

Your Benefits News

Tacoma Employees and Family Members,

Choosing your benefit plans is an important decision for you and your family. This Open Enrollment Newsletter highlights the benefit changes taking place in 2023, and information on how to complete your Open Enrollment elections.

In anticipation of Open Enrollment, we recently emailed you a Benefits Confirmation Statement to help you review your current enrollments, verify the accuracy of your covered dependents and beneficiaries, and make plans for Open Enrollment. We hope you found this useful.

As a reminder, Open Enrollment is the one special time of year when you can make changes to your plan options and dependents outside of experiencing a qualifying life event (e.g. marriage, birth of a child, loss of other coverage, etc.). Even if you do not wish to make changes to your benefit plan selections or the dependents enrolled on your plans for 2023, **we strongly encourage you to review your current information for accuracy.** Additionally, if you are interested in enrolling in a Section 125 Flexible Spending Account (FSA) for 2023, you must make a new annual election during Open Enrollment.

If you have questions, or need additional assistance, please contact the Human Resources Benefits Office at benefits@cityoftacoma.org or (253) 573-2345.



Kari L. Louie
Assistant Human Resources Director

City of
Tacoma

2023

Open
Enrollment
November 1
Through
November 15

BLET
Smart-TD
Yardmasters

Benefit Rates in 2023

Although the City will pay more for some benefit plans in 2023, there will be no monthly premium contribution changes for full-time employees. *(If you met the 2023 Wellness Program incentive requirements, your employee premium for the health insurance will be reduced. See page 3 for details.)*

Benefit Plan	2022 City Plan Cost	2022 Premium (Individual/Family)	2023 City Plan Cost	2023 Premium (Individual/Family)*
Medical Plans				
Regence PPO	\$1,797.78	\$40/\$80	\$1,877.45	\$40/\$80
Regence High-Deductible	\$1,156.13	\$40/\$80	\$1,207.36	\$40/\$80
Kaiser Permanente HMO	\$1,445.67	\$40/\$80	\$1,480.61	\$40/\$80
Dental Plans				
Delta Dental of Washington	\$124.72	\$0/\$0	\$117.49	\$0/\$0
Willamette Dental	\$148.50	\$0/\$0	\$148.50	\$0/\$0
Vision Plans				
Vision Service Plan (VSP)	\$13.04	\$0/\$0	\$11.68	\$0/\$0
Kaiser Permanente	Included in the HMO Medical Plan		Included in the HMO Medical Plan	



ESS Enrollment
Questions & Help
7:30 a.m. - 5:00 p.m.
benefits@cityoftacoma.org
(253) 573-2345

Benefit Plans
Open Enrollment Tools
cityoftacoma.org/benefits

Open Enrollment Changes
Log in to Employee Self Service
cityoftacoma.org/ESS

Need login or password help?
IT Service Desk
(253) 591-2057
Monday - Friday
7:30 a.m. - 5:30 p.m.

See page 8 or the benefits webpage for instructions on how to access Employee Self Service (ESS) and complete Open Enrollment.

Benefit Changes for 2023

Medical Plan Changes

You can visit the Benefits webpage under **Plan Information** to review summaries for the Regence BlueShield (PPO and High-Deductible Health Plans) and Kaiser Permanente (HMO Health Plan). New 2023 plan booklets will be available in the first quarter of 2023.

State Mandated Donor Breast Milk Coverage for Regence BlueShield & Kaiser Medical Plans

Beginning in 2023, this mandate will require coverage for medically necessary donor human milk from a Milk Bank for inpatient use when ordered by a licensed health care provider for an infant who is medically or physically unable to receive maternal human milk or participate in chestfeeding, or whose parent is medically or physically unable to produce maternal human milk or participate in chestfeeding.

Other Kaiser Permanente: Changes

New Advanced Care at Home Program (ACAH): This is a voluntary, patient-centered program designed to provide hospital-level acute care and clinical services to members with certain diagnoses at home, under the direction of Washington Permanente physicians. This option provides members alternatives to hospitalization by bringing the necessary services to them in their home and addresses many safety and quality concerns. Members will not have copayments for services received through the ACAH program.

Inpatient Hospital Services: If a member who is receiving covered services in a hospital for inpatient services loses coverage, that member will no longer be eligible on the coverage termination date. This provision will not apply if the member elects COBRA continuation coverage or is covered under another health plan.

Other Regence BlueShield Changes

Sexual Dysfunction Drugs: Due to the increased demand to treat cardiac and benign prostate conditions, coupled with the low cost of generics within this medication class, effective January 1, 2023, Regence BlueShield will discontinue restricting quantity limits for low-cost generic sexual dysfunction drugs such as tadalafil (Cialis®) and sildenafil (Viagra®), not to exceed one (1) tablet per day. High-cost sexual dysfunction drugs such as vardenafil (Levitra®), vardenafil ODT (Staxyn®) and avanafil (Stendra®) will continue to be restricted to a quantity of eight (8) tablets per month.

Who Can I Cover on my Benefits?

- **Spouse:** Your current legal spouse.
- **Domestic Partner:** Your grandfathered domestic partner who met the requirements of the City of Tacoma Affidavit of Domestic Partnership and was registered and on file with the City of Tacoma as of December 31, 2016; OR, after January 1, 2017, is registered with the State of Washington under chapter 26.60.030 RCW.
- **Child under age 26:** Your children up to age 26 may include: a natural child, adopted child, or a child legally placed with you for adoption, including a child for whom you have assumed a total or partial legal obligation for support in anticipation of adoption, a stepchild or domestic partner's child, or a child for whom you have legal guardianship or court-ordered custody.
- **Child age 26 and over:** Your, your spouse's, or your domestic partner's otherwise eligible child who is age 26 or over and incapable of self-support because of physical, mental, or developmental disability that prevents the child from establishing or maintaining consistent employment or independence that began before their 26th birthday, if you complete and submit the affidavit of dependent eligibility form, with written evidence of the child's incapacity, within 30 days of the later of the child's 26th birthday or your effective date and either:
 - They are a dependent immediately before their 26th birthday; or
 - Their 26th birthday preceded your effective date and he or she has been continuously covered as your dependent on group, individual, or other insurance plan (including public programs) coverage since that birthday.
 - Newly hired employees wishing to enroll an eligible dependent must also be able to demonstrate that the dependent child has been covered on a group, individual, or other insurance plan (including public programs) immediately prior to enrollment on this plan.



Note: You are required to contact the Benefits Office immediately to report any dependents on your plans that no longer meet the above definitions.

Tacoma Employee Wellness Program

The 2023 Wellness Incentive Period has Ended



TACOMA
EMPLOYEE WELLNESS
Growing with Better Health

The 2023 incentive period ran from October 1, 2021 through September 30, 2022.

A letter was mailed to your home in late October indicating if you earned the incentive for next year. If you successfully met the requirements (25,000 point goal), the chart below explains the incentives you will be eligible for based on the health plan you select for 2023. Employees who did not qualify for the incentive, but feel they should have, can submit an appeal form to wellness@cityoftacoma.org by December 15, 2022.

Incentive		
Wellness Credit		
\$20 per month credit toward the premium contribution for medical insurance coverage under the Regence BlueShield or Kaiser Permanente traditional plan; OR		
\$40 per month credit toward the premium contribution for coverage under the Regence BlueShield High-Deductible Health Plan (HDHP) with a Health Savings Account (HSA)		
Contributions to HSA Accounts: Employees who elect the HDHP with HSA plan option will additionally receive contributions to an HSA from the City, which will be prorated per pay period throughout the plan year.		
	City Contributions With Wellness	City Contributions Without Wellness
Employee Coverage	\$1,250/year	\$500/year
Family Coverage	\$2,500/year	\$1,000/year

Virgin Pulse (VP) Wellbeing Experience

The 2024 incentive period is October 1, 2022 through September 30, 2023

The VP platform offers fun challenges, helpful content, engaging social options, and tools to encourage us to make wellbeing a priority. Most importantly, it allows you to get credit for all of the healthy activities that you already practice! Don't forget that you can invite family and friends to join along with you. The VP platform goes beyond physical wellness by helping us make healthy, long-lasting behavior changes for more energy, focus, and drive.

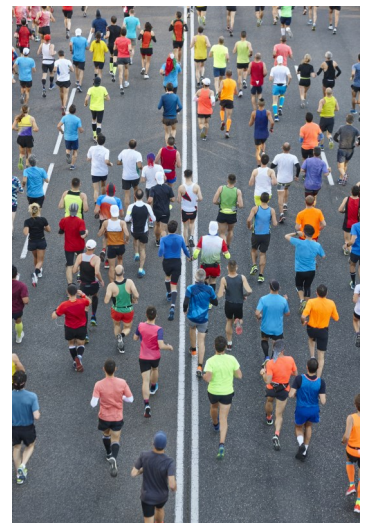
What's New? In addition to the many activities available for you to earn points, you can now earn voucher points for participating in a community physical activity-related event. You can receive up to six vouchers throughout the program year for participating in a 5k - 9.99k and/or 10k+ event for 200 and 400 points each, respectively. Don't forget that you can also earn points for the physical activity exerted during these events! Contact wellness@cityoftacoma.org to share proof of participation and to receive your voucher (up to six times).

Get started today by signing up at join.virginpulse.com/cityoftacoma. The monthly Wellness incentive/credit will be tied to your participation in the VP Wellbeing Platform and there are an abundance of ways for you to earn points! Visit wellness.cityoftacoma.org/tew-webinars-classes to view tutorials and wellness.cityoftacoma.org/wellness-incentives to view the full list of qualifying activities.

Download the Virgin Pulse app today Go to the Apple App store or Google Play store to download the app so that all of the VP tools are in one easily accessible place - your smartphone or tablet.

Save time and effort by syncing a device/app Would you like to spend less time entering activities? Then consider syncing a device or app! This way you will automatically earn points for the healthy, everyday habits that you are already practicing.

Questions? Please visit member.virginpulse.com or wellness.cityoftacoma.org to learn more about the 2024 incentive requirements, sync options, appeals process and other program components.



State Long-Term Care Insurance Program Payroll Tax - Important Updates

Washington State enacted the **Long-Term Services and Supports Trust Act (LTSS) also known as the WA Cares Fund**. This legislation provides for the nation's first public, State-operated, long-term care insurance program, which is funded by a payroll tax on employee wages.

What is Long-Term Care Insurance?

"Long-term care insurance helps with many medical, personal and social services for people with prolonged illnesses or disabilities. It can include home health care, adult day care, nursing home care and group living facility care." <https://www.insurance.wa.gov/long-term-care-insurance>

What Changes Have Been Made to the LTSS Trust Act?

In 2021, the Long-Term Services and Supports (LTSS) Trust Commission developed a report to the Legislature with policy options for addressing some of the issues raised most frequently by the public. In 2022, the Legislature made key improvements to the program and shifted the timeline for implementation.

Implementation Timeline for LTSS Trust Act	
2019	Governor signed the LTSS Trust Act into law
2021	Permanent exemption deadline to purchase private LTC insurance policy by November 1, 2021
2022	Legislature passed reforms to LTSS Trust Act – delays implementation
2023	January: Exemption applications available for certain groups (optional exemptions) July: Workers begin paying LTSS tax
2026	July: Benefits become available through LTSS program for qualified/eligible individuals

- **People who are near retirement earn partial benefits for each year they work.** Anyone born before January 1968 can now earn 10% of the full benefit amount for each year they work at least 500 hours.
- Certain workers who would be unlikely to qualify or use their benefits can now request an exemption starting on January 1, 2023:
 - **Workers who live out of state, workers on non-immigrant visas, and military spouses can be granted a conditional exemption.** Workers with these exemptions will begin contributing to the State program if their situation changes and they no longer qualify for an exemption. *Note: Employees with conditional exemptions will be required to notify their employer and ESD within 90 days of no longer qualifying. Employees who fail to provide notification will owe any unpaid premiums due to ESD and be assessed interest.*
 - **Veterans with a 70% or higher service-connected disability can choose to permanently opt out.** These workers have access to some long-term care benefits through the Veterans Administration (VA).
- **Contributions will begin July 1, 2023, and benefits will become available July 1, 2026.**

The LTSS Trust Commission is currently studying ways to make benefits available to people who qualify for program benefits and then move out of Washington state. The Commission will submit this analysis on benefit portability to the Legislature at the end of 2022.

How Much Does it Cost Employees to Pay the Long-term Care Tax?

Beginning July 1, 2023, the State will begin assessing a payroll tax on all employee wages. Unlike other payroll taxes, there is no cap on the wages subject to this tax. In 2023, the rate is \$0.58 per \$100 of earnings. By way of example, an employee earning \$50,000 per year would contribute \$290 annually, while an employee earning \$150,000 would contribute \$870 annually. This rate may increase over time based on the State's determination.

Private Insurance Exemptions

If you purchased a qualifying private long-term care insurance plan last year by November 1, 2021, you can still apply for a permanent exemption from the WA Cares Fund. **The deadline for applying for this type of exemption is December 31, 2022.** **The choice to apply for this type of exemption is permanent and if an individual is approved for an exemption, they'll be permanently disqualified from the WA Cares program.**

**Note: Workers who were already approved by the State for a permanent WA Cares exemption because they hold a long-term care insurance plan do not need to reapply. Opting back into the program is not an option provided in current law.*

To opt out of the State's long-term care program under the private insurance exemption, individuals must apply through the Employment Security Department (ESD) website wacaresfund.wa.gov, before December 31, 2022. Visit the **Exemptions** section of the website and complete an Exemption Application. Individuals will need to verify their identity and establish a SecureAccess Washington (SAW) account. Individuals may not need to provide a copy of their long-term care insurance policy at this time but may be required to provide it in the future.

City employees must submit the exemption approval letter received from ESD to the City's Benefits Office via email at benefits@cityoftacoma.org. If an employee fails to provide written notification of an approved exemption to the Benefits Office, the City must collect and remit premiums to ESD.

Questions?

For the full details on the State Long-Term Care Program/Payroll Tax, please refer to City's Benefits webpage as well as the State's website wacaresfund.wa.gov. You can also reach out to the Benefits Office at benefits@cityoftacoma.org or at (253) 573-2345.

Flexible Spending Account (FSA) Annual Contribution Limits

The Health Care FSA annual plan limit has increased for 2023, the Dependent Care FSA limit has remains the same.

Plan Type	2023 Annual Contribution Limits
Health care FSA	\$3,050
Dependent Care FSA	\$5,000

DON'T FORGET: If you want to be enrolled in either FSA plan option for 2023, you MUST make a new election in ESS during Open Enrollment. The IRS requires you to elect these plans annually.

Temporary COVID-19 Relief for the Flexible Spending Account (FSA) Benefit Ends in 2023

There were many temporary provisions that were put in place related to the Flexible Spending plan that impacted benefits in 2020 through 2022. A summary of these provisions is listed below:

- Allowed employees to make prospective mid-year elections and election changes
- Extended Health Care FSA Grace Periods
- Added Dependent Care FSA Grace Periods

Returning to FSA Normal Plan Design Reminders:

- **Employees must make an election during Open Enrollment to have the FSA benefit (health or dependent care) for 2023.** The only way to make an election or change an election outside of Open Enrollment is if the employee experiences a qualifying family life event.
- Any funds deposited into an employee's Health Care FSA account at the end of 2022 will be subject to a grace period through March 15, 2023. To avoid forfeiture of these funds, an employee can submit eligible claims expenses incurred in the new 2023 calendar year to be applied to the funds remaining from 2022.
- Any funds deposited into an employee's Dependent Care FSA account by the end of 2022 will not be subject to a grace period and will be forfeited unless there are claims to submit against those funds that were incurred in calendar year 2022.
- The deadline to submit claims toward the Health Care and Dependent Care FSA funds collected in 2022 is April 30, 2023. After this date, funds will be forfeited to the plan to assist with administrative expenses.
- To avoid forfeiture of funds collected in 2022, please visit tpscbenefits.com/hsa-hra-fsa for helpful information on the type of expenses that can be submitted against these funds, such as over-the-counter items like band-aids, cough medicine, aspirin, female health care products, etc.



Deferred Compensation Plan

Annual Contribution Limits

The Deferred Compensation Plan limits have increased for 2023.

Contribution Category	2023 Annual Contribution Limits
Regular Deferral	\$22,500
Age 50+ Catch-Up	\$30,000
Pre-Retirement Catch-Up	\$45,000

New Enrollment & Contribution Change Process for Deferred Compensation Plan

We are excited to announce that effective November 1, 2022, employees will work directly with our deferred compensation plan vendors to enroll in the plan and make changes to their contribution elections. This change will eliminate the need for paper forms, is quick, convenient, and secure. It also will help participants become more acquainted with our vendor websites, which have a host of useful information such as educational materials, tools, and calculators to help participants stay on top of retirement saving goals.

Effective November 1, 2022, instead of completing a paper enrollment/change application or signing into Employee Self Service (ESS) to make contribution changes, employees will now handle these activities directly through our vendors. Access options will include the vendors' website, mobile app, or by calling their customer service line. Staff from the Benefits Office will process enrollment information from the vendor websites to coordinate payroll contributions for the plan.

Note: Special activities like pre-retirement catch-up enrollment/calculations, employee separations and retirements, and leaves of absence issues will still be coordinated directly with the Benefits Office.

For complete details on how to enroll or make changes to your contribution elections with MissionSquare or Nationwide, please refer to the City of Tacoma benefits website at cityoftacoma.org/benefits under **Plan Information** and **Deferred Compensation**. If you have questions about these changes, please contact the Benefits Office at benefits@cityoftacoma.org or (253) 573-2345 or contact your representative at MissionSquare or Nationwide:

MissionSquare: Keith Penewit kpenewit@missionsq.org (202) 759-7015 Cell - (202) 430-3932
Nationwide: Mike Ferguson m.ferguson@nationwide.com (509) 385-7825 (Fire: Local 31 employees only)

Health Savings Account Contribution Limits

Coverage	2022	2023
Single	\$3,650	\$3,850
Family	\$7,300	\$7,750
Catch-Up (Age 55-65)	\$1,000	\$1,000

The Internal Revenue Service (IRS) has increased the Health Savings Account (HSA) annual limits for 2023. This means you are able to put more money into your account on a pre-tax basis. The High-Deductible Health Plan (HDHP) with an HSA is very different from the traditional medical plans the City offers, and may not be the right fit for everyone.

The IRS may not allow you to use your HSA account to pay for qualified health expenses for some of your dependents (e.g. domestic partners and adult children) unless they are claimed on your tax return and meet requirements of Internal Revenue Code (IRC) Section 152.

If you are considering enrolling in this plan for 2023, we recommend you visit the Benefits webpage to review the Frequently Asked Questions (FAQ) for the HDHP/HSA. You can also speak to our Plan Administrator, HealthEquity, 24/7, 365 days a year with your questions toll-free at (866) 346-5800 or healthequity.com/HSAlearn.

(Note: See the Wellness article on page 3 on the City's contributions to an HSA for employees with an HDHP.)

Are you eligible to establish an HSA?

The Internal Revenue Service has established rules for health savings accounts (HSAs) that restrict who can establish an account and make contributions:

- ✓ You must be enrolled in a qualified high-deductible health plan (HDHP)
- ✓ You cannot be covered by another health insurance plan (such as a spouse's plan), unless it is a qualified HDHP
- ✓ You cannot be enrolled in a general purpose flexible spending account (FSA) or have coverage through a spouse's FSA*
- ✓ You cannot be enrolled in a health reimbursement arrangement (HRA) or have coverage through a spouse's HRA*
- ✓ You cannot be covered by other health insurance through Medicare, TRICARE, or Indian Health Services
- ✓ You cannot be claimed as a dependent on someone else's tax return. You can be listed as a spouse filing jointly.

*Individuals can be enrolled in or covered through a spouse's limited purpose FSA or HRA. The City of Tacoma currently offers a general purpose FSA. Employees who sign up for one of the HDHPs will not be able to sign up for the Health Care FSA benefit. However, you can still participate in the Dependent Care FSA.

Understanding a High-Deductible Health Plan with a Health Savings Account

A **high-deductible health plan (HDHP)** is similar to a traditional health plan. There is an annual deductible that must be satisfied before the health plan will begin to contribute toward the cost of an individual's health claims. However, in-network preventative care services are covered at 100 percent by the health plan and not subject to the annual deductible. Once the deductible is met, the health plan shares in the cost of an individual's health claims until the out-of-pocket maximum (OOPM) limit has been satisfied. After the OOPM is satisfied, the health plan will cover the remainder of the in-network health claims for the rest of the plan year. So what is different with an HDHP? With a HDHP, the annual deductible and the OOPM levels are *much larger* and they are often combined with a health savings account (HSA) feature.

A **health savings account (HSA)** is a savings account that gives you tax advantages. In order to have an HSA, you must be enrolled in a qualified HDHP. Employees can make contributions to an HSA post-tax and claim a tax deduction for the contributions made, even if they do not itemize their deductions on their annual tax return. Any interest and earnings through investment on the funds are non-taxable. Similar to a flexible spending account (FSA), the money accumulated in an HSA can be used for out-of-pocket qualified medical expenses. However, unlike an FSA, the "use-it-or-lose-it" rule doesn't apply. The HSA account is a savings account and the money

accumulated belongs to the individual. The account will earn interest and if it reaches a certain threshold, the money can even be invested. As long as the funds are used to pay for qualified out-of-pocket medical expenses, the funds stay sheltered from being taxed.

An HDHP may not be the right fit for everyone and some individuals cannot establish an HSA (see "Are you eligible to establish an HSA?" above). Additionally, the IRS may not allow you to use your HSA account to pay for qualified health expenses for some of your dependents (e.g. domestic partners and adult children), unless they are claimed on your tax return and meet the requirements of Internal Revenue Code (IRC) Section 152.

With an HDHP, an individual may not have enough funds accumulated in their HSA to pay their responsibility for their health claims before the health plan begins to share in the cost. However, with this type of a health plan, an individual may be able to reduce their expenses and build up their HSA account balance while at the same time reducing their taxable earnings. An individual may accomplish this by spending wisely and researching their plan options to ensure they are getting only the needed care at the best price and with the right provider.

If you are considering enrolling in this plan option during Open Enrollment, we strongly urge you to contact the HSA plan administrator to learn about this plan so you are fully informed on how it works.

Personal Time Off (PTO)

Open Enrollment for Converting to PTO

Non-represented City employees currently accruing vacation and sick leave, and employees represented by a union agreement that includes a PTO conversion option, are invited to make a choice between keeping their current Vacation and Sick Leave plans or converting to the City's PTO plan.

Employees electing to convert to Personal Time Off during this open enrollment period will accrue PTO hours with the pay period beginning **December 5, 2022**.

To review more detailed information on converting to the PTO plan, such as which union agreements include a provision for this change, how the conversion works, what the benefit levels are, and how to make a conversion election during Open Enrollment, please visit the Benefits webpage and go to the **Open Enrollment** section.

Note: Eligible Rail employees represented by the Brotherhood of Locomotive Engineers and Yardmasters union agreements were notified of their conversion opportunity in the month of October. Employees represented by the SMART-TD Conductors union agreement are eligible to convert during the entire month of November. All conversions to PTO will be effective with the pay period beginning December 5, 2022.

Questions can also be directed to the Human Resources HRMS Team at HRMSTeam@cityoftacoma.org or call:

Kathy Emerson at (253) 591-5407

Athena Meisenheimer at (253) 573-2482

2023

Open Enrollment is Here

Instructions for Completing Open Enrollment Online

To review your current benefit elections and make any changes to your coverage choices for 2023, log in to Employee Self Service from home or work. **If you have difficulty logging in to ESS, contact the IT Service Desk at (253) 591-2057.**

Per City of Tacoma Information Technology Policy 4.1, "Employees shall not share their user ID or password with any other person".

- ✓ Log in at cityoftacoma.org/ESS
- ✓ Select the **Benefits** link
- ✓ Select the **COT Open Enrollment** link and remember to **Review and Save** when you are done

See detailed instructions for logging into ESS and completing open enrollment on the benefits web page at cityoftacoma.org/benefits under **Open Enrollment**.

Adding Dependents During Open Enrollment?

If you ADD new dependents to your benefit plans during Open Enrollment:

- ✓ ENROLL them in all the appropriate plans in ESS
- ✓ COMPLETE and SUBMIT a *Dependent Eligibility Verification Form* and provide supporting backup documents (e.g. marriage certificate, birth certificate, etc.) to the Benefits Office **NO LATER THAN November 15, 2022**
- ✓ Find the form on the Benefits webpage under Benefits Forms

Open Enrollment Employee Benefit Presentation and Vendor Q & A Event

Open Enrollment Virtual Benefit Recorded Presentation

We will be providing a pre-recorded employee Open Enrollment presentation this year through a link that will be emailed to all employees. To learn more about the benefit changes taking place in 2023, and how to complete Open Enrollment, employees are invited to review this recording conducted by staff from the Compensation & Benefits Office. This will also be available on the Benefits webpage at cityoftacoma.org/benefits under **Open Enrollment**.



Virtual Benefit Vendor Q&A

In order to continue to provide an opportunity for employees to speak directly to our benefits vendors during Open Enrollment, we will be hosting two live Q&A sessions via Zoom with our medical, dental, vision, FSA, life and disability, EAP, and deferred compensation providers. We will also have staff from the Benefits Office as well as our Wellness Coordinator available. Calendar appointments for call-in and login information will be emailed to all employees.

Drop in Virtual Vendor Q&A Sessions via Zoom
(Access information will be emailed to employees)

November 3, 2022 9 a.m. - 10 a.m. & 2 p.m. - 3 p.m.