



2026



Employee Benefits Guide



useful contact information

Benefit Questions?

Medical



www.anthem.com

877.811.3106

HSA



www.optumbank.com

866.234.8913

Dental



www.metlife.com/dental

800.275.4638

HRA



www.nbsbenefits.com

801.532.4000

Vision



www.vsp.com/metlife

855.638.3931

FSA



www.healthequity.com

877.924.3967

Life & AD&D



www.metlife.com

800.523.2894

EAP



www.eaphelplink.com

833.430.6028

Website Code: POOLPACTEAP

Long Term Disability



www.metlife.com

800.300.4296

Surgery Alternative



www.regenexx.com

866.941.4452

Broker Support



Samm Petersen

samm.petersen@lpins.net

775.560.5986

Medicare Education



Mark Toomey

mark.toomey@lpins.net

775.297.4613



reasons to pay attention

Open Enrollment is your once-a-year opportunity to sign up for or change your medical, dental, vision, life, or other insurance coverages. Many people think Open Enrollment is only for those who are either starting their coverage or know they want to make a change to their plans, but Open Enrollment is important for everyone. **Here are four reasons you should check your benefits during Open Enrollment every year:**



Check to see if there are changes in your plan.

Benefit plan designs do change from time to time. **Changes could be big or small, but either could affect your insurance and/or benefits.** Open Enrollment gives you the opportunity to learn about upcoming changes and ensure your current elections are still the best choice for you.



Check the dollar amounts in your Savings and Spending Accounts.

Members enrolled in plans eligible for HSAs or FSAs should review contributions **at least** annually. With both accounts **providing tax advantages for healthcare expenses**, they are governed by the IRS and are subject to changes in regulation and requirements.



Explore new programs and opportunities.

Tahoe Douglas Fire Protection District is constantly working to identify new benefits and opportunities to better serve our employees and retirees. Various programs are offered throughout the year, and are included in the Open Enrollment materials.



health insurance 101

When reviewing the offered plans, it is important to consider how you and your family use your medical care to make the right choice for your specific situation. Not only that, but it is important to understand some common terms used by insurance carriers and healthcare providers as well.

Helpful terms to know

Network: The list of doctors and facilities that have contracted with the insurance company. Staying in network will provide the best rates when you use your healthcare.

Contracted rates: The amount of money the insurance company and in-network doctors/facilities have negotiated for approved services. If you receive services out-of-network there is not a contract to limit the amount a doctor or provider can charge.

Copayments: A flat dollar amount that will pay a provider at the time you receive care.

Coinsurance: A percentage you pay based on the contracted rate negotiated for the type of service you receive.

Deductible: An amount of money that you are responsible for paying before the insurance company will begin paying for your claims. The deductible only applies to services that indicate deductible applies.

Out-of-pocket maximum: This is the most money you will be responsible for paying during a calendar year. All copays, deductibles and coinsurance paid accumulates towards your out-of-pocket maximum. Once you have met your out-of-pocket maximum you will not have to pay for any other approved in-network services.

PPO: PPO health plans contract with medical providers, such as hospitals and doctors, to create a large network of participating providers. You typically pay less if you use providers that belong to the plan's network.



medical plan

Anthem

PPO HDHP \$3,400

PPO



CY Deductible

Individual / Family

\$3,400 / \$6,800



Coinsurance

you pay 20% after deductible



CY Out-of-pocket Max.

Individual / Family

\$6,000 / \$12,000



Preventive Services

you pay 0%



Office Visits

Primary Care
Specialist

you pay 20% after deductible
you pay 20% after deductible



Emergency Services

Urgent Care
Emergency Room

you pay 20% after deductible
you pay 20% after deductible



Inpatient & Outpatient

Inpatient Hospital
Outpatient Surgery

you pay 20% after deductible
you pay 20% after deductible



Diagnostic Lab & Imaging

Lab
X-ray
MRI, PET, CT scans

you pay 20% after deductible
you pay 20% after deductible
you pay 20% after deductible



Prescription Benefit

Prescription Deductible

Generic (Tier I)
Preferred (Tier II)
Non-preferred (Tier III)
Specialty (Tier IV)

Same as Medical
you pay \$20 copay after deductible
you pay \$60 copay after deductible
you pay \$100 copay after deductible
you pay 30% (up to \$350) after deductible



Health Care Account

More details on the following pages

Limited Purpose FSA and Dependent Care FSA

Tahoe Douglas Fire Protection District pays the full premium cost for Employees and Dependents.



know your options for care

Get to know your care options and cost estimates

How much you pay for care can depend on where you get it. For serious or life-threatening conditions, call 911 or go to an emergency room. For everything else, it may be best to contact your Primary Care Physician first. If seeing your PCP isn't possible, it's important to know your other care options, especially before heading to the ER.

Care Options



24/7 Virtual Visits

See a doctor whenever, wherever



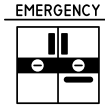
PCP

Care from the doctor who knows you best



Urgent Care

Serious conditions that aren't life-threatening



Emergency Room

Life and limb-threatening emergencies

Average cost

\$

\$\$

\$\$

\$\$\$\$

Hours

24/7

Varies by location

Varies by location

24/7

How to connect

Anthem App (Sydney)

Contact your PCP

Go to the nearest in-network location

Dial 911 or go to the nearest in-network ER.

✓ indicates the suggested place for care when it comes to the following conditions:

Broken bone			✓	✓
Chest pain				✓
Cough	✓	✓		
Fever	✓	✓		
Muscle strain		✓		
Pinkeye	✓	✓		
Shortness of breath				✓
Sinus problems	✓	✓		
Sore throat	✓	✓		
Sprain		✓	✓	
Urinary tract infection	✓	✓		



health savings accounts (HSAs)

Health Savings Accounts (HSAs)

The medical plan offered by **Tahoe Douglas Fire Protection District** is a High Deductible Health Plan (HDHP). This plan is eligible for an HSA. It's important to understand the advantages and limitations with an HSA.



What is an HSA

A Health Savings Account, or HSA, is a tax-advantaged savings account owned by an individual that can be used to pay for qualified medical expenses for the owner and their dependents. Contributions made to an HSA account are made on a pre-tax basis; **this means you save money on the medical expenses you pay for using your HSA because you did not pay taxes on those funds.**

HSA contributions

TDFPD makes the following annual **HSA contributions**:

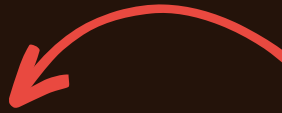
- **Employee Only: \$4,400**
- **Employee + 1 or Family: \$8,750**

Funds are split for the year, the first contribution is disbursed on **January 1st**, and the second is disbursed **July 1st**.

Since TDFPD contributes the full cost of the IRS annual maximums into your HSA account, employees are not permitted to contribute any additional funds, unless over the age of 55.

If you are age 55+, you can contribute an additional amount into your HSA.

- **Catch up Funding (55+): \$1,000**



HSA Advantages:

- HSA Contributions are **tax-Free**
- Amount distributed for qualified medical expenses are **tax-free**
- Unused funds can roll over.

Eligibility Factors

- Must be enrolled on the HDHP
- Not covered by a secondary non-HDHP plan
- Cannot be enrolled in Medicare
- No VA Care in the last 3 months



flexible spending accounts (FSAs)

Dependent Care FSA

For **2026**, you may contribute up to **\$7,500** (per family) to cover eligible dependent care expenses. 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.

Limited Purpose FSA

If you or your employer fund an HSA, you are not eligible to fund a health care FSA. However, you can fund a limited purpose health care FSA. A limited purpose health care FSA can only be used to reimburse **dental and vision expenses**. The 2026 limited purpose health care FSA maximum contribution is \$3,400.

HealthEquity®



Enrollment

FSAs require an annual election. You must enroll each year to participate – there is no “auto-renewing” available.

Plan Year

Dependent Care FSA and Limited purpose FSA run January 1st – December 31st. HR must be notified of elections in November of each year.



dental plan



Dental Plan

In-Network

With your dental plan, you can visit any dentist, but you pay less out-of-pocket when you obtain care from a dentist who is in the **MetLife PDP Plus Network**.



Annual Deductible
[January – December]

\$0 per individual
\$0 per family



Annual Maximum
[January – December]

\$2,000 per individual



Waiting Period

none for preventive
services, basic, major
services



Preventive Services

Cleanings, routine exams, space maintainers, fluoride, sealants, and x-rays

you pay 0% of covered services



Basic Services

Fillings, extractions; certain endo/perio, and oral surgery procedures (see benefit summary for details)

you pay 0% of covered services



Major Services

Crowns, bridges, implants, dentures, inlays, onlays, veneers, and general anesthesia; certain endo/perio, and oral surgery procedures (see benefit summary for details)

you pay 40% of covered services



Orthodontic Services

Children up to age 19

you pay 50% of covered services



Orthodontic Lifetime Maximum

\$2,000

Out-of-network coverage

A dentist who is “out-of-network” means the provider hasn’t agreed to negotiated rates. The plan pays benefits based on the reasonable & customary charge for particular service. If the out-of-network provider charges more, you’ll be responsible for paying the amount that exceeds the reasonable & customary limit plus the applicable coinsurance and deductible. Please refer to plan documents for out-of-network information.

Find a provider by
scanning the QR code!



Tahoe Douglas Fire Protection District pays the full premium cost for Employees and Dependents.

*This information is designed to help you choose a benefit plan for 2026 only. Please refer to the Plan Documents provided by the carrier for information regarding coverage, limitations and exclusions. If there is a difference between this guide and the Plan Documents, the Plan Documents prevail.



vision plan



Vision Plan

In-Network



Routine Vision Exams

\$20 per individual



Benefit Frequency (date of service)

Eye exams
Lenses
Frames

every 12 months
every 12 months
every 12 months



Eye Glasses

Single vision lenses
Lined Bifocal Lenses
Lined Trifocal Lenses
Frame Allowance

\$20 copay
\$20 copay
\$20 copay
up to \$130



Contact Lenses

Prescription medically necessary
Prescription elective (in lieu of eyeglasses)

plan covers up to \$130 of
covered services

With your vision plan, you can visit any provider, but you pay less out-of-pocket when you obtain care from a provider who is in the **MetLife VSP network**.

Find a provider by
scanning the QR
code below!



Tahoe Douglas Fire Protection District pays the full premium cost for Employees and Dependents.

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life and long term disability

Basic life and AD&D insurance

Life insurance is provided through MetLife to help protect yourself and your family against worst-case scenarios. **Tahoe Douglas Fire Protection District provides full-time employees with \$75,000 in group life and accidental death & dismemberment (AD&D) insurance.**



TDFPD pays for the full cost of this benefit – meaning you are not responsible for paying any monthly premiums. Your only responsibility is making sure your beneficiary is up to date.

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Long Term Disability

At **Tahoe Douglas Fire Protection District**, we want to do everything we can to protect you and your family. That's why **TDFPD pays for the full cost of long-term disability insurance** – meaning that you owe nothing out of pocket. This coverage is provided through MetLife.

This benefit ensures that if you are unable to work due to a qualified disability, you won't have to worry about financial stability during your recovery. **The benefit amount is 66.67% of your predisability monthly earning, with a maximum of \$6,000.** By providing the coverage at no cost to employees, we help secure a safety net that supports your income and helps cover ongoing expenses, allowing you to focus fully on your health and wellbeing.

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Tahoe Douglas Fire Protection District pays the full cost of these benefits for employees.

*This information is designed to help you choose a benefit plan for 2026 only. Please refer to the Plan Documents provided by the carrier for information regarding coverage, limitations and exclusions. If there is a difference between this guide and the Plan Documents, the Plan Documents prevail.



making the most of your benefits

Anthem

Sydney Health mobile app

Use Sydney Health to keep track of your health and benefits – all in one place. With a few taps, you can quickly access your plan details, Member Services, virtual care, and wellness resources. Sydney Health stays one step ahead – moving your health forward by building a world of wellness around you.

Find Care

Search for doctors, hospitals, and other healthcare professionals in your plan's network and compare costs. You can filter providers by what is most important to you, such as gender, languages spoken, or location. You'll be matched with the best results based on your personal needs.

My Health Dashboard

Use My Health Dashboard to find news on health topics that interest you, health and wellness tips, and personalized action plans that can help you reach your goals. It also offers a customized experience just for you, such as syncing your fitness tracker and scanning and tracking your meals.

Virtual Care

Connect directly to care from the convenience of home. Assess your symptoms quickly using the Symptom Checker or talk to a doctor via chat or video session.

Chat

If you have questions about your benefits or need information, Sydney Health can help you quickly find what you're looking for and connect you to an Anthem representative.

My Health Records

See a full picture of your family's health in one secure place. Use a single profile to view, download, and share information such as health histories and electronic medical records directly from your smartphone or computer.

Download the app today!

Scan the QR Code below:





making the most of your benefits



Expanding your virtual care options

Find complete care support, on your time, through the Sydney Health App.

Visit with a doctor at your convenience.

Accessing the care you need, when you need it, matters. That's why our Sydney Health mobile app connects you to a team of doctors ready to help you on your time. There are two secure ways to find no- or low-cost care through our app:

Chat with a doctor 24/7 without an appointment

- Urgent care support for health issues, such as allergies, a cold, or the flu.
- New prescriptions for concerns such as a cough or a sinus infection.

Schedule a virtual primary care appointment

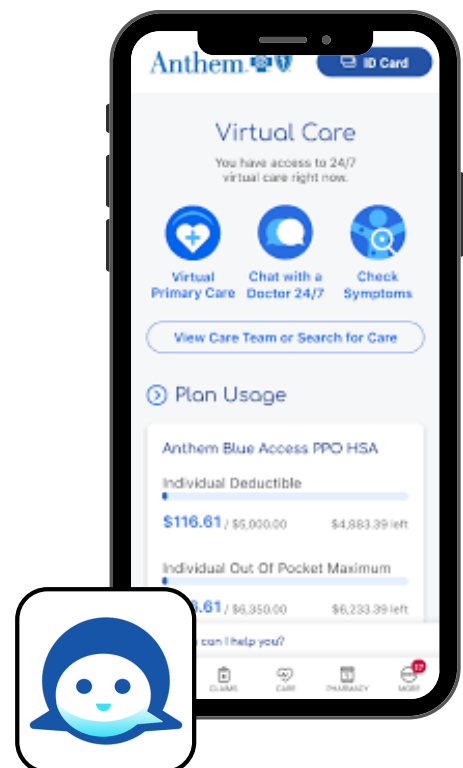
- Routine care, including wellness check-ins and prescription refills.
- Personalized care plans for chronic conditions, such as asthma or diabetes.

Assess your symptoms with the Symptom Checker

When you're sick, you can use the Symptom Checker on Sydney Health to answer a few questions about how you're feeling. That information is run against millions of medical data points to provide care advice tailored to you.

Save money and time with virtual care

Sydney Health brings care to you anywhere, anytime. The Symptom Checker is always free to use, while virtual primary care visits and on-demand urgent care through the app are available at no or low cost.





prescription savings resources

Maximize your pharmacy benefits – even beyond your health plan.

Prescription drug prices can vary widely between pharmacies, and not all medications are priced equally—even with insurance. The good news? These two trusted tools can help you compare prices, access discounts, and potentially save significantly on out-of-pocket costs.

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GoodRx – retail alternative

Compare retail prices and access free discount coupons.

Use GoodRx to search for the lowest prices on prescriptions at local pharmacies. Even if you have insurance, GoodRx coupons can sometimes be cheaper than your cost share so always ask the pharmacy to check both your insurance and the GoodRx price.

While your out-of-pocket costs can be reduced, money spent for prescriptions through GoodRx do not accumulate toward your medical plan deductible or out-of-pocket maximum.

[GoodRx.com/mobile](https://www.GoodRx.com/mobile)

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Scan the QR Code to
download the app today!



Mark Cuban Cost Plus Drugs – mail order alternative

Transparent pricing, directly from the source.

Cost Plus Drugs offers hundreds of common drugs at the lowest possible prices and shipped right to your door. They negotiate directly with manufacturers and pass all savings directly to patients. Get started today in 3 easy steps!



Find your medication

Go to costplusdrugs.com/medications/ to find your generic drugs on our medication list.



Create your account

Go to costplusdrugs.com/create-account/ and enter your basic health information. Make sure to complete all steps.



Ask your doctor to send a new prescription to:
"Mark Cuban Cost Plus Drug Co."



Scan the QR code to get
started!





Regenexx®

Regenexx®: A Non-Surgical Option for Joint, Back & Musculoskeletal Pain



Looking for an alternative to surgery?

Regenexx is a covered benefit available through your health plan that may provide a non-surgical treatment option for certain orthopedic and musculoskeletal conditions.

Using advanced image-guided procedures and your body's own healing cells from blood or bone marrow, Regenexx may help reduce pain, improve function, and support recovery without invasive surgery.

You may be a candidate if you are experiencing:

- Knee pain or arthritis
- Shoulder pain or injuries
- Hip pain
- Back or neck pain
- Tendon, ligament, or joint injuries

Why Consider Regenexx?

- Non-surgical treatment option for many orthopedic conditions
- Minimally invasive, image guided procedures
- Short recovery time compared to traditional surgery
- Available through a nationwide network of providers
- Designed for individuals who want to explore alternatives before undergoing surgery

How the Process Works:

1. Contact Regenexx to determine eligibility.
2. Complete an evaluation with a Regenexx provider.
3. Review your treatment options and coverage.
4. If appropriate, receive treatment through a participating provider.

Contact Information:

Contact Member Services at **866-941-4452** or go to **www.regenexx.com** for more information or to determine eligibility!



employee assistance program

Employee Assistance Program

Employee Assistance Program (EAP) is provided to all full-time active employees through Acentra health, and the cost is covered by **Tahoe Douglas Fire Protection District** for you and your family.



EAP provides confidential, professional counseling and support for all of life's challenges. This service is provided **24/7, 7 days a week, 365 days a year**. Employees are given **4 counseling sessions per issue**. This is available to **you and your dependents**.

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EAP Services

- **Immediate 24/7 support and guidance**
 - Access to a master level counselor 365 days a year 24/7.
 - **Counseling & Support**
 - Help with stress, anxiety, depression, relationship issues, substance abuse issues, or any other challenges in your life.
 - **Online Tools & Resources**
 - Webinar services, self-assessments, podcasts, childcare and eldercare resources, etc.
 - **Legal Consultation**
 - Free 30-minute phone consultation with a lawyer for any issue (excluding work-related issues). After 30-minutes you will get a 25% discount for additional time and services.
 - **Financial Consultation**
 - Free 30-minute phone consultation with a financial expert. To help with budgeting, debt management, and getting ready for retirement.
 - **Work – Life Support & Referral Services**
 - Can help you research fitness centers, colleges, adoption services, relocation services, volunteer opportunities, pet care, and more.
 - **Caregiver Support Services**
 - Can help you find childcare, summer camps, afterschool activities, or backup care. this gives guidance and support for child or elder care in your area.
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Call **833.430.6028**

TSR: 711

Website: **www.eaphelpink.com**

Code: POOLPACTEAP



medicare navigation services

Medicare Made Easy – Clear. Personal. Stress-Free.

Are you turning 65 soon? Already eligible for Medicare but not sure where to start? Medicare is a major milestone – and it can be confusing. That’s why we’re here.

Through **Tahoe Douglas Fire Protection District’s** Medicare Navigation Services program, you have access to licensed Medicare consultants who will help you understand your options, compare plans, and choose what’s best for you. At no cost.

What You Can Expect:

Personal Guidance

One-on-one support from a licensed Medicare advisor. **Spouses welcome!**

Simplified Plan Comparison

We help you evaluate your **best-fit** options.

Enrollment Assistance

Step-by-step help when you are ready to transition to Medicare.

Education First

We’re here to help you understand your options, **with no obligation to enroll.**

Who Should Use this Service?

- Turning 64 or 65 in the next year
- Transitioning from an employer plan
- Supporting a spouse or parent
- Exploring Medicare Advantage, Medigap, or Part D

Why This Matters:

Medicare isn’t one-size-fits-all.

Your situation, medications, doctors, and budget are unique – and your coverage should be too.

Whether you are working past 65, planning to retire, or already navigating Medicare, **we’ll help you make informed decisions with clarity and confidence.**



Mark Toomey
Lead Medicare Specialist

Mark.Toomey@lpins.net
775-297-4613





This Guide is only intended to offer an outline of benefits. All details and contract obligations of plans are stated in the group contract/insurance documents, including any disclosures (whether regarding "grandfathering" of plans or others) required by the new health reform law, the Patient Protection and Affordable Care Act (PPACA). In the event of conflict between this guide and the group contract/insurance documents, the group contract/insurance documents will prevail. Please contact your Human Resources Department for further information.