



BENEFITS OUTLINE 2019 / 2020

Plan Year 7/1/2019 – 6/30/2020
New hire benefits are effective first of the month after 30 days

MEDICAL INSURANCE	AETNA – AET-TRAD-BASE <small>In-Network Benefits</small>	TRADITIONAL
<u>EMPLOYEE COST / MONTH</u>	<u>FIXED CO-PAYS</u> (*AFTER DEDUCTIBLE)	<u>RX CO-PAYS</u> (*AFTER DEDUCTIBLE)
SINGLE: \$ XXX	OFFICE VISIT (PCP): \$ XXX	GENERIC VALUE: \$ XXX
DOUBLE: \$ XXX	SPECIALIST VISIT: \$ XXX	GENERIC: \$ XXX
FAMILY: \$ XXX	URGENT CARE: \$ XXX	PREFERRED BRAND: \$ XXX
	ER VISIT: \$ XXX	NON-PREFERRED BRAND: \$ XXX
<u>EMPLOYER COST / MONTH</u>	AMBULANCE: XXX	PREFERRED SPECIALTY: XXX
SINGLE: \$ XXX	HIGH TECH IMAGING: XXX	NON-PREFERRED SPECIALTY: XXX
DOUBLE: \$ XXX		
FAMILY: \$ XXX		
<u>DEDUCTIBLE</u> (calendar year)	<u>COINSURANCE MAX</u> (calendar year)	<u>TOTAL OUT-OF-POCKET MAXIMUM</u> (calendar year)
INDIVIDUAL: \$ XXX	INDIVIDUAL: \$ XXX	INDIVIDUAL: \$ XXX
FAMILY: \$ XXX	FAMILY: \$ XXX	FAMILY: \$ XXX
	<u>HOSPITAL COINSURANCE</u> XXX	
<p>SPECIAL FEATURES:</p> <ul style="list-style-type: none"> <u>WELLNESS VISITS/CHECKUPS</u>: Covered 100% w/ no co-pay based on gender/age guidelines <u>TELEDOC VIRTUAL VISITS</u>: 24/7 phone/video physician access, including dermatology & behavioral health <u>INFORMED HEALTH LINE</u>: Get your general health questions answered anytime, anywhere, 24/7 <u>OUT-OF-NETWORK BENEFITS</u>: Please see individual plan summaries for details 		

MEDICAL INSURANCE	AETNA – AET-TRAD-VALUE <small>In-Network Benefits</small>	TRADITIONAL
<u>EMPLOYEE COST / MONTH</u>	<u>FIXED CO-PAYS</u> (*AFTER DEDUCTIBLE)	<u>RX CO-PAYS</u> (*AFTER DEDUCTIBLE)
SINGLE: \$ XXX	OFFICE VISIT (PCP): \$ XXX	GENERIC VALUE: \$ XXX
DOUBLE: \$ XXX	SPECIALIST VISIT: \$ XXX	GENERIC: \$ XXX
FAMILY: \$ XXX	URGENT CARE: \$ XXX	PREFERRED BRAND: \$ XXX
	ER VISIT: \$ XXX	NON-PREFERRED BRAND: \$ XXX
<u>EMPLOYER COST / MONTH</u>	AMBULANCE: XXX	PREFERRED SPECIALTY: XXX
SINGLE: \$ XXX	HIGH TECH IMAGING: XXX	NON-PREFERRED SPECIALTY: XXX
DOUBLE: \$ XXX		
FAMILY: \$ XXX		
<u>DEDUCTIBLE</u> (calendar year)	<u>COINSURANCE MAX</u> (calendar year)	<u>TOTAL OUT-OF-POCKET MAXIMUM</u> (calendar year)
INDIVIDUAL: \$ XXX	INDIVIDUAL: \$ XXX	INDIVIDUAL: \$ XXX
FAMILY: \$ XXX	FAMILY: \$ XXX	FAMILY: \$ XXX
	<u>HOSPITAL COINSURANCE</u> XXX	
<p>SPECIAL FEATURES:</p> <ul style="list-style-type: none"> <u>WELLNESS VISITS/CHECKUPS</u>: Covered 100% w/ no co-pay based on gender/age guidelines <u>TELEDOC VIRTUAL VISITS</u>: 24/7 phone/video physician access, including dermatology & behavioral health <u>INFORMED HEALTH LINE</u>: Get your general health questions answered anytime, anywhere, 24/7 <u>OUT-OF-NETWORK BENEFITS</u>: Please see individual plan summaries for details 		

2019 / 2020 Plan Year

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MEDICAL INSURANCE		AETNA – AET-HSA-BASE In-Network Benefits		HSA
EMPLOYEE COST / MONTH		CO-PAYS (*AFTER DEDUCTIBLE)		RX CO-PAYS (*AFTER DEDUCTIBLE)
SINGLE: \$ XXX		OFFICE VISIT (PCP): XXX		GENERIC VALUE: \$ XXX
DOUBLE: \$ XXX		SPECIALIST VISIT: XXX		GENERIC: \$ XXX
FAMILY: \$ XXX		URGENT CARE: XXX		PREFERRED BRAND: \$ XXX
		ER VISIT: XXX		NON-PREFERRED BRAND: \$ XXX
		AMBULANCE: XXX		PREFERRED SPECIALTY: XXX
EMPLOYER COST / MONTH		HIGH TECH IMAGING: XXX		NON-PREFERRED SPECIALTY: XXX
SINGLE: \$ XXX				
DOUBLE: \$ XXX		COINSURANCE MAX (calendar year)		TOTAL OUT-OF-POCKET MAXIMUM (calendar year)
FAMILY: \$ XXX		INDIVIDUAL: \$ XXX		INDIVIDUAL: \$ XXX
		FAMILY: \$ XXX		FAMILY: \$ XXX
DEDUCTIBLE (calendar year)				
INDIVIDUAL: \$ XXX		HOSPITAL COINSURANCE XXX		
FAMILY: \$ XXX				
SPECIAL FEATURES:				
<ul style="list-style-type: none"> • WELLNESS VISITS/CHECKUPS: Covered 100% w/ no co-pay based on gender/age guidelines • TELEDOC VIRTUAL VISITS: 24/7 phone/video physician access, including dermatology & behavioral health • INFORMED HEALTH LINE: Get your general health questions answered anytime, anywhere, 24/7 • OUT-OF-NETWORK BENEFITS: Please see individual plan summaries for details • ^INDIVIDUAL DEDUCTIBLE: Embedded Individual Deductible can be met before the family deductible 				

WAIVE MEDICAL BENEFIT	\$	EMPLOYER PAID
SPECIAL FEATURES:		
<ul style="list-style-type: none"> • Staff that are eligible for but waive medical coverage will receive XXX .in lieu of that coverage. Waive Medical is considered taxable income. 		

DENTAL INSURANCE	DELTA DENTAL PPO	EMPLOYER PAID
EMPLOYEE COST / MONTH	FEATURES	DESCRIPTION (assumes in-network)
SINGLE: \$ XXX	BENEFIT MAX^: \$ XXX	PREVENTATIVE SERVICES: NO DEDUCTIBLE APPLIES – COVERED 100%
DOUBLE: \$ XXX	DEDUCTIBLE^: \$ XXX	BASIC SERVICES: COVERED 80% AFTER DEDUCTIBLE
FAMILY: \$ XXX	ORTHO MAX: \$ XXX	MAJOR SERVICES: COVERED 50% AFTER DEDUCTIBLE
	• Lifetime	ORTHODONIC: COVERED 50% AFTER DEDUCTIBLE
		DEPENDENTS: COVERED TO AGE 26
SPECIAL FEATURES:		
<ul style="list-style-type: none"> • No ID card required – simply let your provider know you have Delta Dental and they will be able to look you up by your SSN • Delta Dental PPO Network • ^ Benefit Maximum and Deductible(s) are calendar year 		

VISION INSURANCE	EYEMED	EMPLOYER PAID
EMPLOYEE COST / MONTH	FEATURES	DESCRIPTION
SINGLE: \$ XXX	EXAMS: ONCE EVERY 12 MONTHS	EXAM CO-PAY: XXX
DOUBLE: \$ XXX	CONTACTS: ONCE EVERY 12 MONTHS	CONTACT LENSES: XXX
FAMILY: \$ XXX	CONTACTS: ONCE EVERY 12 MONTHS	DEPENDENTS: COVERED TO AGE 26
	FRAMES: ONCE EVERY 24 MONTHS	
SPECIAL FEATURES:		
<ul style="list-style-type: none"> • No ID card required – simply let your provider know you have EyeMed and they will look you up by your SSN • Benefit frequency based on date of last visit 		

LIFE INSURANCE	LINCOLN FINANCIAL - CHARTER	VOLUNTARY EMPLOYEE PAID
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COVERAGE

EMPLOYEE: \$10k to \$200k guarantee, Max. 5X Salary or \$500k
 SPOUSE: \$5k to \$50k guaranteed, Max. \$250k or 50% of Emp.
 DEPENDENT: \$10k guaranteed

SPECIAL NOTES:

- You must elect coverage for yourself in order to elect coverage for your spouse and / or child(ren)
- Any amount elected over the guarantee issue amount will be subject to medical underwriting

SHORT TERM DISABILITY LINCOLN FINANCIAL VOLUNTARY EMPLOYEE PAID

COVERAGE

- 60% of weekly salary up to \$1,000 per week
- Benefits begin on (Accident) 1st day
- Benefits begin on (Illness) 8th day
- Max Duration of Benefits: 26 weeks

SPECIAL NOTES:

- Pre-Existing Condition: You may not be eligible for benefits if you have received treatment for a condition within 3 months prior to your effective date under the policy until you have been covered under the policy for 6 months.

LONG TERM DISABILITY LINCOLN FINANCIAL VOLUNTARY EMPLOYEE PAID

COVERAGE

- 60% of weekly salary up to \$5,000 per month
- Elimination Period: 180 days
- Max Duration of Benefits: till age 65

SPECIAL NOTES:

- Pre-Existing Condition: You may not be eligible for benefits if you have received treatment for a condition within 3 months prior to your effective date under the policy until you have been covered under the policy for 6 months.

OFF THE JOB ACCIDENT ALLSTATE VOLUNTARY EMPLOYEE PAID

EMPLOYEE COST / MONTH

EMPLOYEE: \$ XXX
 EE + SPOUSE: \$ XXX
 EE + CHILD: \$ XXX
 EE + FAMILY: \$ XXX

SPECIAL FEATURES

- This coverage pays you cash benefits that correspond with a variety of covered occurrences, such as dismemberment; dislocation or fracture; hospital confinement; ambulance services; physical therapy and more. The cash benefits can be used to help pay for deductibles, treatment, rent and more.
- Benefits are paid once per accident unless otherwise noted in the schedule of benefits.
- Guaranteed issue coverage and coverage available for spouse and child(ren).
- See plan document for more details.

HOSPITAL INDEMNITY ALLSTATE VOLUNTARY EMPLOYEE PAID

EMPLOYEE COST / MONTH

EMPLOYEE: \$ XXX
 EE + SPOUSE: \$ XXX
 EE + CHILD: \$ XXX
 EE + FAMILY: \$ XXX

SPECIAL FEATURES

- This coverage pays a cash benefit for hospital confinement. This benefit is payable directly to you and can keep you from withdrawing money from your personal bank account or your Health Savings Account (HSA) for hospital-related expenses.
- Guaranteed issue coverage and coverage available for spouse and child(ren).
- Coverage can be continued as long as premiums are paid to Allstate Benefits.
- See plan document for more details.

CRITICAL ILLNESS ALLSTATE VOLUNTARY EMPLOYEE PAID

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SPECIAL FEATURES

- Benefit Coverage options are XXX
- This coverage helps offer financial support if you are diagnosed with a covered critical illness. With the expense of treatment often so high, seeking the treatment you need seems like a heavy financial burden. But when a diagnosis occurs (such as cancer, major organ failure, etc.), what you should be focusing on is getting better. With Allstate Benefits, you gain the power to take control of your health when faced with a covered event.
- How It Works: You select the benefit coverage amount you want based on your individual need and your budget. If you have covered family members, this coverage also provides cash benefits for them. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on the percentage payable for the condition.

EAP	EMPLOYEE ASSISTANCE PROGRAM	EMPLOYER PAID
<p><u>SPECIAL FEATURES</u>:</p> <p>https://eaccares.com</p>	<ul style="list-style-type: none"> • Provides up to five personal counseling sessions around various concerns including: <ul style="list-style-type: none"> ○ bereavement ○ substance abuse ○ relationships & family 	<ul style="list-style-type: none"> ○ child care ○ finances ○ various other stressors

Legal / ID Protection	ID Shield/ Legal Shield	VOLUNTARY EMPLOYEE PAID
SPECIAL FEATURES		
<ul style="list-style-type: none"> • <u>ID Shield</u> membership includes security and privacy monitoring social media monitoring, identity restoration and consolation services. <ul style="list-style-type: none"> - If your identity is stolen, ID Shield will fully restore to pre-theft status 	<ul style="list-style-type: none"> • <u>LEGAL Shield</u> offers advice, consultation and representation including legal guidance for common issues. - Membership includes a dedicated law firm, contracts and document review as well as preparation of your end of life documents, 	

FINANCIAL WELLNESS	FINFIT	FREE USE OF SITE WITH REGISTRATION
<p>SPECIAL FEATURES</p> <ul style="list-style-type: none"> • Assess your Personal Financial Health • Budget Building Tools • Financial Calculators • Life Planning 	<ul style="list-style-type: none"> • Financial Education information • Online tracking of your bank accounts • 24/7 Financial Wellness provided online • Short-Term Loan Assistance* 	<p><i>Access via the Axios HR Payroll website in Axios Perks</i></p>
* Fee Based Service, subject to credit approval		

FLEX BENEFIT – HEALTH & DEPENDENT CARE	AXIOS HR	VOLUNTARY EMPLOYEE PAID
SPECIAL FEATURES		

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- Health Care Spending Account Maximum Limit: XXX Annually
- Dependent Care Spending Account Maximum Limit: XXX Annually
- NEW PROVIDER – Omega Benefit Strategies, includes debit cards
- FSA's give you a way to pay for your health care and / or dependent care expenses with pre-tax dollars.
- FSA's are voluntary – YOU decide how much to have taken out of your paycheck and put into your Health care and / or Dependent Care Spending Account(s).
- See the Flexible Spending Account section for more information.

PET INSURANCE

PET'S BEST

VOLUNTARY EMPLOYEE PAID

SPECIAL FEATURES

- Coverage is now available for furry family members!
- You are responsible for the full premium cost and are required to make direct payments to the carrier in order to maintain coverage. This plan does not use payroll deductions.
- How to Enroll: You will enroll directly through the carrier's website. See the plan flyer for more details.

401(k)

MASS MUTUAL

RETIREMENT PLAN

	SERVICE LENGTH	AGE	ENTRY DATE
ELIGIBILITY REQUIREMENTS:	<ul style="list-style-type: none"> • Immediate 	<ul style="list-style-type: none"> • 21 	<ul style="list-style-type: none"> • Immediate
SPECIAL FEATURES:	<ul style="list-style-type: none"> • Single Sign on through Employee Self Service Portal (Coming Soon) 		

HOW TO COMPLETE OPEN ENROLLMENT – NAVIGATION INSTRUCTIONS

2019 / 2020 Plan Year

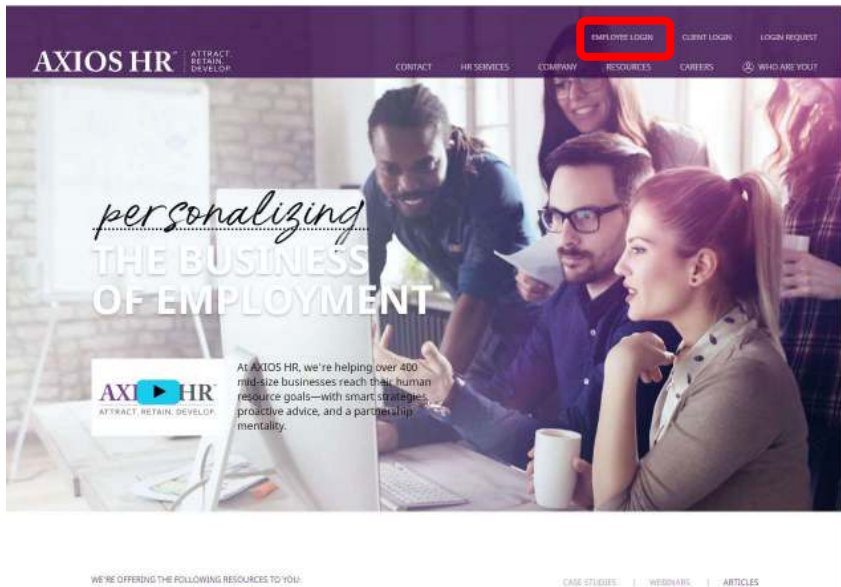
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To elect your benefits for the 2019-2020 plan year, please follow these simple instructions. Please note that it is highly recommended that you use **Google Chrome** to complete your enrollment.

Go to <https://axioshr.com/>, and click on the 'Employee Login' link at the top right of the screen:



Enter your employee credentials and click the blue 'Log In' button:



If you have forgotten your username or password, you may use the 'Forgot Username?' or 'Forgot Password?' links on the login screen for assistance retrieving or resetting your credentials. You may also contact Axios HR for assistance at 1-844-44AXIOS, or by e-mailing service@axioshr.com. The Axios HR Employee Care Team is available to assist you Monday-Friday from 8am-5pm.

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Once you are logged in to the Employee Portal, navigate to the Benefits Enrollment tool by clicking on 'Benefits' in the side menu and then on 'Benefits Enrollment'. The enrollment experience will open in a separate window. If the separate window is not opening, make sure you do not have any pop-ups blocked.

AXIOS HR

Dashboard

Personal

Benefits

- Summary
- Flexible Spending
- Retirement Summary
- Dependents/Beneficiaries
- Benefits Enrollment**
- Employee Assistance Center
- Flex Spending - Omega Benefit Strate

Pay

Paid Time Off

Time Entry

Documents

Events

Taxes

Minimize Navigation

Pay

Most Recent Pay Statements

04/10/2019
03/27/2019
03/13/2019

View More

Paid Time Off

Paid Time Off

Planned	Taken	Available
0 Hours	72 Hours	2.46 Hours

View More

Benefits

Aetna HSA Value 100% 6350
EMPLOYEE + 1
Effective 07/01/2018

AXERLIFE-LGH-25k
25000.00
Effective 07/01/2018

AXERSTD-1-8-26-500-LGH
450.00
Effective 01/01/2019

View Benefits Summary

New Messages

04/18/2019
Last Chance to Complete Your Benefits Enrollment

04/14/2019
Annual Enrollment Ends in 5 Days

04/11/2019
We Have Received Your Benefit Selections

View More

The Axios HR Employee Care Team is here to assist you if you have any questions, or have any trouble making or submitting your benefit elections for the 2019-2020 benefit plan year. You can reach the Axios HR Employee Care Team by phone at 1-844-44AXIOS (1-844-442-9467) or by e-mailing service@axioshr.com.

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