

HEBER PUBLIC UTILITY DISTRICT

REPORT TO BOARD OF DIRECTORS

MEETING DATE: December 19, 2024

FROM: Madeline Dessert, General Manager

SUBJECT: Employee Medical Benefit Cost Increase

FISCAL IMPACT:

During the development and approval of the Fiscal Year 2024-2025 budget, staff estimated a 23% rate increase for employee medical benefits. According to our insurance carrier the actual increase is **20.37%**. This is a total of **\$4,836.59 per month**. This amount will change along with our employee demographics. There will be no increase in Dental or Vision coverage. There will be a **\$34 per month** increase for Group Life Insurance.

Staff does not anticipate a budget modification will be necessary. Our insurance carrier provided the attached documents for your consideration. These documents present an option to change insurance plans from a plan with a \$1,000 deductible to a \$1,750 deductible. In order to change insurance plans, the Board will need to negotiate any change with the NRTA bargaining unit. At this time, staff does not recommend making any changes.

November 24, 2024

HEBER PUBLIC UTILITY DISTRICT FINANCING CORP
1078 DOGWOOD RD
HEBER, CA 92249

Time to renew your health plan! Everything you need is in this packet.

Dear Valued Customer:

Thank you for choosing us to be your continued partner in health. We're committed to protecting your most important asset — your employees. Our plans offer affordable, whole-person care and a simplified healthcare experience. We're here to support you and your employees every step of the way.

What's in this packet

You will find everything you need to renew your current plan or switch to a different one:

- The current rates and the new renewal rates for your new proposed plan(s). Please provide a copy of the current and new renewal rates to your employees. Anthem rates and benefits are subject to regulatory review and approval.
- Other plan options if you want to make a change. Please review all of the plan details in this packet. For more information, you can visit anthem.com/ca.
- Important plan information and highlights.
- Information on other plans if you would like to make a change. Some of the changes may include new plan names, new contract codes, cost-sharing changes, benefit changes, metal level changes from the current plan(s), which plans have been amended or may no longer be available. Please provide copies of these important documents to your employees.
- Documents required for renewal. These can be found on the following pages: Monthly Premium Comparison, Your Alternate Option, Medical Benefit Selection Form, and Benefit to Benefit Comparison chart. Please provide a copy of the Benefit to Benefit Comparison chart to your employees.

Added benefits for better overall health

When you add dental and vision coverage to your medical plan, your employees get comprehensive, cost-effective, coordinated care. Because we integrate data across our plans, we can create a personalized, more complete picture of an employee's health. This lets us identify issues earlier, close gaps in care, and improve health management to help employees stay healthy and productive. Your renewal may include a dental and/or vision quote if you have a minimum of 5 enrolled medical subscribers. However, additional plans and possibly better rates can be provided. Have your broker request a quote by contacting our Connect team at 877-567-1802 or connect@anthem.com.

To make your renewal easier, you have a couple of options:

- Renew into the proposed plan – you don't have to do anything!
- Select another plan – we've given you a couple of different options to help you select the right plan(s) for your employees. If you choose one of the alternatives, all you need to do is complete the Medical Benefit Selection Form and return it to us no later than 30 days before your renewal date.
- **For HMO plans** - enrollment in the selected plan is dependent upon the employee residing or working within a plan's geographical service area, and the network, provider, and physician availability within the geographical service area. If at the time of enrollment, the network or physician/medical group is not available or an employee does not reside or work in the geographical service area of the plan, the employee may be assigned to or be required to choose a different provider, network, and/or plan.

You may have received a letter requesting you to confirm your group continues to meet the definition of a Small Group. This renewal is only valid if your group is in compliance with the Group Contract.

Please work with your broker to return your paperwork 30 days before your effective date.

Your broker can help you choose the right plan. For your convenience, your renewal packet is also available on EmployerAccess at **employer.anthem.com**.

Thank you for partnering with us. We look forward to a great year together.

Your Anthem Small Group Team

Enclosures

Protecting the health of your employees — and your business

Health plans that offer whole-person care
for better overall health

Renewal Packet

for HEBER PUBLIC UTILITY DISTRICT
FINANCING CORP

Your Agent/Broker as of 11/01/2024 12:32

KEENAN & ASSOCIATES

Group #: H37703

Effective Date: February 01, 2025

Group State: California

Zip Code: 92249

Rating Area: 13



In California Anthem Blue Cross is the trade name of Blue Cross of California, Inc. Also serving California: Anthem Blue Cross Life and Health Insurance Company. In 11 northeastern counties of New York Anthem Blue Cross is the trade name of Anthem HealthChoice Assurance, Inc. and Anthem HealthChoice HMO, Inc. and Anthem Blue Cross HP is the trade name of Anthem HP, LLC. Independent licensees of the Blue Cross Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

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11/01/2024 14:46



Helping your employees — and your business — stay healthy



Making sure you and your employees have great healthcare is good for business. Anthem plans include benefits that support whole-person health and come with tools that make it easier to get care from anywhere.

All of this helps your employees stay healthy and productive for longer.

Your health plan home

EmployerAccess is now the hub for plan administration, marketing resources, and news. This updated site has everything you need to administer your plan and manage your benefits, including helpful tools and resources for both you and your employees.

Benefits that work together

Anthem plans keep you and your employees at the center of a whole-person, team-based care model, transforming healthcare into a collaborative process. By combining all aspects of coverage — medical, behavioral health, pharmacy, dental, and/or vision — doctors can see the whole picture of a person's health for simpler, smarter, and more cost-effective care.

- Programs to motivate employees to take charge of their well-being.
- Engaged care management teams that can identify potential health issues and coordinate health action plans.
- Digital tools to help employees connect to resources, as well as receive alerts and updates.

Wellbeing Solutions

Our health and wellness programs are included in our plans, and focus on awareness, prevention, and the right resources to help enable better health and cost savings.

Support for emotional health

Our plans also include access to the Emotional Well-being Resources program, powered by Learn to Live. With this program, employees learn how to manage specific behavioral patterns, such as anxiety, sleep issues, stress, and drug and alcohol use. Experienced coaches also provide support by email, text, or phone.

Pharmacy

Our integrated medical and pharmacy benefits work together to improve employee health and manage costs. With 24/7 access to pharmacy experts and digital tools that can help with pricing a medication, finding a pharmacy, or requesting a refill, we're working to make it easier for employees to stay on top of their medications, their health, and their budgets.



The **SydneySM Health** app connects your employees to high-quality, affordable care with expanded virtual care options. It provides a simple, guided, and intuitive experience using data, artificial intelligence, and machine learning to create deep employee personalization. Empowering your employees to:

- Search for in-person or virtual care, including virtual primary care and urgent care.
- Video-chat with a board-certified healthcare professional or therapist.
- Order and refill prescriptions.
- Easily access their health plan ID card on their mobile devices.

We make it simpler for you and your employees to manage your own health, while staying by your side every step of the way.

Sydney Health is offered through an arrangement with Carelon Digital Platforms, a separate company offering mobile application services on behalf of your health plan.

Learn to Live, Inc. is an independent company offering online tools and programs for behavioral health support. Learn to Live is an education program and should not be considered medical treatment.

Your Medical Renewal Snapshot

Your current medical plan(s) and the new proposed plan(s) are reflected in the grid(s) below. All of our ACA-compliant plans cover Preventative Care at 100% in network. In-Network benefits are shown below. A complete listing of benefit details can be found on the Summary of Benefits at sbc.anthem.com. Or click on the plan name in electronic copies, then enter your renewal effective date into the top box of that page.

Total Medical Subscribers: 13

		Monthly Medical Premium % Change	Deductible (individual/ family)	Out of Pocket Maximum (individual/ family)	Office Visits PCP/SPC	Inpatient Hospital	ER/ Urgent Care	Prescription Drugs-Retail Network Formulary	Vision/ Dental Benefits Included
Current Plan 1	# OF SUBSCRIBERS ENROLLED IN PLAN: 13 Anthem Gold PPO 30/500/20%	\$23739.62	\$500/ \$1500	\$7900/ \$15800	\$30/ \$60	Ded;20%	Ded;\$250; 20%/\$30	Rx Choice Tiered Network with R90 Select Level 1- \$10/ \$50/ \$90/ 30% up to \$250/script Level 2- \$20/ \$60/ \$100/ 40% up to \$250/script	V2/ D1
	Contract Code: 9KF1	Current							
	CalendarYear Embedded								
Proposed Plan 1	# OF SUBSCRIBERS ENROLLED IN PLAN: 13 Anthem Gold PPO 30/500/20%	\$28576.21	\$500/ \$1500	\$7900/ \$15800	\$30/ \$60	Ded;20%	Ded;\$250; 20%/\$30	Rx Choice Tiered Network with R90 Select Level 1- \$10/ \$50/ \$90/ 30% up to \$250/script Level 2- \$20/ \$60/ \$100/ 40% up to \$250/script	V2/ D1
	Contract Code: 805T	20.37%							
	CalendarYear Embedded								

Note: In the **Vision/Dental** column, please refer to the following codes to call out additional vision and/or dental benefits included within the medical plan:

- D1: Dental Embedded Pediatric Only
- V2: Vision Embedded Adult Exam Plus Pediatric

Your Alternate Options

Here are some alternate plans to consider and discuss with your agent/broker. Other options are available, so please ask your agent/broker if you would like to see additional plan options. All of our ACA compliant plans cover Preventive Care at 100% in-network. In-Network benefits are shown below. A complete listing of benefit details can be found by clicking on the plan name below in electronic copies, then enter your renewal effective date into the top box of that page. Plan change forms/instructions can be found towards the end of this package.

Total Medical Subscribers: 13

Alternate Options for Contract Code: 805T		Monthly Medical Premium _____	Deductible (individual/family)	Out of Pocket Maximum (individual/family)	Office Visits PCP/SPC	Inpatient Hospital	ER/ Urgent Care	Prescription Drugs-Retail Network Formulary	Vision/ Dental Benefits Included
Alternate Option 1	# OF SUBSCRIBERS ENROLLED IN PLAN: <u>13</u> Anthem Gold PPO 35/1000/20%	\$27334.72	\$1000/ \$3000	\$8200/ \$16400	\$35/ \$60	Ded;20%	Ded;\$250; 20%/\$35	Rx Choice Tiered Network with R90 Select Level 1- \$5/ \$60/ \$110/ 30% up to \$250/script/ \$300/ \$600 Ded Tier(s) 2-4 Level 2- \$15/ \$70/ \$120/ 40% up to \$250/script/ \$300/ \$600 Ded Tier(s) 2-4	V2/ D1
	Contract Code: 807B	15.14%							
	CalendarYear Embedded								
Alternate Option 2	# OF SUBSCRIBERS ENROLLED IN PLAN: <u>13</u> Anthem Silver PPO 45/1750/40%	\$23796.00	\$1750/ \$3500	\$9100/ \$18200	\$45/ \$95	Ded;40%	Ded;\$300; 40%/\$45	Rx Choice Tiered Network with R90 Select Level 1- \$15/ \$70/ \$110/ 30% up to \$250/script/ \$300/ \$600 Ded Tier(s) 2-4 Level 2- \$20/ \$80/ \$120/ 40% up to \$250/script/ \$300/ \$600 Ded Tier(s) 2-4	V2/ D1
	Contract Code: 84MX	0.24%							
	CalendarYear Embedded								

Note: In the **Vision/Dental** column, please refer to the following codes to call out additional vision and/or dental benefits included within the medical plan:

- D1: Dental Embedded Pediatric Only
- V2: Vision Embedded Adult Exam Plus Pediatric

Monthly Premium Comparison Details (continued)

	<i>Medical</i>	<i>Dental</i>	<i>Vision</i>	<i>Grand Total</i>
<i>Current Premium</i>	\$23739.62	\$0.00	\$0.00	\$23739.62
<i>New Premium</i>	\$28576.21	\$0.00	\$0.00	\$28576.21
<i>Premium Rate Change</i>	\$4836.59	\$0.00	\$0.00	\$4836.59
<i>Premium Percent Change</i>	20.37%	0%	0%	20.37%

Please note that your total premium may change for various reasons, including but not limited to changes in your employee census, changes in your employees' tobacco use status where applicable, and changes to the ACA requirements. If your group has multiple products, changes made to coverage and/or participation levels may also result in the loss of any multi-product discounts.

Per the Affordable Care Act (or health care reform law), Summary of Benefits and Coverage (SBCs) can be accessed through our Internet Posting Site at sbc.anthem.com. The benefit information included in this packet is intended to present only a general overview of the benefits. The entire provisions of benefits and exclusions are contained in the Certificate of Coverage. In the event of a conflict between the Certificate of Coverage and the description included in this packet, the terms of the Certificate of Coverage will prevail.



Monthly Premium Rate and Product(s) Selected-Schedule B

Effective date of this Addendum is 12:01 a.m. on 02/01/2025.

This Addendum applies to the Employer and its affiliated companies as agreed to in writing by Anthem Blue Cross.

The Employer will pay a per Subscriber per month fee calculated by adding the sum of the rates for each of the Member categories (Subscriber, Spouse, up to 3 oldest Dependents 20 years and younger, and Dependents 21 years and over) set forth in the tables below:

Proposed Plan 1						Alternate Option 1						Alternate Option 2					
Anthem Gold PPO 30/500/20% Contract Code: 805T Rating Area: 13						Anthem Gold PPO 35/1000/20% Contract Code: 807B Rating Area: 13						Anthem Silver PPO 45/1750/40% Contract Code: 84MX Rating Area: 13					
Age	Rate	Age	Rate	Age	Rate	Age	Rate	Age	Rate	Age	Rate	Age	Rate	Age	Rate	Age	Rate
0-14	\$423.30	31	\$641.31	48	\$904.69	0-14	\$404.91	31	\$613.45	48	\$865.39	0-14	\$352.49	31	\$534.03	48	\$753.36
15	\$460.92	32	\$654.59	49	\$943.98	15	\$440.90	32	\$626.15	49	\$902.97	15	\$383.82	32	\$545.09	49	\$786.07
16	\$475.31	33	\$662.89	50	\$988.25	16	\$454.66	33	\$634.09	50	\$945.31	16	\$395.80	33	\$552.00	50	\$822.94
17	\$489.70	34	\$671.74	51	\$1,031.96	17	\$468.42	34	\$642.56	51	\$987.13	17	\$407.78	34	\$559.37	51	\$859.34
18	\$505.19	35	\$676.17	52	\$1,080.10	18	\$483.24	35	\$646.79	52	\$1,033.17	18	\$420.68	35	\$563.06	52	\$899.42
19	\$520.68	36	\$680.60	53	\$1,128.79	19	\$498.06	36	\$651.03	53	\$1,079.75	19	\$433.58	36	\$566.75	53	\$939.97
20	\$536.73	37	\$685.02	54	\$1,181.36	20	\$513.41	37	\$655.26	54	\$1,130.03	20	\$446.95	37	\$570.43	54	\$983.74
21	\$553.33	38	\$689.45	55	\$1,233.93	21	\$529.29	38	\$659.50	55	\$1,180.32	21	\$460.77	38	\$574.12	55	\$1,027.52
22	\$553.33	39	\$698.30	56	\$1,290.92	22	\$529.29	39	\$667.96	56	\$1,234.83	22	\$460.77	39	\$581.49	56	\$1,074.98
23	\$553.33	40	\$707.16	57	\$1,348.47	23	\$529.29	40	\$676.43	57	\$1,289.88	23	\$460.77	40	\$588.86	57	\$1,122.90
24	\$553.33	41	\$720.44	58	\$1,409.88	24	\$529.29	41	\$689.14	58	\$1,348.63	24	\$460.77	41	\$599.92	58	\$1,174.04
25	\$555.54	42	\$733.16	59	\$1,440.32	25	\$531.41	42	\$701.31	59	\$1,377.74	25	\$462.61	42	\$610.52	59	\$1,199.38
26	\$566.61	43	\$750.87	60	\$1,501.74	26	\$541.99	43	\$718.25	60	\$1,436.49	26	\$471.83	43	\$625.26	60	\$1,250.53
27	\$579.89	44	\$773.00	61	\$1,554.86	27	\$554.70	44	\$739.42	61	\$1,487.30	27	\$482.89	44	\$643.70	61	\$1,294.76
28	\$601.47	45	\$799.01	62	\$1,589.72	28	\$575.34	45	\$764.29	62	\$1,520.65	28	\$500.86	45	\$665.35	62	\$1,323.79
29	\$619.18	46	\$830.00	63	\$1,633.43	29	\$592.28	46	\$793.94	63	\$1,562.46	29	\$515.60	46	\$691.16	63	\$1,360.19
30	\$628.03	47	\$864.85	64+	\$1,659.99	30	\$600.74	47	\$827.28	64+	\$1,587.87	30	\$522.97	47	\$720.18	64+	\$1,382.31

Additional Fees or Charges:

Payment by Phone: \$10 NSF Charge: \$25 Late Payment Fee: \$25 Reinstatement Fee: \$50

The rates listed above may include charges for riders that have been purchased by the group. These additional charges are not applicable to the dependent rates. Please refer to your Monthly Premium Comparison page for dependent rates.

Anthem Blue Cross

Beth P Andersen, President

Interested in adding a Dental Plan?

Employers, for more information please work directly with your broker or Anthem Sales Representative to obtain final rates.
Brokers, our Anthem Connect team is here to assist. For our lowest rates, additional coverage options and to take advantage of all available discounts, please contact the Anthem Connect team at 866-956-8602 or Connect@anthem.com.

This illustration is based on the medical enrollment and the **proposed rates may not be final**. Final dental rates are determined by the total number of eligible employees and the Group Standard Industry Code (SIC).

Your small group medical plan may include embedded dental benefits. Please check with your broker or Anthem Sales Representative before purchasing additional dental coverage to ensure the best coordination of your benefits.

To add or change dental coverage on an existing Anthem plan, completion of the Specialty [Benefit Modification Form](#) is required.

13 Eligible Employees used for rating

SIC Code used for rating: 9199

Add	Plan Name/Contract Code	Ded Ind/Fam	Annual Max	Diag/Prev In/Out Net	Basic In/Out Net	Major In/Out Net	Ortho	Additional Features	EMP	ESP	ECH	FAM
<input type="checkbox"/>	Bronze PPO 100/80/50 Active 50/1000 MAC E&P Basic OON Reimbursement: Maximum Allowable Charge - 3RH7	\$50/\$150	\$1000	100%/80%	80%/60%	50%/50%	Not Covered	Endo/Perio/Oral: Basic Waiting Period: None Implants : Covered	\$35.65	\$72.72	\$77.01	\$117.05
<input type="checkbox"/>	Silver PPO 100/80/50 Passive 50/1500 90th E&P Basic OON Reimbursement: 90th percentile of FAIR Health - 3RH3	\$50/\$150	\$1500	100%/100%	80%/80%	50%/50%	Not Covered	Endo/Perio/Oral: Basic Waiting Period: None Implants : Covered	\$54.16	\$110.48	\$117.60	\$178.76
<input type="checkbox"/>	Gold PPO 100/90/60 Active 50/1500 90th E&P Basic OON Reimbursement: 90th percentile of FAIR Health - 3RGY	\$50/\$150	\$1500	100%/100%	90%/80%	60%/50%	Not Covered	Endo/Perio/Oral: Basic Waiting Period: None Implants : Covered	\$57.17	\$116.62	\$122.47	\$186.15
<input type="checkbox"/>	Platinum PPO 100/90/60 Active 50/2000 90th E&P Basic OON Reimbursement: 90th percentile of FAIR Health - 3RGX	\$50/\$150	\$2000	100%/100%	90%/80%	60%/50%	Not Covered	Endo/Perio/Oral: Basic Waiting Period: None Implants : Covered	\$60.15	\$122.71	\$128.86	\$195.87
<input type="checkbox"/>	Platinum PPO 100/90/60 Active 50/2500 90th E&P Basic OON Reimbursement: 90th percentile of FAIR Health - 3SND	\$50/\$150	\$2500	100%/100%	90%/80%	60%/50%	Not Covered	Endo/Perio/Oral: Basic Waiting Period: None Implants : Covered	\$62.39	\$127.27	\$133.65	\$203.15

Coverage Types - EMP=Employee Only, ESP=Employee/Spouse, ECH=Employee/Child(ren), FAM = Family

Authorization for ANY Plan Change

Group Email Address: _____ Date: _____

Printed Name: _____ Signature: _____

COMPLETE, SIGN, and Email to sguwca@anthem.com.

Interested in adding a Vision Plan?

Employers, for more information please work directly with your broker or Anthem Sales Representative to obtain final rates.
Brokers, our Anthem Connect team is here to assist. For our lowest rates, additional coverage options and to take advantage of all available discounts, please contact the Anthem Connect team at 866-956-8602 or Connect@anthem.com.

This illustration is based on the medical enrollment and the **proposed rates may not be final**.

Small Group Medical plans may include some form of vision care for eligible adults and children. Add a Material Only Plan to complete the Vision package, or a Full Service Plan for members who are not covered by a Medical plan.

To add or change vision coverage on an existing Anthem plan, completion of the Specialty [Benefit Modification Form](#) is required.

13 Eligible Employees used for rating

Add	Plan Name/Contract Code	Plan Type	Exam Frequency	Lens Frequency	Frame Frequency	Exam Copay	Lens Copay	Frame Benefit	Contact Benefit	EMP	ESP	ECH	FAM
<input type="checkbox"/>	MO.A.10.150.150 4CC7	Materials Only	Unlimited	Once every calendar year	Once every calendar year	Not Covered	\$10	\$150	\$150	\$6.24	\$12.48	\$12.65	\$21.00
<input type="checkbox"/>	MO.B.10.150.150 4BHM	Materials Only	Unlimited	Once every calendar year	Once every other calendar year	Not Covered	\$10	\$150	\$150	\$5.79	\$11.57	\$11.73	\$19.48
<input type="checkbox"/>	FS.A.10.25.150.150 4B5L	Full Service	Once every calendar year	Once every calendar year	Once every calendar year	\$10	\$25	\$150	\$150	\$7.27	\$14.54	\$14.56	\$24.23
<input type="checkbox"/>	FS.B.10.25.130.130 4BFU	Full Service	Once every calendar year	Once every calendar year	Once every other calendar year	\$10	\$25	\$130	\$130	\$6.49	\$12.99	\$13.05	\$21.70
<input type="checkbox"/>	FS.C.20.20.130.80 4C2S	Full Service	Once every calendar year	Once every other calendar year	Once every other calendar year	\$20	\$20	\$130	\$80	\$4.33	\$8.67	\$8.86	\$14.69

Plans shown are for Employer Paid options, which are subject to minimum participation requirements. Please refer to your state specific guidelines. Voluntary plans are available for eligible groups.

Coverage Types - EMP=Employee Only, ESP=Employee/Spouse, ECH=Employee/Child(ren), FAM = Family

Authorization for ANY Plan Change

Group Email Address: _____ Date: _____

Printed Name: _____ Signature: _____

COMPLETE, SIGN, and Email to sguwca@anthem.com.



HEBER PUBLIC UTILITY DISTRICT

2025 Renewal Summary

Policy 160-169548

Thank you for allowing Standard Insurance Company to provide quality products to support your employees' insurance needs. We are pleased to renew your policy with continued coverage and services.

We have carefully reviewed the current composition of your organization and evaluated the experience of your dental policy. Based upon this review and application of rate factors appropriate for your industry classification, we are renewing your policy at the existing premium rates as indicated in the chart below. These rates are guaranteed until February 1, 2026.

Division 1/Class 1

Dental Coverage

<i>Product & Services</i>	<i>Through 1/31/2025</i>	<i>Effective 2/1/2025</i>
<i>Employee</i>	<i>\$52.68 per member</i>	<i>\$52.68 per member</i>
<i>Employee & One Dependent</i>	<i>\$88.66 per member</i>	<i>\$88.66 per member</i>
<i>Employee & Two or more Dependents</i>	<i>\$134.90 per member</i>	<i>\$134.90 per member</i>

Please note, the state of California requires that we provide you and your employees a copy of a dental matrix that summarizes benefits under your plan. This information is provided by us in the policy and the certificate of coverage. Please have your employees consult their certificate of coverage to access this document.

If you have any questions about your rates or our review process our Employee Benefits Sales and Service office at 714-634-8200 is available to serve your needs. We value your business and welcome the opportunity to provide continued assistance to you.

Sincerely yours,

Group Insurance Underwriter
Employee Benefit Services
Standard Insurance Company



Heber Public Utility District

2025 Renewal Summary

Policy 169548

Thank you for choosing Standard Insurance Company (The Standard) as your employee benefits partner since February 1, 2022. We appreciate your business and the opportunity to renew our commitment. We strive to provide Heber Public Utility District and your employees outstanding value, expertise and personal service.

As always, our goal is to help you take care of your business and your employees. Our team remains committed to helping you achieve strategic goals for your benefits program, streamline administration and increase employee satisfaction. In short — better results with less noise. Thank you again for your continued business.

Our Approach to Renewals — Continued Partnership

The renewal rates for your Group Life insurance will be effective February 1, 2025.

For your renewal, we utilized manual rates to determine the appropriate rate for renewal. Our manual rates use the demographics of your employees to determine the appropriate rates. Factors such as gender, age, salary, occupation and plan design contribute to determining the manual rate.

Please consider this renewal package the next step in our ongoing conversation about how we can best meet your needs. We may be able to work together to help you get more value out of your benefits program or reduce overall costs. We'd be happy to re-evaluate your plan design and benefits usage and discuss your options.

Your Basic Life Renewal

We understand that handling a Life insurance claim takes a special touch. Our Life benefits analysts complete annual grief training. This program helps them empathize with beneficiaries and recognize when they need special attention. We strive to help you make a tough time easier. Our goal is to provide support with easy claim filing, timely decisions, and prompt payment of approved claims.

Census Demographics for Basic Life

Categories	Prior Calculation	Current Calculation	Change
Female Lives	4	3	-1
Male Lives	8	11	3
Benefit Volume	\$466,000	\$560,000	\$94,000
% Benefit Volume Age 50 +	23%	43%	20%

Based on our thorough analysis, we're offering the renewal rate[s] listed below.

Renewal Date	Current Rate *	Renewal Rate *	Monthly Premium Change **
February 1, 2025	\$0.190	\$0.250	\$34

* Rate mode is Per \$1000 of Benefit

** Final premium change will be determined based on your group's composition at billing time

Rate will be guaranteed for 1 year until February 1, 2026.

The Standard is committed to helping you provide employees and their beneficiaries with the support they need. Below is a reminder of the additional services and tools offered with your Life plan.

The Life Services Toolkit

For employees, online services include estate planning and state-specific will preparation, identity theft prevention, financial calculators, wellness resources and more. For beneficiaries, the Life Services Toolkit offers grief and loss support by phone, online and face-to-face. They can also take advantage of access to financial counselors, legal consultation and other support services. This service is offered through a vendor that is not affiliated with The Standard.

Travel Assistance

Travel Assistance can provide a sense of security for your employees and their eligible family members anytime they travel with minimal restrictions. Available 24 hours a day — with access online or through a single phone call — Travel Assistance offers a full range of trip planning and travel support, including emergency evacuation services and medical, legal, and translation service referrals. This service is offered through a vendor that is not affiliated with The Standard.

Thank You and Next Steps

We appreciate the opportunity to continue our partnership with Heber Public Utility District.

A summary of our Renewal Offer is in the chart below. Thank you for allowing Standard Insurance Company the opportunity to support your insurance needs.

Product & Services *	Through 01/31/25	Effective 02/01/25
Basic Life	\$0.190 Per \$1000 of Benefit	\$0.250 Per \$1000 of Benefit
Travel Assistance	Included in Rates for Life	Included in Rates for Life
Basic AD&D	\$0.025 Per \$1000 of Benefit	\$0.025 Per \$1000 of Benefit

*The above shown rates are monthly.

You can count on us to help you retain and attract employees by providing the benefits and services they value – now and for years to come. We're always available to address any questions you have about this

renewal or for any service needs. Please reach out to the Orange group office at (800) 542-1525 and we'll be happy to help.

Heber Public Utility District



Benefits Review Agenda

- Anthem Medical
- Ameritas Dental
- EyeMed Vision
- The Standard Life Insurance
- The Standard Life Services Toolkit
- Ease – Benefits Platform
- Contacts

Anthem Medical Coverage



Anthem Whole Health Connection®

We put you and your employees at the center of a whole-person, team-based care model, transforming healthcare into a truly collaborative process. By combining all aspects of coverage — medical, behavioral health, pharmacy, dental, vision, life and disability — doctors can see the whole picture of a person's health for simpler, smarter, and more cost-effective care.

- Programs to motivate employees to take charge of their well-being.
- Engaged care management teams who can identify potential health issues and coordinate health action plans.
- Digital tools to help employees connect to resources, as well as receive alerts and updates.



Wellbeing Solutions

Our health and wellness programs are included in all our Affordable Care Act (ACA) plans, and focus on awareness, prevention, and the right resources to help enable better health and cost savings.



Pharmacy

Our integrated medical and pharmacy benefits work together to improve employee health and manage costs. With 24/7 access to pharmacy experts and digital tools that can help with pricing a medication, finding a pharmacy, or requesting a refill, we're working to make it easier for employees to stay on top of their medications, their health, and their budgets.



Emotional Wellbeing Resources

Our ACA plans also include access to the Emotional Wellbeing Resources program. Your employees' mental health deserves the same care as their physical health. Connecting them with behavioral health resources is an important way to support their overall well-being so they can lead healthier, more productive lives.

Anthem Mobile App



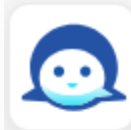
SydneySM Health delivers industry-leading experiences that drive high-quality, affordable care with expanded virtual care options. It provides a simple, guided, and intuitive experience using data, artificial intelligence, and machine learning to create deep employee personalization. Empowering your employees to:

- Search for in-person or virtual care, including virtual primary care and urgent care.
- Video chat with a board-certified healthcare professional or therapist.
- Order and refill prescriptions.
- Easily access their health plan ID card on their mobile devices.
- Find answers to health questions through interactive chat or our Symptom Checker.

Anthem is empowering you and your employees to confidently navigate the path to good health. As your trusted partner, we will help you simplify benefits, manage costs, and improve employee satisfaction — every step of the way.

Save Time With Live Chat

Find answers to all your questions with an Anthem representative in real time. Use our app, Sydney Health, to start a Live Chat.



[Download Sydney Health](#)

<https://www.sydneyhealth.com/>

Anthem Medical Coverage

Gold PPO 30/500/20%

Visits with Virtual Care-Only Providers	Cost through our mobile app and website
Primary Care, and medical services for urgent/acute care	No charge
Mental Health & Substance Use Disorder Services	No charge
Specialist care	\$60 copay per visit medical deductible does not apply

Covered Medical Benefits	Cost if you use an In-Network Provider	Cost if you use an Out-of-Network Provider
Overall Deductible	\$500 person / \$1,500 family	\$2,000 person / \$4,000 family
Overall Out-of-Pocket Limit <i>When you meet your out-of-pocket limit, you will no longer have to pay cost-shares during the remainder of your benefit period.</i>	\$7,900 person / \$15,800 family	\$15,800 person / \$31,600 family

Dental - Highlights

- No changes to your dental plan
- Dental Provider – Ameritas

Plan Benefit	In Network	Out of Network
Type 1 (Preventive)	100%	100%*
Type 2 (Basic)	80%	80%*
Type 3 (Major)	80%	80%*
Waiting Period	None	
Deductible	\$50/Calendar Year Type 2 & 3	\$50/Calendar Year Type 2 & 3
	Waived Type 1	Waived Type 1
	\$150/family	\$150/family
Maximum (<i>per person</i>)**	\$2,000 per calendar year	\$1,250 per calendar year
Allowance	Discounted Fee	90% usual and customary
Annual Eye Exam	None	None
Annual Open Enrollment	None	None

*If you go to an out of network Dentist, you will be responsible for paying the difference between what the Dentist submits for payment and the amount we pay.

**Maximum is per calendar year for both in network and out of network.

Orthodontia Summary - Adult and Child Coverage

	In Network	Out of Network
Allowance	Discounted Fee	Usual and customary
Plan Benefit	50%	50%
Lifetime Maximum (<i>per person</i>)**	\$1,000	\$1,000
Waiting Period	None	None

**Maximum is lifetime for both in network and out of network.

EyeMed Vision - Highlights

- No changes to your EyeMed vision plan

	EyeMed Insight Network	Out of Network
Deductibles		
	\$10 Exam	No deductible
	\$10 Eye Glass Lenses	
Annual Eye Exam	Covered in full	Up to \$35
Lenses (per pair)		
Single Vision	Covered in full	Up to \$25
Bifocal	Covered in full	Up to \$40
Trifocal	Covered in full	Up to \$55
Lenticular	20% discount	Not covered
Progressive	See lens options	NA
Contacts		
Fit & Follow Up Exams		
<i>Standard</i>	Standard: Participant cost up to \$40	Not covered
<i>Premium (Allowance)</i>	Premium: 10% off of retail	Not covered
Elective	Up to \$130	Up to \$104
Medically Necessary	Covered in full	Up to \$200
Frame Allowance	\$130	Up to \$65
Frequencies (months)		
Exam/Lens/Frame	12/12/12	12/12/12
	Based on date of service	Based on date of service

EyeMed Vision – Highlights (continued)

	EyeMed Insight Network	Out of Network
Progressive Lenses		
<i>Standard</i>	\$65 + lens deductible	Not covered
<i>Premium</i>		
<i>Tier 1</i>	\$85 + lens deductible	Not covered
<i>Tier 2</i>	\$95 + lens deductible	Not covered
<i>Tier 3</i>	\$110 + lens deductible	Not covered
<i>Tier 4</i>	\$65 plus 80% of charge less \$120 allowance	Not covered
Std. Polycarbonate	\$40	Not covered
Tint (solid and gradient)	\$15	Not covered
Scratch Resistant Coating	\$15	Not covered
Anti-Reflective Coating		
Standard	\$45	Not covered
Premium		
<i>Tier 1</i>	\$57	Not covered
<i>Tier 2</i>	\$68	Not covered
<i>Tier 3</i>	80% of the charge	Not covered
Ultraviolet Coating	\$15	Not covered
Lasik or PRK	Average discount of 15% off retail price or	Not covered

The Standard Life Insurance

Benefits

Basic Life Coverage Amount	Your Basic Life coverage amount is \$40,000.
Basic AD&D Coverage Amount	For a covered accidental loss of life, your Basic AD&D coverage amount is equal to your Basic Life coverage amount. For other covered losses, a percentage of this benefit will be payable.
Life Age Reductions	Basic Life and AD&D insurance coverage amount reduces to 65 percent at age 65, and to 50 percent at age 70.

Other Basic Life Features and Services

- Accelerated Benefit
- Life Services Toolkit
- Portability of Insurance
- Repatriation Benefit
- Right to Convert Provision
- Standard Secure Access account payment option
- Travel Assistance
- Waiver of Premium

Other Basic AD&D Features

- Family Benefits Package
- Seat Belt and Air Bag Benefits

Update Beneficiaries during Open Enrollment!

The Standard Life Services Toolkit

Resources and Tools to Support You and Your Beneficiary

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 advance directives.
- **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 for guidance on how to begin, to educate yourself on funeral costs, find funeral-related services and make decisions about funeral arrangements in advance.

The Standard Life Services Toolkit

Services for Your Beneficiary available for 12 months

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

- **Grief Support:** Care Managers with advanced training 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.

Our Care Managers may offer your beneficiaries additional grief support through support kits 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:** In addition to online estate planning tools, your beneficiaries can obtain legal assistance from experienced attorneys. They can schedule an initial office visit or a telephone consultation for up to 30 minutes with a network attorney. Beneficiaries who wish to retain a participating attorney after the initial consultation receive a 25% rate reduction from the attorney's normal hourly or fixed-fee rates.
- **Financial Assistance:** Your beneficiaries can schedule up to 30-minute telephone sessions with financial counselors who can help with issues such as budgeting strategies, and credit and debt management.
- **Support Services:** During an emotional time, your beneficiaries can receive help planning a funeral or memorial service. WorkLife 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 about funeral costs, find funeral-related services and make decisions about funeral arrangements.



Carrier Contact Information

The
Standard
Dental

800.547.9515

standard.com/dental

The
Standard
Vision

EyeMed 866.289.0614

standard.com/vision

The
Standard
Life

800.547.9515

Standard.com/mytoolkit

EASE - Benefits Platform

- Keenan will assist you with making changes during Open Enrollment
- You can access all benefit plan information all year long
- EASE has your benefit elections, plan summaries, rates, beneficiaries, etc.

ease



Benefits Enrollment

You're about to begin enrollment. Please note the following:



Takes 10-15 mins
... or a cup of coffee



Good to have ready
Information about your dependents, Medicare, and previous coverage (if applicable)



Your progress will be saved
Exit and finish later if you need to

Start

9 Easy steps to employee enrollment

1. Log in to Ease per the instructions you have received from your HR administrator or Broker.*

2. Click **Start**.



3. Follow the prompts on each page to complete your benefits enrollment — Click **Continue** to proceed to the next section.



4. Verify your personal information is correct and enter in any of your dependent information.

5. If requested during the enrollment process, provide any emergency contacts, employment documents, Medicare status, previous/current coverage and/or health information.

6. Select your benefit by choosing **Enrolled** or **Waived** for each plan — Click **Continue** to proceed to the next benefit.



7. You will then be prompted to provide any missing data. Once you have done this, you will be able to sign and review your forms using your mouse or mobile device.



8. Before you review your forms, you will need to first type your name, then sign your signature and follow the prompts to finish.



9. If you have questions, please reach out to your HR administrator or Broker.

We Are Here to Help!



Lucha Olguin

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916-859-7160 x4171



Sam Cole

scole1@keenandirect.com

916-859-7160 x4170



Thank you!

Any Questions?

