

BENEFITS OUTLINE 2020 / 2021

New hire benefits are effective first of the month 30 days after hire

MEDICAL INSURANCE	BCN - I		GOLD k Benefits			HSA
EMPLOYEE COST / MONTH	CO-PAYS (*AFTER DEDUCTIB	LE)		RX CO-PAYS (*AFTER DEDUCTIBLE)		
SINGLE: \$	OFFICE VISIT (PCP):	\$0		GENERIC/GENERIC VALUE:	\$	25
DOUBLE: \$	SPECIALIST VISIT:	\$0		PREFERRED BRAND:	\$	50
FAMILY: \$	URGENT CARE:	\$0		NON-PREFERRED BRAND:	\$	80
	ER VISIT:	\$0		PREFERRED SPECIALTY:	\$	20% coins
EMPLOYER COST / MONTH	AMBULANCE:	\$0		NON-PREFERRED SPECIALTY:	\$	20% coins
SINGLE: \$	HIGH TECH IMAGING:	\$0				
DOUBLE: \$						
FAMILY: \$	COINSURANCE MAX (p	olan ye	ear)	TOTAL OUT-OF-POCKET MAXIN	1UM	(plan year)
	INDIVIDUAL:	\$	0	INDIVIDUAL:	\$	5,000
DEDUCTIBLE (plan year)	FAMILY:	\$	0	FAMILY:	\$	10,000
INDIVIDUAL: \$ 2,800 FAMILY: \$ 5,600	HOSPITAL COINSURANCE	0%				
SPECIAL FEATURES:	WELLNESS VISITS/CHECKUPS:	: Cove	red 100%	w/ no co-pay based on gender/age g	guide	elines

WAIVE MEDICAL BENEFIT	\$	EMPLOYER PAID
SPECIAL FEATURES:	Staff that are eligible for but waive medical coverage will receiv that coverage. Waive Medical is considered taxable income.	e \$2000.00 annually (\$83.33/pay) in lieu of

DENTAL INS	UR	ANCE	DELTA DENTAL PPO		EMPLOYER PAID		
EMPLOYEE COST	/ M	<u>ONTH</u>	<u>FEATURES</u>			DESCRIPTION (assumes in-netwo	vork)
SINGLE:	\$	0.00	BENEFIT MAX^:	\$ 1	,000	PREVENTATIVE SERVICES:	NO DEDUCTIBLE APPLIES – COVERED 100%
DOUBLE:	\$	0.00	DEDUCTIBLE^:	\$ 5	0	BASIC SERVICES:	COVERED 80% AFTER DEDUCTIBLE
FAMILY:	\$	0.00	ORTHO MAX:	\$ 1	,000	MAJOR SERVICES:	COVERED 50% AFTER DEDUCTIBLE
			 Lifetime 			ORTHODONIC:	COVERED 50% AFTER DEDUCTIBLE
						DEPENDENTS:	COVERED TO AGE 26
			SPECIAL FEATURE	 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 	d Deductible are calendar year





VISION INSURA	NCE		EYEMED		EMPLOYER PAID
EMPLOYEE COST / MO	<u>HTNC</u>	<u>FEATURES</u>		DESCRIPTION	
SINGLE: \$	0.00	EXAMS:	ONCE EVERY 12 MONTHS	EXAM CO-PAY:	\$ 10
DOUBLE: \$	0.00	CONTACTS:	ONCE EVERY 12 MONTHS	CONTACT LENSES:	\$130 Allowance
FAMILY: \$	0.00	CONTACTS:	ONCE EVERY 12 MONTHS	DEPENDENTS:	COVERED TO AGE 26
		FRAMES:	ONCE EVERY 24 MONTHS		
SPECIAL FEATURES:	•	No ID card required – sin Benefit frequency based	nply let your provider know you l on date of last visit	have EyeMed and they v	will look you up by your SSN

SHORT TERM DISABIL	TY LINCOLN FINANCIAL	EMPLOYER PAID
EMPLOYEE: \$ 0.00	 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
Rates will vary based on your monthly salary	 COVERAGE 60% of weekly salary up to \$5,000 per month Elimination Period: 180 days Max Duration of Benefits: till age 65 	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.

LIFE INSURANCE	LINC	OLN FINANCIAL - CHARTE	ER	VOLUNTARY EMPLOYEE PAID
Rates are based on employee's age and amount of coverage	COVERAGE EMPLOYEE: SPOUSE:	\$10k to \$200k guarantee, Max. 5X Salary or \$500k \$5k to \$50k guaranteed, Max. \$250k or 50% of Emp.	SPE •	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
	DEPENDENT:	\$10k guaranteed		

FLEX BENEFIT - HEAL	TH & DEPENDENT CARE	AXIOS HR	VOLUNTARY EMPLOYEE PAID
You elect how much to contribute annually	from a licensed care provider or FSA's give you a way to pay for y	unt Maximum Limit: \$5,000 r program) your health care and / or de le how much to have taken o	ally Annually (Dependent Care expenses must be pendent care expenses with pre-tax dollars. out of your paycheck and put into your Health





OFF THE JOB ACCIDEN	NT ALLSTATE	VOLUNTARY EMPLOYEE PAID				
EMPLOYEE COST / MONTH	SPECIAL FEATURES					
EMPLOYEE:	 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 					
EE + SPOUSE:	more. The cash benefits can be used to help pay for deductibles, treatment, rent and more.					
EE + CHILD:	 Benefits are paid once per accident unless otherwise noted in the schedule of benefits. 					
	 Guaranteed issue coverage and coverage available 	ple for spouse and child(ren).				
EE + FAMILY:	 See plan document for more details. 					

CRITICAL ILLNESS	ALLSTATE	VOLUNTARY EMPLOYEE PAID
Rates will vary based on your issue age, who you wish to cover, the amount of coverage and whether or not you use tobacco products	 SPECIAL FEATURES Benefit Coverage options are \$10,000 or \$20,000 This coverage helps offer financial support if you are expense of treatment often so high, seeking the treat But when a diagnosis occurs (such as cancer, major or getting better. With Allstate Benefits, you gain the porcovered event. How It Works: You select the benefit coverage amound budget. If you have covered family members, this covidiagnosed with a covered critical illness, you will receive for the condition. 	tment you need seems like a heavy financial burden. rgan failure, etc.), what you should be focusing on is ower to take control of your health when faced with a not you want based on your individual need and your verage also provides cash benefits for them. Then, if

HOSPITAL INDEMNITY	ALLSTATE	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST / MONTH	SPECIAL FEATURES	
EMPLOYEE:	6 1 7	nement. This benefit is payable directly to you and can onal bank account or your Health Savings Account (HSA)
EE + SPOUSE:	for hospital-related expenses.	
FF + CHILD:	Guaranteed issue coverage and coverage available	for spouse and child(ren).
	 Coverage can be continued as long as premiums are 	e paid to Allstate Benefits.
EE + FAMILY:	See plan document for more details.	

Legal / ID Protection	ID Shield/Legal Shield	VOLUNTARY EMPLOYEE PAID
	0050141 554711050	
	SPECIAL FEATURES	

Plan	Family (per month)	Individual (per month)	
LegalShield	23.95	23.95	
IDShield	18.95	8.95	
Combined	38.90	32.90	

- <u>ID Shield</u> membership includes security and privacy monitoring social media monitoring, identity restoration and consolation services.
 - If your identity is stolen, ID Shield will fully restore to pre-theft status.
- LEGAL Shield 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,





EAP EMPLOYEE ASSISTANCE PROGRAM EMPLOYER PAID

SPECIAL FEATURES: • Provides up to five personal counseling sessions around various concerns including:

o bereavement o child care https://eaccares.com o substance abuse o finances

o relationships & family o various other stressors

401(k)	MASS	RETIREMENT PLAN		
	SERVICE LENGTH	AGE	ENTRY DATE	
ELIGIBILITY REQUIREMENTS:	• IMMEDIATE	• 21	• IMMEDIATE	
SPECIAL FEATURES:	,	Enrollment in the 401k, or any contribution or beneficiary changes to your existing MassMutual 401k, can be done on MassMutual's website, www.retiresmart.com .		

PET INSURANCE PET'S BEST VOLUNTARY EMPLOYEE PAID

Pet insurance reimburses you for vet bills when your pet is sick or injured, to help take the financial worry out of vet visits.

- Fast claims processing and payment receive reimbursement via direct deposit or direct vet pay options available
- Use any veterinarian in the U.S. including specialty and emergency clinics
- Access to a 24/7 pet helpline powered by whiskerDocs
- Exclusive Axios HR employee discount on a BestBenefit Plan

The Pet Insurance benefit through Pet's Best is not run through payroll. If interested, employees can obtain plan information and enroll in the plan at www.petsbest.com/axios. Employees will pay premiums directly to Pet's Best.

FINANCIAL WELLNESS FINFIT FREE USE OF SITE WITH REGISTRATION

SPECIAL FEATURES

- Assess your Personal Financial Health
- Budget Building Tools
- Financial Calculators
- Life Planning

Access via the Axios HR Payroll website in Axios Perks

- Financial Education information
- Online tracking of your bank accounts
- 24/7 Financial Wellness provided online
- Short-Term Loan Assistance*

* Fee Based Service, subject to credit approval

ASSISTANCE FOR CAREGIVERS CARALLEL - MyCareDesk FREE USE OF SITE WITH REGISTRATION

SPECIAL FEATURES

- ORGANIZE Keep track of important documents, coordinate tasks and manage bill payment.
 CONSULT
 Advocates
- COLLABORATE Create your own care team and then share information, tasks and decision making.
- CONSULT Speak with trusted and experienced Care Advocates through our full-service concierge.
- LEARN Access tools and resources on topics like health, wealth, lifestyle, senior living and in-home care.



Access via the Axios HR Employee Portal under 'Axios Perk's