



CREDIT UNION
OF
COLORADO
A FEDERAL CREDIT UNION

2022

BENEFITS eGUIDE

JANUARY 1 - DECEMBER 31, 2022

Welcome

Your benefits are an important part of your overall compensation. We are pleased to offer a comprehensive array of valuable benefits to protect your health, your family and your way of life. This guide answers some of the basic questions you may have about your benefits. Please read it carefully, along with any supplemental materials you receive.

Eligibility

You are eligible for benefits if you work 20 or more hours per week. You may also enroll your eligible family members under certain plans you choose for yourself. Eligible family members include:

- ▶ Your legally married spouse
- ▶ Your registered domestic partner (RDP) and/or his/her children, where applicable by state law
- ▶ Your children who are your biological children, stepchildren, adopted children or children for whom you have legal custody (age restrictions may apply). Disabled children age 26 or older who meet certain criteria may continue on your health coverage.

When Coverage Begins

- ▶ **New Hires:** You must complete the enrollment process within 30 days of your date of hire. If you enroll on time, coverage is effective on the first of the month following your date of hire.
- ▶ If you fail to enroll on time, you will miss out on having benefit coverage for the current year (except for company-paid benefits).
- ▶ **Open Enrollment:** Changes made during Open Enrollment are effective January 1 - December 31, 2022.

Required Information—When you enroll, you will be required to enter a Social Security number (SSN) for all covered dependents. The Affordable Care Act (ACA), otherwise known as health care reform, requires the company to report this information to the IRS each year to show that you and your dependents have coverage. This information will be securely submitted to the IRS and will remain confidential.

Choose Carefully!

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualified life event during the year. Following are examples of the most common qualified life events:

- ▶ Marriage or divorce
- ▶ Birth or adoption of a child
- ▶ Child reaching the maximum age limit
- ▶ Death of a spouse, RDP, or child
- ▶ You lose coverage under your spouse's/RDP's plan
- ▶ You gain access to state coverage under Medicaid or CHIP

Making Changes

To make changes to your benefit elections, you must contact Department of People within 30 days of the qualified life event (including newborns). Be prepared to show documentation of the event such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

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Enrollment

Go to the Pay and Benefits bird on the Department of People Chirp page. There, you will find detailed information about the plans available to you and instructions for enrolling in benefits on Paycom.

Medical

We are proud to offer you a choice among three different medical plans that provide comprehensive medical and prescription drug coverage. The plans also offer many resources and tools to help you maintain a healthy lifestyle. Following is a brief description of each plan.

Cigna High Deductible Health Plan (HDHP)

Like the PPO plan, a High-Deductible Health Plan (HDHP) gives you the freedom to seek care from the provider of your choice. You will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Cigna Open Access Plus (OAP) network. In addition, the HDHP comes with a health savings account (HSA) that allows you to save pre-tax dollars¹ to pay for any qualified health care expenses as defined by the IRS, including most out-of-pocket medical, prescription drug, dental and vision expenses. For a complete list of qualified health care expenses, visit www.irs.gov/pub/irs-pdf/p502.pdf.

Here's how the plan works:

- ▶ **Annual Deductible:** You must meet the entire annual deductible before the plan starts to pay for non-preventive medical and prescription drug expenses.
- ▶ **Coinsurance:** Once you've met the plan's annual deductible, you are responsible for a percentage of your medical expenses, which is called coinsurance. For example, the plan may pay 80 percent and you may pay 20 percent.
- ▶ **Out-of-Pocket Maximum:** Once your deductible and coinsurance add up to the plan's annual out-of-pocket maximum, the plan will pay 100 percent of all eligible covered services for the rest of the calendar year.

Health Savings Account (HSA)

For those enrolling in an HDHP medical plan(s) you may contribute to your HSA through pre-tax payroll deductions to help offset your annual deductible and pay for qualified health care expenses. **To be eligible for the HSA, you cannot be covered through Medicare Part A or Part B or TRICARE programs. See the plan documents for full details.**

Your HSA is yours for life. The money is yours to spend or save, regardless of whether you change health plans², retire or leave the company. There is no "use it or lose it" rule. Your account grows tax free over time as you continue to roll over unused dollars from year to year. You decide how or if you want to spend your HSA funds. You can use them to pay for you and your dependents' doctor's visits, prescriptions, braces, glasses—even laser vision correction surgery.

- ▶ **CUofCO HSA:** The credit union offers a free HSA to its employees and members. The account comes with a debit card and an easy to access online banking portal.
- ▶ **Empower HSA:** The Empower HSA gives employees with a high balance HSA the ability to invest funds from their account once there is a \$2,000 cash balance. The account has a \$2.75 maintenance fee for cash balances under \$3,000 and a small investment fee on investments³.
- ▶ **CUofCO Contributions:** CUofCO will contribute a lump sum amount into your HSA at the beginning of the calendar year- \$400 for single coverage and \$800 for non-single coverage. CUofCO will contribute an additional \$200 for single enrollment and \$450 for family enrollment on an annual basis if you participate in any of the approved wellness activities.

Important: Your contributions, in addition to the company's contributions, may not exceed the annual IRS limits listed below.

HSA Contribution Limit	2022
Employee Only	\$3,650
Family (employee + 1 or more)	\$7,300
Catch-up (age 55+)	\$1,000

¹Tax free under federal tax law; state taxation rules may apply

²You must be enrolled in a qualified health plan to contribute to an HSA

³Monthly investment fee is calculated based on the average daily balance. For example, if the average daily investment balance is \$5,000, the investment fee for that month is \$1.50. The monthly investment fee will never exceed \$10 in any given month.

Cigna PPO

This plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Cigna Open Access Plus (OAP) network. The calendar-year deductible must be met before certain services are covered.

The PPO plan has copayments that apply to certain services. A copayment is a fixed amount (for example \$25) you pay for a covered service. The amount can vary by the type of covered health care service.

Medical

Following is a high-level overview of the coverage available. For complete coverage details, please refer to the Summary Plan Description (SPD).

Key Medical Benefits	Basic HDHP - HSA		Standard HDHP - HSA		PPO Plan	
	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹	In-Network	Out-of-Network ¹
Deductible (per calendar year)						
Individual / Family	\$6,650 / \$13,300 ²	\$6,650 / \$13,300 ²	\$3,000 / \$6,000 ³	\$3,000 / \$6,000 ³	\$1,000 / \$3,000 ²	\$2,000 / \$6,000 ²
Out-of-Pocket Maximum (per calendar year)						
Individual / Family	\$6,650 / \$13,300 ²	\$12,000 / \$24,000 ²	\$3,000 / \$6,000 ³	\$6,000 / \$12,000 ³	\$3,000 / \$9,000 ²	\$6,000 / \$18,000 ²
Company Contribution to Your Health Savings Account (HSA) (per calendar year)						
Individual / Family	Lump Sum: \$400 / \$800 Wellness: \$200 / \$450		Lump Sum: \$400 / \$800 Wellness: \$200 / \$450		N/A	
Covered Services						
Office Visits (physician/specialist)	0%*	40%*	0%*	30%*	\$25/ \$50	50%*
Routine Preventive Care	No charge	Not covered	No charge	Not covered	No charge	Not covered
Outpatient Diagnostic (lab/X-ray)	0%*	40%*	0%*	30%*	20%*	50%*
Complex Imaging	0%*	40%*	0%*	30%*	20%*	50%*
Chiropractic	0%*	40%*	0%*	30%*	20%*	50%*
Ambulance	0%*		0%*		20%*	
Emergency Room	0%*		0%*		\$350 copay	
Urgent Care Facility	0%*	40%*	0%*	30%*	\$50 copay	50%*
Inpatient Hospital Stay	0%*	40%*	0%*	30%*	20%*	50%*
Outpatient Surgery	0%*	40%*	0%*	30%*	20%*	50%*
Prescription Drugs (Tier 1 / Tier 2 / Tier 3 / Tier 4)						
Retail Pharmacy (30-day supply)	0%*	Not covered	0%*	Not covered	\$10 / \$30 / \$60 / 20% to \$150 maximum ⁴	Not covered
Mail Order (90-day supply)	0%*	Not covered	0%*	Not covered	\$25 / \$75 / \$150 / N/A	Not covered

Coinsurance percentages and copay amounts shown in the above chart represent what the member is responsible for paying.

*Benefits with an asterisk (*) require that the deductible be met before the Plan begins to pay.

To be eligible for the HSA, you cannot be covered through Medicare Part A or Part B or TRICARE programs. See the plan documents for full details.

1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.

2. For each individual, the individual deductible, coinsurance, and out-of-pocket must be met before the plan begins to pay. If other family members are on the plan, each must meet their own individual deductible until the family deductible or out-of-pocket maximum has been met collectively.

3. If you enroll one or more family members, you must meet the full family deductible and out-of-pocket maximum before the plan starts to pay eligible covered services for any one individual.

4. The cost of certain specialty pharmacy drugs will not be applied toward satisfying the participant's out-of-pocket maximum. Employees need to enroll in the SaveOnSP program, and will thereby have a \$0 copay for those specialty medications.

Regenexx- New!

Regenexx uses your body's natural healing agents to replace the need for up to 70% of elective orthopedic surgeries. Your stem cells and blood platelets are concentrated in an on-site lab and injected under image guidance into the location of a specific injury. With Regenexx, members can get back to doing what they love without the lengthy recovery or invasive surgery. For more information, call 866-962-6905 or visit regenexxbenefits.com/cuofco. If you are interested in moving forward with a Regenexx procedure, please reach out to Department of People to ensure your claim is processed correctly.

Dental

Cigna DPPO

This plan offers you the freedom and flexibility to use the dentist of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a dentist who participates in the network.

Following is a high-level overview of the coverage available.

Key Dental Benefits	DPPO	
	In-Network	Out-of-Network ¹
Deductible (per calendar year)		
Individual / Family	\$50 / \$150	
Benefit Maximum (per calendar year; preventive, basic, and major services combined)		
Per Individual	\$1,500	
Covered Services		
Preventive Services	No charge	
Basic Services	0%*	
Major Services	50%*	
Orthodontia (Child Only)	50% to \$1,000 Lifetime Maximum Benefit	

Coinurance percentages shown in the above chart represent what the member is responsible for paying.

*Benefits with an asterisk (*) require that the deductible be met before the Plan begins to pay.

1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.

Vision

We are proud to offer you a vision plan.

The EyeMed Insight Network vision plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the EyeMed Insight Network.

Following is a high-level overview of the coverage available.

Key Vision Benefits	In-Network	Out-of-Network Reimbursement
Exam (once every 12 months)	\$20 copay	Up to \$30
Materials Copay	\$20 copay	N/A
Lenses (once every 24 months) Single Vision Bifocal Trifocal	Covered in full after materials copay	Up to \$25
		Up to \$40
		Up to \$60
Frames (once every 24 months)	Covered up to \$130 allowance, then 20% discount	Up to \$65
Contact Lenses (once every 24 months; in lieu of glasses)	Covered up to \$130 allowance, then 15% discount; Up to \$40 for contact lens fit and follow-up exam	Up to \$104



Cost of Benefits - Per Pay Period

Your contributions toward the cost of benefits are automatically deducted from your paycheck before taxes. The amount will depend upon the plan you select and if you choose to cover eligible family members. There are 24 pay periods in the calendar year.

Medical - Per Pay Period Costs

Coverage Tier	Basic HDHP - HSA			Standard HDHP - HSA			Open Access Plus PPO		
	Total Cost	CUofCO Cost	Employee Cost	Total Cost	CUofCO Cost	Employee Cost	Total Cost	CUofCO Cost	Employee Cost
Employee Only	\$244.94	\$235.00	\$9.94	\$287.42	\$235.00	\$52.42	\$326.66	\$235.00	\$91.66
Employee + Spouse	\$514.38	\$415.00	\$99.38	\$603.58	\$415.00	\$188.58	\$685.97	\$415.00	\$270.97
Employee + Child(ren)	\$465.40	\$405.00	\$60.40	\$546.11	\$405.00	\$141.11	\$620.64	\$405.00	\$215.64
Family	\$734.83	\$590.00	\$144.83	\$862.26	\$590.00	\$272.26	\$979.96	\$590.00	\$389.96

Dental - Per Pay Period Costs

Coverage Tier	Cigna Dental DPPO Plan		
	Total Cost	CUofCO Cost	Employee Cost
Employee Only	\$18.56	\$9.55	\$9.01
Employee + Spouse	\$37.02	\$10.84	\$26.19
Employee + Child(ren)	\$37.01	\$10.84	\$26.17
Family	\$77.84	\$13.72	\$64.13

Vision - Per Pay Period Costs

Coverage Tier	EyeMed Vision Plan
	Employee Paid Total Cost
Employee Only	\$2.47
Employee + Spouse	\$4.70
Employee + Child(ren)	\$4.95
Family	\$7.27



Flexible Spending Accounts (FSAs)

We provide you with an opportunity to participate in up to three different flexible spending accounts (FSAs) administered through Rocky Mountain Reserve. FSAs allow you to set aside a portion of your income, before taxes, to pay for qualified health care and/or dependent care expenses. Because that portion of your income is not taxed, you pay less in federal income, Social Security and Medicare taxes.

Health Care FSA

For 2022, you may contribute up to \$2,750 to cover qualified health care expenses incurred by you, your spouse and your children up to age 26. Some qualified expenses include:

- ▶ Coinsurance
- ▶ Copayments
- ▶ Deductibles
- ▶ Prescriptions
- ▶ Dental treatment
- ▶ Orthodontia
- ▶ Eye exams/eyeglasses
- ▶ Lasik eye surgery

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p502.pdf.

Limited-Purpose Health Care FSA (for HSA participants)

If you enroll in the HSA medical plan, you may only participate in a limited-purpose Health Care FSA. This type of FSA allows you to be reimbursed for eligible dental, orthodontia and vision expenses while preserving your HSA funds for eligible medical expenses.

Dependent Care FSA

For 2022, you may contribute up to \$5,000 (per family) to cover eligible dependent care expenses (\$2,500 if you and your spouse file separate tax returns). Please note that both you and your spouse must be working to be eligible for this benefit. Some eligible expenses include:

- ▶ Care of a dependent child under the age of 13 by babysitters, nursery schools, pre-school or daycare centers
- ▶ Care of a household member who is physically or mentally incapable of caring for him/herself and qualifies as your federal tax dependent

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p503.pdf.

FSA Rules

YOU MUST ENROLL EACH YEAR TO PARTICIPATE.

Because FSAs can give you a significant tax advantage, they must be administered according to specific IRS rules:

Health Care FSA: Unused funds up to \$550 from one year can carry over to the following year. Carryover funds will not count against or offset the amount that you can contribute annually. Unused funds over \$550 will **NOT** be returned to you or carried over to the following year.

Dependent Care FSA: This is a “use it or lose it” plan and does not roll over.

Maximum contribution amount is established by the IRS and your employer each year. See plan document for details.

Life and AD&D Insurance

Life insurance provides your named beneficiary(ies) with a benefit in the event of your death.

Accidental Death and Dismemberment (AD&D) insurance provides specified benefits to you in the event of a covered accidental bodily injury that directly causes dismemberment (i.e., the loss of a hand, foot or eye). In the event that your death occurs due to a covered accident, both the life and the AD&D benefit would be payable.

Basic Life/AD&D (Company-paid)

This benefit is provided at **NO COST** to you through Voya.

Benefit Amount	1x annual salary up to \$200,000
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Supplemental Life/AD&D (Employee-paid)

If you determine you need more than the basic coverage, you may purchase additional coverage through Voya for yourself and your eligible family members.

	Benefit Option	Guaranteed Issue*
Employee	\$10,000 increments up to \$300,000	\$100,000
Spouse	\$10,000 increments up to \$100,000 or 50% of employee's amount	\$30,000
Child(ren)	Birth to 6 months: \$1,000; 6 months to age 23: \$10,000	\$10,000

*During your initial eligibility period only, you can receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.

Disability Insurance

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness.

Short-Term Disability

Provided at **NO COST** to you through Voya.

Benefit Percentage	66 2/3%
Weekly Benefit Maximum	\$1,500
When Benefits Begin	After 7 th day of disability
Maximum Benefit Duration	13 weeks

Long-Term Disability

Provided at **NO COST** to you through Voya and Unum.

LTD Plan Design (Voya)	60% to \$10,000/month
IDI Plan Design (Unum)*	60% less LTD up to benefit cap \$10,000/month
When Benefits Begin	After 90 th day of disability
Maximum Benefit Duration	Social Security Normal Retirement Age or age 65

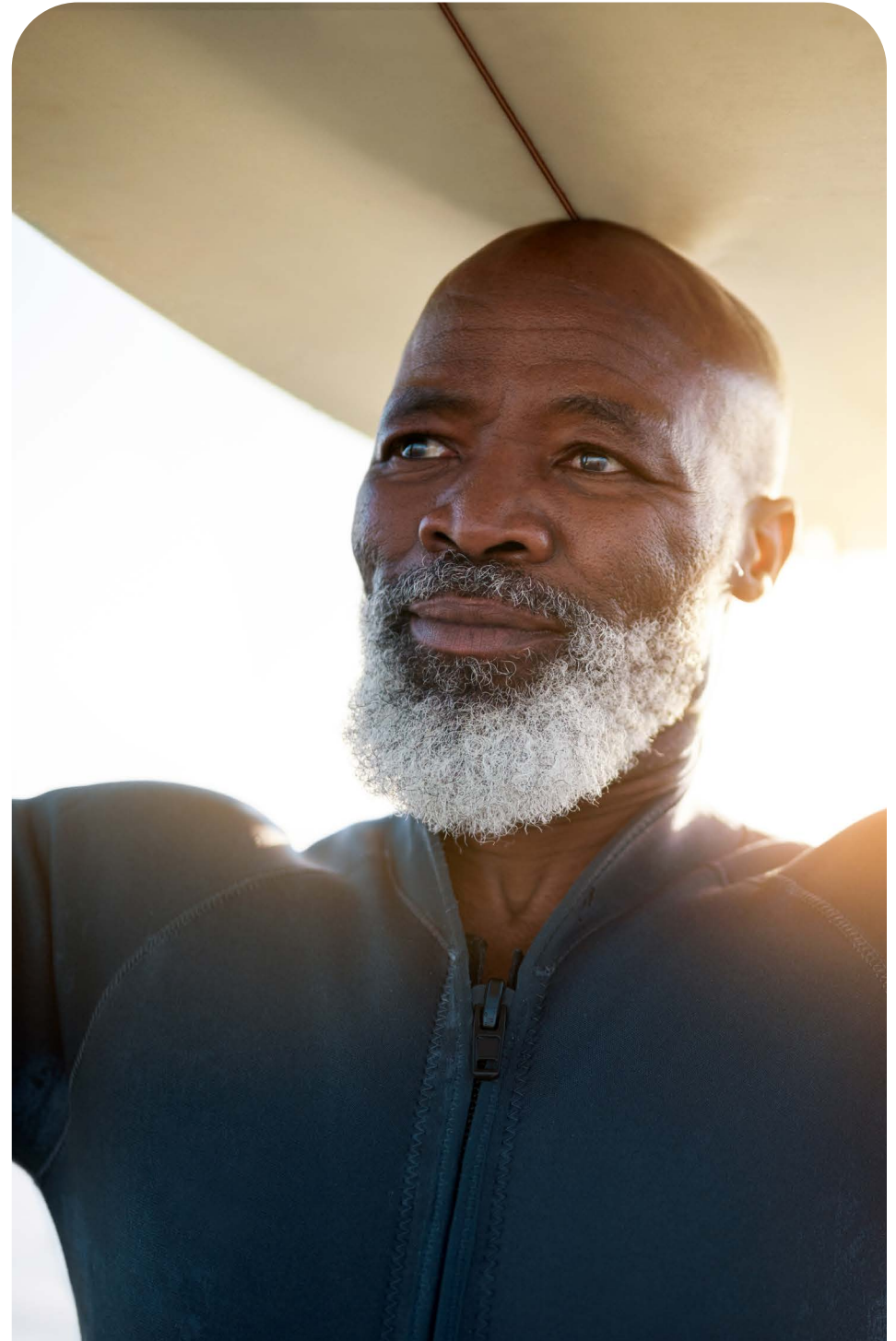
*Unum IDI is only provided to employees making over \$100,000 annually

Employee Assistance Program

Life is full of challenges, and sometimes balancing it is difficult. We are proud to provide a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The employee assistance program (EAP) is provided at **NO COST** to you through Mines & Associates.

The EAP can help with the following issues, [EAP Benefits](#) among others:

- ▶ Mental health
- ▶ Relationships or marital conflicts
- ▶ Child and eldercare
- ▶ Substance abuse
- ▶ Grief and loss
- ▶ Legal or financial issues
- ▶ Assistance for you and your household members
- ▶ Up to eight (8) in-person sessions with a counselor per issue, per year, per individual
- ▶ Unlimited toll-free phone access and online resources
- ▶ 4 telephonic wellness coaching sessions



Voluntary Benefits

Our benefit plans are here to help you and your family live well—and stay well. But did you know that you can strengthen your coverage even further? It's true! Our voluntary benefits through Aflac are designed to complement your health care coverage and allow you to customize our benefits to you and your family's needs. The best part? Benefits from these plans are paid directly to you! Coverage is also available for your spouse and dependents.

You can enroll in these plans during Open Enrollment—they're completely voluntary, which means you are responsible for paying for coverage at affordable group rates.

Accident Insurance

Accident insurance can soften the financial impact of an accidental injury by paying a benefit to you to help cover the unexpected out-of-pocket costs related to treating your injuries.

Critical Illness

Did you know that the average total out-of-pocket cost related to treating a critical illness is over \$7,000¹? With critical illness insurance, you'll receive a lump-sum benefit if you are diagnosed with a covered condition that you can use however you would like, including to help pay for: treatment (e.g. experimental), prescriptions, travel, increased living expenses, and more.

Hospital Indemnity Insurance

The average cost of a hospital stay is \$10,000²—and the average length of a stay is 4.8 days³. Hospital indemnity insurance can help reduce costs by paying you or a covered dependent a benefit to help cover your deductible, coinsurance and other out-of-pocket costs due to a covered sickness or injury related hospitalization.

1. MetLife Accident and Critical Illness Impact Study, October 2013

2. Costs for Hospital Stays in the United States, 2011. HCUP Statistical Brief #168, December 2013. Agency for Healthcare Research and Quality, Rockville, MD.

3. National Hospital Discharge Survey: 2010



Valuable Extras

Home and Auto Insurance

HUB International Insurance Services is proud and excited to offer Credit Union of Colorado employees access to HUB Personal Lines Insurance. HUB offers all lines of coverage for our personal coverage such as home, auto, motorcycles, boat and RV. HUB International represents the very best carriers and can tailor your coverage to meet your specific needs. We have offices throughout Colorado near all of the Credit Union of Colorado locations. Find out by calling 888-795-0300 to talk to a HUB Representative.

Pet Insurance

Pet ownership has steadily increased for the past 20 years. In fact, 75% of US employees own a pet and 78% of pet owners say their pet is part of the family. With pet care costs increasing 68% over the last decade, pet insurance has become increasingly popular. The Nationwide pet insurance policy makes it easy to keep your pets healthy and reduce financial stress at the same time.

Key features:

- ▶ Visit any licensed veterinarian
- ▶ Pay for your pet's treatment at the time of service
- ▶ Submit your vet bill and claim form to Nationwide through email, fax, mail, or through their convenient online portal
- ▶ Get reimbursed up to 90% of your bill up to \$7,500 after meeting your \$250 annual deductible
- ▶ Pet insurance is available for dogs, cats, birds, exotic pets, reptiles, goats and pigs
- ▶ Exclusions include pre-existing conditions, behavioral training/treatment/therapy that is not prescribed by a licensed vet, dietary or nutritional supplements, fees not directly related to veterinary services, diagnosis/ treatment that is experimental/ investigational
- ▶ Affordable premiums are conveniently deducted directly from your paycheck

To find more information, premiums, and to enroll, please visit <https://benefits.petinsurance.com/cuofco> or call 877-738-7874.

Discount Marketplace

Enjoy discounts, rewards and perks on thousands of the brands you love in a variety of categories:

- ▶ Travel
- ▶ Auto
- ▶ Electronics
- ▶ Apparel
- ▶ Local Deals
- ▶ Education
- ▶ Entertainment
- ▶ Restaurants
- ▶ Health and Wellness
- ▶ Beauty and Spa
- ▶ Tickets
- ▶ Sports & Outdoors

It's easy to access and start saving!

1. Visit: www.cuofco.benefithub.com
2. Create an account using this unique referral code: B5RJBN
3. Enjoy your savings!



Retirement Benefits

401(k): CUofCO contributes 5% of your Base Pay to the 401(k) plan. Additionally, CUofCO will match 50% of the first 5% that you contribute; totaling up to a 7.5% match. Vesting occurs gradually reaching 100% after 5 years.

457(b): CUofCO offers a 457(b) plan to managers, directors and senior management. Eligible employees can elect to contribute to a 457(b) in addition to contributing to a 401(k) plan.

Time Off Benefits

Vacation

Directors and Senior Management Team: Unlimited

Full-Time (40 Hours): Vacation time is accrued based on tenure

Part-Time (Less than 40 Hours): Vacation accrues based on hours worked and tenure

Years of Service for Full-Time	
0-5 years	8 hours/month, up to 12 days per year
6-10 years	10 hours/month, up to 15 days per year
11-15 years	12 hours/month, up to 18 days per year
16-20 years	14 hours/month, up to 21 days per year
21 years and over	16 hours/month, up to 24 days per year

Vacation Sellback: Opportunity to sell back accrued vacation once per calendar year.

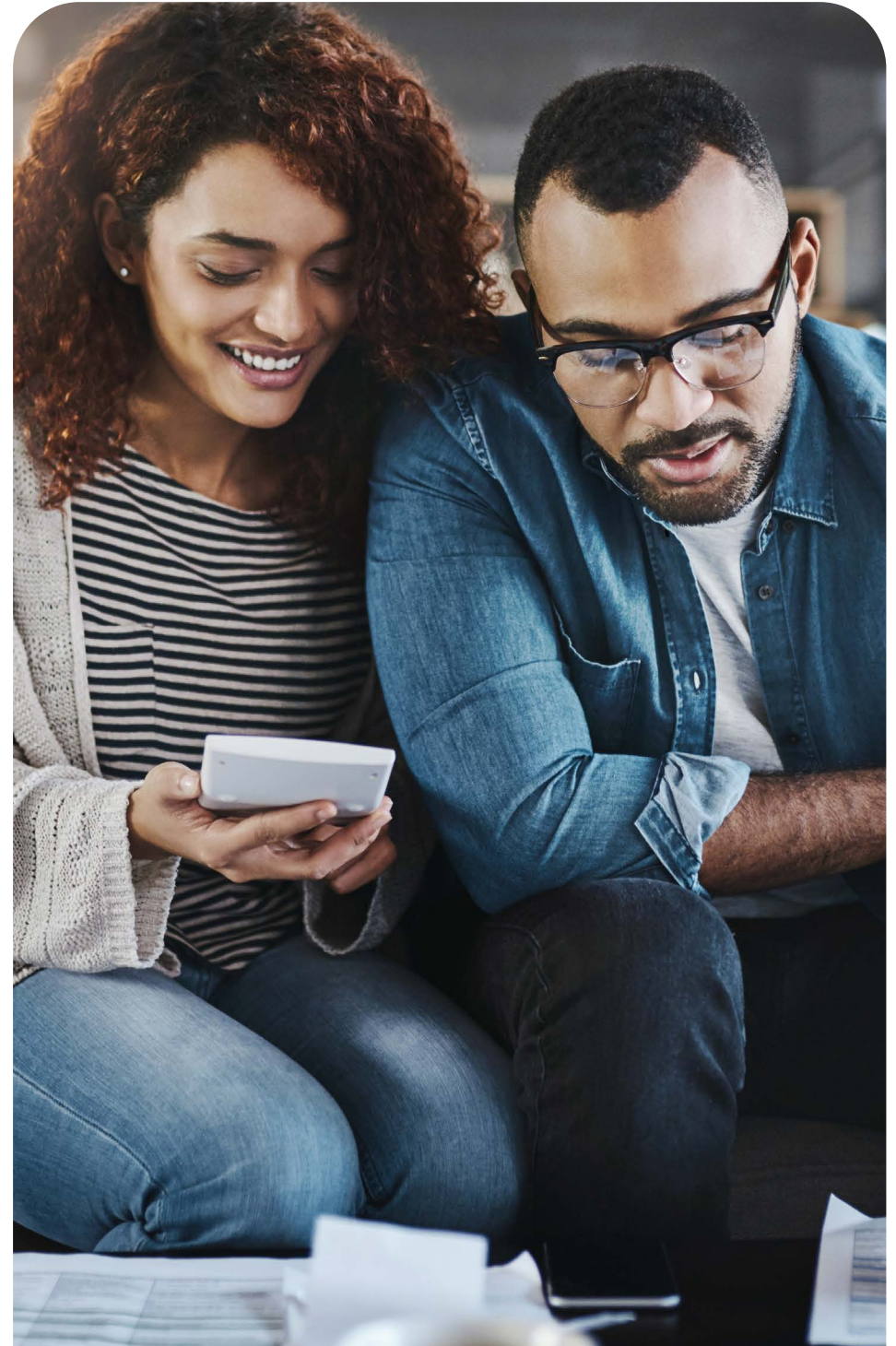
Sick Time

Directors and Senior Management Team: Unlimited

Full-Time (40 Hours): 2.67 hour accrual per pay period (64 hours annually)

Part-Time (Less than 40 Hours): Sick time accrues based on hours worked

- ▶ **5 Day Rule:** Eligible employees receive, in addition to vacation time, 5 consecutive company paid days off per year
- ▶ **Volunteer Time Off:** 1 day per calendar year (8 Hours), plus various Employer sponsored events
- ▶ **Holidays:** Up to 11 Federal holidays observed each year
- ▶ **Bereavement Time Off:** 5 days paid for immediate family members and 3 days paid for non-immediate



Contact Information

Coverage	Carrier	Phone #	Website/Email
Medical	Cigna	866-494-2111	www.mycigna.com
HSA with Investment	Optum Bank through Empower Retirement	800-331-5455	www.empowermyretirement.com
Orthopedic Regenerative Medicine	Regenexx	866-962-6905	regenexxbenefits.com/cuofco
Dental	Cigna Dental	866-494-2111	www.mycigna.com
Vision	EyeMed	866-939-3633	www.eyemed.com
Flexible Spending Account (FSA)	Rocky Mountain Reserve	888-722-1223	www.rockymountainreserve.com
Life/AD&D	Voya	800-955-7736	www.voya.com
Short Term Disability (STD) Long Term Disability (LTD)	Voya	888-305-0602	www.voya.com
Individual Disability	Unum	866-679-3054	www.unum.com
Employee Assistance Program (EAP)	Mines & Associates	800-873-7138	www.minesandassociates.com Company Code: cuofco
Voluntary Benefits	Aflac Keanu Vela	800-433-3036 720-207-2347	www.aflacgroupinsurance.com keanu.vela@hubinternational.com
Benefits Claims Advocate	Shana Trujillo, HUB International	720-207-2354	shana.trujillo@hubinternational.com
Home and Auto Group Insurance	HUB Personal Lines Insurance	888-795-0300	www.hubinternational.com
Pet Insurance	Nationwide	877-738-7874	www.petinsurance.com https://benefits.petinsurance.com/cuofco
Discount Marketplace	Discount Marketplace	866-664-4621	www.cuofco.benefithub.com Create an account using this unique referral code: B5RJBN
401(k)	Empower Retirement Benefits	866-467-7756	www.empower-retirement.com

Questions?

If you have additional questions, you may also contact:

Laura Vallejo,
303-894-5253
vallejol@cuofco.org

DISCLAIMER: The material in this benefits brochure is for informational purposes only and is neither an offer of coverage or medical or legal advice. It contains only a partial description of plan or program benefits and does not constitute a contract. Please refer to the Summary Plan Description (SPD) for complete plan details. In case of a conflict between your plan documents and this information, the plan documents will always govern.
Annual Notices: ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. The company will distribute all required notices annually.

