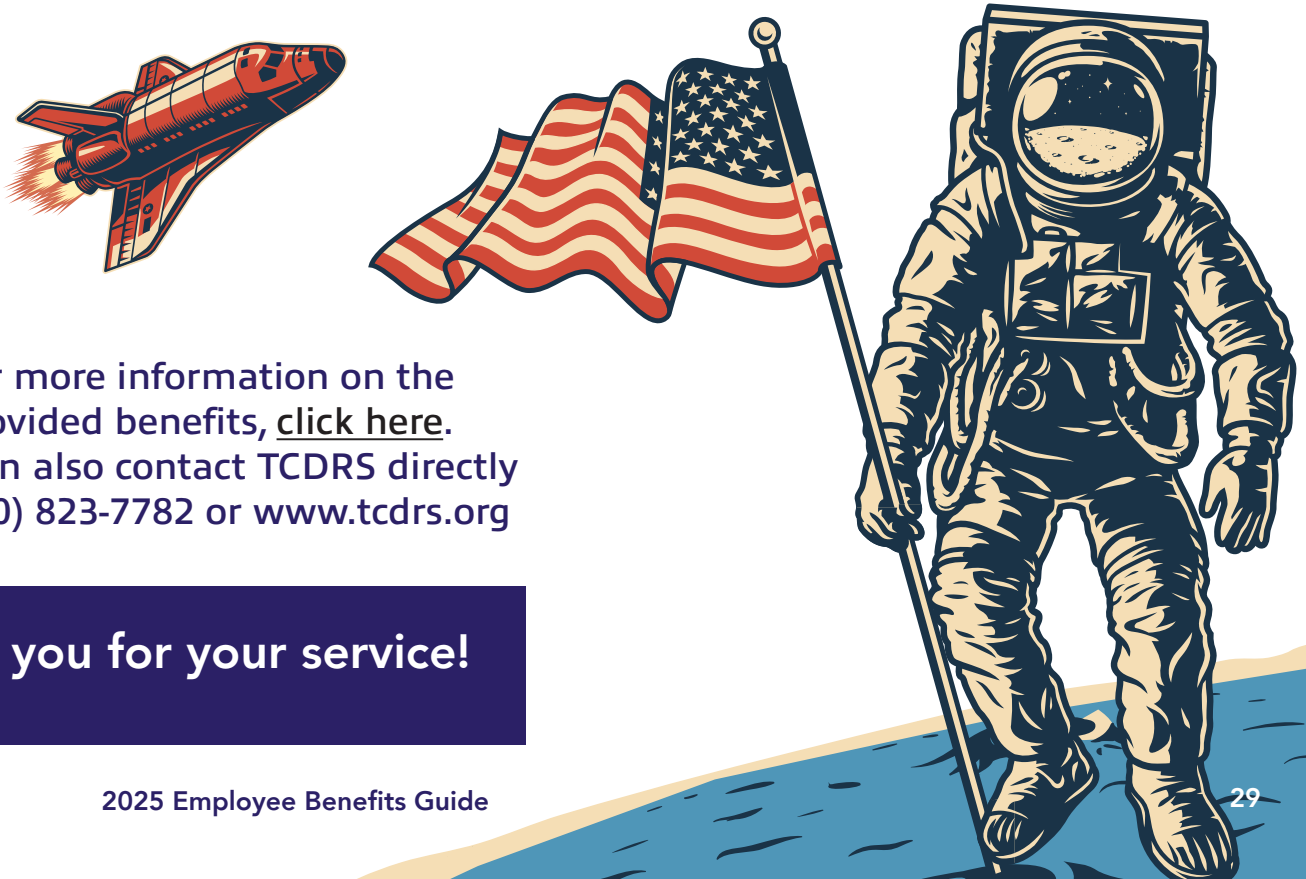
Military Service Time & TCDRS

Did you know your served military time can be counted towards your retirement eligibility?

Your **active-duty** military service prior to becoming a TCDRS member may be counted toward your retirement eligibility. The time served may be accounted once you've met the County's vesting requirement. You may be eligible to qualify up to 60 months (5 years) of active service!

Survivor Benefit is one of the first milestones you will reach on your road to retirement. What is survivor benefit? Once you have completed 4 years of service time with TCDRS, your assigned beneficiary becomes eligible for the lifetime monthly benefit from your TCDRS account if something were to happen to you before you retire.

Keeping your **beneficiaries** updated can help ensure that the benefit payment to your loved ones doesn't get delayed. It is important to review your beneficiaries yearly or after a life-changing event, such as marriage divorce, a birth, or death in the family.

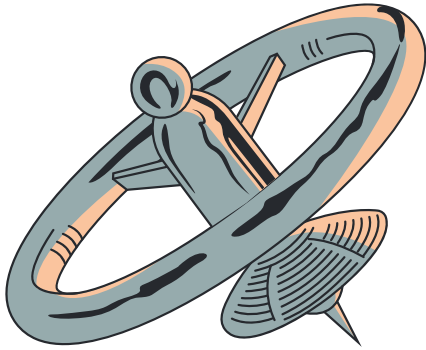


For more information on the provided benefits, [click here](#).
You can also contact TCDRS directly at (800) 823-7782 or www.tcdrs.org

Thank you for your service!



Nationwide Deferred Compensation 457 Plan



Employees have probably heard of the different types of retirement plans: 457(b) Deferred Compensation, 401(k), 403(b), 401(a) and 457(b) Deferred Compensation with both traditional and Roth contributions. As a public employee, there are plans created specifically for you.

What is a 457(b) plan?

A 457(b) deferred compensation plan is a retirement plan offered by the County of El Paso, it was created to allow public employees like you to put aside money from each paycheck toward retirement. A deferred comp plan can help bridge the gap between that you have in your pension and Social Security, and how much you'll need in retirement.

What does tax-deferred mean?

Employees don't pay income taxes on their deferred comp plan contributions or earnings until they retire and/ or begin to take payments from your account. This may lower the employee's taxable income now and in retirement. Withdrawals taken in retirement are taxed as regular income.

How does it work?

It's easy to participate in deferred comp. Contributions are automatically deducted from each paycheck and deposited to the employees account, so employees don't have to remember to write a check.

Save for your future!

457 can supplement employee's pension and help them have a more comfortable retirement. Contribute pre-tax dollars.

To create new account or change amount, please go through Nationwide Portal:

<https://www.nrsforu.com/iApp/rsc/login.x>

Would you like to schedule
some time to chat?
Contact our Nationwide
Representatives:

Wilson Heacock
1-361-887-1978
wilson.heacockl@
nationwide.com

Sarita Null
1-512-497-1666
nulls4@nationwide.com



Legal & Identity Theft Protection

LegalShield and IDShield provide the legal and identity theft protection you and your family need and deserve. It is a benefit offered to El Paso County employees to help pay for most attorney fees! You will have access to an attorney 24 hours a day, 7 days a week! The Identity Theft will protect you and your family against Identity Theft.

LegalShield

LegalShield Coverage Includes:

- Legal Consultation and Advice
- Court Representation
- Dedicated Provider Law Firm
- Legal Document Preparation & Review
- Will Preparation
- Letters and Phone Calls Made on Your Behalf
- Speeding Ticket Assistance
- 24/7 Emergency Legal Access

LegalShield Family Plan

\$19.55 per month

IDShield

IDShield Coverage Includes:

- Identity Consultation and Advice
- Dedicated Licensed Private Investigators
- Identity, Credit and Financial Account Monitoring
- Child Monitoring (family plan only)
- Full-Service Identity Restoration
- Real-Time Alerts
- 24/7 Emergency Access
- Social Media Monitoring and Online Privacy Reputation Management.

IDShield

Employee Plan

\$7.45

Per Month

Family Plan

\$14.05

Per Month

LegalShield & IDShield

Employee Plan

\$26.00

Per Month

Family Plan

\$31.60

Per Month



Educational Assistance Program (EdAP)

Take the next step in your education with the Educational Assistance Program.

You could receive up to \$2,000 in reimbursement funds per calendar year.

Who is eligible?

County Employees who:

- Hold a part-time or full-time regular position (non-temporary or seasonal);
- Have completed the initial probationary period;
- Have received, in the last 12 months, a "Meets Standards" or higher rating on the last performance evaluation;
- Have not received disciplinary action in the past 12 months at the time of claim form submission; and
- Employees participating in EdAP must maintain continuous employment with the County until the date on the last reimbursement check.

Note: This policy applies to non-collective bargaining covered County employees.

MetLife Pet Insurance



If they don't understand personal space,

they deserve to be insured.



We care about all your dependents — even the four-legged ones. As part of your El Paso County benefits, you can access MetLife Pet Insurance.

Key Benefits



Flexible product offerings with straightforward pricing and options, discounts up to 30%¹, customizable limits, and deductible savings²



Quick 3-step enrollment and hassle-free claims experience with most claims processed within 10 days



An experienced team of pet advocates and multi-channel support options

Get a quote or enroll today.

Visit www.metlife.com/getpetquote

Call 1-800-GET-MET8

Scan the QR code





Contact Us

If you have any questions about your benefits, please reach out to speak to a dedicated benefits counselor

1-877-203-5615
Monday - Friday
8:00am-5:00pm CST