



Welcome to Open Enrollment

Plan Year: July 2025 – June 2026



WELCOME TO OPEN ENROLLMENT

PICK THE BEST BENEFITS FOR YOU AND YOUR FAMILY.

Bartlett Regional Hospital strives to provide you and your family with a comprehensive and valuable benefits package. We want to make sure you’re getting the most out of your benefits—that’s why we’ve put together this Open Enrollment Guide.

IMPORTANT: If no changes are desired, your elections will roll over and no action is needed. This guide outlines the benefit plans, so you can identify which offerings are best for your situation.

Elections you make during open enrollment are effective **July 1, 2025**. If you have questions about any of the benefits mentioned in this guide, please don’t hesitate to reach out to HR or Natasha Peterson by phone: **(907) 586-5250 ext.4085** or by email: Natasha.Peterson@juneau.org

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WELCOME TO OPEN ENROLLMENT



ELIGIBILITY

Bartlett Regional Hospital Employees:

Effective on the first day of the pay period following an employee's date of hire, and chooses to "enroll" in the plan, if they satisfy the following:

- Become an active full-time employee who regularly works a minimum of 72 hours per pay period
- Become an active permanent/probationary part-time employee, or exempt employee working less than full time and who regularly works a minimum of 832 hours per year and a minimum of 16 hours per week, and they agree to pay their portion of the premium, which will be pro-rated depending on the number of hours worked per pay period

WELCOME TO OPEN ENROLLMENT

Ready to enroll? The first step is to review and verify all your personal information, as well as any dependents, before making elections.

Once all your information is up to date, it's time to make your benefit elections. The decisions you make during open enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully. **Remember, all employees are suggested to review their coverage during this Open Enrollment to ensure accuracy for the following plan year.**

When To Enroll

Open enrollment is **Monday, May 5 through Friday, May 23, 2025**

Qualifying Life Events

IRS rules place certain restrictions for when you can make changes outside of open enrollment. Once the new plan year begins, you are unable to make changes unless you experience a life-changing qualifying event. You'll need to fill out enrollment forms and provide supporting documentation within the allowable time frame (typically 30 days from the event).

Qualifying events include:

- Marriage, gain or loss of domestic partnership, divorce, or legal separation
- Birth or adoption of a child
- Death of a qualified dependent
- Change in employment status that impacts coverage or eligibility under another employer-sponsored plan



WELCOME TO OPEN ENROLLMENT

What do I need to do for Open Enrollment?

- Open enrollment is a **PASSIVE enrollment** this year—you will need to review your prior benefit elections.

What changes are effective July 1, 2025?

- **NEW!** Health Savings Accounts, Health Care Flexible Spending Accounts, and Dependent Care Flexible Spending Accounts will now be administered through HSA Bank.
- Voluntary short-term disability rates are decreasing. The updated rates are listed on page 13.

Where can I learn more about my benefit options?

- We partner with TheBenefitseXpert® (TBX) for a comprehensive online enrollment experience. You will have access to videos and handouts with more information about each benefit option. You also have access to LIVE benefit counselors who can help walk you through enrollment options!

How do I enroll in benefits?

- Click the “**My Benefits**” link on the www.thebenefitsexpert.com/juneau portal to access TheBenefitseXpert® enrollment site.
- You will be prompted to fill in your personal details to access your personalized account:

User ID Enter your Social Security Number or your employee ID. No dashes required.	Username First Name.Last Name Employees that include middle initial will be contacted directly
Personal ID Number(PIN) Enter the last 4 digits of your Social Security Number and the last 2 digits of your birth year. No dashes required.	Example: John Doe Social Security Number: 123456789 Date of Birth: June 1st, 1980 PIN is 678980



WELCOME TO OPEN ENROLLMENT

MEDICAL / PRESCRIPTION DRUG INSURANCE

This is a free plan that allows you to save on premiums compared to the Economy and Standard plan. It does come with a higher deductible which will have you pay a little more in the beginning before coinsurance will take effect.

To help with those early costs, this plan can also be paired with a Health Savings Account which allows you to set aside pre-tax dollars for medical expenses.. Unlike the other plans, unused funds will not expire each year.

BENEFITS	HDHP
	In-Network
Medical Deductible	\$2,000 Individual / \$4,000 Family **If enrolled on the family plan, you must meet the family level deductible prior to the plan paying at 80% of all
Medical Out-of-Pocket Maximum (includes medical deductible)	\$4,000 Individual / \$8,000 Family
Physician / Specialist Office Visit	20%, after deductible
Virtual care	Deductible does apply first Then general medical covered in full Other subject to outpatient cost
Hospitalization	20%, after deductible
Preventive Care	No charge
Emergency Room	20%, after deductible
Prescription Drug Deductible (per person)	Included in medical deductible
Prescription Drug Out-of-Pocket Maximum (per person)	Included in medical out-of-pocket maximum
Prescriptions** (per 90-day supply retail and mail) Generic Preferred Formulary Preferred Specialty Non-Preferred	20% after deductible 20%, after deductible 20%, after deductible 20%, after deductible
Hearing Exam/Hardware Max Hardware Limit	20% after deductible, max coverage of \$3,000/36 months for hardware and max of \$400 for exam

YOUR COST—Medical Insurance

*Bi-Weekly = 26 pay periods per year

**Specialty drugs 30-day supply at specific pharmacies

BI-WEEKLY PAYROLL DEDUCTIONS*	HDHP
Employee Only	\$0.00**
Employee & Family	\$79.00**

** Part-Time employees pay a prorated amount for this plan.



WELCOME TO OPEN ENROLLMENT

MEDICAL PLANS CONTINUED

All of our plans do not require you to select a primary care physician or secure a referral from one provider to another. This may allow for quicker and more convenient access to specialty physicians.

The chart below compares the two PPO medical plan benefits that we offer based on network coverage. Refer to the Premera SBC for more detail and non-network benefit levels.

BENEFITS	ECONOMY	STANDARD
	In-Network	In-Network
Medical Deductible	\$700 Individual / \$1,400 Family	\$350 Individual / \$700 Family
Medical Out-of-Pocket Maximum (includes medical deductible)	\$3,000 Individual / \$8,000 Family	\$1,850 Individual / \$5,200 Family
Physician / Specialist Office Visit	20%, after deductible	20%, after deductible
Virtual care	General medical covered in full Other subject to outpatient cost	General medical covered in full Other subject to outpatient cost
Hospitalization	20%, after deductible	20%, after deductible
Preventive Care	No charge	No charge
Emergency Room	\$150 + 20%, after deductible	\$150 + 20%, after deductible
Prescription Drug Deductible (per person)	\$150	\$75
Prescription Drug Out-of-Pocket Maximum (individual/family)	\$2,000/\$6,000	\$1,450/\$4,350
Prescriptions** (per 30-day supply retail) (per 90-day supply mail) Generic Preferred Formulary Preferred Specialty Non-Preferred	\$10, after deductible \$35, after deductible \$55, after deductible \$150, after deductible	\$10, after deductible \$25, after deductible \$45, after deductible \$100, after deductible
Hearing Exam/Hardware Max Hardware Limit	Covered in full up to \$400 once per plan year Covered up to \$3,000/36 months	Covered in full up to \$400 once per year Covered up to \$3,000/36 months

YOUR COST—Medical Insurance

* Bi-Weekly = 26 pay periods per year

** Specialty drugs only covered at specific pharmacies

BI-WEEKLY PAYROLL DEDUCTIONS*	ECONOMY PLAN	STANDARD PLAN
Employee Only	\$53.40**	\$104.40**
Employee & Family	\$158.00**	\$230.40**

** Part-Time employees pay a prorated amount for this plan.



WELCOME TO OPEN ENROLLMENT

TELADOC CHRONIC CONDITION SUPPORT PROGRAM

Premera's comprehensive chronic condition support program treats the whole person, not just the disease. This program supports employees who are at risk of developing diabetes, those who are working daily to manage their condition, and those who are managing hypertension. The program provides solutions to make healthcare simple and easy. It's just another way Premera is making healthcare work better for you.

Chronic condition support goes beyond just diabetes care

Going beyond diabetes prevention, you (or an eligible dependent) can opt-in to Premera's full chronic condition support program, or just the preventive diabetes or hypertension and diabetes management, depending on which program is most helpful.

Premera's chronic condition support program helps by offering:

- Personal health support from expert coaches
- Management and strategy support
- Connected technology that delivers real-time results and remote monitoring
- Continuing educational content support
- Free unlimited supply of test strips (Diabetes Management Program)

VIRTUAL CARE—24/7/365 ACCESS TO CARE

Primary Care / Urgent Care / Mental Health

The Premera virtual health network provides quality care that saves you money and time.

- Get everything from fast diagnosis and treatment of common ailments to routine checkups and ongoing monitoring of chronic conditions anytime.
- Getting an appointment for mental health help can take days or weeks. With virtual care, you get specialized psychiatric treatment from a licensed prescriber—all from the comfort of your home.

These virtual providers are integrated into your health plan and provide:

- Convenient high-quality care at low or no out-of-pocket costs
- The ability to get your prescriptions filled
- Great customer experience by addressing your healthcare concerns in a timely manner and providing treatment options within minutes

Substance Use Addiction Assistance

Achieve recovery for conditions like opioid and/or alcohol use addictions, wherever you are with virtual care. Take advantage of short wait times through your Premera health plan.

- **Boulder Care**—Video visits and text messaging with a therapist. boulder.care/getstarted

ALL INFORMATION IS CONFIDENTIAL BETWEEN YOU AND YOUR PROVIDER



WELCOME TO OPEN ENROLLMENT

HEALTH SAVINGS ACCOUNTS

Health Savings Account

If you enroll in the High Deductible Health Plan, you will have access to the Health Savings Account (HSA). You can think of the HSA like a personal savings for your healthcare expenses with some impressive tax advantages.



Health Savings Account (paired with the HDHP only)

- This account allows you to set aside funds from your pay-check that will not be subject to federal income taxes.
- The IRS allows you to pay qualified medical expenses with these tax-free funds.
- The account can earn interest on a tax-free basis and you are allowed to roll funds over from year to year..
- If you leave CBJ/BRH, or retire, you can take your HSA with you.

HEALTH SAVINGS ACCOUNT (HSA) IRS LIMITS

Annual Maximum Contributions	2025
Employee Only	\$4,300*
Employee & Family	\$8,550*

*If an individual reaches 55 by the end of the calendar year, they can contribute an additional \$1,000.



WELCOME TO OPEN ENROLLMENT

FLEXIBLE SPENDING/DEPENDENT CARE ACCOUNTS

Flexible Spending Account (FSAs)

FSAs enable you to put aside money for important expenses and help you reduce your income taxes at the same time. The Bartlett Hospital offers two types of FSAs – A Health Care FSA and a Dependent Care FSA. These accounts allow you to set aside pre-tax dollars to pay for certain out-of-pocket health care or dependent care expenses.

It is important to note that these funds need to be used within the calendar year. Any unused funds will be forfeited. You will have 2 and ½ months after the start of next plan year to accrue and submit claims for reimbursement from the previous year's funds before elections are forfeited.



Health Care FSA

Copays, deductibles, orthodontia, prescription drugs, medical equipment and more.



Dependent Care FSA

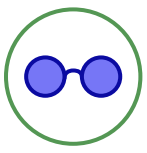
Babysitters, daycare, day camp, home nursing care and more.

Flexible Spending Account (for medical or dependent care services)

- Each year during the open enrollment period, you decide how much to set aside for health care and/or dependent care services.
- Your deductions are made from your paycheck on a before-tax basis in equal installments throughout the calendar year.
- As you incur health care or dependent care expenses throughout the year, submit a claim for reimbursement. Your claim will be reimbursed from your account. Or use your FSA card to pay for eligible transactions at the point of sale. If you use your card to pay directly, there is no need for a reimbursement form.
- Please keep receipts for eligible expenses, as you may be asked for proof of a qualified expense.

FLEXIBLE SPENDING ACCOUNT (FSA) IRS LIMITS

Annual Maximum Contributions	2025	Examples of covered expenses
Health Care Flexible Spending Account	\$3,300	Copays, deductibles, orthodontia, over-the-counter medicines and more.
Dependent Care Flexible Spending Account	\$5,000 per household	Day care, nursery school, elder care expenses and more.



WELCOME TO OPEN ENROLLMENT

VISION INSURANCE

Driving, reading, and interacting with technology are all activities you likely perform daily. Your ability to do all these activities depends on your vision and eye health. Regular vision exams help you maintain your vision as well as detect various health problems.

The Bartlett Hospital's vision insurance entitles you to specific eye care benefits.

If you seek the services of a provider listed in Premera's provider directory, your Standard plan benefits include the following:

Adult Vision Benefit:

- Vision exam is covered at 100% and limited to once per year
- \$200 maximum per year hardware allowance (glass lenses are allowed and do not accrue to maximum)

Pediatric Vision Benefit:

- Vision exam is covered at 100% and limited to once per year
- The following is covered at 100%: one pair of frames and lenses once per year or contact lenses every 12 months

YOUR COST—Vision Insurance

* *Bi-Weekly = 26 pay periods per year*

BI-WEEKLY PAYROLL DEDUCTION*	VISION PLAN
Employee Only	\$3.50**
Employee & Family	\$6.80**

** *Part-Time employees pay a prorated amount for this plan.*





WELCOME TO OPEN ENROLLMENT

DENTAL INSURANCE

In addition to protecting your smile, dental insurance helps pay for dental care and includes regular checkups, cleanings and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart.

The following chart outlines the dental benefits we offer, just like on the medical plan, you'll receive negotiated and contracted rates when using a network provider.

BENEFITS	BASE PLAN	BUY-UP PLAN
Deductible (per member)	\$50	\$50
Annual Maximum (per member) Preventive services do not accrue to maximum	\$2,000	\$3,000
Diagnostic & Preventive Services (Exams, cleanings, X-rays)	No charge	No charge
Basic Services (Fillings, simple extractions, stainless steel crowns)	20%, after deductible	20%, after deductible
Major Services (Oral surgery, root canal, gold and resin crowns)	50%, after deductible	20%, after deductible
Orthodontia (per member)	Excluded	50%, after deductible \$2,500 maximum per lifetime

YOUR COST—Dental Insurance

* *Bi-Weekly = 26 pay periods per year*

BI-WEEKLY PAYROLL DEDUCTIONS*	BASE PLAN	BUY-UP PLAN
Employee Only	\$0.00**	\$21.00**
Employee & Family	\$0.00**	\$34.50**

** *Part-Time employees pay a prorated amount for this plan.*





WELCOME TO OPEN ENROLLMENT

BASIC LIFE INSURANCE

Life insurance can help provide for your loved ones if something were to happen to you. Bartlett Hospital provides full-time employees with **\$10,000** in group life and accidental death and dismemberment (AD&D) insurance. Additionally, this policy also includes **\$10,000** in group life for your spouse and any eligible children.

Bartlett Hospital pays for the full cost of these benefits. Contact HR if you would like to update your beneficiary information (you are automatically named the beneficiary for the dependent coverage).

VOLUNTARY LIFE INSURANCE

While Bartlett Hospital offers basic life insurance, some individuals may want to purchase additional coverage. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future? Depending on your needs, you may want to consider buying supplemental coverage.

With voluntary life insurance, you are responsible for paying the full cost of coverage through bi-weekly payroll deductions. You can purchase coverage for yourself and your spouse in \$25,000 increments. The maximum amount for employees is \$300,000 or 7x Base Annual Salary. For a spouse, the maximum amount will be limited to your voluntary life and AD&D amount. For child(ren), there is a \$10,000 flat option. Please note that life and AD&D insurance are automatically purchased together.

For more information on plan coverage, rates & to enroll, go to: www.thebenefitsexpert.com/juneau

YOUR COST—Voluntary Life / AD&D Insurance

The chart below outlines the monthly costs of purchasing additional employee and spouse life / AD&D insurance coverage. Rates are per \$1,000 of elected coverage.

EMPLOYEE / SPOUSE—MONTHLY RATES*				CHILDREN	
Age	Per \$1,000	Age	Per \$1,000	MONTHLY RATE*	
<30	\$0.103	55-59	\$0.754	\$0.23 per \$1,000	
30-34	\$0.110	60-64	\$1.104	BENEFIT	
35-39	\$0.128	65-69	\$1.583	Birth to 6 months old: \$500	
40-44	\$0.185	70-74	\$2.242	6 months to 26 years old: \$10,000	
45-49	\$0.307	75-99	\$3.258		
50-54	\$0.485				

**Monthly rates will be calculated as bi-weekly (26 pay periods per year)*



WELCOME TO OPEN ENROLLMENT

VOLUNTARY DISABILITY INCOME BENEFITS

Bartlett Hospital offers employees optional short-term disability income benefits. Without disability coverage, your income will decrease if you miss work due to an injury or illness that occurs off the job.

In the event you become disabled, even temporarily, disability income benefits will provide a partial replacement of lost income. Please note, that disability payments may be offset by other sources of income. Contact HR or Cigna if you have further questions.

SHORT-TERM DISABILITY	BENEFIT SUMMARY
Benefit Paid	60% up to \$1,500 per week
Waiting Period (time between injury/illness to payment)	7 days
Maximum Period (from the date of injury/illness)	13 Weeks (includes Waiting Period)
Pre-Existing Condition Limitations	3 months prior / 12 months insured

Age Bracket	Rate per \$10 of benefit
0-54	\$0.52
55-59	\$0.584
60-64	\$0.68
65-99	\$0.744



For more information on plan coverage and rates,
please refer to www.thebenefitexpert.com/juneau



WELCOME TO OPEN ENROLLMENT

VOLUNTARY ACCIDENT INSURANCE

In the event of a covered accident, the plan pays **cash benefits** fast to help with the costs associated with out-of-pocket expenses and bills—expenses your medical insurance may not completely cover, including:

Accident Benefits Payable for (examples):

- Medical transportation
- Wheelchairs, crutches, other medical appliances
- Emergency room visits
- Surgery and anesthesia
- Bandages, stitches, and casts
- Includes accidents that happen on or off the job

Features:

- If you (or a covered dependent) have a qualifying wellness screening, you get \$50 per person, per year!
- Benefits are paid directly to you unless otherwise assigned
- Coverage is available for you, your spouse, and dependent children
- Coverage is portable (with certain stipulations)—that means you can take it with you if you change jobs or retire

YOUR COST—Voluntary Accident Insurance

BI-WEEKLY PREMIUM RATES*	
Tier Coverage	Premium
Employee	\$3.22
Employee and Spouse/DP	\$5.71
Employee and Child(ren)	\$7.77
Employee and Family	\$10.25

* Bi-Weekly = 26 pay periods per year



For more information on plan coverage and rates, please refer to www.thebenefitexpert.com/juneau



WELCOME TO OPEN ENROLLMENT

VOLUNTARY HOSPITAL INDEMNITY INSURANCE

Hospital Indemnity Insurance through Cigna which provides supplemental coverage to offset out-of-pocket expenses related to hospital stays. In the event of a hospital admission and any days spent inpatient, the plan pays cash benefits directly to you to help with any out-of-pocket expenses and bills.

Important Note: You can only enroll during Open Enrollment, unless you have a qualifying life event.

Benefits:

- When admitted as an inpatient to a hospital, the plan pays \$1,000 for the first day of your hospital stay
- You also receive \$200 per day for each day after that, up to 30 days.
- Both hospital and ICU admissions are covered.

Features:

- No waiting period, benefits pay the day of your admission
- Benefits are paid directly to you
- Coverage is available for you, your spouse, and dependent children
- Coverage is portable (with certain stipulations)—that means you can take it with you if you change jobs or retire

YOUR COST—Voluntary Hospital Indemnity Insurance

BI-WEEKLY PREMIUM RATES*	
Tier Coverage	Premium
Employee	\$7.16
Employee and Spouse/DP	\$14.38
Employee and Child(ren)	\$12.81
Employee and Family	\$20.03

* Bi-Weekly = 26 pay periods per year

For more information on plan coverage and rates, please refer to www.thebenefitsexpert.com/juneau





WELCOME TO OPEN ENROLLMENT

VOLUNTARY CRITICAL ILLNESS INSURANCE

With the Critical Illness plan, you receive cash benefits directly (unless otherwise assigned)—giving you the flexibility to help pay bills related to treatment or to help with everyday living expenses.

Critical Illness Benefits Payable for (examples):

- Cancer
- Heart Attack
- Stroke
- Major Organ Transplant
- End-Stage Renal Failure
- Coronary Artery Bypass Surgery
- Carcinoma in Situ

Features:

- Benefits are paid directly to you unless otherwise assigned
- Coverage is available for you, your spouse, and dependent children
- Coverage is portable (with certain stipulations)—that means you can take it with you if you change jobs or retire
- If you (or a covered dependent) have a qualifying wellness screening, you get paid \$50 per person, per year!

For rates, see
the next page.



WELCOME TO OPEN ENROLLMENT

YOUR COST—Voluntary Critical Illness Insurance

EMPLOYEE BI-WEEKLY PREMIUM RATES* (50% of employee issued benefit amount for children included)						
Age	\$10,000		\$20,000		\$30,000	
	Non-tobacco	Tobacco	Non-tobacco	Tobacco	Non-tobacco	Tobacco
Under 30	\$1.14	\$1.62	\$2.28	\$3.24	\$3.42	\$4.86
30-39	\$2.01	\$2.39	\$4.02	\$4.78	\$6.03	\$7.17
40-49	\$3.69	\$4.30	\$7.38	\$8.60	\$11.07	\$12.90
50-59	\$6.83	\$7.98	\$13.66	\$15.96	\$20.49	\$23.94
60-69	\$12.73	\$14.93	\$25.46	\$29.86	\$38.19	\$44.79
70-79	\$15.47	\$16.80	\$30.94	\$33.60	\$46.41	\$50.40
80+	\$16.74	\$17.73	\$33.48	\$35.46	\$50.22	\$53.19

Spouse / Domestic Partner BI-WEEKLY PREMIUM RATES*						
Employee Age	\$5,000		\$10,000		\$15,000	
	Non-tobacco	Tobacco	Non-tobacco	Tobacco	Non-tobacco	Tobacco
Under 30	\$0.57	\$0.81	\$1.14	\$1.62	\$1.71	\$2.43
30-39	\$1.01	\$1.20	\$2.01	\$2.39	\$3.02	\$3.59
40-49	\$1.85	\$2.15	\$3.69	\$4.30	\$5.54	\$6.45
50-59	\$3.42	\$3.99	\$6.83	\$7.98	\$10.25	\$11.97
60-69	\$6.37	\$7.47	\$12.73	\$14.93	\$19.10	\$22.40
70-79	\$7.74	\$8.40	\$15.47	\$16.80	\$23.21	\$25.20
80+	\$8.37	\$8.87	\$16.74	\$17.73	\$25.11	\$26.60

* Bi-Weekly = 26 pay periods per year

For more information on plan coverage and rates,
please refer to www.thebenefitsexpert.com/juneau



Pet insurance



Pet-loving employees can fetch the best health coverage for their pets with My Pet Protection ChoiceSM, available only through workplace benefit programs.

Nationwide offers two ready-made employee plans, plus the ability to customize a coverage plan for individual pets and their specific care needs.¹

Pet protection when it matters most

Nationwide's pet insurance plans cover:

- Accidents and injuries
- Common illnesses
- Serious illnesses
- Chronic illnesses
- Hereditary conditions
- Testing and diagnostics
- Procedures
- Holistic and alternative care
- And more!

Coverage includes emergency care and specialists. No networks, no pre-approval, no problem.

What's the difference between accident, illness and wellness coverage?



Accident coverage

Support for unexpected injuries



Illness coverage

Support for when pets get sick



Wellness coverage

Support for proactive care

Easy to use, easy to understand

Using a Nationwide pet insurance plan is easy:

- Visit any vet, anywhere
- Submit a claim from any device
- Get reimbursed for eligible expenses once the deductible is met








Did you know? Nationwide is the industry's first provider of coverage for birds and exotic pets.



Get a quote at [PetsNationwide.com](https://www.PetsNationwide.com) • 877-738-7874

How does My Pet Protection ChoiceSM compare?

My Pet Protection Choice SM	Accident & Illness	Accident, Illness & Wellness	Customizable	My Pet Protection	My Pet Protection with Wellness500
Annual deductible options	\$250	\$250	\$100 to \$500	\$250	\$250
Reimbursement level	80%	80%	50%, 70% or 80%	50% or 70%	50% or 70%
 Accident coverage	✓	✓	✓	✓	✓
Annual maximum	\$5,000	\$5,000	\$2,500 or \$5,000	\$7,500 maximum annual benefit total for all conditions	\$7,500 maximum annual benefit total for all conditions
Broken bones, animal attack, hit by car, poisoning, heatstroke, and more	✓	✓	✓	✓	✓
 Illness coverage	✓	✓	Optional	✓	✓
Annual maximum	\$5,000	\$5,000	\$2,500 or \$5,000	\$7,500 maximum annual benefit total for all conditions	\$7,500 maximum annual benefit total for all conditions
Ear infections, diabetes, vomiting, allergies, cancer, and more	✓	✓	✓	✓	✓
 Hereditary & congenital coverage	✓	✓	Optional when purchased with illness coverage	✓	✓
Annual maximum	\$5,000	\$5,000	\$2,500 or \$5,000	\$7,500 maximum annual benefit total for all conditions	\$7,500 maximum annual benefit total for all conditions
Hip dysplasia, cherry eye, elbow dysplasia, umbilical hernia, brachycephalic syndrome, and more	✓	✓	✓	✓	✓
 Wellness coverage (for dogs & cats)		✓	Optional		✓
Annual maximum		\$450	\$450 or \$800		\$500
Vaccination or titer, fecal test, deworming, microchip, health certificate, heartworm or FeLV/FIV test, flea control or heartworm prevention, and more		✓	✓		✓
Spay/neuter or dental ³ and one additional test ⁴			✓		✓
 Wellness coverage (for birds) ⁵			Optional		✓
Annual maximum			\$200, \$300 or \$500		\$500
Panel or titer, parasite/fecal test, CBC, culture, parasite prevention treatment, beak trim, nail trim, wing trim and more			✓		✓

With our flexible new My Pet Protection ChoiceSM customizable plan, pet parents can dial coverage levels up or down so they're paying only for what they need.



Get a quote at [PetsNationwide.com](https://www.petsnationwide.com) • 877-738-7874

[1] Guaranteed issuance means any new pets enrolling into a My Pet Protection Choice plan are eligible for enrollment regardless of health status. Guaranteed issuance does not mean guaranteed coverage since certain exclusions could apply. [2] Some exclusions may apply. Certain coverages may be excluded due to pre-existing conditions. See policy documents for a complete list of exclusions and any annual limits that may apply. Plans may not be available in all states. Policy eligibility may vary. [3] Coverage for spay/neuter or dental starts 90 days after the original policy term effective date. [4] One additional test of the following: health screen (blood test), radiograph (X-ray), electrocardiogram (EKG). [5] Wellness coverage not available for reptiles or exotic pets.

All plans require accident coverage; additional coverage for illness, hereditary & congenital, and wellness is optional. Optional coverage for behavior, prescription food and prescription supplements may also be available. Optional cruciate coverage may be added after the first year of coverage; not available in all states. Pre-existing conditions are not covered.

Products underwritten by Veterinary Pet Insurance Company (CA), Columbus, OH; National Casualty Company (all other states), Columbus, OH. Agency of Record: DVM Insurance Agency. All are subsidiaries of Nationwide Mutual Insurance Company. Subject to underwriting guidelines, review and approval. Products and discounts not available to all persons in all states. Insurance terms, definitions and explanations are intended for informational purposes only and do not in any way replace or modify the definitions and information contained in individual insurance contracts, policies or declaration pages, which are controlling. Nationwide, the Nationwide N and Eagle, Nationwide is on your side, and My Pet Protection are service marks of Nationwide Mutual Insurance Company. ©2025 Nationwide. 24GRP10277G.





WELCOME TO OPEN ENROLLMENT

457 DEFERRED COMPENSATION PLAN

GET TO KNOW YOUR 457 PLAN

Your pension and Social Security may go far, but you will likely need more income for a truly comfortable future. That's where your 457 deferred compensation plan comes in—see why it matters to you! To get started go to : www.msqplanservices.org/myplan/302663 All you need is your Plan number: **302663**

1 It's easy to contribute

- Make automatic paycheck contributions.
- Change your contributions any time.

2 Get tax benefits along the way

- Pre-tax contributions lower your tax liability, possibly increasing your take-home pay.
- Delay all taxes, until you take money out.

3 A wide range of investments are available

- You control investment decisions, choosing from available options.
- Consider a diversified target-date fund or build your own portfolio. Get help with Guided Pathways® Advisory Services: www.icmarc.org/guidedpathways.

4 Take out what you need

- You control withdrawals upon separation from service with your employer.*
- Only 457 plans have no early withdrawal penalty regardless of your age.**

* Depending on your plan's rules, withdrawal and loan options may be available while you're still working.

** The penalty may apply to non-457 plan assets rolled into a 457 plan and subsequently withdrawn prior to age 59½.

HOW MUCH CAN I CONTRIBUTE?

For 2025, you can contribute up to:

- \$23,500
- \$7,500 for over 50 catch up
- \$11,250 for 60-63 catch up
- You may also qualify for pre-retirement catch-up contributions.

Reminder: you may be able to contribute accrued sick or vacation leave.

Can't save that much? Even small savings can really add up—start with as little as \$10 per paycheck.

The sooner you save, the more your money can grow—see how at www.icmarc.org/costofdelay.

Already enrolled? Aim to save more—see how at www.icmarc.org/savingsboost.

GET HELP ONLINE

- Manage your account at: www.icmarc.org/login
- Find tips and tools to help you save, invest, and retire at: www.icmarc.org/education

Your ICMA-RC representative can help.

Jeff Spindle
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MissionSquare
RETIREMENT

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WELCOME TO OPEN ENROLLMENT

The FY26 CBJ Employee Parks & Recreation Pass provides benefit-eligible employees (CBJ/BRH/JSD Admin) and their immediate families with free access to all Parks & Recreation facilities. This pass grants unlimited entry to public drop-in programs at:

- Augustus G. Brown Swimming Pool
- Dimond Park Aquatic Center
- Dimond Park Field House
- Mount Jumbo Gym
- Treadwell Ice Arena



The CBJ Employee Parks & Recreation Pass does not include private rentals or registrations such as swim lessons, Start Smart, adult volleyball, youth sports, Parent & Tot, etc.

To receive a pass for yourself and/or your family, **you must elect it during open enrollment** by selecting one of the following options below: Employee OR Employee + Family. Passes will only be issued to those who complete the enrollment process by the open enrollment deadline. **It is the employee's responsibility to ensure they make their selection before open enrollment closes—passes will not be added after the deadline under any circumstances.**

All FY26 CBJ Employee Park & Rec Passes will be active from July 1, 2025, through June 30, 2026. If an employee separates during the fiscal year, the pass(es) will become inactive on the last day of employment.



The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are possible. In case of discrepancy between the guide and actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about the guide, please contact HR.

