

**2021 Employee Open Enrollment Benefits Guide**





**Insert Company Logo**

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**OPEN ENROLLMENT**



Our 2021 Benefits Guide will provide you with an overview of the comprehensive and rewarding benefits package offered by [Client Name]. We value your service as an employee and our competitive benefits are one way that we thank you for all that you bring to [Client Name]. We are proud to offer you a benefits program designed to protect the health and financial security of you and your family.

Employees and their families will have access to a web and mobile-optimized employee benefits video education and engagement platform. You may visit [www.banksite.com](http://www.banksite.com)(LearnYourBenefits) to learn more about your employee benefit programs.

If you are enrolling in benefits with [Client Name] for the first time or are evaluating changes to your past elections, we are here to help! You can have your questions answered by the following resource:

Human Resources Department

Name:

Email:

Phone Number:

Sincerely,

CEO Name / VP of HR Title



# Eligibility & Enrollment

**Benefits Eligibility**

If you are a part-time or full-time employee, working 30 or more hours per week, you are eligible to enroll in the benefits described in this guide. Eligible dependents may enroll in medical, dental, and vision coverage. Eligible dependents include:

* Your legal spouse or domestic partner
* Children up to age 26

**How to Enroll**

1. Log into bswift at <http://vbabenefits.bswift.com> using your username and password. Note: Your default username is the first four letters of your last name and last four digits of your social security number. Your password default is your date of birth (example: MMDDYYYY).
2. Review your current benefit elections.
3. Verify your personal and dependent information and make changes as needed, including beneficiary designations.
4. Evaluate plan options and make your benefit elections on the bswift portal.
5. Submit elections through bswift portal by <enrollment date>.
6. Please print and review your confirmation of benefits statement for your records.

Please contact your HR representative with any problems accessing the bswift system.

**When to Enroll**

The open enrollment period runs from November X, 2020 through November X, 2020. The benefits you elect during open enrollment will be effective from January 1, 2021 through December 31, 2021.

**Making Changes**

Several benefits may only be elected or changed during open enrollment or with a qualified life change. You must notify HR **within 30 days** of date of your qualifying event to make the change. After that you will have to wait until the next annual open enrollment.

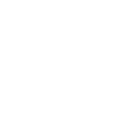
Examples of changes in status:

* You get married, divorced or legally separated (if recognized in the state you live in)
* You experience a loss of other group coverage
* You have a baby or adopt a child
* You or your spouse has a change in employment status
* Your spouse dies
* You become eligible for or lose Medicaid coverage

# https://tse4.mm.bing.net/th?id=OIP.M55960a6fbe341dbd3b239be0f75955faH0&pid=15.1&P=0&w=300&h=300Medical & Pharmacy Coverage

**Open Enrollment is date to date**

**Elections will take effect on January 1, 2021**



**Overview of Plan Benefits** (Copy and paste plan design grid below from Excel document. Only show plans available for employees in 2021.)

**2021 Plan Changes**

* No **balance billing** for emergency services provided out-of-network
* Addition of **acupuncture** for treatment of chronic pain; 20 visits per year
* LiveHealth Online (telemedicine) to include coverage for **sleep studies** conducted at home
* Additional coverage for medical services provided by clinical **nurse specialists**
* Coverage for medically necessary **formula and enteral nutrition** products to treat metabolic disorders
* Cap on cost sharing for **insulin** at $50 for 30-day supply ($150 for 90-day)
* Members who take a **specialty drug** while in a high deductible health plan will not have drug manufacture Rx copay assistance accumulate toward deductible and out of pocket max



# Telemedicine

|  |  |  |
| --- | --- | --- |
| Plan 1 | Plan 2 | Plan 3 |
| $15 Copay | $59 Copay | $59 Copay |

Anthem’s LiveHealth Online® benefit allows you to visit with board-certified doctors online via video using your phone or computer any time, from practically anywhere. Their national network is available 24/7, including holidays to provide affordable quality care. Online physicians can diagnose, treat, and write prescriptions for routine medical conditions.



All you have to do is sign up at [www.livehealthonline.com](http://www.livehealthonline.com) or   
download the free mobile app to get started.

# Sydney Mobile App

With Sydney, you can find everything you need to know about your Anthem benefits - personalized and all in one place. Sydney makes it easier to get things done, so you can spend more time focused on your health. A new Health Dashboard brings together personalized program recommendations and information about wellbeing. Other features include scoring tools, support for health goals, integration for health-care devices and health trackers, and more. Sydney supports My Family Health Records (myFHR), that gives members easy access to health data, including health history and electronic medical records

With the just one click you can:

* Find care and check costs
* Check all benefits
* See claims
* Get answers even faster with the digital chatbot
* View and use digital ID cards

Already using one of the Anthem apps? It’s easy to make the switch. Simply download the Sydney app and log in with your Anthem username and password.

Sydney is available for iOS and Android devices! Download the Mobile app today!

# Anthem EAP

Employees enrolled in the medical plan have access to Anthem’s EAP (Employee Assistance Program), available 24 hours a day, 7 days a week.

The EAP provides the following services:

* Four face-to-face counseling sessions per situation
* Crisis consultation
* Legal assistance
* Financial assistance
* ID recovery
* Tobacco cessation
* Dependent care services and other family or work-related resources

Counselors are available by calling 800-346-5484 or visiting the website at [www.AnthemEAP.com](http://www.AnthemEAP.com); Login is “VBA”.

Employees can take advantage of this resource with the full confidence that all information discussed with Anthem will be kept confidential.

# Additional HealthCare Programs

**RxBenefits**

Participants have access to a concierge Member Services Team for prescription drug questions, available Monday through Friday, 8:00am – 9:00pm, EST. You can reach this team at 800.334.8134. They can assist members with questions such as:

* Is my drug covered? What will it cost?
* Is my pharmacy in the network?
* Are there lower cost alternatives

**Airrosti**

A provider group that focuses on the prevention and treatment of musculoskeletal injuries and conditions (i.e. back or hip pain). They can significantly reduce claims spend through the reduction of surgery, imaging, opioids, and long-term treatment plan. Their goal is to have their patients close to recovery within 3 to 4 visits. Your cost will depend on the health plan you are currently enrolled in. Please visit their website at [www.airrosti.com](http://www.airrosti.com) to find a provider near you but note that Airrosti offices are currently only in Richmond, Charlottesville and Northern Virginia. They hope to expand in other Virginia areas as demand increases.

**Anthem Health Guide**

We understand navigating the healthcare system can be tough. We provide a concierge customer service unit to help you. Anthem Health Guide is a one-stop shop for all of your healthcare needs and you can access this group by calling 1-833-831-0085 on the back of your Anthem ID card. The following are examples of how Health Guides can assist members:

* Assist in finding a physician and/or making an appointment on your behalf
* Help you with estimating costs of care at various facilities or providers
* Resolve claims issues
* Help you understand your medical plan benefits

**Living Connected**

Diabetic members will receive a Bluetooth glucose meter and diabetic supplies at $0 out-of-pocket costs. Additionally, supplies (test strips, lancing device, lancets) will be automatically refilled at no additional cost. Personalized health coaching from certified diabetic educators and 24/7/365 toll free access to live nursing support are included in the program. Members who are eligible will receive a welcome letter and if you would like to opt-out please call 1-800-966-2046.

**LearnYour Benefits**

Employees and their families have access to a web and mobile enabled, employee benefits video education and engagement platform. You may visit [www.banksite.com](http://www.banksite.com/) to learn more about your employee benefit programs.

# C:\Users\1019239\Desktop\52.jpgDental

Dental coverage is available through Delta Dental. The plan allows you and your dependents to visit the in-network dentist of your choice. Preventive services are covered by the plan at 100% and other services are covered with coinsurance. See an overview of the coverage below and view full details in your dental summary of benefits.

|  |  |  |  |
| --- | --- | --- | --- |
| **Plan Feature** | **Basic Plan**  *In-network Benefit* | **Comprehensive Plan**  *In-network Benefit* | **Enhanced  Indemnity Plan**  *(No network required)* |
| **Annual Deductible** | $50 (3 per family) | $50 (3 per family) | $50 (3 per family) |
| **Annual Benefit Maximum** | $1,000 per person | $1,500 per person | $1,500 per person |
| **Preventive & Diagnostic Services**  *Costs for preventive and diagnostic services do not count toward annual maximum* | 100%;  80% OON | 100%;  80% OON | 100% |
| **Primary Services**  *Fillings (including composite); oral surgery; endodontics & periodontics* | 80%;  60% OON | 80%;  60% OON | 80% |
| **Major Services**  *Crowns, bridges, dentures, implants* | No coverage | 50% | 50% |
| **Orthodontia**  *(dependents under the age of 19 only)* | No coverage | 50% up to $1,000 lifetime maximum | 50% up to $1,000 lifetime maximum |

(DELETE COLUMNS FOR PLANS NOT OFFERED)



# https://tse4.mm.bing.net/th?id=OIP.M9d259321d86a348af6ad4793f076a50ao0&pid=15.1&P=0&w=357&h=199Vision

When you are enrolled in one of our Anthem medical plans you also receive basic vision benefits through Anthem, called ‘Anthem Blue View Vision’, which covers a routine eye exam and discounts on materials; however, (employer name) also offers additional vision benefits on a voluntary basis through VSP. Our vision plan covers eye exams and helps offset the cost of corrective eyewear. VSP does not distribute ID cards, providers can verify eligibility directly with VSP. Dependents will be covered up to age 26, regardless of full-time student status. An overview of the plan is provided below; please see your summary of benefits for complete details. To view benefits, review provider directory and plan benefits, check out VSP’s website at [www.vsp.com](http://www.vsp.com).

(DELETE COLUMNS FOR PLANS NOT OFFERED)

|  |  |  |  |
| --- | --- | --- | --- |
| **In-network**  **Plan Design Features** | **Anthem Blue View Vision**  *(Included with Anthem medical plans)* | **Basic Plan**  **(VSP)** | **Enhanced Plan**  **(VSP)** |
| **Comprehensive Eye Exam** *Benefit available every 12 months* | $15 copay | $15 copay | $15 copay |
| **Frames/Lenses** – *single vision, bifocal, trifocal and lenticular* | 35% discount off retail | $30 copay  *($150 allowance\*) frame benefit available every 24 months* | $15 copay  *($150 allowance\*) frame benefit available every 12 months* |
| **Covered Lens Options** | Varying discounts | Standard scratch-resistant coating; polycarbonate lenses for children | Standard scratch-resistant coating, progressive lenses, photochromic, polycarbonate lenses (children and adults), ultraviolet coating and Pink Tints (1 & 2) |
| **Contact Lenses**  *Contact lens benefit in lieu of frames benefit every 12 months* | 15% off retail | $30 copay;  *$150 allowance* | $15 copay;  *$150 allowance* |
| Contact lenses fitting fee | No discount | Copay not to exceed $60 | Copay not to exceed $60 |
| *\*$80 allowance at Costco* | | | |

**EXTRA SAVINGS!   
Additional $20 to spend on featured brands like:**

ANNE KLEIN, BEBE®, CALVIN KLEIN, LACOSTE, NIKE, NINE WEST and many more!



# Employee Contributions in 2021

Your premium for elected plans will be deducted pre-tax from each paycheck.

(DELETE COLUMNS AND/OR ROWS FOR PLANS/TIERS NOT OFFERED)

**Medical Coverage**

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Monthly/Bi-Weekly Premium | | | |
|  | **Plan 1** | **Plan 2** | **Plan 3** |
| Employee Only | **$** | **$** | **$** |
| Employee & Child | **$** | **$** | **$** |
| Employee & Child(ren) | **$** | **$** | **$** |
| Employee & Spouse | **$** | **$** | **$** |
| Employee & Family | **$** | **$** | **$** |

**Dental Coverage**

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Monthly/Bi-Weekly Premium | | | |
|  | **Basic Plan** | **Comprehensive Plan** | **Enhanced Indemnity Plan** |
| Employee Only | **$** | **$** | **$** |
| Employee & Child(ren) | **$** | **$** | **$** |
| Employee & Spouse | **$** | **$** | **$** |
| Employee & Family | **$** | **$** | **$** |

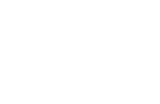
**Vision Coverage**

|  |  |  |
| --- | --- | --- |
| Employee Monthly/Bi-Weekly Premium | | |
|  | **Basic Plan** | **Enhanced Plan** |
| Employee Only | **$6.30** | **$11.20** |
| Employee & Child(ren) | **$10.60** | **$17.10** |
| Employee & Spouse | **$9.90** | **$16.00** |
| Employee & Family | **$16.90** | **$27.40** |

Note: VSP Vision rates are increasing an aggregate 9.7% in 2021

**Tips for Keeping Costs Down:**

* Choose in-network providers
* Take advantage of preventive care services
* Request generic prescriptions
* Use Urgent Care providers instead of the Emergency Room
* Try telemedicine for non-emergent health consultations



# Health Savings Account (hsA)

If you enroll in a High Deductible Health Plan, you can also open a Health Savings Account (HSA) to help pay for eligible medical expenses.

**🡪 What is an HSA?**

An HSA is a deposit account that you can use to pay for current and future qualified medical expenses – tax-free. Money in your HSA earns interest and can be invested to help you build funds faster.

**🡪 Who is eligible to open an HSA?**

To open an HSA, you must be enrolled in a HDHP plan. You cannot be a dependent on another person’s tax return, be enrolled in Medicare if you’re over 65, or have received Veteran's Affairs benefits during the previous 3 months, except for preventative care. If you are a veteran with a disability rating from the VA, this exclusion does not apply.

**🡪 What is the tax benefit associated with an HSA?**

The money you contribute to your HSA is tax-deductible and can be used for expenses for yourself and your dependents. You can maximize your tax savings by contributing up to the maximum annual amount allowed by the Internal Revenue Service (IRS). Your HSA balance plus investment earnings carry over from year to year – tax-free.

**Plus – your HSA funds are yours to keep – even if you switch health plans, change jobs, or retire.**

**Client Name will contribute $$$ per month/quarter/year to your HSA account.**

|  |  |  |
| --- | --- | --- |
| IRS HSA Contribution Maximum\* | | |
|  | **2020** | **2021** |
| Individual | $3,550 | $3,600 |
| Family | $7,100 | $7,200 |
| Catch-up – 55 or older | Additional $1,000 | Additional $1,000 |
| \* Maximums include any employer contribution | | |

**🡪 What are qualified medical expenses?**

The IRS maintains a list of all eligible medical expenses, common qualified expenses include:

* + Acupuncture
  + Ambulance services
  + Dental treatment
  + Contact lenses
  + Doctor’s fees
  + Hearing aids
  + Chiropractic Care
  + COBRA premiums

❖ *Effective 1/1/2020,* the IRS now allows Over-the-Counter (OTC) medicines to be purchased with HSA funds without a prescription.

View the complete list of qualified expenses at: <https://www.irs.gov/publications/p502/index.html>

Health Equity is the administrator of our HSA Benefits. See their website at: [www.healthequity.com](http://www.healthequity.com)

# Flexible Spending Account (FSA)

FSAs provide you with an important tax advantage that can help you pay for out-of-pocket medical, dental, vision, and dependent care expenses on a pre-tax basis.

Contributions to your FSA are deducted from your paycheck before any taxes are taken out. You should contribute the amount of money you expect to spend on eligible expenses for the year. Any leftover money will not be refunded or rolled over to the following year, per IRS regulations. **OR** Per IRS ruling you may rollover up to $500 in your Health and Limited FSA. Effective 1/1/2020, the IRS now allows Over-the-Counter (OTC) medicines to be purchased with health care and limited FSA funds without a prescription.

|  |  |
| --- | --- |
| Health Care Tax Savings Example\* | |
| Prescription drugs | $225 |
| Doctor co-pays | $80 |
| Orthodontia (braces) | $1,500 |
| Suggested Plan Year Election | **$1,805** |
| Taxes (30%) | x 0.30 |
| Estimated Annual Savings | **$541.50** |

**Health Care FSA** (not available with HDHP enrollment)

The maximum you can contribute to a health care FSA for 2020 is $2,750. This amount is subject to change in 2021 per IRS ruling. The full amount you elect is available at the beginning of the plan year. Examples of qualified expenses include:

|  |  |
| --- | --- |
| * Prescriptions | * Dental care |
| * Doctor visit co-pays | * Copays & Coinsurance |
| * Contact lenses |  |

**Limited FSA**

Limited FSA is for those employees enrolled in a HDHP with an HSA account. This FSA is only able to be used for **eligible dental and vision** expenses. The maximum you can contribute to a Limited FSA for the 2020 plan year is $2,750 (subject to change in 2021). The full amount you elect is available at the beginning of the plan year.

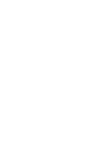
|  |  |
| --- | --- |
| Dependent Care Tax Savings Example\* | |
| Day care for child | $3,500 |
| Summer child care | $1,500 |
| Suggested Plan Year Election | **$5,000** |
| Taxes (30%) | x 0.30 |
| Estimated Annual Savings | **$1,500** |
| \*Tax savings examples are for illustrative purposes only and are not intended to reflect actual costs of care. 30% tax rate is used for illustration only and may be different than your rate. | |

**Dependent Care FSA**

A Dependent Care FSA can be used to reimburse expenses related to care of eligible dependent while you and your spouse work. Eligible dependents include children under the age of 13 or disabled spouse, parent or child if individual lives with the covered employee. Care can be provided by a babysitter, day care or before/after-school care. The maximum you can contribute to the dependent care FSA is $5,000 (or $2,500 if you are married and filing separately). Funds are available only after they are deducted from your paycheck. This benefit is not eligible for rollover.

**Full List of Qualified Expenses**

The IRS maintains a complete list of qualified medical and dental expenses eligible for FSA reimbursement. See the list at: [**https://www.irs.gov/publications/p502/index.html**](https://www.irs.gov/publications/p502/index.html)



# Related imageLife Insurance

**Employer Paid Basic Life and AD&D Insurance**

Basic Life and Accidental Death & Dismemberment (AD&D) Insurance is available to all full-time employees at no cost to you. Employees are automatically covered at (1x, 2x, 3x,…) annual salary. Please make sure the Human Resources department has your designated beneficiary for this plan.

**Employee Paid Supplemental Life and AD&D Insurance**

**Key Terms**

* The **guaranteed issue** amount is the maximum amount of coverage you can obtain regardless of health status
* **Evidence of insurability** is an application process detailing your health condition that is required for certain types of insurance coverage



You are also eligible to elect Supplemental Life and AD&D Insurance for yourself and your dependents. Employees pay the full cost for these plans; premiums will be deducted from your paycheck. Once you start the process to increase coverage through Securian Financial, you will receive instructions outlining how to provide evidence of insurability (EOI), if applicable. If you decide not to pursue additional coverage, please contact Securian Financial directly to close your case. Employees must be enrolled in coverage in order to enroll dependents. Please refer to the plan documents for additional details.

Supplemental AD&D is a separate election. All benefit amounts are guarantee issue (no underwriting) and you can purchase AD&D coverage for spouse and/or children. See box below for further details

|  |  |  |
| --- | --- | --- |
| Supplemental Life | | |
| Employee | * Up to a max of 8X salary or $1,500,000; whichever is the lesser * All increases in coverage will require EOI | |
| Spouse | * Increments $10,000 up to $100,000 * Limited to 100% of the Employee amount * All increases in coverage will require EOI | |
| Child | * Increments of $5,000 to max $20,000 | |
| Supplemental AD&D | | |
| Employee | | • Increments of $25,000  • Up to a max $500,000  • All amounts guaranteed issue |
| Family | | Spouse and child(ren) benefit is a % of the employee’s amount of coverage:   * Spouse, 40%; children, 10% * Spouse only, 50% * Children only, 15% |

**Employee Paid Supplemental Life and AD&D Insurance**

|  |  |  |  |
| --- | --- | --- | --- |
| **Supplemental Life Rates** | | | |
| **Employee Age** | **Employee Rate Per $1,000 of Benefit** | **Spouse Age** | **Spouse Rate Per  $1,000 of Benefit** |
| < 25 | $.051 | < 25 | $.060 |
| 25 – 29 | $.061 | 25 – 29 | $.072 |
| 30 – 34 | $.081 | 30 – 34 | $.096 |
| 35 – 39 | $.091 | 35 – 39 | $.108 |
| 40 – 44 | $.120 | 40 – 44 | $.139 |
| 45 – 49 | $.204 | 45 – 49 | $.236 |
| 50 – 54 | $.336 | 50 – 54 | $.390 |
| 55 – 59 | $.528 | 55 – 59 | $.612 |
| 60 – 64 | $.816 | 60 – 64 | $.947 |
| 65 – 69 | $1.464 | 65 – 69 | $1.698 |
| 70+ | $2.628 | 70+ | $3.048 |

|  |  |  |
| --- | --- | --- |
| **Supplemental Child Life -**  Total monthly rate, regardless of the number of children | | |
|  | **Benefit Amount** | **Monthly Rate** |
| **Option 1** | **$5,000** | **$.40** |
| **Option 2** | **$10,000** | **$.80** |
| **Option 3** | **$15,000** | **$1.20** |
| **Option 4** | **$20,000** | **$1.60** |



Voluntary AD&D Rates:

* Employee only - $.019/$1,000
* Family - $.03/$1,000

# Disability Income Benefits

Client Name is committed to providing a comprehensive benefits program. Should you become unable to work due to a non-work related illness or injury, disability coverage acts as income replacement to protect you and your family from serious financial hardship. Refer to plan documents for additional details.

**Short-Term Disability Coverage**

As part of your benefits package, short-term disability income benefits are provided to you at no cost | are available on a voluntary basis. Administered by Lincoln Financial, short-term disability coverage pays \_\_% of your salary for up to \_\_\_ weeks, after a waiting period of \_\_\_.

|  |  |
| --- | --- |
| **Short-Term Disability** | |
| Benefits Begin |  |
| Benefits Payable / Duration |  |
| Percentage of Income Replaced |  |
| Maximum Weekly Benefit |  |



**Long-Term Disability Coverage**

As part of your benefits package, long-term disability income benefits are provided to you at no cost | provided with both an employer paid option and varying options to buy-up and down. Participants are required to elect one option during open enrollment. Administered by Lincoln Financial, long-term disability coverage pays \_\_% of your salary up to \_\_\_ per month, after a waiting period of \_\_\_.

|  |  |
| --- | --- |
| **Long-Term Disability** | |
| Benefits Begin |  |
| Benefits Payable / Duration |  |
| Percentage of Income Replaced |  |
| Maximum Monthly Benefit |  |

**Taxation of Disability Coverage**

Because disability coverage is an employer paid benefit and is available for employees at no cost, any disability   
payments made to you will be taxable.

**OR**

As an employee paid benefit, disability coverage is available to you on a pre-tax and/or post-tax basis:

* **Pre-tax:** By paying for your disability coverage on a pre-tax basis, you will pay income taxes on any STD and/or LTD benefits you receive. In effect, you are reducing your taxable income and will not have income taxes withheld on the portion of your income used to pay your disability insurance
* **After-tax:** If you pay your disability coverage on an after-tax basis, you will not have to pay income taxes on any STD and/or LTD benefits you receive

# See the source imageAccident Benefits

Accident insurance benefits pay you money based on the injury and the treatment received; this can be anything from a simple sprain to something more serious, like an injury from a car accident or visit to the emergency room. Money is paid directly to you and you decide how to spend it. The cost of this benefit is not based on age and no health questions are asked.

Benefits cover accidents incurred by all family members covered under this policy. There is a $50 (Low Plan) or $100 (High Plan) Wellness Benefit included in this plan when you visit a physician for a covered screening or exam. This benefit is payable directly to you.

|  |  |  |
| --- | --- | --- |
| Employee Monthly Premiums | | |
|  | Accident Low Option | Accident High Option |
| Employee only | $8.52 | $18.43 |
| Employee & Child(ren) | $17.43 | $35.89 |
| Employee & Spouse | $13.35 | $27.76 |
| Employee & Family | $22.26 | $45.22 |

There are two reimbursement levels available, a high and a low option. The rates are shown below.



# Critical Illness Benefits

Critical Illness coverage from Aflac helps cover your out-of-pocket expenses in the event of a serious illness by paying a lump sum benefit at first diagnosis of a covered illness. The benefits are paid directly to you, so you can use the money however you like. Covered critical illnesses include cancer, heart attack, stroke, major organ failure and kidney failure.

There are two reimbursement level options available: $10,000 or $20,000. Rates vary by age and usage of tobacco products (Employee and/or Spouse tobacco user rates); visit the enrollment site for your specific monthly premiums.

Regular wellness screenings and exams appropriate to your stage of life are an important part of staying healthy and catching problems early. There is a $100 Wellness Benefit included in this plan when you visit a physician for a covered screening or exam. This benefit is payable directly to you. Please be sure to review your Aflac informational flyers for additional information.

# Group Hospital Indemnity

Aflac’s Hospital Indemnity Plan provides coverage for hospital admission, inpatient stays and intensive care confinement. There are two options available: high and low, plans vary by level of reimbursement (see below).

|  |  |  |
| --- | --- | --- |
| **Hospital Indemnity** | **Low Option** | **High Option** |
| Hospital Confinement (per day) | $100 | $200 |
| Hospital Admission (per confinement) | $1,000 | $2,000 |
| Intensive Care Unit (per day) | $100 | $200 |
| Wellness Benefit | $50 | $75 |
| **Employee Monthly Premium** | | |
| Employee Only | $18.21 | $35.92 |
| Employee & Dependent Children | $32.92 | $64.57 |
| Employee & Spouse | $37.38 | $73.74 |
| Employee & Family | $52.09 | $102.39 |

# Other Programs

[](https://www.metlife.com/)**Legal Assistance Program**

Employees can purchase legal service protection and have access to an attorney on retainer within a nationwide network of more than 13,500 attorneys. Provides full coverage for money matters, home and real estate, estate planning, living will preparation, family and personal, civil lawsuits, elder care issues, vehicles and driving.

To access attorney directory, visit [www.legalplans.com](http://www.legalplans.com/)  
Employee/Members Access Code: GETLAW

$16.50 monthly premium



**Pet Insurance**

Company Name and Figo understand that your companion animals are more than "just pets." They're family. We also know how expensive veterinary care can be.

Employees can receive a group discount on pet insurance through FIGO, a technology-based pet insurance vendor. Policies provide illness and injury coverage for cats and dogs. There are no benefits specific to wellness. FIGO offers customized plan designs with flexible deductibles, coinsurance and benefit maximums based on the needs of your pet. FIGO offers technology resources including Pet cloud, which preserves all medical records and claims and sends appointment reminders; a mobile app for electronic claims submittal and payment; digital pet tags and lost pet service. To sign up for this great plan, follow the link below and request a customized quote. Employees can enroll in this benefit at any time during the year, not just at open enrollment. Members will be billed directly from FIGO, not through payroll deductions. Check it out at: <http://bit.do/vbafigo>.



**401(k) Retirement Plan**

Client Name’s 401(k) retirement plan is designed to help you save for a financially secure future. Electing a percentage of your salary to contribute will decrease your taxable income while building your retirement savings.

Client Name will match \_\_% of the first \_\_% of your contribution beginning after a \_\_ month waiting period.

Find more information about plan options, election maximums, and instructions for enrolling at \_\_\_\_\_\_.

# Contact Information

|  |  |  |  |
| --- | --- | --- | --- |
| Benefit | Provider | Phone | Website |
| Medical | Anthem | 1-833-831-0085 | [www.anthem.com](file:///C:\Users\1030015\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\H6B0N3HP\www.anthem.com) |
| Pharmacy | RxBenefits (ESI) | 1-800-334-8134 | [www.express-scripts.com](http://www.express-scripts.com) |
| Telemedicine | Anthem  LiveHealth Online | Use App | [www.livehealthonline.com](http://www.livehealthonline.com) |
| EAP | AnthemEAP | 1-800-346-5484 | [www.AnthemEAP.com](http://www.anthemeap.com/) Login: VBA |
| Dental | Delta Dental | 1-800-237-6060 | [www.deltadentalva.com](file:///C:\Users\1030015\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\H6B0N3HP\www.deltadentalva.com) |
| Vision | VSP | 1-800-877-7195 | [www.vsp.com](file:///C:\Users\1030015\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\H6B0N3HP\www.vsp.com) |
| Health Savings Account | Health Equity | 1-866-346-5800 | [www.healthequity.com](http://www.healthequity.com) |
| Flexible Spending Account | LD&B | 1-877-532-5478 | [www.LDBbenefitsadmin.com](file:///C:\Users\1030015\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\H6B0N3HP\www.LDBbenefitsadmin.com) |
| Basic Life and AD&D | Securian Financial | 1-800-643-5599 (VBA) | [www.minnesotalife.com](http://www.minnesotalife.com) |
| Supplemental Life and AD&D | Securian Financial | 1-800-643-5599 (VBA) | [www.minnesotalife.com](http://www.minnesotalife.com) |
| Short-Term Disability Long-Term Disability | Lincoln Financial | 1-800-643-5599 (VBA) | [www.lincolnfinancial.com](file:///C:\Users\1030015\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\H6B0N3HP\www.lincolnfinancial.com) |
| Critical Illness, Accident, & Hospital Indemnity | AFLAC | 1-800-643-5599 (VBA) | [www.aflacgroupinsurance.com](file:///C:\Users\1030015\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\H6B0N3HP\www.aflacgroupinsurance.com) |
| 401(K) Plan |  |  |  |
| Legal Assistance | MetLife Legal Plan | 1-800-821-6400  (client svc center) | [www.info.legalplans.com](file:///C:\Users\1030015\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\H6B0N3HP\www.info.legalplans.com) |
| Pet Insurance | FIGO | 1-800-643-5599 (VBA) | <http://bit.do/vbafigo> |
| COBRA | LD&B | 1-877-532-5478 | [www.LDBbenefitsadmin.com](file:///C:\Users\1030015\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\H6B0N3HP\www.LDBbenefitsadmin.com) |

# Frequently Asked Questions

If you’ve been keeping track of commonly asked questions you receive from your employees, please feel free to list these here. We have provided some samples.

1. What changes can be made effective **1/1/2021**?
   * Elect or change individual and/or dependent coverage in medical, dental and vision plans
   * Enrollment in a Flexible Spending Account and Health Savings Account
   * Add supplemental life and AD&D coverage
   * Elect voluntary programs
2. Where can I submit my plan elections?
   * Log-in to the employee portal to elect or change your plans by **due date**
3. Who can I talk to if I have questions?
   * Contact Human Resources with any questions you may have
4. What happens next?
   * After you have enrolled in for coverage, you may receive additional information in the mail from the insurance carriers. This information will contain your personal identification cards. In the meantime, you can look up the appropriate participating providers online at the carrier’s websites.

# Open Enrollment Details

**[DELETE IF NOT NEEDED]**

|  |  |  |
| --- | --- | --- |
| Benefit Meetings/Webinars | | |
| **Date** | **Time** | **Location** |
|  |  |  |
|  |  |  |
|  |  |  |

*The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this Guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the Guide and the actual plan documents the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about your Guide, contact Human Resources.*