



# Livingston County



## 2026 Benefit Guide Part-Time LCCOPS Employees

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**Livingston County** is proud to offer a comprehensive benefits package to our employees. This benefit summary is for part-time employees covered by the collective bargaining agreement between Livingston County and Livingston County Coalition of Patrol Services (LCCOPS). You will have access to benefit summaries which may provide more detailed information about the benefits.

**Additional benefits include:**

- » Retirement Programs
- » Wellness Programs
- » Employee Assistance Program

Contact HR as follows:

Livingston County Human Resources Department  
6 Court Street, Room 206  
Geneseo, NY 14454

[HumanResources@livingstoncountyny.gov](mailto:HumanResources@livingstoncountyny.gov)

585.243.7570



This document is an outline of the coverage provided under the Livingston County benefit plans based as well as the terms and conditions set forth in the collective bargaining agreement between Livingston County and Livingston County Coalition of Patrol Services (LCCOPS). It does not include all the terms, coverage, exclusions, limitations, and conditions contained in the official Plan Document, applicable insurance policies and contracts (collectively, the "plan documents"). The plan documents themselves must be read for those details. The intent of this document is to provide you with general information about your employer's benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice or to provide benefits that are not expressly provided for within the collective bargaining agreement. To the extent that any of the information contained in this document is inconsistent with the plan documents and/or the collective bargaining agreement, the provisions set forth in the plan documents and collective bargaining agreement will govern in all cases. If you wish to review the plan documents or you have questions regarding specific issues or plan provisions, you should contact the Livingston County Human Resources Department.

## 2026 Holiday Pay

All part-time employees required to work on New Year's Day, Independence day, Thanksgiving Day, or Christmas day shall be paid at one and one half (1.5) time their hourly rates for the total time worked on holiday.

## Retirement

Enrollment in the New York State Employees Retirement System is optional for part-time employees. Employee contributions will vary by tier.

Tier 1-4	
3% contribution for the first 10 years	
Tier 5	
3% contribution for your entire employment	
Tier 6	
\$45,000 or less	3%
\$45,000.01 – \$55,000	3.5%
\$55,000.01 – \$75,000	4.5%
\$75,000.01 – \$100,000	5.75%
More than \$100,000	6%

## Direct Deposit

All employees shall participate in the Livingston County direct deposit program.

## Deferred Compensation

LCCOPS part-time employees are eligible to participate in 457(b) deferred compensation plan.

## College Savings (529 Program)

Livingston County will provide a payroll deduction for employees who wish to participate in the New York State College Savings Program. This program allows you to save for college expenses by investing contributions and providing tax benefits.

## Wellness Program

In Partnership with University of Rochester Employee Wellness (UREW) Team

We are pleased to offer year round access to programming and services through UREW including biometric screenings, health coaching, and lifestyle and condition management courses at no cost to employees. Watch for more information.

Additionally, multiple fitness facilities are provided at County sites for use with no cost.

Employees are eligible to utilize Employee Assistance Program (EAP) services whenever needed.



## Annual Notices

### Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit [www.healthcare.gov](http://www.healthcare.gov).

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are **not** currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **877.KIDS.NOW** or [www.insurekidsnow.gov](http://www.insurekidsnow.gov) to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at [www.askebsa.dol.gov](http://www.askebsa.dol.gov) or call **866.444.EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2024. Contact your state for more information on eligibility.

<b>ALABAMA – Medicaid</b> <a href="http://myalhipp.com">http://myalhipp.com</a> 855.692.5447	<b>INDIANA – Medicaid</b> Health Insurance Premium Payment Program Family and Social Services Administration <a href="http://www.in.gov/fssa/dfr/">http://www.in.gov/fssa/dfr/</a>   800.403.0864 All other Medicaid <a href="https://www.in.gov/medicaid/">https://www.in.gov/medicaid/</a>   800.457.4584
<b>ALASKA – Medicaid</b> The AK Health Insurance Premium Payment Program <a href="http://myakhipp.com/">http://myakhipp.com/</a>   866.251.4861 CustomerService@MyAKHIPP.com Medicaid Eligibility: <a href="https://health.alaska.gov/dpa/Pages/default.aspx">https://health.alaska.gov/dpa/Pages/default.aspx</a>	<b>IOWA – Medicaid and CHIP (Hawki)</b> Medicaid: <a href="https://hhs.iowa.gov/programs/welcome-iowa-medicaid">https://hhs.iowa.gov/programs/welcome-iowa-medicaid</a> 800.338.8366 Hawki: <a href="https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link/hawki">https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link/hawki</a> 800.257.8563 HIPP: <a href="https://hhs.iowa.gov/programs/welcome-iowa-medicaid/fee-service/hipp">https://hhs.iowa.gov/programs/welcome-iowa-medicaid/fee-service/hipp</a> 888.346.9562
<b>ARKANSAS – Medicaid</b> <a href="http://myarhipp.com">http://myarhipp.com</a> 855.MyARHIPP (855.692.7447)	<b>KANSAS – Medicaid</b> <a href="https://www.kancare.ks.gov/">https://www.kancare.ks.gov/</a> 800.792.4884   HIPP Phone: 800.967.4660
<b>CALIFORNIA – Medicaid</b> Health Insurance Premium Payment (HIPP) Program <a href="http://dhcs.ca.gov/hipp">http://dhcs.ca.gov/hipp</a> 916.445.8322   Fax: 916.440.5676   Email: <a href="mailto:hipp@dhcs.ca.gov">hipp@dhcs.ca.gov</a>	<b>KENTUCKY – Medicaid</b> Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP): <a href="https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx">https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx</a> 855.459.6328   <a href="mailto:KIHIPPPROGRAM@ky.gov">KIHIPPPROGRAM@ky.gov</a> KCHIP: <a href="https://kynect.ky.gov">https://kynect.ky.gov</a>   877.524.4718 Medicaid: <a href="https://chfs.ky.gov/agencies/dms">https://chfs.ky.gov/agencies/dms</a>
<b>COLORADO – Medicaid and CHIP</b> Health First Colorado (Colorado's Medicaid Program) <a href="https://www.healthfirstcolorado.com">https://www.healthfirstcolorado.com</a> Member Contact Center: 800.221.3943   State Relay 711 Child Health Plan Plus (CHP+) <a href="https://www.colorado.gov/pacific/hcpf/child-health-plan-plus">https://www.colorado.gov/pacific/hcpf/child-health-plan-plus</a> Customer Service: 800.359.1991   State Relay 711 Health Insurance Buy-In Program (HIBI) <a href="https://www.mycohibi.com/">https://www.mycohibi.com/</a> HIBI Customer Service: 855.692.6442	<b>LOUISIANA – Medicaid</b> <a href="http://www.medicaid.la.gov">www.medicaid.la.gov</a> or <a href="http://www.lahipp.la.gov">www.lahipp.la.gov</a> 888.342.6207 (Medicaid hotline) or 855.618.5488 (LaHIPP)
<b>FLORIDA – Medicaid</b> <a href="http://www.flmedicaidtprecovery.com/flmedicaidtprecovery.com/hipp/index.html">www.flmedicaidtprecovery.com/flmedicaidtprecovery.com/hipp/index.html</a> 877.357.3268	<b>MAINE – Medicaid</b> Enrollment: <a href="https://www.mymaineconnection.gov/benefits/s/?language=en_US">https://www.mymaineconnection.gov/benefits/s/?language=en_US</a> 800.442.6003   TTY: Maine relay 711 Private Health Insurance Premium: <a href="https://www.maine.gov/dhhs/ofa/applications-forms">https://www.maine.gov/dhhs/ofa/applications-forms</a> 800.977.6740   TTY: Maine relay 711
<b>GEORGIA – Medicaid</b> GA HIPP Website: <a href="https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp">https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp</a> 678.564.1162, Press 1 GA CHIPRA Website: <a href="https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra">https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra</a> 678.564.1162, Press 2	<b>MASSACHUSETTS – Medicaid and CHIP</b> <a href="https://www.mass.gov/masshealth/pa">https://www.mass.gov/masshealth/pa</a> 800.862.4840   TTY: 711   Email: <a href="mailto:masspreassistance@accenture.com">masspreassistance@accenture.com</a>

<b>MINNESOTA – Medicaid</b>
<a href="https://mn.gov/dhs/health-care-coverage/">https://mn.gov/dhs/health-care-coverage/</a> 800.657.3672
<b>MISSOURI – Medicaid</b>
<a href="http://www.dss.mo.gov/mhd/participants/pages/hipp.htm">http://www.dss.mo.gov/mhd/participants/pages/hipp.htm</a> 573.751.2005
<b>MONTANA – Medicaid</b>
<a href="http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP">http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP</a> 800.694.3084   Email: HSHIPPProgram@mt.gov
<b>NEBRASKA – Medicaid</b>
<a href="http://www.ACCESSNebraska.ne.gov">http://www.ACCESSNebraska.ne.gov</a> Phone: 855.632.7633   Lincoln: 402.473.7000   Omaha: 402.595.1178
<b>NEVADA – Medicaid</b>
<a href="http://dhcfp.nv.gov">http://dhcfp.nv.gov</a> 800.992.0900
<b>NEW HAMPSHIRE – Medicaid</b>
<a href="https://www.dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program">https://www.dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program</a> 603.271.5218   Toll free number for the HIPP program: 800.852.3345, ext. 15218   Email: DHHS.ThirdPartyLiabi@dhhs.nh.gov
<b>NEW JERSEY – Medicaid and CHIP</b>
Medicaid: <a href="http://www.state.nj.us/humanservices/dmahs/clients/medicaid">http://www.state.nj.us/humanservices/dmahs/clients/medicaid</a> 800.356.1561 CHIP: <a href="http://www.njfamilycare.org/index.html">http://www.njfamilycare.org/index.html</a> 800.701.0710 (TTY: 711)   Premium Assistance: 609.631.2392
<b>NEW YORK – Medicaid</b>
<a href="https://www.health.ny.gov/health_care/medicaid/">https://www.health.ny.gov/health_care/medicaid/</a> 800.541.2831
<b>NORTH CAROLINA – Medicaid</b>
<a href="https://dma.ncdhhs.gov">https://dma.ncdhhs.gov</a> 919.855.4100
<b>NORTH DAKOTA – Medicaid</b>
<a href="https://www.hhs.nd.gov/healthcare">https://www.hhs.nd.gov/healthcare</a> 844.854.4825
<b>OKLAHOMA – Medicaid and CHIP</b>
<a href="http://www.insureoklahoma.org">http://www.insureoklahoma.org</a> 888.365.3742
<b>OREGON – Medicaid and CHIP</b>
<a href="http://healthcare.oregon.gov/Pages/index.aspx">http://healthcare.oregon.gov/Pages/index.aspx</a> 800.699.9075
<b>PENNSYLVANIA – Medicaid and CHIP</b>
<a href="https://www.pa.gov/en/services/dhs/apply-for-medicaid-health-insurance-premium-payment-program-hipp.html">https://www.pa.gov/en/services/dhs/apply-for-medicaid-health-insurance-premium-payment-program-hipp.html</a> 800.692.7462 CHIP Website: <a href="https://www.dhs.pa.gov/CHIP/Pages/CHIP.aspx">https://www.dhs.pa.gov/CHIP/Pages/CHIP.aspx</a> CHIP Phone: 800.986.KIDS (5437)
<b>RHODE ISLAND – Medicaid and CHIP</b>
<a href="http://www.eohhs.ri.gov">http://www.eohhs.ri.gov</a> 855.697.4347 or 401.462.0311 (Direct Rlte Share Line)
<b>SOUTH CAROLINA – Medicaid</b>
<a href="http://www.scdhhs.gov">http://www.scdhhs.gov</a> 888.549.0820
<b>SOUTH DAKOTA – Medicaid</b>
<a href="http://dss.sd.gov">http://dss.sd.gov</a> 888.828.0059

<b>TEXAS – Medicaid</b>
<a href="https://www.hhs.texas.gov/services/financial/health-insurance-premium-payment-hipp-program">https://www.hhs.texas.gov/services/financial/health-insurance-premium-payment-hipp-program</a> 800.440.0493
<b>UTAH – Medicaid and CHIP</b>
Utah's Premium Partnership for Health Insurance (UPP) <a href="https://medicaid.utah.gov/upp/">https://medicaid.utah.gov/upp/</a>   Email: <a href="mailto:upp@utah.gov">upp@utah.gov</a>   888.222.2542 Adult Expansion: <a href="https://medicaid.utah.gov/expansion/">https://medicaid.utah.gov/expansion/</a> Utah Medicaid Buyout Program: <a href="https://medicaid.utah.gov/buyout-program/">https://medicaid.utah.gov/buyout-program/</a> CHIP: <a href="https://chip.utah.gov/">https://chip.utah.gov/</a>
<b>VERMONT – Medicaid</b>
<a href="https://dvha.vermont.gov/members/medicaid/hipp-program">https://dvha.vermont.gov/members/medicaid/hipp-program</a> 800.250.8427
<b>VIRGINIA – Medicaid and CHIP</b>
<a href="https://coverva.dmas.virginia.gov/learn/premium-assistance/famis-select">https://coverva.dmas.virginia.gov/learn/premium-assistance/famis-select</a> <a href="https://coverva.dmas.virginia.gov/learn/premium-assistance/health-insurance-premium-payment-hipp-programs">https://coverva.dmas.virginia.gov/learn/premium-assistance/health-insurance-premium-payment-hipp-programs</a> Medicaid and Chip: 800.432.5924
<b>WASHINGTON – Medicaid</b>
<a href="https://www.hca.wa.gov/">https://www.hca.wa.gov/</a> 800.562.3022
<b>WEST VIRGINIA – Medicaid and CHIP</b>
<a href="https://dhhr.wv.gov/bms/">https://dhhr.wv.gov/bms/</a> or <a href="http://mywvhipp.com/">http://mywvhipp.com/</a> Medicaid: 304.558.1700 CHIP Toll-free: 855.MyWVHIPP (855.699.8447)
<b>WISCONSIN – Medicaid and CHIP</b>
<a href="https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm">https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm</a> 800.362.3002
<b>WYOMING – Medicaid</b>
<a href="https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/">https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/</a> 800.251.1269

To see if any other states have added a premium assistance program since July 31, 2024, or for more information on special enrollment rights, contact either:

**U.S. Department of Labor**  
Employee Benefits Security Administration  
[www.dol.gov/agencies/ebsa](http://www.dol.gov/agencies/ebsa)  
866.444.EBSA (3272)

**U.S. Department of Health and Human Services**  
Centers for Medicare & Medicaid Services  
[www.cms.hhs.gov](http://www.cms.hhs.gov)  
877.267.2323, Menu Option 4, Ext. 61565

OMB Control Number 1210-0137 (expires 1/31/2026)

*This benefit summary prepared by*



**Gallagher**

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