

2025 Benefits Enrollment Guide

SEASONAL STAFF



**CONSERVATION
LEGACY**

If you and/or your dependents have Medicare or will become eligible for Medicare in the near future, Federal law gives you more choices about your prescription drug coverage. Please see page 13 for more information.

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Introduction

As a Conservation Legacy employee, you are eligible for benefits if you work an average of 30 hours per week. Benefits are effective on the first day of the month following 60 days from your date of hire.

You may enroll your eligible dependents for coverage once you are eligible. Your eligible dependents include your legal spouse or your domestic partner, and your children up to age 26.

Once your benefit elections become effective, they remain in effect until the end of the final month of employment or end of year. You may only change coverage within 30 days of a qualified life event.

Your domestic partner is eligible for benefits if they have lived with you for at least six months and can be defined as being in a domestic partnership, common-law relationship, civil union, or same-sex marriage. For more information about partner benefits, contact the Central HR Team at (970) 712-7497.

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If you have any questions:

- 1. Review benefit summaries and plan documents in detail.
- 2. For questions, contact your Human Resources:
Central HR Team
(970) 712-7497

Alyssa Murray
hwebster@conservationlegacy.org
(970) 946-6989

This booklet discusses important features of Conservation Legacy benefits for our benefit-eligible employees. In the event of a discrepancy with this guide, your actual benefit will be determined by the legal plan documents and the contracts that govern these plans.

Enrollment Information

Qualifying Life Events

Generally, you may change your benefit elections only during the annual enrollment period. However, you may change your benefit elections during the year if you experience a qualified life event, including:

- Marriage
- Divorce or legal separation
- Birth of your child
- Death of your spouse, domestic partner or dependent child
- Adoption of or placement for adoption of your child
- Change in employment status of employee, spouse/domestic partner or dependent child
- Qualification by the Plan Administrator of a child support order for medical coverage
- Entitlement to Medicare or Medicaid

You must notify the Central HR Team within 30 days of the qualified life event. Depending on the type of event, you may be asked to provide proof of the event. If you do not contact the Central HR Team within 30 days of the qualified event, you will have to wait until the next annual enrollment period to make changes (unless you experience another qualified life event).

Monthly Cost of Your Benefits

Medical/Rx Anthem	PPO B17	HSA/HDHP (30)	HSA/HDHP (24E)
Employee	\$24.49	\$1.29	\$0.00 (\$53.01 surplus)*
Employee + Spouse	\$204.82	\$153.55	\$24.69
Employee + Child(ren)	\$89.22	\$47.69	\$0.00 (\$56.69 surplus)*
Family	\$286.56	\$213.24	\$28.98

*You must set up your own HSA account into which the surplus will be deposited. Until the HSA account number is identified in Axiom self-enrollment or submitted to payroll@conservationlegacy.org, all funds are forfeited.

Medical Plan



Summary

Medical and prescription drug benefits provide you and your family access to health care, utilizing the Anthem Blue Cross and Blue Shield networks and discounts. Conservation Legacy offers a comprehensive medical open access plan that includes in and out-of-network benefits.

The Anthem PPO Plan allows you to see providers in the network or outside of the network. Your coverage level is higher when you use in-network physicians, hospitals and facilities.

The Anthem PPO Plan covers routine and preventive care at no charge to you when you use in-network providers.

You are encouraged to review the plan carefully and consider the benefit needs of you and your family.



Terms To Know

Deductible: An amount you must pay annually for certain covered services. This means you may be required to pay all or part of a bill, up to your deductible amount.

Copayment: A fixed dollar amount you pay at the time of your visit or when the provider bills you.

Coinsurance: A percentage of the cost of covered services that you must pay after you have paid your full, annual deductible amount.

In-Network Services: Refers to services received from the doctors, hospitals and other medical professionals who are contracted to care for our members and participate in Cigna's provider network.

Out-of-Network Services: Refers to covered services received from providers who do not participate in Cigna's network.

Anthem Find Care

<https://www.anthem.com/find-care/>

Medical Plan



Conservation Legacy offers a choice of medical plan options with Anthem so you can choose the plan that best meets your needs – and those of your family.

Each plan includes comprehensive health care benefits, including free preventive care services and coverage for prescription drugs.

Plan Provisions	Blue Classic 17		H.S.A. Plan 30		H.S.A. Plan 24E	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Does HSA apply?	No		Yes		Yes	
Annual Deductible (Individual/Family)	\$2,500/ \$7,500	\$7,000/ \$22,500	\$2,000/ \$4,000	\$4,000/ \$8,000	\$5,000/ \$10,000	\$5,000/ \$10,000
Out-of-Pocket Maximum (Includes Deductible)	\$3,500 / \$7,000	\$10,500 / \$21,500	\$3,500 / \$7,000	\$10,500 / \$21,000	\$5,000 / \$10,000	\$15,000 / \$30,000
Preventive Care	100% (w)	50% after ded.	100% (w)	60% after ded.	100% (w)	70% after ded.
Primary Physician Office Visit	\$20 copay	50% after ded.	80% after ded.	60% after ded.	100% after ded.	70% after ded.
Specialist Office Visit	\$40 copay	50% after ded.	80% after ded.	60% after ded.	100% after ded.	70% after ded.
Hospital Services	80% after ded.	50% after ded.	80% after ded.	60% after ded.	100% after ded.	70% after ded.
Lab & X-ray*	100% (w)	50% after ded.	80% after ded.	60% after ded.	100% after ded.	70% after ded.
Urgent Care	\$40 copay	50% after ded.	80% after ded.	60% after ded.	100% after ded.	70% after ded.
Emergency Room Care	\$250 copay (w)		80% after ded.		100% after ded.	
Retail Prescription Drugs (30-day supply)	Tier 1 Pharmacy**	Not covered	Tier 1 Pharmacy**	Not covered	Tier 1 Pharmacy**	Not covered
Tier 1			20% after deductible		0% after deductible	
Tier 2	\$15 copay					
Tier 3	\$50 copay					
Tier 4	\$75 copay					
	30% to \$350					
Tier 1	Tier 2 Pharmacy**	Not covered	Tier 2 Pharmacy**	Not covered	Tier 2 Pharmacy**	Not covered
Tier 2	\$25		30% after deductible		0% after deductible	
Tier 3	\$60					
Tier 4	\$85					
	30% to \$500					

This is a summary of coverage; please refer to your summary plan description for the full scope of coverage. In-network services are based on negotiated charges; out-of-network services are based on reasonable & customary (R&C) charges.

**MRI, nuclear medicine, and other advanced imaging services are subject to deductible and coinsurance.*

*** Tier 1 Pharmacies: Walmart, Kroger, Giant Eagle, Albertsons/Safeway, Hannaford/Ahold and CVS.*

Tier 2 Pharmacies: Walgreen's, Rite Aid, Sam's Club, Costco and Meijer.

Home Delivery prescription coverage on the Blue Classic plan available for 2.5 times the retail copay for a 90-day supply.

Health Savings Account (HSA)

Health Savings Account (HSA) Basics

If you enroll in one of the HSA plans, you can set up an HSA as long as:

- You don't have low deductible coverage through another source
- No Medicare, TRICARE

An HSA allows you to fund your HSA with pre-tax earnings taken from your paycheck to reimburse yourself for deductible, coinsurance and other qualified expenses.

Conservation Legacy also contributes to your HSA if there is a surplus. Please see the Cost of Your Benefits page for more information.

The annual maximum contribution for 2025 is \$4,300 for individual coverage and \$8,550 if you are enrolled with your family. If you are age 55 or older, you can contribute an additional \$1,000 per year. The annual maximum includes Conservation Legacy's contribution. Your contributions plus Conservation Legacy's contributions cannot exceed the annual maximum.

HSA Facts

- Set up your HSA so Conservation Legacy can contribute
- Funds are not taxed going in or going out
- You own the HSA and take it with you if you leave Conservation Legacy

Declining Medical Benefits?

What if You Do Not Need Medical Benefits?

Conservation Legacy offers a unique benefit to employees who do not need medical coverage. If you are declining medical benefits, you can elect to receive the taxable cash contribution and we will add \$100 to your paycheck per pay period. This benefit will apply to the first two paychecks of the month as long as your paperwork is returned early enough for it to be administratively feasible for it to be added to the current payroll. It will not appear on the third paycheck in months that have three paychecks. This amount is taxable at the same rate as your wages.

If you would like to take advantage of this benefit:

Please complete the option in Axiom to take advantage of the taxable cash contribution.

Full-time staff can still enroll in the dental and vision plans even if declining medical coverage and choosing to accept the taxable cash contribution.



Anthem Wellness Programs



Take advantage of all the programs available to you through Anthem. Once you have your Anthem ID number download the Sydney App, go to www.anthem.com or call the phone number on the back of your ID card to enroll in these programs.

Anthem Virtual Care Programs

- Virtual Urgent care
- Virtual Primary care
- Virtual Mental Health or Substance Use
- Virtual Preventative Care
- Virtual Symptom Checker

PPO Member Cost:

- For virtual medical, mental health or substance use disorders there is no copayment, deductible, or coinsurance. Virtual Visit for specialty care services is \$40 copayment per visit.

H.S.A. plans (24e and 30) Member Cost:

- 0% coinsurance after deductible for all virtual visit types.

Benefit cost share will apply for medications and lab tests.

Other Anthem Programs

- Building Healthy Families Program , a new program to support growing families.
- Cancer Care Support, a cancer care team to support and guide you through cancer treatment. Contact 833-649-0669 or TTY/TDD at 711 to get support.
- Autism Program, designed to access resources right for you, guide you through the healthcare system and use your benefits to get the best results. Call the Autism Team at 844-269-0538.
- Care Management Program gives you access to a nurse care manager to help you work through health issues such as serious illness, chronic conditions, trauma, or mental and behavioral health conditions. Call 888-613-1130.
- Save money on special offers and discounts for hearing, dental, vision, health and fitness, family and home, and more!



Download the Sydney Health app today

Use the app anytime to:

- Find care and compare costs.
- See what's covered and check claims.
- View and use digital ID cards.
- Check your plan progress.
- Fill prescriptions.



Scan the QR code to download the Sydney Health app.

You can also set up an account at anthem.com/register to access most of the same features from your computer.

To access programs or get support download the Sydney App, go to www.anthem.com

Preventive Care Benefits

Regular checkups and exams can help you stay healthy and catch problems early, when they are easier to treat. Our health plans offer all the preventive care services and immunizations below at no cost to you.¹ As long as you use a plan doctor, pharmacy, or lab, you will not have to pay anything. If you use providers that are not in your plan, you may have out-of-pocket costs.

If you are not sure which exams, tests, or shots are right for you, talk to your doctor.

Preventive Care vs. Diagnostic Care: Knowing The Difference

Preventive care helps protect you from getting sick. If your doctor recommends services when you have no symptoms, that's preventive care.

Diagnostic care is when you have symptoms, and your doctor recommends services to determine what's causing those symptoms.

Adult Preventive Care:

Preventive physical exams, screenings, and tests:

- Alcohol misuse: related screening and behavioral counseling
- Aortic aneurysm screening (for men who have smoked)
- Behavioral counseling to promote a healthy diet
- Blood pressure
- Bone density test to screen for osteoporosis
- Cholesterol and lipid (fat) levels
- Colorectal cancer, including fecal occult blood test, barium enema, flexible sigmoidoscopy, screening colonoscopy and related prep kit, and computed tomography (CT) colonography (as appropriate)²
- Depression screening
- Hepatitis C virus (HCV) for people at high risk for infection, and a one-time screening for adults born between 1945 and 1965
- Type 2 diabetes screening³
 - Eye chart test for vision⁴
- Hearing screening
- Height, weight, and body mass index (BMI)
- Human immunodeficiency virus (HIV) screening and counseling
- Lung cancer screening for those ages 55 to 80 who have a history of smoking 30 packs per year and still smoke, or quit within the past 15 years²
- Obesity: related screening and counseling³
- Prostate cancer, including digital rectal exam and prostate-specific antigen (PSA) test
- Sexually transmitted infections screening and counseling
- Tobacco use: related screening and behavioral counseling
- Tuberculosis screening
- Violence, interpersonal, and domestic: related screening and counseling

Women's Preventive Care:

- Well-woman visits
- Breast cancer, including exam, mammogram, and genetic testing for BRCA1 and BRCA2 when certain criteria are met⁵
- Breastfeeding: primary care intervention to promote breastfeeding support, supplies, and counseling^{5,6,7,8}
- Contraceptive (birth control) counseling
- Food and Drug Administration (FDA)-approved contraceptive medical services, including sterilization, provided by a doctor
- Counseling related to chemoprevention for those at high risk for breast cancer
- Counseling related to genetic testing for those with a family history of ovarian or breast cancer
- Human papillomavirus (HPV) screening
- Screening and counseling for interpersonal and domestic violence
- Pregnancy screenings, including gestational diabetes, hepatitis B, asymptomatic bacteriuria, Rh incompatibility, syphilis, HIV, and depression⁷
- Pelvic exam and Pap test, including screening for cervical cancer

Immunizations:

- Coronavirus disease (COVID-19)
- Diphtheria, tetanus, and pertussis (whooping cough)
- Hepatitis A and hepatitis B
- Human papillomavirus (HPV)
- Measles, mumps, and rubella (MMR) ◦ Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Varicella (chickenpox)
- Zoster (shingles)

The preventive care services listed above are recommendations of the Affordable Care Act (ACA) and therefore are subject to change. They may not be right for every person. Ask your doctor what's right for you.

Child Preventive Care

Preventive Physical Exams, Screenings, and Tests:

- Behavioral counseling to promote a health diet
- Blood pressure
- Cervical dysplasia screening
- Cholesterol and lipid levels
- Depression screening
- Development and behavior screening
- Type 2 diabetes screening
- Hearing screening
- Height, weight, and BMI
- Lead testing
- Newborn screening
- Screening and counseling for obesity
- Skin cancer counseling for those ages 10 to 24 with fair skin
- Oral (dental health) assessment, when done as part of a preventive care visit
- Screening and counseling for sexually transmitted infections
- Tobacco use: related screening and behavioral counseling
- Vision screening, when done as part of a preventive care visit⁴

Immunizations:

- Chickenpox
- Flu
- Haemophilus influenza type b (Hib)
- Hepatitis A and hepatitis B
- Human papillomavirus (HPV)
- Meningitis
- Measles, mumps, and rubella (MMR)
- Pneumonia
- Polio
- Rotavirus
- Whooping cough

Coverage For Pharmacy Items

For 100% coverage of your over-the-counter (OTC) drugs and other pharmacy items listed here, you must:

- Meet certain age requirements and other rules.
- Get prescriptions from plan providers and fill them at plan pharmacies.
- Have prescriptions, even for OTC items.

Adult preventive drugs and other pharmacy items (age appropriate)

- Aspirin use (81 mg and 325 mg) for the prevention of cardiovascular disease (CVD), preeclampsia, and colorectal cancer in adults younger than 70 years of age
- Colonoscopy prep kit (generic or OTC only) when prescribed for preventive colon screening
- Generic low-to-moderate dose statins for members ages 40 to 75 who have one or more CVD risk factors (dyslipidemia, diabetes, hypertension, or smoking)
- Tobacco-cessation products, including all FDA-approved brand-name and generic OTC and prescription products, for those ages 18 and older
- Preexposure prophylaxis (PrEP) for the prevention of HIV

Child preventive drugs and other pharmacy items (age appropriate)

- Dental fluoride varnish to prevent the tooth decay of primary teeth for children ages 0 to 5
- Fluoride supplements for children ages 0 to 6

Women's preventive drugs and other pharmacy items (age appropriate)

- Contraceptives, including generic prescription drugs and OTC items like female condoms and spermicides⁷
- Low-dose aspirin (81 mg) for pregnant women who are at increased risk of preeclampsia
- Folic acid for women ages 55 or younger who are planning and able to become pregnant
- Breast cancer risk-reducing medications, such as tamoxifen, raloxifene, and aromatase inhibitors, that follow the U.S. Preventive Services Task Force criteria²

We hope this information helps you understand your preventive care benefits. For a complete list of covered preventive drugs under the Affordable Care Act, view the *Preventive ACA Drug List* flyer, available at anthem.com/pharmacyinformation.

¹ The range of preventive care services covered at no cost share when provided by plan doctors is designed to meet state and federal requirements. The Department of Health and Human Services decided which services to include for full coverage based on U.S. Preventive Services Task Force A and B recommendations, the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC), and certain guidelines for infants, children, adolescents and women supported by Health Resources and Services Administration (HRSA) guidelines. You may have additional coverage under your insurance policy. To learn more about what your plan covers, see your *Certificate of Coverage* or call the Member Services number on your ID card.

² You may be required to receive preapproval for these services.

³ The Centers for Disease Control and Prevention (CDC)-recognized diabetes prevention programs are available for overweight or obese adults with abnormal blood glucose or who have abnormal CVD risk factors.

⁴ Some plans cover additional vision services. Please see your contract or *Certificate of Coverage* for details.

⁵ Check your medical policy for details.

⁶ Breast pumps and supplies must be purchased from plan providers for 100% coverage. We recommend using plan durable medical equipment (DME) suppliers.

⁷ This benefit also applies to those younger than age 19. A cost share may apply for other prescription contraceptives, based on your drug benefits. Your cost share may be waived if your doctor decides that using the multisource brand or brand name is medically necessary.

⁸ Counseling services for breastfeeding (lactation) can be provided or supported by a plan doctor or hospital provider, such as a pediatrician, OB-GYN, or family medicine doctor, and hospitals with no member cost share (deductible, copay, or coinsurance). Contact the provider to see if such services are available.

GET SCREENED IN 2025

PUT YOUR HEALTH FIRST

There are many recommended screenings that are extremely important for preventative healthcare.



Screening	Timing	Age	Gender
Physical Exam	Annually	18+ yrs.	Everyone
Blood Pressure	Every 3-5 yrs.	19-39 yrs.	Everyone
	Annually	40+ yrs.	
Cholesterol	Every 5 yrs.	20+ yrs.	Everyone
Type 2 & Pre-Diabetes	Every 3 yrs. If BMI is >25	35-70 yrs. Everyone over 45 yrs.	Everyone
Depression	Annually	12+ yrs.	Everyone
Colorectal Cancer	Determined by physician	45+ (earlier if family history)	Everyone
Skin Cancer	Regular self-check, annually if at risk	No set age	Everyone
Lung Cancer		50-80 yrs. w/ 20 pack/yr. smoking history & currently smoke or have quit in last 15 yrs.	Everyone
Dental Exam	Once or twice a year	16+ yrs	Everyone
Eye Exam	Annually		Everyone
Hepatitis C & HIV	Screened at least once	18+ yrs.	Everyone
Breast Cancer	First Mammogram	35-40 yrs.	Women
	Every 2 yrs.	40-50 yrs.	
	Annually	50+ yrs.	
Cervical Cancer	Every 3 yrs.	21-30+ yrs.	Women
	Discuss with Doctor	65+ yrs.	
Bone Density		65+ & postmenopausal women under 65 yrs. With risk factors	Women
Prostate Cancer		50+ yrs. men should get PSA blood test. Those with risk factors should start screenings at 40	Men

All market place health plans & many other plans must cover a majority of the above preventative services without charging a payment or co-insurance even if you haven't met your yearly deductible.

*Skin, dental and eye exams are screenings that may have a fee associated with services.

Voluntary Benefits

PET PLAN: WISHBONE

Conservation Legacy is offering Wishbone Pet Insurance for employees. These benefits can help with any unforeseen pet care expenses.

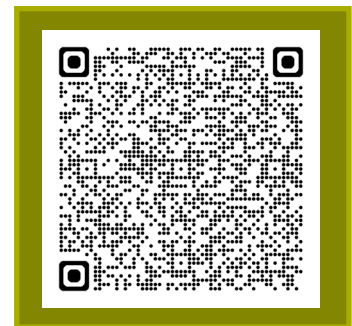
Wishbone: Wellness Coverage <i>For regular routine visits</i>	Monthly Rates	Wishbone: Pet Insurance Accident & Illness Coverage	<i>*Wishbone is for cats and dogs only. Direct Pay Rates based on your pet's age, breed & zip code. Pre-existing conditions are not covered.</i>
Essential Plan: Up to \$300 in coverage	\$14	90% reimbursement	
		\$250 deductible	
Premium Plan: Up to \$575 in coverage	\$25	\$25,000 annual limit	
		Includes lost pet recovery service and 24/7 pet telehealth	

Please click [here](#) to enroll in Wishbone pet insurance

EMPLOYEE PERKS PROGRAM: WORKING ADVANTAGE

Employees will have access to receive extra savings on electronics, hotels, gym memberships, appliances and much more through Working Advantage at no cost!

Click [here](#) to get started today or scan the QR Code to the right.



Benefits Contacts

This benefit summary provides selected highlights of the Conservation Legacy employee benefits program. Any discrepancies between information provided through this summary and the actual terms of the policies, contracts and plan documents are governed by the terms of these policies, contracts and plan documents.

Plan	Contact	Phone Number	Website
Medical Plan	Anthem	877-811-3106 888-224-4911 (H.S.A.)	www.anthem.com

