

MY TOTAL REWARDS

January 1, 2024 through December 31, 2024



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This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.

WELCOME

Welcome to the City of Boise! As an employer, the city prides itself on providing you with a number of benefits to help you succeed in your role. This not only includes great health and retirement benefits, but also a culture that promotes professional growth, recognition, worklife balance and being paid an equitable wage.

This is called a Total Rewards package, which includes Benefits, Compensation, Worklife, Career Development and Rewards & Recognition. We understand that as a new employee this information is a lot to take in all at once, which is why we created this document. It gives you the opportunity to refer back to any of these pieces as they come up throughout your employment with us.



We will walk through the city's Vision, Mission, and Values, how your supervisor and you will work on your professional development, how pay is determined at the city and finally provide details of your benefits package.

VISION

CREATING A CITY FOR
everyone

MISSION

The City of Boise will create a city for everyone by embracing our community in the decision-making process; innovating and investing to protect our environment; and ensuring a thriving local economy that benefits all.

VALUES

THERE'S *nothing*
WE CAN'T DO BETTER.

One city, one team
FOR THE GREATEST GOOD.

Community EXPERIENCE
WITH 'WOW'.



BOISE
CITY OF TREES

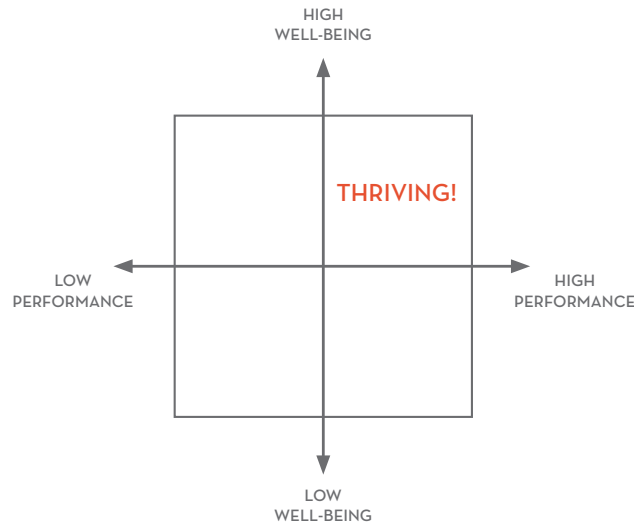
CAREER DEVELOPMENT

CONNECTBOISE

Creating a culture where our people can thrive and find meaning in their work.

ConnectBoise is:

- An employee development program
- Connection to your supervisor
- A tool for engagement, growth and recognition in your role here at the city
- A focus on both high wellbeing and high performance



CONNECTBOISE CORE PRACTICES

MONTHLY 1:1 MEETINGS WITH YOUR SUPERVISOR

- Regular, meaningful time spent between an employee and supervisor
- Opportunities to give and receive feedback

RECOGNITION

- Flexible Rewards - Timely and meaningful award money that can be given and redeemed at any point throughout the year (up to \$3,000/fiscal year)

ONGOING DEVELOPMENT

- Citywide and department-specific options

MONTHLY AND QUARTERLY PULSE CHECKS

- Short, electronic surveys used to inform meaningful conversations

COMPENSATION

PAY PHILOSOPHY + STRATEGY

In alignment with the city's vision, mission and values, our pay philosophy is based on a set of principles designed to be attractive and competitive with the market, responsible to stakeholders and meaningful for employees.

HOW PAY IS DETERMINED



MARKET DATA

Professional market data from large, competitive public and private employers, in the Treasure Valley and across the western United States.



DUTIES + RESPONSIBILITIES

Jobs are evaluated by matching essential functions of the role - not job titles.



INTERNAL EQUITY

Total Rewards looks at internal equity for each job family across the organization, not just within a department or work group.



PERFORMANCE PAY

When budgets allow, our organization takes time to recognize outstanding performance. Performance pay is a comprehensive approach that evaluates not only what you do, but how you do it.

LIVING WAGE!

In 2012 the city implemented a living wage pay philosophy for our current non-temporary employees regularly working 20-hours or more per week. A living wage is a wage that provides a household with economic self-sufficiency, allowing them to meet their basic needs without government subsidy. To determine the living wage, the city evaluates expenses for basic necessities, such as food, housing, utilities, transportation, health care, childcare, clothing and other personal items, savings and state and federal taxes.

BENEFITS OVERVIEW

The City of Boise is proud to offer a generous, competitive and comprehensive benefits plan. Your benefits represent a very important component of your total compensation package offered by the City of Boise. Your benefit package is designed to provide you with a wide range of benefit options from which to choose. You can view plan booklets on the MyBenefits site from BoiseHome.

BENEFITS OFFERED

- Medical/Vision
- Dental
- City Provided Life Insurance
- Accidental Death & Dismemberment (AD&D) Insurance
- Voluntary Life Insurance
- Voluntary Long-Term Disability (LTD)
- Health Reimbursement Arrangement (HRA) through the Voluntary Employees' Benefit Association (VEBA)
- Dependent Care FSA (DCAP)
- Flexible Spending Account (FSA)
- PERSI Retirement
- PERSI Choice 401(k)
- Lincoln 457(b)
- Wellness Programs
- Paid Time Off
- Parental Leave
- Bilingual Pay
- Adoption Assistance

ELIGIBILITY

You and your dependents are eligible for City of Boise benefits if you work 20 hours or more per week in a regular position. These benefits will become effective on the first of the month following hire.

Eligible dependents include your spouse, children under age 26, or disabled dependents of any age. Elections made when you first enroll will remain until the next open enrollment, typically November of each year, unless you or your family members experience a qualifying event. If you experience a qualifying event, you must contact your Total Rewards team within 30 days.

If you become ineligible for benefits due to a change in work hours or through separation of employment, benefits coverage will end on the last day of the month during which that event takes place.

ENROLLING AS A NEW HIRE

You'll participate in the City of Boise's orientation program, "New Teammate Orientation" generally within the first two weeks of your first day of work. In New Teammate Orientation, you will receive your benefit enrollment information. You will have 15 days from your date of hire to complete your enrollment and return your required forms to the Total Rewards team. Your medical, dental, vision and flexible spending (FSA/DCAP) benefits will become effective on the first of the month following hire.

For example, if you were hired on February 10, your benefits would become effective on March 1.

MAKING CHANGES TO YOUR ENROLLMENT THROUGHOUT THE YEAR

You can make certain benefit changes throughout the plan year if something big happens, such as getting married, divorced, having a baby, or dependents losing/gaining coverage. These are examples of "qualified" changes under IRS rules. You must provide the required documentation, such as a marriage certificate, divorce decree, etc. within 30 days of the event. If the request is not completed within 30 days of the event, you will have to wait until the next annual open enrollment period.

If you have a question about whether or not your life event is considered qualified, please contact the Total Rewards team.

INSURANCE PLAN TERMINOLOGY 101

MONTHLY PLAN COSTS

The monthly amount that you must pay in order to have insurance coverage.

DEDUCTIBLE

The annual amount of money that you must pay out of pocket for medical expenses before your insurance kicks in and starts to make payments.

COPAYMENT

A flat fee that you must pay toward the cost of your medical visits, your insurance provider pays the remaining balance. For example, the Blue Cross Plan requires a \$20 copay for an in-network physician office visit while the SLHP plan has no copay to see your primary care physician.

COINSURANCE

The percentage that you must pay to share responsibility for your medical claims after you

meet your annual deductible. For example: If you are on the Blue Cross Plan and see an in-network physician for Maternity Services, our plan covers 80% of the cost after you've met your deductible until you reach your out-of-pocket max.

OUT-OF-POCKET MAX

Once you have paid your deductible, copayments and coinsurance for care and services, the plan pays 100% of costs of covered benefits.

MEDICAL BENEFITS

ADMINISTERED BY BLUE CROSS OF IDAHO AND ST. LUKE'S HEALTH PARTNERS

Comprehensive and preventive healthcare coverage is important in protecting you and your family from the financial risks of unexpected illness and injury. A little prevention can go a long way— especially in healthcare. Routine exams and regular preventive care provide an inexpensive review of your health.

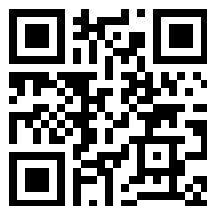
The City of Boise offers three medical plans for you to choose from, two Preferred Provider Organization (PPO) networks and one Coordinated Care Organization (CCO). With the PPO, you may choose any provider that accepts Blue Cross. On the other hand, the CCO is specific to St. Luke's Health Partners (SLHP) which consists of providers at St. Luke's, Primary Health, Saltzer Group and many other independent doctors. To see if your provider is in the SLHP network, search directory.stlukeshealthpartners.org

WHAT'S THE DIFFERENCE BETWEEN THE BLUE CROSS PLAN AND ST. LUKE'S HEALTH PARTNERS?

St. Luke's is a valued based care program, meaning your provider is reimbursed based on quality of care and patient outcomes. On this plan, the provider has a vested interest in making you better!

Blue Cross remains a fee for service network, meaning your provider is reimbursed only on services rendered.

Check to see if your provider is in the
St. Luke's Health Partners network here:
Directory.StLukesHealthPartners.org.



MEDICAL PLANS

Regular employees working 30 hours or more may choose from either the St Luke's Health Partners Plan or the Blue Cross of Idaho plan. Regular part time employees working 20 to 29 hours are only eligible for the Blue Cross Plan or the Basic PPO Plan.

MEDICAL/PRESCRIPTION SEMI-MONTHLY COSTS			
	ST. LUKE'S HEALTH PARTNERS FT 40-30HR	BLUE CROSS OF IDAHO FT 40-30HR	BLUE CROSS OF IDAHO PT 29-20HR
Employee	No Cost	\$25.00	\$100.00
Spouse	No Cost	\$50.00	\$200.00
Child	No Cost	\$35.00	\$140.00
Children	No Cost	\$42.50	\$170.00
Family	No Cost	\$75.00	\$300.00

PRESCRIPTION DRUG	
	ST. LUKE'S HEALTH PARTNERS (SLHP) + BLUE CROSS OF IDAHO PPO (BCI)
OUT OF POCKET	\$3,600 Individual/ \$7,200 Family
GENERIC	\$0 co-pay SLHP; \$10 co-pay for BCI
NON-PREFERRED GENERIC	\$0 co-pay SLHP; \$10 co-pay for BCI
PREFERRED BRAND NAME	\$30 co-pay
NON-PREFERRED BRAND NAME	\$60 co-pay
PREFERRED SPECIALTY	\$75 co-pay
NON-PREFERRED SPECIALTY	\$150 co-pay
RETAIL SUPPLY	90 days for 3 co-pays
MAIL ORDER	90 days for 2 co-pays

MEDICAL

	ST. LUKE'S HEALTH PARTNERS (SLHP)		BLUE CROSS OF IDAHO PPO (BCI)	
	IN NETWORK	OUT OF NETWORK	IN NETWORK	OUT OF NETWORK
DEDUCTIBLE	\$300 Individual		\$350 Individual	
	\$600 Family		\$700 Family	
OUT OF POCKET	\$2,000 Individual	\$3,000 Individual	\$2,500 Individual	\$5,000 Individual
	\$4,000 Family		\$5,000 Family	
AMBULANCE SERVICES	80% billed after deductible	60% billed after deductible	80% billed after deductible	60% billed after deductible
CHIROPRACTIC AND/OR ACUPUNCTURE/NATUROPATH] <i>(Limited to 23 visits per benefit period)</i>	80% after deductible	60% after deductible	80% after deductible	60% after deductible
DIABETES PREVENTION PROGRAM	Free 16-week program for prediabetics to reduce risk of developing diabetes. Log in to members.bcidaho.com to see if you qualify.			
DIAGNOSTIC SERVICES	80% after deductible	60% after deductible	80% after deductible	60% after deductible
DURABLE MEDICAL EQUIPMENT	80% after deductible	60% after deductible	80% after deductible	60% after deductible
EMERGENCY SERVICES	80% billed after deductible		80% billed after deductible	
HEARING AIDS <i>(Hardware and exams)</i>	100% to \$3,000 per year; Bal @10%, <i>In-Network Only</i> , Does not apply to deductible or OOP			
HOSPICE SERVICES	100%	60%	100%	60%
HOSPITAL SERVICES <i>(Inpatient or Outpatient)</i>	80% after deductible	60% after deductible	80% after deductible	60% after deductible
INPATIENT OR OUTPATIENT PHYSICAL, SPEECH + OCCUPATIONAL REHAB/THERAPY	80% after deductible	60% after deductible	80% after deductible	60% after deductible
PHYSICIAN OFFICE VISIT <i>(Additional labs, x-rays, other diagnostic services not included in the copay)</i>	\$0 co-pay	60% after deductible	\$20 co-pay	60% after deductible
SPECIALIST PHYSICIAN OFFICE VISIT <i>(Dermatologist, Endocrinologist, Podiatrist, Otolaryngologist (ear, nose, throat), etc.)</i>	\$30 co-pay	60% after deductible	\$40 co-pay	60% after deductible
PREVENTATIVE CARE + IMMUNIZATIONS	100%	60%	100%	60%
MATERNITY SERVICES	80% after deductible	60% after deductible	80% after deductible	60% after deductible
BREASTFEEDING SUPPORT + SUPPLIES <i>(Includes rental and/or purchase of (1) manual or electric breast pump per benefit period)</i>	100% of Max Allowance <i>(Does not apply to Deductible)</i>	60% of Max Allowance <i>(Does not apply to Deductible)</i>	100% of Max Allowance <i>(Does not apply to Deductible)</i>	60% of Max Allowance <i>(Does not apply to Deductible)</i>
MENTAL HEALTH INPATIENT	80% after deductible	60% after deductible	80% after deductible	60% after deductible
MENTAL HEALTH OUTPATIENT	\$0 co-pay	60% after deductible	\$20 co-pay	60% after deductible
SUPPLEMENTAL ACCIDENT	100%		100%	
	\$500 per incident		\$500 per incident	
SURGICAL/MEDICAL <i>(Professional Services)</i>	80% after deductible	60% after deductible	80% after deductible	60% after deductible
SURGERY <i>(Medical Necessary Obesity)</i>	80% after deductible	60% after deductible	80% after deductible	60% after deductible

DENTAL BENEFITS

ADMINISTERED BY DELTA DENTAL OR WILLAMETTE DENTAL

Good oral care enhances overall physical health, appearance and mental well being. Problems with the teeth and gums are common and easily treated. Keep your teeth healthy and your smile bright with one of the City of Boise’s dental benefit plans.

The City of Boise offers four Idaho dental plan options. Carefully review the Delta Dental PPO plan and the Willamette Dental Group plan to understand your options and determine which one is right for you and your family.

DENTAL SEMI-MONTHLY COSTS				
	DELTA DENTAL			DENTAL BLUE CONNECT
	COMPREHENSIVE	CORE	PREVENTIVE	WILLAMETTE
Employee	\$17.50	\$10.50	No Cost	\$8.00
Spouse	\$34.00	\$20.50	No Cost	\$16.50
Child	\$21.00	\$12.50	No Cost	\$28.50
Children	\$32.50	\$19.50	No Cost	\$23.50
Family	\$47.50	\$29.00	No Cost	\$39.00

DELTA DENTAL

The Delta Dental Plan works like the medical plan PPO. You may visit any licensed dentist; however, you will get the maximum benefit if you visit an in-network provider. When you visit an out-of-network provider, you may pay a higher deductible and/or coinsurance. Delta Dental now offers the Health through Oral Wellness (HOW) program. By having your dentist perform a simple risk assessment, you may have access to additional preventive and health-sustaining benefits.

	COMPREHENSIVE	CORE	PREVENTIVE
DEDUCTIBLE	\$25		
ANNUAL MAX. BENEFIT	\$2,000	\$1,500	\$500
PREVENTATIVE SERVICES	100%		
BASIC SERVICES	80%		
ORTHODONTIA <i>Does not apply to Deductible</i>	75%	No Benefits	
ORTHODONTIA MAX.	\$2,500		

DENTAL BLUE CONNECT (SERVICE PROVIDED AT WILLAMETTE DENTAL CLINICS ONLY)

Willamette Dental Group, works more like an HMO plan. You must visit a Willamette Dental location and all costs are provided up front. No deductibles to pay before your dental benefit applies, no annual maximum to your dental benefit, you pay a low premium and you may only receive services from Willamette Dental Group providers.

DEDUCTIBLE	NONE	CROWN	\$200
ANNUAL MAX. BENEFIT	NONE	DENTURES	\$250 Top \$250 Bottom
PREVENTATIVE SERVICES	\$15	ROOT CANAL	\$75-\$175
BASIC SERVICES	\$15	ORAL SURGERY	\$75
PRE-ORTHODONTIA	\$350	ROUTINE EXTRACTIONS	\$15
ORTHODONTIA	\$1,800	OFFICE VISIT	\$15

VISION BENEFITS

ADMINISTERED BY VSP

Regular eye examinations can not only determine your need for corrective eyewear but may also detect general health problems in their earliest stages. Protection for the eyes should be a major concern to everyone.

VISION

Ensure you make the most of your in-network savings by creating your member account at VSP.com. Refer to your Blue Cross ID Card to enter your member ID (without the preceding CIJ) to begin.

To take advantage of your VSP vision benefit, simply contact a VSP provider and let them know you have VSP coverage— they handle the paperwork for you.

VSP members will continue to receive an extra \$20 to spend when choosing a featured frame brand like bebe®, Calvin Klein, Flexon®, Lacoste, Nike, Ferragamo, Chloe and more.

VSP CHOICE PLAN

	IN NETWORK		OUT OF NETWORK
EXAMS INCLUDES RETINAL IMAGING	\$25 co-pay		Up to \$45 less any applicable co-pay
LENSES (<i>single, lined bifocals/trifocals</i>)	Covered in full after co-pay		Up to \$30 single, \$50 bifocal, \$65 trifocal
LENS EXTRAS	SINGLE VISION	MULTIFOCAL	
Anti-reflective coating	Covered in Full	Covered in Full	N/A
Polycarbonate Lenses (for children)	Covered in Full	Covered in Full	N/A
Polycarbonate Lenses (for all)	Covered in Full	Covered in Full	N/A
Standard Progressive Lenses	N/A	Covered in Full	\$50
Premium Progressive Lenses	N/A	\$95-\$105	\$50
Custom Progressive Lenses	N/A	\$150-\$175	\$50
Other Lens Options	Average 20-25% off	Average 20-25% off	N/A
FRAMES	\$250 Allowance + 20% Remaining		Up to \$70
CONTACT LENSES	<i>Contacts are in lieu of Rx Glasses</i>		
Fitting + Evaluation	Covered in Full No Copay		Covered in Full No Copay
Elective Contacts	\$250 Allowance (In-Network ONLY)		Up to \$105 Allowance
Necessary Contacts	Covered in Full		

LIFE AND ACCIDENTAL DEATH INSURANCE PLANS

LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE

INSURED BY STANDARD INSURANCE

Life insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump-sum payment if you die while employed by the City of Boise. The city provides Basic Life Insurance, Accidental Death & Dismemberment, as well as Long Term Disability at no cost to you if you are a benefit eligible employee.

Additional Life and Disability Insurances can be elected at your discretion.



If you wait to enroll, you will have to go through the evidence of insurability process that ensures you are in good health before benefits are issued.

BASIC TERM LIFE

The City of Boise pays for Basic Life and AD&D up to \$50,000 for all our non-temporary general employees working at least 20 hours per week. Premiums are paid by the city!

BASIC DEPENDENT TERM LIFE

A spouse of a general employee is covered at \$5,000 and children at \$2,500 at no cost to the employee.

OPTIONAL DEPENDENT TERM LIFE

Employees may elect to purchase Optional Dependent Term Life Insurance equal to one of the following levels.

- A spouse may be covered up to any multiple of \$5,000 to a maximum amount of \$250,000 not to exceed 50% of the amount of optional term life purchased by the employee.
- New employees or employees covering a new spouse may purchase up to \$20,000 without having to complete a Medical History Statement within 30-days of hire or marriage.
- Children may be covered at an additional \$5,000 or \$10,000.

Employees may not purchase optional dependent term life without purchasing it on themselves.

Current employees wishing to buy or increase optional life insurance can contact the Total Rewards team at 208-972-8090 or totalrewards@cityofboise.org for more information.

OPTIONAL ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE

Employees may elect to purchase Optional AD&D in \$10,000 increments to a maximum of \$500,000. Employees may not purchase Optional Dependent AD&D without purchasing AD&D on themselves. The rate is \$0.023 per \$1,000 of benefit.

VOLUNTARY LIFE INSURANCE

INSURED BY STANDARD INSURANCE

You can purchase additional life insurance for you, your spouse and your children. You pay the cost of coverage with after-tax dollars, but you can do so with convenient payroll deductions.

If you purchase life insurance in addition to the company-provided coverage, you may also purchase life insurance for your dependents. You are guaranteed coverage as a new hire (up to two times your salary with a maximum of \$300,000, and up to \$20,000 for your spouse) without answering medical questions if you enroll when you are first eligible.

EMPLOYEE — Up to eight times your salary; \$500,000 maximum

SPOUSE — Up to \$250,000 in increments of \$5,000

CHILDREN BIRTH TO 26 YEARS — \$5,000 or \$10,000

VOLUNTARY LONG-TERM DISABILITY INSURANCE

ADMINISTERED BY STANDARD INSURANCE

Meeting your basic living expenses can be a real challenge if you become disabled. Your options may be limited to personal savings, spousal income and possibly Social Security. Disability insurance provides protection for your most valuable asset—your ability to earn an income. The City of Boise offers the option for employees to purchase additional Long-Term Disability insurance (LTD) coverage.

LTD coverage provides income when you have been disabled for 90 days or more. Your benefit is offered to you for free for the first 40%, with an option to add coverage from 50 to 66 2/3% of your monthly earnings, up to \$4,500 per month. This amount may be reduced by other deductible sources of income or disability earnings. You are guaranteed coverage if you enroll as a new hire.

VOLUNTARY DECREASING TERM LIFE INSURANCE— IDAHO NCPERS PLAN

ADMINISTERED BY MEMBER BENEFITS

As an eligible PERSI participant, you may also enroll in a voluntary term life insurance program, the Idaho NCPERS Plan. You may enroll at the time you begin working for the City of Boise or during a special enrollment period, sponsored by the plan. You will receive separate enrollment information about this plan during New Employee Orientation or during the annual NCPERS Open Enrollment period November 1-15 of each year.

OTHER BENEFITS

ADOPTION ASSISTANCE

All regular full- and part-time benefit eligible employees who have completed 60-days of regular employment with the city are eligible to apply for adoption assistance. Bargaining unit employees, temporary employees and employees in limited duration positions are not eligible for this benefit.

Adopted children, to be considered for this benefit, must be under the age of eighteen and may be a relative of the employee but not a stepchild.

Eligible employees whose reimbursement request is approved, may receive up to \$15,000 per adoption. Per adoption is defined as each instance of adoption regardless of number of children being adopted in each instance.

THE LIFE SERVICES TOOLKIT

PROVIDED BY THE STANDARD INSURANCE CO.

The Life Services Toolkit provides you or your family assistance in the event of a death, beyond a life insurance policy. It offers online tools and services to help you create a will, make advance funeral plans and put your finances in order. After a loss, your beneficiary can consult experts by phone or in person, and obtain other helpful information online. The Life Services Toolkit is automatically available to those insured under a group life insurance policy from The Standard.

SERVICES TO HELP YOU NOW

Visit the Life Services Toolkit website at standard.com/mytoolkit and enter user name “assurance” for information and tools to help you make important life decisions.

ESTATE PLANNING ASSISTANCE – Online tools walk you through the steps to prepare a will and create other documents, such as living wills, powers of attorney and health care agent forms.

FINANCIAL PLANNING – Consult online services to help you manage debt, calculate mortgage and loan payments, and take care of other financial matters with confidence.

HEALTH AND WELLNESS – Timely articles about nutrition, stress management and wellness help employees and their families lead healthy lives.

IDENTITY THEFT PREVENTION – Check the website for ways to thwart identity thieves and resolve issues if identity theft occurs.

FUNERAL ARRANGEMENTS – Use the website to calculate funeral costs, find funeral-related services and make decisions about funeral arrangements in advance.

If you are a recipient of an Accelerated Benefit, you may access the services for beneficiaries outlined on the next page.

SERVICES FOR YOUR BENEFICIARY

Life insurance beneficiaries can access services for 12 months after the date of death. Recipients of an Accelerated Benefit can access services for 12 months after the date of payment.

These supportive services can help your beneficiary cope after a loss:

GRIEF SUPPORT – Clinicians with master’s degrees are on call to provide confidential grief sessions by phone or in person. Your beneficiaries are eligible for up to six face-to-face sessions and unlimited phone contact. Our clinicians may offer your beneficiaries additional grief support through books sent to their home, based on each individual’s needs. As part of this program, age-appropriate books can be sent for children and teens.

LEGAL SERVICES – Your beneficiaries can obtain legal assistance from experienced attorneys. They can:

- Schedule an initial 30-minute office and a telephone consultation with a network attorney. Beneficiaries who wish to retain a participating attorney after the initial consultation receive a 25 percent rate reduction from the attorney’s normal hourly or fixed-fee rates.
- Obtain an estate-planning package that consists of a simple will, a living will, a health care agent form and a durable power of attorney.

FINANCIAL ASSISTANCE – Your beneficiaries have unlimited phone access to financial counselors who can help with issues such as budgeting strategies, and credit and debt management, including hour-long sessions on topics requiring more in-depth discussion.

SUPPORT SERVICES – During an emotional time, your beneficiaries can receive help planning a funeral or memorial service. Work-life advisors can guide them to resources to help manage household repairs and chores, find child care and elder care providers, or organize a move or relocation.

ONLINE RESOURCES – Your beneficiaries can easily access additional services and features on the Life Services Toolkit website for beneficiaries, including online resources to calculate funeral costs, find funeral-related services and make decisions about funeral arrangements.

TRAVEL ASSISTANCE

PROVIDED BY THE STANDARD INSURANCE CO.

Things can happen on the road. Passports get stolen or lost. Unforeseen events or circumstances derail travel plans. Medical problems surface at the most inconvenient times. Travel Assistance can help you navigate these issues and more at any time of the day or night.

You and your spouse are covered with Travel Assistance¹ – and so are kids through age 25 – with your group insurance from Standard Insurance Company (The Standard).

SECURITY THAT TRAVELS WITH YOU

Travel Assistance is available when you travel more than 100 miles from home or internationally for up to 180 days for business or pleasure. It offers aid before and during your trip, including:

- Visa, weather and currency exchange information, health inoculation recommendations, country-specific details and security and travel advisories
- Credit card and passport replacement and missing baggage and emergency cash coordination
- Help replacing prescription medication or lost corrective lenses and advancing funds for hospital admission
- Emergency evacuation to the nearest adequate medical facility and medically necessary repatriation to the employee's home, including repatriation of remains²
- Connection to medical care providers, interpreter services, local attorneys and assistance in coordinating a bail bond
- Return travel companion if travel is disrupted due to emergency transportation services or care of minor children if left unattended due to prolonged hospitalization³
- Assistance with the return of your personal vehicle if your emergency transportation services leave it stranded
- Evacuation arrangements in the event of a natural disaster, political unrest and/or social instability

¹ Travel Assistance is provided through an arrangement with Assist America, Inc. and is not affiliated with The Standard. Travel Assistance is subject to the terms and conditions, including exclusions and limitations of the Travel Assistance Program Description. Assist America, Inc. is solely responsible for providing and administering the included service. Travel Assistance is not an insurance product. This service is only available while insured under The Standard's group policy.

² Spouses and children traveling on business for their employers are not eligible to access these services during those trips.

³ Must be arranged by Assist America, Inc.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

FLEXIBLE SPENDING ACCOUNTS (FSA)

ADMINISTERED BY PEAK1 ADMINISTRATION

You can save money on your healthcare and/or dependent care expenses with an FSA. You set aside funds each pay period on a pretax basis and use them tax-free for qualified expenses. You pay no federal income or Social Security taxes on your contributions to an FSA. (That's where the savings comes in.) Your FSA contributions are deducted from your paycheck before taxes are withheld, so you save on income taxes and have more disposable income.

HEALTHCARE SPENDING LIMIT

\$3,200 (SUBJECT TO CHANGE EACH YEAR)

DEPENDENT CARE SPENDING LIMIT

\$5,000

Peak1 Administration is the administrator of two individual Flexible Spending Accounts— one for healthcare expenses and one for dependent childcare and elder care expenses. You can enroll in one or both FSAs. You use each account separately, but they work similarly.

HERE'S HOW AN FSA WORKS

1. You decide the annual amount you want to contribute to either or both FSAs based on your expected healthcare and/or dependent childcare/elder care expenses.
2. Your contributions are deducted from each paycheck before income and Social Security taxes, and deposited into your FSA.
3. You can pay with the healthcare FSA debit card for eligible healthcare expenses. Your full FSA election is available immediately and you also have the ability to use Amazon and the FSA store. For dependent care, you pay for eligible expenses when incurred, and then submit a reimbursement claim form or file the claim online.
4. You are reimbursed from your FSA. So, you actually pay your expenses with tax-free dollars.
5. If you still have a balance in your account at the end of the plan year, a minimum of \$25 and maximum of \$610, will be rolled over into the next plan year on April 1st.



For both your Healthcare FSA and Dependent Care FSA, you can setup direct deposit so your reimbursement for claims gets to you faster.

HRA VEBA

A Post Employment Health Plan (or VEBA) is a 501(c)9 plan under Internal Revenue Code that provides each eligible member with an individual account to pay health/dental insurance premiums and/or unreimbursed medical expenses after separation of employment with the City of Boise. These accounts are funded by the city and it is the city's intention to provide a target benefit. Employees who are eligible for this benefit include all non-contract, regular employees who are regularly scheduled to work twenty (20) hours or more per week.

HOW IS VEBA FUNDED?

Based on an eligible employee's status on the last day of the last pay period in December:

1. An employer contribution in the amount of 0.25% of the employee's annual base salary will be made in January.
2. Eligible employees shall have accrued sick leave in excess of 600 hours converted into the employee's Post Employment Health Plan (VEBA) account. The conversion will be done on a 2:1 ratio at the employee's current regular hourly rate of pay. Conversion of hours shall occur at the end of the calendar year and shall be based upon the balances on the last day of the last pay period.
3. When an employee who is eligible for this benefit retires, all accrued sick leave hours will be converted at a 4:1 ratio at the retiree's current regular hourly rate of pay. Vacation, and for non-exempt employees their compensatory time, will also be converted into the VEBA at retirement if the current Minimum Funding Standard is not met. Eligible employees, who separate from the City of Boise prior to retirement, will have no further contributions made by the city.

MINIMUM FUNDING STANDARDS

The target benefit, or Minimum Funding Standard (MFS), represents the amount of funds necessary to pay for fifteen (15) years of single person Medicare supplement premiums after subtraction of the City's \$50 per month contribution toward the premium. The premium amounts for the city-provided retiree Medicare supplement premium will be used to create the minimum funding standard calculation. Please see next page schedule for MFS amount by year.

The Minimum Funding Standard shall be updated periodically.

The assumptions used to calculate the target benefit are as follows:

1. Fifteen (15) years of single person Medicare supplement premiums.
2. The premium used is the amount of the City of Boise’s retiree Medicare supplement plan minus the \$50 per month contributed by the city.
3. Medical premium increases are estimated at 6.5% per year.
4. VEBA investment earnings are estimated at 8% per year.

MINIMUM FUNDING STANDARDS	
YEAR OF RETIREMENT	AMOUNT
2024	\$115,912
2025	\$123,447
2026	\$131,471
2027	\$140,017
2028	\$149,118

WHAT HAPPENS WHEN I LEAVE THE ORGANIZATION

Whether you are leaving the organization through resignation, termination, layoff or retirement you are able to access the funds in your VEBA account. In order to request reimbursement for health/dental insurance premiums and/or unreimbursed medical expenses after separation of employment with the City of Boise, register or log onto www.hraveba.org, email totalrewards@cityofboise.org or call 208.972.8090 to obtain the appropriate form.

PERSI

PERSI BASE PLAN

PERSI is a pension plan, designed to provide long-term retirement benefits when you choose a career in public service. The city makes sizable contributions on your behalf and these are combined with your pretax contributions to provide a valuable source of future income. Participation in the PERSI Base Plan is mandatory. You are fully vested in the Base Plan after 60 months of credited service.

PERSI offers three types of retirement:

- Service retirement
- Early retirement (including the rule of 80/90, which means you may receive an unreduced retirement allowance if your years of credited service, plus your age equal 90 (general members) or 80 (public safety)).
- Disability retirement

YOUR PERSI PLAN BENEFITS CONTRIBUTIONS		
	CITY CONTRIBUTIONS	EMPLOYEE CONTRIBUTIONS
GENERAL MEMBERS – JULY 2023	11.18% of annual salary	6.71% of annual salary
GENERAL MEMBERS – JULY 2024	11.96% of annual salary	7.18% of annual salary

DEFERRED COMPENSATION PLANS

PERSI CHOICE PLAN 401(K)

Participation in the Choice Plan is totally voluntary, but you must be eligible for the benefits in order to participate. With the Choice Plan 401(k), you set aside a percentage of your income on a pretax basis. You can invest those contributions in a variety of investment options, although your funds will default into the PERSI Total Return Fund if you do not actively invest in other funds. You can also roll money over from another eligible retirement savings plan into the Choice Plan 401(k).

457(B) DEFERRED COMPENSATION ACCOUNT - PRE-TAX AND ROTH

Saving for retirement is important. That’s why the city offers a 457(b) plan in addition to PERSI and the 401(k). Employees can contribute income on a per paycheck basis into the 457(b) account both on a pre-tax or after-tax (Roth) basis.

The maximum amount you are allowed to contribute to your 457 plan is based on taxable compensation as defined by the Internal Revenue Code (IRC). The current maximum contribution

amount is 100% of your compensation less any mandatory before tax contributions to a governmental pension plan per year or \$23,000 whichever is less. Employees age 50 or over can contribute an additional \$7,500 per year.

You can go to www.lincolnfinancial.com to begin a new enrollment, update your beneficiary or change your salary deferral amount, either by percentage or a flat dollar amount.

PERSONAL ACCOUNT LOANS

Loans are available to all participating employees. Please review the Managing Your Account Guide (PDF) to answer questions you may have. Although it is not encouraged, you do have access to the money in your Choice Plan 401(k) through loans or withdrawals; you will pay taxes on the amount (if under age 59½) in addition to regular income taxes. You may also pay a 10% early-withdrawal penalty.

EMPLOYER MATCHING

The city will match up to 2% of your contributions in either the 457(b) pretax (not roth) OR the 401(k). The employer match is paid up to a percentage of your base wages per pay period. Please see the fringe exhibit in the Employee Handbook for specific match information.

	401K PLAN	457(b) PLAN
CONTRIBUTION TYPES:	Pretax Only	Pretax and Roth
ANNUAL CONTRIBUTION LIMITS:	\$23,000 (Includes pretax only)	\$23,000 (Includes both pretax and Roth contributions)
SPECIAL AGE 50 CATCH UP <i>(Catch-up contribution limit for ages 50 and over.)</i>	\$7,500	\$7,500
3-YEAR PRE-RETIREMENT CATCH UP:	Not Allowed	Allowed, if qualified. You can contribute up to twice the annual limit for the three years prior to normal retirement age.
VESTING/OWNERSHIP:	All contributions are fully (100%) vested	All contributions – both pretax and Roth – are fully (100%) vested
EARLY WITHDRAWAL PENALTY FOR PARTICIPANTS UNDER 59-1/2:	Plan allows withdrawals at age 55	No early withdrawal penalty



Participants can fully participate in both plans!

To maximize your retirement savings, you can contribute up to the annual IRS limit in both plans.

\$46,000 – The combined annual contribution limit for 401(k) plan and the 457(b) plan

\$61,000 – The combined annual contribution limit for the 401(k) plan and the 457(b) plan for participants who are age 50 or older.

PAID TIME OFF/LEAVES

PAID TIME OFF

When you need a few days away, the City of Boise understands. Whether you are taking time off to be with family and friends, or you're trying to beat an illness, sick time, vacation time and holidays are available so you can get paid while you're away. Or, if you don't need all of your sick time, you can save it to help you pay for health insurance when you stop working for the city.

HOLIDAYS

The City of Boise recognizes 10 paid holidays, and offers two additional floating holidays each year:

- New Year's Day
- Martin Luther King, Jr. Day
- Presidents' Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Veterans Day
- Thanksgiving Day
- Christmas Day
- Two Floating Holidays

SICK LEAVE POLICY

The city offers a sick leave policy separate from time off for vacation. The city's policy is designed to be there for you when you need it, but it also offers some rewards if you find you don't need to use the time off.

Eligible employees who have accrued sick leave in excess of 600 hours will have those hours converted into the employee's Post Employment Health Plan (VEBA) account. The conversion will be done on a 2:1 ratio at the employee's current regular hourly rate of pay each January. Conversion of hours shall occur at the end of the calendar year and shall be based upon the balances on the last day of the last pay period.

Sick leave is accrued at the end of the pay period and the number of hours an employee accrues is based on the employee's standard hours of work. All sick leave at retirement is converted at a 4:1 ratio.

PARENTAL LEAVE

The city recognizes that it is in a unique position to be a model for other government organizations. As such, in an effort to provide an opportunity for parents to bond and welcome a new child to their family, the city offers paid parental leave.

Parental leave is available to regular, full and part-time employees, regardless of gender.

WHAT IS PARENTAL LEAVE?

Parental Leave refers to paid time off following the birth of an employee's natural child or the legal placement of a child with an employee for the purposes of adoption. The maximum amount of paid parental leave is ten (10) work weeks.

Parental Leave shall only be taken in a single, continuous block of time; thus incremental leave is not permitted. This means employees are only eligible for parental leave one time in the 12 months following the birth/adoption date. The employee's actual workweek counts as a week of leave regardless of the number of hours worked, or whether the employee is full or part-time.

ELIGIBILITY AND USE

Employees become eligible for parental leave the first day of the month following 60 days of regular employment. The leave may be used only for the birth of the employee's natural child or adoption of a child (up to the age of 18 years old) in order to promote bonding with the child.

When an employee is eligible for Family Medical Leave (FML), paid leave under this program will run concurrently with FML (please refer to the Family and Medical Leave Regulation for details). Employees shall designate, at the time they request FML, when parental leave will be used during the FML period. FML eligibility does not dictate parental leave eligibility.

VACATION LEAVE

Eligibility for paid vacation leave begins as the leave is accrued in the first pay period of employment.

RATE AT WHICH YOUR VACATION TIME BUILDS					
The amount of vacation time you accrue is tied to your hours worked with the City.					
REGULAR FULL TIME ANNUAL ACCRUAL AMOUNTS 35 OR MORE STANDARD HOURS PER WEEK					
YEARS OF CONTINUOUS SERVICE	HOURS ACCRUED PER PAY PERIOD	HOURS ACCRUED ANNUALLY	DAYS (8HRS) ACCRUED ANNUALLY	MAXIMUM ACCRUAL LIMIT IN HOURS	
LESS THAN 5 YEARS	4.62	120	15	144	
5+ YEARS	5.54	144	18	176	
10+ YEARS	6.46	168	21	216	
15+ YEARS	7.38	192	24	248	
20-YEARS AND OVER	8.31	216	27	288	
PART TIME ANNUAL ACCRUAL AMOUNTS 34 OR LESS STANDARD HOURS PER WEEK					
YEARS OF CONTINUOUS SERVICE	HOURS WORKED	HOURS ACCRUED ANNUALLY	DAYS (8HR) ACCRUED ANNUALLY	MAXIMUM ACCRUAL LIMIT IN HOURS	MAXIMUM ACCRUAL LIMIT IN HOURS
LESS THAN 5 YEARS	29-34 hours	3.46	90	15	144
	19-28 hours	2.3	60		
5+ YEARS	29-34 hours	4.15	108	18	176
	19-28 hours	2.76	72		
10+ YEARS	29-34 hours	4.84	126	21	216
	19-28 hours	3.23	84		
15+ YEARS	29-34 hours	5.54	144	24	248
	19-28 hours	3.69	96		
20-YEARS AND OVER	29-34 hours	6.24	162	27	288
	19-28 hours	4.15	108		
SENIOR MANAGER/DEPARTMENT DIRECTOR ANNUAL ACCRUAL AMOUNTS 40 STANDARD HOURS PER WEEK					
YEARS OF CONTINUOUS SERVICE	HOURS ACCRUED PER PAY PERIOD	HOURS ACCRUED ANNUALLY	DAYS (8HR) ACCRUED ANNUALLY	MAXIMUM ACCRUAL LIMIT IN HOURS	
LESS THAN 20 YEARS	7.38	192	24	248	
20-YEARS AND OVER	8.31	216	27	288	

WELLNESS PROGRAM

Employee wellbeing is an important part of your benefits at the City of Boise. The city provides resources for you and your family to enjoy a healthy, happy life. One tool you may use to support your wellbeing is Virgin Pulse! Virgin Pulse is a flexible and easy-to-use tool that can help you no matter where you are on your wellbeing journey.

GET STARTED

1. **ACTIVATE YOUR VIRGIN PULSE ACCOUNT** at join.virginpulse.com/boisehealthylife. Once registered log in at member.virginpulse.com.
2. **DOWNLOAD THE VIRGIN PULSE MOBILE APP** on IOS or Android. The first time you log in, you'll earn bonus points.
3. **DISCOVER HOW TO EARN POINTS** and what your rewards are for doing so.
4. **CONNECT AN ACTIVITY TRACKER** to get credit for your steps, active minutes and sleep.
5. **SET YOUR INTERESTS** to get personalized daily tips to help you eat healthy, get active, reduce stress, sleep well, and more.

EARN REWARDS WITH POINTS

Rewards will be paid directly through payroll - \$500 total available per year.

- **EACH QUARTER \$100 POSSIBLE.** Earn points to reach levels:
Level 1 – \$15 Level 2 – \$20 Level 3 – \$30 Level 4 – \$35
- Anytime: Health Screening Participation – \$100
(Q3 onsite screenings may still be offered)

THE MORE HEALTHY DECISIONS YOU MAKE, THE MORE POINTS YOU EARN

DAILY: Track healthy habits, steps, calories and sleep

MONTHLY: Create personal challenges, achieve milestones toward healthy habits, steps, calories and sleep goals

QUARTERLY: Organizational challenges, profile engagement and surveys

ANNUAL AND ONE-TIME: Preventative visits with healthcare providers, participate in a health care screening and connecting with other devices or applications.

KOA HEALTH - FOUNDATIONS

Your mental health and wellbeing matters —and taking care of it is more important than ever. Foundations is available to all benefit-eligible employees. You can access science-based support to help you handle stress and build resilience whenever and wherever you need it.

Download Foundations for iOS or Android and register using your City of Boise email to access 100+ science-based mental wellbeing programs and activities to help you manage your wellbeing.

EMPLOYEE ASSISTANCE PROGRAM

ADMINISTERED BY BPA HEALTH

LIFE IS A CHALLENGE. WE PROVIDE SUPPORT TO SEE YOU THROUGH IT.

YOU HAVE UP TO 6 SESSIONS PER INCIDENT PER BENEFIT YEAR.

Your EAP (Employee Assistance Program) is a benefit provided by the City of Boise to help you successfully address work and personal problems that impact your life. BPA Health, the administrator of your EAP, connects you to face-to-face counseling professionals, web-based tools and other resources that will help you sort out work, personal or family issues.

- **PERSONAL:** Stress, anxiety, depression, grief, drug or alcohol use
- **RELATIONSHIP:** Marriage, separation or divorce, family, parenting, domestic abuse
- **WORK:** Anger management, job change, co-worker conflicts, ethics
- **LEGAL & FINANCIAL:** Wills, budgeting, financial planning, divorce, identity theft protection and recovery

ACCESSING YOUR EAP IS EASY, CONFIDENTIAL AND NO COST TO YOU.

Services are provided at no cost to eligible employee and family and are strictly confidential. To access services call 800.726.0003. Crisis counselors are available 24 hours a day, 7 days a week. BPAHealth.com

EASY TO ACCESS AND MOBILE FRIENDLY.

The BPA Health Website is available to you when and where you need it.

On the site, you have access to useful information and resources:

- Review your benefits
- Search providers near you
- Access your work-life resources

LOGIN IS FAST.

Go to BPAHealth.com and enter the following information:

LOGIN: City of Boise

PASSWORD: 8007260003

FINDING A PROVIDER IS EASY.

Using the smart search options, look for a provider by location, service that meets your need, gender, hours of operation and more.

RESOURCES ARE CONVENIENT.

View or download work-life resources including webinars, forms, informational documents, and educational materials.

BPA Health is a Boise company that connects people to make lives better, organizations more effective and communities stronger. BPA Health professionals help individuals successfully address work and personal problems that impact their job performance, health and overall wellbeing.

CONTACT INFORMATION

If you have specific questions about a benefit plan, please contact the administrator listed below:

CONTACT INFORMATION			
BENEFIT	ADMINISTRATOR	PHONE	NOTES
MEDICAL PPO	Blue Cross of Idaho	208-331-7626	General Group #10031331
MEDICAL CCO	St Luke's Health Partners	208-331-7626	alhealthpartners@slhs.org
DENTAL PPO	Delta Dental of Idaho	208-489-3580	Group #2700 www.deltadentalid.com
DENTAL HMO	Willamette Dental Group	855-433-6825	email: info@willamettedental.com www.willamettedental.com
VISION	Vision Service Plan	800-877-7195	www.vsp.com
FLEXIBLE SPENDING ACCOUNTS (FSA)	Peak1 Administration	866-315-1777	email: membercare@mypeak1.com www.mypeak1.com
457B PLAN	Lincoln Financial	360-580-9741	Contact: Rachael
401K PLAN	PERSI/Empower	208-345-1120	Contact: Bruce Singkhaopphet, bruce.singkhaopphet@empower.com
EMPLOYEE ASSISTANCE PROGRAM	Business Psychology Associates (BPA)	800-726-0003	
LIFE INSURANCE AND DISABILITY	Standard Insurance	971-321-5583	
IDAHO NCPERS LIFE INSURANCE	Member Benefits	800-525-8056	ncpers@memberbenefits.com
HRA VEBA	Rich Dickman	509-990-7262	www.hraveba.org
BASE PLAN (PENSION)	PERSI	208-334-3365	www.persi.idaho.gov
		800-451-8228	
COBRA	Peak1 Administration	877-404-9443	
AFLAC	David Bicknell	208-616-0533	David_bicknell@us.aflac.com

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM(CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed on the following pages, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are not currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial 877.KIDS.NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 866.444.EBSA (3272).

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of January 31, 2020. Contact your state for more information on eligibility.

ALABAMA – Medicaid

<http://myalhipp.com>
855-692-5447

ALASKA – Medicaid

The AK Health Insurance Premium Payment Program:
<http://myakhipp.com>
866-251-4861
CustomerService@MyAKHIPP.com

Medicaid Eligibility: <http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx>

ARKANSAS – Medicaid

<http://myarhipp.com>
855-MyARHIPP (855-692-7447)

CALIFORNIA – Medicaid

https://www.dhcs.ca.gov/services/Pages/TPLRD_CAU_cont.aspx
800-541-5555

COLORADO – Medicaid and CHIP

Health First Colorado (Colorado's Medicaid Program):
<https://www.healthfirstcolorado.com>
Member Contact Center: 800-221-3943
State Relay 711

Child Health Plan Plus (CHP+)
<https://www.colorado.gov/pacific/hcpf/child-health-plan-plus>
Customer Service: 800-359-1991
State Relay 711

FLORIDA – Medicaid

<http://flmedicaidtplrecovery.com/hipp>
877-357-3268

GEORGIA – Medicaid

<https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp>
678-564-1162, ext. 2131

INDIANA – Medicaid

Healthy Indiana Plan for low-income adults 19-64
<http://www.in.gov/fssa/hip>
877-438-4479

All other Medicaid: <http://www.indianamedicaid.com>
800-403-0864

IOWA – Medicaid and CHIP (Hawki)

Medicaid: <https://dhs.iowa.gov/ime/members>
800-338-8366

Hawki: <http://dhs.iowa.gov/Hawki>
800-257-8563

KANSAS – Medicaid

<http://www.kdheks.gov/hcf/default.htm>
800-792-4884

KENTUCKY – Medicaid

Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP)
<https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx>
855-459-6328

KIHIPP.PROGRAM@ky.gov
KCHIP: <https://kidshealth.ky.gov/Pages/index.aspx>
877-524-4718

Medicaid: <https://chfs.ky.gov>

LOUISIANA – Medicaid

www.medicaid.la.gov or www.ldh.la.gov/lahipp
888-342-6207 (Medicaid hotline) or 855-618-5488 (LaHIPP)

MAINE – Medicaid

<http://www.maine.gov/dhhs/ofi/public-assistance/index.html>
800-442-6003
Maine relay 711

MASSACHUSETTS – Medicaid and CHIP

<http://www.mass.gov/eohhs/gov/departments/masshealth>
800-862-4840

MINNESOTA – Medicaid

<https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/medical-assistance.jsp> (Under ELIGIBILITY tab, see “what if I have other health insurance?”)
800-657-3739

MISSOURI – Medicaid

<http://www.dss.mo.gov/mhd/participants/pages/hipp.htm>
573-751-2005

MONTANA – Medicaid

<http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP>
800-694-3084

NEBRASKA – Medicaid

<http://www.ACCESSNebraska.ne.gov>
Phone: 855-632-7633
Lincoln: 402-473-7000
Omaha: 402-595-1178

NEVADA – Medicaid

<http://dhcfp.nv.gov> 800.992.0900

NEW HAMPSHIRE – Medicaid

<https://www.dhhs.nh.gov/oii/hipp.htm>
603-271-5218
Toll-Free: 800-852-3345, ext. 5218

NEW JERSEY – Medicaid and CHIP

Medicaid
<http://www.state.nj.us/humanservices/dmahs/clients/>
609-631-2392

CHIP
<http://www.njfamilycare.org/index.html>
800-701-0710

NEW YORK – Medicaid

https://www.health.ny.gov/health_care/medicaid/
800-541-2831

NORTH CAROLINA – Medicaid

<https://medicaid.ncdhhs.gov/>
919-855-4100

NORTH DAKOTA – Medicaid

<http://www.nd.gov/dhs/services/medicalsev/medicaid>
844-854-4825

OKLAHOMA – Medicaid and CHIP

<http://www.insureoklahoma.org>
888-365-3742

OREGON – Medicaid

<http://healthcare.oregon.gov/Pages/index.aspx>
<http://www.oregonhealthcare.gov/index-es.html>
800-699-9075

PENNSYLVANIA – Medicaid

<http://www.dhs.pa.gov/provider/medicalassistance/healthinsurancepremiumpaymenthippprogram/index.htm>
800-692-7462

RHODE ISLAND – Medicaid and CHIP

<http://www.eohhs.ri.gov>
855-697-4347 or 401-462-0311 (Direct Rlte Share Line)

SOUTH CAROLINA – Medicaid

<http://www.scdhhs.gov>
888-549-0820

SOUTH DAKOTA – Medicaid

<http://dss.sd.gov>
888-828-0059

TEXAS – Medicaid

<http://gethipptexas.com>
800-440-0493

UTAH – Medicaid and CHIP

Medicaid: <https://medicaid.utah.gov>
CHIP: <http://health.utah.gov/chip>
877-543-7669

VERMONT – Medicaid

<http://www.greenmountaincare.org>
800-250-8427

VIRGINIA – Medicaid and CHIP

<https://www.coverva.org/hipp/>
Medicaid: 800-432-5924
CHIP: 855-242-8282

WASHINGTON – Medicaid

<https://www.hca.wa.gov/>
800-562-3022

WEST VIRGINIA – Medicaid

<http://mywvhipp.com/>
855-MyWVHIPP (855-699-8447)

WISCONSIN – Medicaid and CHIP

<https://www.dhs.wisconsin.gov/publications/p1/p10095.pdf>
800-362-3002

WYOMING – Medicaid

<https://wyequalitycare.acs-inc.com>
307-777-7531

To see if any other states have added a premium assistance program since January 31, 2020, or for more information on special enrollment rights, contact either:

U.S. Department of Labor Employee Benefits Security Administration

www.dol.gov/agencies/ebsa
866-444-EBSA (3272)

U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services

www.cms.hhs.gov
877-267-2323, Menu Option 4, Ext. 61565

OMB Control Number 1210-0137 (expires 1/31/2023)



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