

# 2021 EPO (Colorado/QHS) Comprehensive Overview: Employee Benefits and Rates







www.benefits.devereux.org

Table of Contents	
EPO Health Plan	<u>p. 3</u>
High Deductible Health Plan	<u>p. 4</u>
Behavioral Health and Substance Abuse Program – Magellan Health Services	<u>p. 5</u>
Prescription Drug Benefit Program	p. 6
Dental Benefits: Cigna Dental PPO – Plan A and Plan B	<u>p. 7</u>
Dental Benefit: Cigna Dental HMO	<u>p. 8</u>
Living Healthier Contest and Health Advocate	<u>p. 9</u>
Health and Wellness Program	<u>p. 10</u>
TIAA 403 (b) Tax Deferred Annuity	<u>p. 11</u>
Voluntary Accidental Death and Dismemberment (AD&D) Insurance	<u>p. 12</u>
Voluntary Supplemental Life Insurance	<u>p. 13</u>
Group Voluntary Off the Job Accident Insurance	<u>p. 14</u>
Voluntary Short Term Disability	<u>p. 15</u>
Explanation of Accruals for HML and TOB, and Other Benefits	p. 16
Other Benefits (continued)	<u>p. 17</u>
30-39 Hour Employee Benefit Design	p. 18
Benefit Contact Information	<u>p. 19</u>

## **Medical EPO Health Plan**

The closed panel PPO provides in-network-only benefits through the National BlueCard® network, except for medically necessary, covered emergency care services.

BENEFIT		Medical and Rx			
		\$630 Individual \$950 EE/Child \$1,250 EE-Spouse/DP or Family			
COINSURANCE				Plan Pays 75% You Pay 25%	
OUT-OF-POCKET MAXIMUM (Includes Deductible)				\$4,160 Individual \$6,250 EE/Child \$8,330 EE-Spouse or Family	
PRIMARY CARE OFFICE VISIT				100% after \$20 copay, NO deductible	
SPECIALIST OFFICE VISIT				100% after \$50 copay, NO deductible	
MD LIVE (TELEMEDICINE) URGENT CARE CLINIC (EXAMPLE – MINUTE CI	LINIC, TAKE CARE CL	INIC)		100% after \$10 copay, NO deductible 100%, after \$50 copay 100% after \$20 copay	
PEDIATRIC AND ADULT PREVE	NTIVE CARE (ACCOR	DING TO SCHEDULE)		100%, NO deductible	
OUTPATIENT SURGERY BARIATRIC SURGERY				75%, after deductible 50% after deductible No OOP Max	
INPATIENT HOSPITAL				\$250 Copay, after deductible, then 75%	
EMERGENCY CARE				100% after \$275 copay, NO deductible (Copay waived if admitted)	
OUTPATIENT X-RAY/RADIOLOGY MRI/MRA, PET SCAN, CT/CTA SCAN			75% after deductible 75% after \$100 copay, NO deductible 100% after \$100 copay, NO deductible		
OUTPATIENT LABORATORY/PA		( 00 - f-t/-)		100%, NO deductible	
PHYSICAL, SPEECH & OCCUPA RESTORATIVE SERVICES, INCL				100% after \$40 copay, NO deductible 100% after \$40 copay, NO deductible	
PHARMACY BENEFITS TIERED THROUGH INDEPENDENCE BLU				15%/35%/50% Copay \$5 Min Generic//\$10 Min Brand	
OUT-OF-POCKET MAXIMUM FO	OR PRESCRIPTION ON	ILY		\$3,600 Individual \$5,400 EE/Child \$7,200 EE-Spouse/DP or Family	
MAGELLAN BEHAVIORAL HEALTH (BEHAVIORAL HEALTH AND SUBSTANCE ABUSE) SEE MAGELLAN BENEFIT PAGE FOR SPECIFIC INFORMATION		In Network Out Patient \$20 copay In Network In-Patient 100% after medical deductible (top of page) Out of network benefits available 50% copay day limitations apply			
PREMIUM: 10% Discount for Health & Wellness Program Participation					
Premium is the same for all	Single	\$55.38	\$49.85		
salary tiers: Tier 1 (<\$37,500)	EE+Child	\$138.92	\$125.03	Vision benefit included in medical, at no extra charge	
Tier 2 (\$37,500-\$74,999)	EE+Spouse/DP	\$174.00	\$156.60	you! \$0 Eye Exam; contacts/frames \$0 - \$25 copay or	ſ
Tier 3 ( <u>&gt;</u> \$75,000)	Family	\$248.31	\$223.48	receive \$130 toward selection. Benefit frequency 1x	
		Non-Qualified	Qualified	each calendar year.	

## **Medical High Deductible Health Plan (HDHP)**

The Closed Panel PPO provides in-network-only benefits through the National BlueCard® network. Closed Panel PPO members must seek care from participating BlueCard providers, except for medically necessary, covered emergency care services. If care is received from non-participating providers, there is no benefit coverage.

DEDUCTIBLE			ı	\$2,5251	INDIVIDUAL
DEDUCTION			\$3,800 EE/CHILD		
					USE/DP OR FAMILY
COINSURANCE			PLAN ]	PAYS 75%	
				PAY 25%	
	KET MAXIMUM				INDIVIDUAL
(Includes Ded	luctible)				EE/CHILD USE/DP OR FAMILY
				1-)	
INPATIENT H			,		R DEDUCTIBLE
	SING FACILITY (120 days	combined per calendar y	ear)		R DEDUCTIBLE
EMERGENCY					R DEDUCTIBLE
URGENT CAR	E MPLE – MINUTE CLINIC, T	'AKE CADE CLINIC)		75% AFTE	R DEDUCTIBLE
MD LIVE (TEL		ARE CARE CLIVIC)		75% AFTE	R DEDUCTIBLE
OUTPATIENT	SURGERY			75% AFTE	R DEDUCTIBLE
BARIATRIC S	URGERY			50%, AFTER DEDU	CTIBLE, NO OOP MAX
OUTPATIENT	X-RAY/RADIOLOGY				
MRI/MRA,				75% AFTE	R DEDUCTIBLE
PET SCAN, C					
OUTPATIENT	LABORATORY/PATHOLOG	GY		75% AFTER DEDUCTIBLE	
PRIMARY CA	RE OFFICE VISIT			75% AFTER DEDUCTIBLE	
SPECIALIST C	FFICE VISIT			75% AFTER DEDUCTIBLE	
PEDIATRIC AN	ND ADULT PREVENTIVE C	ARE (ACCORDING TO SC	HEDULE)	100%, NC	) DEDUCTIBLE
PHYSICAL, SPEECH & OCCUPATIONAL THERAPY (Maximum of 30 visits			75% AFTE	R DEDUCTIBLE	
combined per calendar year)			<b>550</b> /		
RESTORATIVE SERVICES, INCLUDING CHIROPRACTIC CARE (Maximum of 15 visits combined per calendar year)			ximum of 15	75% AFTER DED	OUCTIBLE (20 VISITS)
	EDICAL EQUIPMENT AND P	POSTHETICS		75% AFTER DEDUC	CTIBLE; NO MAXIMUM
	SENEFITS THROUGH MEDI		HROUGH FUTURE		R DEDUCTIBLE
	DAY SUPPLY AT PHARMACY			70 / V III I I	KDEDCCTIBLE
	HEALTH (BEHAVIORAL I			75% AFTE	R DEDUCTIBLE
THROUGH ME	EDICAL HDHP PROGRAM	THROUGH INDEPENDENCE	CE BLUE CROSS		
	K BENEFITS ONLY – NO OU		S - NETWORK IS		
	THROUGH MAGELLAN BUT IN-NETWORK ONLY				
PREMIUM:					
HDHP	Single	\$29.54	HDHP Part-time	Single	\$86.77
Full-time	EE+Child	\$84.46	Premium	EE+Child	\$229.85
	EE+Spouse/DP	\$111.23		Ilness participation	
	Family	\$158.77		pay contributed	
	. anny	Ψ100.11	Family: \$10 per pay contributed into HS		I into HSA
				-	

#### **Health Savings Account (HSA) through Optum**

HSA's are offered in conjunction with Medical HDHP's. Employees can save pre-tax dollars to pay for medical expenses. This plan is similar to a flexible spending account, but rolls over each year and is owned by the individual; it is never forfeited, as there is no "use it or lose it rule."

The maximum amount for 2021 is \$3,600 for employees with single coverage and \$7,200 for employees with two-person or family coverage. The plan allows an additional \$1,000 catch-up contribution for those aged 55-64. If you don't enroll in Medicare Part A or Part B, you may continue participating.

This money can be used to cover deductible or coinsurance. Money saved in a HSA plan is the employee's and he/she can take it with them if they leave Devereux. At retirement, there are additional post-employment uses for HSA savings, such as paying for Medicare premiums.

Contributions rollover each year and always belong to you. Investment options are available for long term savings.

Vision benefit included in medical, at no extra charge to you! \$0 eye exam; contacts/frames \$0 - \$25 copay or receive \$130 toward selection; benefit frequency 1x each calendar year. HDHP participants DO NOT have to meet deductible first.

## **Behavioral Health and Substance Abuse Program Magellan Health Services**

Benefits are accessed by calling (800) 220-1570 or visiting www.MagellanAscend.com

	In-Network	Out-of-Network	Devereux's EAP benefits are through Carebridge. Call (800)
Prior Authorization Required (Call Magellan at (800) 220-1570)	<ul> <li>Inpatient Care (including Residential Treatment, Supervised Living, Partial Hospitalization)</li> <li>Certain Outpatient Care         <ul> <li>Intensive Outpatient Program</li> <li>Electroconvulsive Treatment</li> <li>Psychological Testing</li> <li>Hypnotherapy</li> <li>Biofeedback</li> <li>Treatment not consistent with usual treatment practices, as determined by Magellan</li> </ul> </li> </ul>	<ul> <li>Inpatient Care (including Residential Treatment, Supervised Living, Partial Hospitalization)</li> <li>Certain Outpatient Care         <ul> <li>Intensive Outpatient Program</li> <li>Electroconvulsive Treatment</li> <li>Psychological Testing</li> <li>Hypnotherapy</li> <li>Biofeedback</li> <li>Treatment not consistent with usual treatment practices, as determined by Magellan</li> </ul> </li> </ul>	437-0911 or download the app.  Five free in-person or telehealth consultations are available. See more Carebridge resources at:  www.myliferesource.com. The code to register is ADC53.  The behavioral health program offers you the flexibility of going innetwork or out of network. If you choose an in-network provider, you
Prior Authorization Not Required	<ul><li>Outpatient Care</li><li>Outpatient Medication Management</li></ul>	<ul><li>Outpatient Care</li><li>Outpatient Medication Management</li></ul>	receive higher benefit coverage and you maximize your benefit dollars through the provider discounts
Inpatient Facility Coverage  Acute Inpatient Residential Supervised Living Partial Hospitalization Intensive Outpatient Program (IOP) Outpatient Coverage:	100%, after applicable medical deductible and copay No annual or lifetime limits.  \$20 copay	After medical deductible and copay, 50% of UCR to a maximum of 125% of the in-network rate.  30 inpatient days per year; lifetime max for out of network inpatient facility 90 days.  Obtain a claim form from your provider or by calling (800) 220-1570  After medical deductible and copay, 50% UCR/ 20 visits per year Lifetime Max of 120 for out of network	extended to you and Devereux. For mental health and substance abuse treatment, network providers usually handle billing directly with Magellan. All claims, including nonnetwork treatment services should be sent directly to Magellan Health Services, P.O. Box 2275, Maryland Heights, MO 63043. Please be sure you obtain a completed claim form from your provider that itemizes the services provided and reflects any
<ul> <li>Routine Outpatient psychotherapy (Individual, Group, Family)</li> <li>Medication Management Office visits</li> </ul>	No annual or lifetime limits.	Obtain a claim form from your provider or by calling (800) 220-1570.	payment that you have made. This will protect against unnecessary delays in reimbursement. If possible, please include additional proof of payment (i.e., a receipt or canceled check). For outpatient reimbursement, a universal claim form (HCFA 1500) or a Magellan Claim Form should be submitted.

<sup>\*</sup>Note: For the High Deductible Health Plan (HDHP), Magellan benefit is In-Network only; 25% after Deductible.

## Prescription Drug Benefit Program through Future Scripts (Independence Blue Cross) Tiered Medical Only

Any questions, call Independence Blue Cross toll-free at (888) 678-7012 / Optum Specialty (855) 427-4681.

Retail Pharmacy Original plus 1 fill only, Refills must be filled at Mail Service or 90 Day Supply at CVS Retail Pharmacy	(Mail Service) or 90 Day Supply at CVS Pharmacy	Specialty Pharmacy (Biotech Drugs) Mail Service Only; Specialty Guideline Management Program Applies to all Specialty Pharmacy. Optum Specialty (formerly BriovaRx) will work with your physician to provide the best medication for your diagnosis. (855) 427-4681
30 consecutive days Refills allowed for antibiotics and allergy serums only	Up to 100 consecutive days	30 consecutive days

**Comprehensive Prescription Drug Plan** 

	Generic	Formulary	Non-Formulary
Copayments:	15%	35%	50%
o opaymonio.	\$5 Minimum	\$10 Minimum	No minimum
Contraceptives: Generic and Single Source Brands until Generic is Available; Quantity Limits Apply for Vaginal Rings, Diaphragms, Cervical Caps, IUD's. Contraceptives include Emergency Contraception (Plan B); OTC female only contraception requires Rx.  Call (888) 678-7012	\$0	N/A	N/A
Insulin	1	co-pay per type of ins	ulin
Diabetic Supplies:			
Syringes, alcohol swabs, lancets, blood and urine glucose testing strips	1 co-pa	ay (per item) per 30-da	ay supply
Infant Iron Supplements, RX fluoride supplements (children under age 6), Folic Acid (females only under age 55), Aspirin Therapy, OTC or Generic only (male and female age 45 and older); Vitamin D Therapy, OTC only requires prescription (male and female 65 and older). Call (888) 678-7012	\$0 co-pay for generic	and OTC only. OTC re	equires prescription.

#### **Maximum Out of Pocket Expense (MOOP)**

The maximum amount that can be paid out of pocket is \$3,600 single coverage, \$5,400 for Employee/Child coverage, \$7,200 for Employee/Spouse/DP and Family coverage. Once this level is met, Devereux is responsible for 100% of the cost of your prescription. The copayments incurred for infertility medications will not apply towards the maximum out of pocket expense.

#### **Prior Authorization**

Some prescription drugs require a "prescription drug review" or prior authorization before they may be obtained through the program. If your pharmacist tells you that a prescription drug requires prior authorization, have your pharmacist or doctor call

If you request to receive the brand name drug when there is an equivalent generic alternative available, you will be required to pay the price difference between the brand and the generic in addition to your copayment. If you choose a non-participating retail pharmacy or fail to present your plan participant ID card to your pharmacy, you must pay 100% of the cost of the medication. You may submit a claim to Independence Blue Cross for reimbursement. You will be reimbursed based on the contracted rate for covered medications less your copayment amount. For any prescription obtained from a non-participating pharmacy, you will not be reimbursed for the difference between the price you paid and the price of the same prescription at a participating retail pharmacy.

## **Cigna Dental PPO**

- Dental PPO has two plans: Plan A (high option); Plan B (low option) and choice of Premier, Preferred or Out of Network Dentists
- Enhanced benefit during pregnancy

   Three cleanings in any 12-month period instead of two

		PLAN A	PLAN B
a.	Single	\$12.46	\$10.62
b.	2-Person- EE + child	\$24.00	\$20.77
C.	2-Person- EE + spouse/DP	\$24.00	\$20.77
d.	Family	\$24.00	\$20.77
e.	Family/2Employees	\$24.00	\$20.77

	Advantage Provider	Premier Provider	Out of Network
Annual Maximum	\$2,000	\$1,000	\$1,000
Deductible (Individual/Family) Plan A	\$50/\$150	\$50/\$150	\$50/\$150
Deductible (Individual/Family) Plan B	\$75/\$225	\$75/\$225	\$75/\$225
Orthodontia (Plan A) dependent to age 19; separate \$50 deductible	\$1,500	\$1,000	\$1,000
Orthodontia (Plan B) dependent to age 19; separate \$75 deductible	\$1,000	\$750	\$750
Orthodontia (Plan A) Adult; separate \$50 Deductible	\$1,500	\$1,000	\$1,000
Orthodontia (Plan B) Adult; separate \$75 Deductible	\$1,000	\$750	\$750

Procedure	Paid by Cigna Dental		
	Plan A	Plan B	Is there a deductible?
Diagnostic	100%	100%	No Deductible
Preventive	100%	100%	No Deductible
Basic Restorative	70%	50%	Deductible Applies Deductible Applies
Composite Fillings in Molars	70%	50%	
Major Restorative	60%	50%	Deductible Applies
Oral Surgery	70%	50%	Deductible Applies
Endodontics	70%	50%	Deductible Applies
Periodontics	70%	50%	Deductible Applies
Prosthodontics	60%	50%	Deductible Applies
Denture Repair and Relining	70%	0%	Deductible Applies
Orthodontics	50%	50%	Separate Deductible

## **Cigna Dental Care Access (DHMO)**

The Cigna Dental Care Access (DHMO) plan requires you to select a general dentist for routine, preventive, diagnostic and emergency care. They will refer you to specialists as needed.

MUST CHOOSE IN-NETWORK DHMO DENTIST; NO ANNUAL DEDUCTIBLE

If you choose a Cigna Dental Care Access plan, it is important to know how it works.

- This plan covers most preventive and diagnostic services at a competitive rate, or at no extra cost.
- Easily search for Cigna Dental Care Access (DHMO) network providers in the directory on Cigna.com.
- Cigna Dental Care Access plans don't have a deductible or a yearly dollar limit. There is also no waiting period to access coverage.

#### **Example of Schedule of Covered Services**

	100%	Amalgam (silver) fillings	90%
Preventive Services			
Basic Services	90%	Composite fillings	90%
		(anterior teeth only)	
Major Services	60%	Stainless steel crowns	90%
Annual Benefit Maximum	None	Incision and drainage of abscess	90%
Office Visit Copay	\$0	Uncomplicated extractions	90%
Orthodontic Services (Adult and Child)	50%	Surgical removal of erupted tooth	90%
Orthodontic Deductible	None	Surgical removal of	90%
		impacted tooth (soft tissue)	
Orthodontic Lifetime Maximum 24 months of comprehensive orthodontic treatment plus 24 months of retention		Major Inlay	60%
Preventive Oral examinations	100%	Onlays	60%
Cleanings Adult/Child	100%	Crowns	60%
Fluoride	100%	Full & partial dentures	60%
Sealants (permanent molars only)	100%	Pontics	60%

Single 2-Person- EE + child 2-Person- EE + spouse/DP Family Family/2Employee	\$6.46 \$11.08 \$11.08 \$14.77 \$14.77
--	--

## Devereux's Chance of a Lifetime - Living Healthier Contest

Have you and/or your spouse or domestic partner had preventive care visits between September 1, 2020 and now, or will you be receiving and of the following preventive care screenings before August 31, 2021?

- Breast cancer (mammogram)
- Cervical cancer (Pap test)
- Colorectal cancer (colonoscopy)
- Prostate cancer (exam/blood test)
- Diabetes (blood test)
- Physical exam- Covered every two calendar years if 22-39 years old; covered every year if 18-21 and beginning at 40 years old.

Not only will you earn 5 to 10 points for the Health and Wellness Program (which also includes the flu vaccine), you no longer have to submit information to qualify. Anyone who receives any of the above screenings will have a chance to win!

What's the prize? Single qualified employee portion of medical coverage for 2022!

Why is Devereux Advanced Behavioral Health offering this prize to **one employee at each Center**? Preventive care is very important and we want to ensure that all employees with a Devereux plan are taking advantage of the commonly recommended screenings listed above. Winners will be announced during Open Enrollment.

## Health Advocate - FREE TO YOU! (Devereux Paid) Call (866) 695-8622

For employees enrolled in one of Devereux's Independence Blue Cross medical plans, you have access to Health Advocate services to help you, your spouse or Domestic Partner, dependent children, parents and parents-in-law. Health Advocate experts can save you money and time. Personal Health Advocates can help:

- Explain benefits and estimate procedure costs
- Find the right in-network doctors and make appointments
- Answer questions about diagnoses and treatments
- Research and arrange expert second opinions
- Facilitate pre-authorizations and coordinate benefits
- Resolve insurance claims and billing issues

## **Health and Wellness Program**

Complete the two required activities below and earn 85 points or more to qualify for the incentive to save 10% on your medical premiums or receive contributions to your health savings account. The program runs from October 1 to August 31 each year and allowances are made for new hires. (Any activities completed in the month of September accrue points for October 1.) Those enrolled in Devereux's Independence Blue Cross medical plans can register and access the Health Advocate member portal at <a href="https://www.HealthAdvocate.com/Devereux">www.HealthAdvocate.com/Devereux</a> or download the free Health Advocate app. The Health and Wellness Program can help you, your spouse or domestic partner, and dependent children age 18 and older. Take charge of your health and improve your well-being by getting started today!



- Personal Health Profile (required) Complete this 5-minute questionnaire to get personalized tips.
- Tobacco Affidavit (required) Check a box to certify your tobacco status. If you're tobacco-free, you'll earn 25 points.
  If you use tobacco, complete a 12-week Tobacco Cessation Program—with a workshop or Wellness Coach to earn 35 points.

Wellness Activities	Points/Max Points	Details
Healthy Behavior Tracking:	Earn up to 25 points per tracker:	
<ul> <li>Log 150 minutes of time exercised</li> </ul>	• 5 points/week	Track your progress and reach healthy goals! Connect your
<ul> <li>Weight</li> </ul>	• 1 point/week	compatible fitness device or manually track your activity on the
<ul> <li>Distance exercised 7-9 hours of sleep</li> </ul>	• 1 point/week	app or website.
<ul> <li>7-9 hours of sleep</li> </ul>	• 1 point/day	
<ul> <li>64 ounces of water</li> </ul>	• 1 point/day	
• 5 or more servings of fruits & vegetables	• 1 point/day	
Devereux Challenges	10/20	Compete with other Devereux centers and make it to the finish line
Center Wellness Events	10/20	Participate in Devereux and community wellness events and approved webinars
Wellness Workshops	25/75	Choose a 6-week self-paced workshop from a variety of wellness topics to learn and earn points
Wellness Coaching	35/35	A Wellness Coach can help you meet your health goals and thrive! Complete 6 sessions over 3 months
Preventive Care Exams	5/10	Stay on top of your health by getting preventive care between 10/1/2020 and 8/31/2021. Exams include: Annual physical, well-woman visit; screenings for diabetes or osteoporosis; screenings for breast, cervical, colon or prostate cancers.
Flu Shot	10/10	Protect yourself and others by getting a flu shot. (If you receive a flu shot at Devereux, you can enter the date as a Center Event for 10 points.)

Questions? Contact Health Advocate at (866) 695-8622 or your local People Operations department.

## **TIAA**403(b) Tax Deferred Annuity

The Devereux retirement plan is a valuable employee benefit that helps you save for your retirement by deferring part of your salary into an investment plan for the future.

Defined Contribution Plans allow you to control where your savings are allocated. You choose where to invest and how much based on your retirement time horizon, investment objective, and risk tolerance

You can change where you want future contributions to go at any time; and you can transfer some or all of your funds among accounts, with no tax implications.

You can make changes to your retirement plan contribution amount and investment mix any time after you enroll.

Individual consultations, advice and counseling are free to all employees via telephone, web session, TIAA office or on-site where available. Devereux has a dedicated website <a href="https://www.tiaa.org/Devereux">www.tiaa.org/Devereux</a> where you can find on-demand webinars, calculators/tools, and much more at NO cost to you.

Loans and hardship withdrawals are available from Employee Contributions only. Restrictions may apply.

Rollovers into the plan are allowed.

## **Questions? Call TIAA or Janney Montgomery Scott**

#### **Employee Contributions**

- As of the first day of employment, you may contribute on a voluntary basis up to the IRS maximum (\$19,500 in 2020); and if age 50 or older, may contribute a catch-up contribution of up to \$6,500.
- Employees with 15 or more years of service can make a catch-up contribution of up to an additional \$3,000; employees age 50 or over that have 15 or more years of service, can make a catch-up contribution of up to an additional \$9,500.
- 2021 contribution limits will be updated at <u>irs.gov/retirement</u>.

#### **Devereux Contributions**

- Contributions are provided based on your base salary.
- Take advantage of your retirement plan match! For more information, ask your local People Operations representative or visit Devereux's TIAA Retirement <u>Summary Plan Description</u> to learn more.

## **Investment Options**

- The Retirement Choice (RC) contract
- The RA and GSRA are no longer available for contributions; existing money can remain in them.
- Tailored menu of best in class investment options for a variety of well-known fund managers in addition to TIAA.

#### **Pre-tax investments**

No taxes are due on pretax contributions and earnings until the money is withdrawn. Because these plans are intended primarily for retirement, you can generally withdraw funds without penalties after you've reached age 59½. Withdrawals made prior to age 59½ may be subject to an additional 10% penalty in addition to ordinary income tax.

#### Post-tax (Roth 403b)

■ Taxes are withheld prior to making the contributions. Enjoy tax-free distributions, without penalty when you are age 59 ½ or older and a distribution is taken five years after the first Roth contribution was made to the contract. Earnings are subject to ordinary income tax and a 10% early withdrawal penalty may apply prior to age 59 ½.

TIAA products may be subject to market and other risk factors. See the applicable product literature, or visit <a href="https://www.tiaa.org/Devereux">www.tiaa.org/Devereux</a> for details. Investment, insurance and annuity products are not FDIC insured, are not bank guaranteed, are not deposits, are not insured by any federal government agency, are not a condition to any banking service or activity, and may lose value.

#### Contact info:

#### TIAA

Advisors are available Monday-Friday, 8 a.m. - 10 p.m. (ET) at (800) 842-2252.

## **Janney Montgomery Scott**

- Devereux's Plan Advisors at Janney Montgomery Scott are Quinn Karpiak, Scott Karpiak and Greg Dupee
- You can call (800) 567-2687 Toll Free, call direct by dialing (215) 665-6010, or email QKarpiak@janney.com

## Voluntary Accidental Death and Dismemberment (AD&D) Insurance through Cigna

Devereux is offering you the opportunity to elect Accidental Death and Dismemberment (AD&D) Insurance through Cigna at affordable group rates. Below you will find the cost of coverage if you elect to have this insurance coverage for you and your family.

## What Is Accidental Death and Dismemberment (AD&D)?

AD&D insurance is an inexpensive way to provide additional life insurance benefits if the cause of death is accidental. It also pays a benefit if there is a loss of a limb, vision or hearing due to an accident.

### What is Available?

- \$10,000 increments up to **\$500,000** (not to exceed 10x salary)
- All Guaranteed issue coverage (no medical questions)
- Offered as Employee Only plan or a Family Plan option
  - o Family plan provides 100% employee, 50% spouse and 15% Child of amount elected

#### COST:

Employee Only - \$0.18/\$10,000 Family - \$0.26/\$10,000

Coverage Amount \$10,000	Monthly Employee Only Cost \$ .18	Monthly Employee and Family Cost \$ .26
\$20,000	\$ .36	\$ .52
\$30,000	\$ .54	\$ .78
\$40,000	\$ .72	\$1.04
\$50,000	\$ .90	\$1.30
\$60,000	\$1.08	\$1.56
\$70,000	\$1.26	\$1.82
\$80,000	\$1.44	\$2.08
\$90,000	\$1.62	\$2.34
\$100,000	\$1.80	\$2.60
\$110,000	\$1.98	\$2.86
\$120,000	\$2.16	\$3.12
\$130,000	\$2.34	\$3.38
\$140,000	\$2.52	\$3.64
\$150,000	\$2.70	\$3.90
\$160,000	\$2.88	\$4.16
\$170,000	\$3.06	\$4.42
\$180,000	\$3.24	\$4.68
\$190,000	\$3.42	\$4.94
\$200,000	\$3.60	\$5.20

Coverage amounts for employees that attain age 70 or older will be reduced:			
Age	Reduced by		
70	65%		
75	40%		
80	30%		
85	15%		

- Additional amounts available to \$500,000
- To figure cost for the amount you desire Amount of Insurance x Cost / 10,000 (\$300,000 x .18 / 10,000 = \$5.40) Employee Only; (\$300,000 x .26 / 10,000 = \$7.80) Family

## **Voluntary Supplemental Life Insurance through Cigna**

Guaranteed Issue of \$200,000; increased amounts available with underwriting. Spouse/Domestic Partners and children riders are available.

Voluntary Life	Per Pay
Employee	per \$10,000
Under 25	\$ 0.30
25-29	\$ 0.30
30-34	\$ 0.37
35-39	\$ 0.44
40-44	\$ 0.63
45-49	\$ 0.92
50-54	\$ 1.47
55-59	\$ 2.34
60-64	\$ 3.30
65-69	\$ 5.86
70-74	\$ 9.51
75+	\$ 9.51
Spouse/DP	per \$5,000
Under 25	\$ 0.14
25-29	\$ 0.22
30-34	\$ 0.29
35-39	\$ 0.36
40-44	\$ 0.50
45-49	\$ 0.79
50-54	\$ 1.26
55-59	\$ 2.06
60-64	\$ 2.60
65-69	\$ 3.78
70-74	\$ 7.49
75+	\$ 14.75
Children	\$ 10,000
	\$ 0.65

Up to \$200,000 guaranteed issue (no medical questions) for new hires; all benefit eligible employees have the opportunity to elect or increase their current amount of supplemental life insurance by one increment of \$10,000, not to exceed the plan guarantee issue amount. Additional increments of \$10,000 may be elected, subject to Evidence of Insurability approval. Maximum available with Evidence of Insurability is \$250,000.

Spouse/Domestic Partner: (new hires) Guarantee Issue Amount of \$50,000 without Evidence of Insurability can be purchased in \$5,000 increments. All other benefit eligible spouse/domestic partners may elect or increase their election by one increment of \$5,000, not to exceed the plan guarantee issue amount.

Spouse/Domestic Partner and Children's coverage does not require employee to purchase single coverage supplemental life insurance.

Unmarried Children: Age 14 days to 26 years - \$10,000

**Basic Term Life Insurance: FREE TO YOU! (Devereux Paid)** 

2x annual base salary, not to exceed \$200,000.

## Group Voluntary Accidental Injury Insurance (Off the Job Accidents) through Cigna

- Guaranteed Issue: No medical underwriting
- Plan provides a schedule of benefits for covered injuries and accident related expenses for Off the Job accident coverage only that result within 90 days of the accident.
- A physician must diagnose covered losses.
- Treatment must be received in the United States or its territories.
- \$50 per year Wellness, Health Screening and/or Preventative Care Benefit Credit per covered person per calendar year.
- Click here to learn more about coverage and benefit amounts.

### What is Accidental Injury Insurance?

Accidental Injury Insurance helps to pay for expenses associated with a covered accident or injury. **Covered injuries may include:** 

- Broken bones
- Burns
- Torn ligaments
- Concussions
- Eye injuries
- Ruptured discs
- Cuts requiring stitches

## Benefits may be payable for:

- Ambulance
- Initial treatment
- Emergency room visit
- Hospitalization
- Admission (per occurrence)
- Confinement (per day)
- Follow-up care
- X-rays
- MRI's
- Rehab

#### Rates per pay:

•	Single	\$4.21
•	Employee + Spouse/DP	\$6.94
•	Employee + Children	\$8.97
•	Family	\$11.55

## **Voluntary Short-Term Disability**

When an unexpected illness or injury happens, your focus should be on your health – not your budget. For those without that much HML, this is an opportunity to cover your risk of lost income if you are out of work for a short period of time due to an off the job injury or illness, including maternity. Coverage is at 60% of your salary, up to a maximum of \$1,500 per week. There is a 14-day and 28-day elimination period for sickness or accident. An elimination period is the number of days you have to wait until the benefit kicks in. Employees who select this insurance will use Devereux's Health Medical Leave or Time-off Benefit (until Short-term Disability coverage begins), or not be paid for the 14-day or 28-day elimination period. Once approved, Short Term Disability lasts as long as you are unable to work due to a disabling condition, up to 11 weeks. If you continue to meet the definition of disability after 11 weeks, you would become eligible for Long-term Disability, a benefit paid by Devereux.

#### What is the cost for this benefit option and how is it paid?

This voluntary benefit is paid 100 percent by the employee. All full-time employees are eligible. Rates are based on age and base salary, which determines the amount of Short-term Disability benefit received.

Age	14-day elimination period	28-day elimination period
<25	\$0.94	\$0.47
25-29	\$1.14	\$0.55
30-34	\$1.35	\$0.65
35-39	\$1.02	\$0.45
40-44	\$0.66	\$0.30
45-49	\$0.70	\$0.34
50-54	\$0.85	\$0.43
55-59	\$0.96	\$0.45
60-64	\$1.12	\$0.54
65+	\$1.18	\$0.54

## How to determine the bi-weekly cost of this benefit option:

To calculate the bi-weekly payroll deduction for voluntary Short-term Disability coverage, use the rates above and the formula below:

1. Enter your annual pre-disability earnings, not to exceed \$130,000, divided by 52 weeks, and multiply by benefit of 60 percent and enter on Line 1	1)
2. Select your rate from the rate table and enter on Line 2	2)
3. Multiply Line 1 by the amount shown on Line 2 and enter on Line 3	3)
4. Divide Line 3 by \$10 and enter on Line 4	4)
5. Multiply Line 4 by 12 months and enter on Line 5	5)
6. Divide Line 5 by 26 pays and enter on Line 6	6)

The amount shown on Line 6 is your estimated bi-weekly payroll deduction for this benefit; premiums will be deducted directly from your paycheck.

## Long Term Disability (LTD): Free to you! (Devereux Paid)

Devereux provides all full-time active employees with a minimum of 60% income replacement if out of work due to a disabling condition for 90 days or longer. This important paycheck protection benefit pays benefits directly to you and may be continued to Normal Social Security Retirement Age if you continue to meet the definition of disability. This benefit is offered at no cost to you.

## **Explanation of Accruals for HML and TOB**

Benefit	Years of Service*	Accrual Factor	<b>Annual Accrual Maximum</b>	Earned on 80 Hours Worked
HML – FT & Academic Staff	Date of Hire	.0500	64 Hours	4.00 Hours
TOB – FT Staff hired prior to 1/1/2005	90 Days – 9 Years	.1000	208 Hours	8.00 Hours
	10 Years – 14 Years	.1192	248 Hours	9.54 Hours
	15+ Years	.1385	288 Hours	11.08 Hours
TOB – FT Staff hired on or	90 Days – 2 Years	.0923	192	7.38 Hours
after 1/1/2005				
	3 Years – 4 Years	.0962	200	7.70 Hours
	5 Years – 9 Years	.1000	208	8.00 Hours
	10 Years – 14 Years	.1192	248	9.54 Hours
	15+ Years	.1385	288	11.08 Hours

## **Domestic Partnership:**

Please refer to the DP Enrollment Packet for more information including affidavits.

## **Flexible Spending Accounts:**

Pre-tax plan to pay for out-of-pocket medical or dependent care, such as daycare. Maximum \$550 carry-over for medical spending; any additional contribution not used is forfeited. The contribution limits for 2021 are as follows: Medical FSA \$2,750 per year; Dependent Care FSA \$5,000 per year.

Flexible Spending Accounts (Medical Spending Accounts) and Dependent Care Accounts are pre-tax programs that work with the Medical Tiered Plan to help cover medical related or dependent daycare expenses for the benefit plan year. A Medical Spending Account (also referred to as a Flexible Spending Account or FSA) is designed to reimburse for out-of-pocket medical care expenses incurred by you or your eligible dependents. A Dependent Care Flexible Spending Account is designed to reimburse you for expenses incurred to care for your eligible dependents under age 13 or other dependents that are physically or mentally incapable of self-care, such as elderly parents who live in your home at least eight hours each day and who qualify as exemptions on your federal income tax return. These programs are limited in the amount you can save pre-tax and in how much may be carried over into the next benefit year. For more information, please refer to the Flex Spending Packet.

#### CommuteEase:

You'll be able to make contributions to your CommuteEase plan directly through Employee Benefits Corporation's member portal by the 13th each month for the upcoming month to pay for eligible transit or parking expenses, and those contributions will be available on the EBC Benefits Card. EBC will provide Devereux the election amount and that amount will be deducted from the employees check the last pay of each month. The contribution limit for CommuteEase for transportation, transit and parking is \$270 per month. Unused funds carryover to the next year for CommuteEase.

## Benefits that are 100 percent Devereux Paid

## **Carebridge Employee Assistance Program (EAP):**

Carebridge can help with managing family and personal concerns including childcare, parenting, elder care, money management, education planning, time management, convenience services, legal resources, relocation and more. Help is confidential and available 24/7/365 by calling (800) 437-0911. You and your dependent family members can call up to five times per topic per year. This includes up to five free, in-person or telehealth counseling services to assist with emotional concerns such as grief, stress, relationship difficulties, depression, anxiety, other behavioral health challenges and addictions. Discounted shopping and other helpful resources are available at <a href="https://www.myliferesource.com">www.myliferesource.com</a> and on the Carebridge EAP app. The initial access code is ADC53.

## **Resiliency Initiative:**

The health and well-being of our employees is of the utmost importance, and we are committed to ensuring you feel protected and supported <u>every day</u>. Take advantage of these free, resilience-building tools and resources to help you grow and flourish in your role here at Devereux, and help your team thrive. Remember, you need to take care of yourself first, so you can take care of others. Log into <a href="https://devereux.sharepoint.com/Pages/DevereuxStrong.aspx">https://devereux.sharepoint.com/Pages/DevereuxStrong.aspx</a> for videos, webinars and other resources.

## **Autism Spectrum Disorder (ASD) Benefit:**

Devereux will provide up to \$2,500 reimbursement toward Applied Behavioral Analysis for diagnosis of and services for Autism Spectrum Disorders (ASD). This benefit will be administered through the Corporate People Operations office by Ann DelCarlino and Jelsy Kravatz. Employees will submit paid receipt or EOB for reimbursement.

## Extra Benefits that are free to you (Devereux Paid):

- Travel Assistance: Cigna offers pre-trip planning, assistance while traveling and emergency medical transportation benefits for covered persons traveling 100 miles or more from home. Service is a phone call away, 24/7/365.
- Life Services: Cigna makes it easy for you to take charge of those difficult life and healthcare legal decisions, including living wills, financial power of attorney, healthcare power of attorney, funeral planning, medical authorizations for minors, and more.
- Online Will Preparation: Cigna's will preparation services support an important overall financial planning process and provide a valuable first step to help protect your family's financial future.
- ID Theft Protection: Identity theft kits information to help protect you and your family from identity theft.

## Benefits that may interest you - check with your People Operations department

## **Student Loan Debt Solution:**

Through TIAA, Savi offers Devereux employees two tiers of service for student loan assistance (including Parent Plus loans):

- 1. Free Student Loan Checkup: Quickly view repayment plan options and discover potential savings;
- 2. Savi Essential Services: Track payments, e-file paperwork and receive one-on-one assistance, reminders and more for a \$60 annual fee.

Visit <u>TIAA.org/studentloanhelp-devereux</u> to sign up for Devereux's student loan debt solution. It takes about 15-20 minutes to get an estimate of your savings. Employees who take advantage of this benefit option will receive advice from Savi's student loan experts on navigating <u>Public Service Loan Forgiveness</u>, as well as lowering interest rates, consolidating loans or reducing payments for private loans. To learn more, you can view the <u>Student Debt Solution Guide</u> and common <u>FAQs</u>. Questions? Contact your local People Operations representative or call Savi at **(833) 604-1226** Monday-Friday 8:30 a.m. to 8 p.m. (ET).

## **Student Tuition Assistance Program (STAP):**

Based on Center availability, Devereux pays a portion of tuition for continuing education and development opportunities. Check with your local People Operations representative to learn more.

## 30-39 Hour Employee Benefit Design

Devereux's current plan defines full-time as employees as working 40 hours per week

- Affordable Care Act requires that we offer benefits to those employees who work 30 hours or more.
- ACA does not require plans to offer spousal/domestic partner coverage.
- ACA does not require that benefit plans to these employees match those employees who work 40 hours.

## **High Deductible Health Plan only**

- Employee and employee + child(ren) only (no spousal/domestic partner coverage)
- Health Savings Account (HSA): Employees can save pre-tax dollars to pay for qualified medical expenses. The maximum contribution amount for 2021 is \$3,600 for employees with single coverage and \$7,200 for employees covering children. The plan allows an additional \$1,000 catch-up contribution for those aged 55-64. This money can be used to cover deductible/coinsurance. The benefit of a HSA is that unused money remains in the account and rolls over each year. Money saved in a HSA belongs to the employee and they can take it with them if they leave Devereux. At retirement, there are additional post-employment uses for HSA savings, such as paying for Medicare premiums.

## Bi-weekly Contributions (26 pays):

- Single \$75.23
- Employee and child(ren) \$157.38
  - Enrollment in the Health and Wellness Program contributes \$5 per pay for Single and \$10 per pay for Employee/child (ren) in the Health Savings Account (HSA).

## **Cigna Dental PPO or DHMO Benefit**

- Plan A (high option)
  - Single \$12.46 per pay; Employee/Children \$24.00 per pay
- Plan B (low option)
  - Single \$10.62 per pay; Employee/Children \$20.77 per pay
- Dental DHMO
  - o Single \$6.46; Employee/Children \$14.77
  - Must choose Primary Care Dentist

Benefit Contact Information	Questions? Call Hea		
Company Name	Phone Number	Website	Group #
Carebridge (EAP)	(800) 437-0911	www.myliferesource.com	ADC53
CIGNA Life/LTD/Voluntary Benefits	(800) 351-9214	www.Cigna.com	
CIGNA Dental (Dental PPO and DHMO)	(800) 564-7642	www.Cigna.com	
Employee Benefits Corporation (Flexible Spending Accounts)	(800) 346-2126	www.ebcflex.com	
Health Advocate	(866) 695-8622	www.HealthAdvocate.com/Devereux	
Independence Blue Cross (IBX) (Medical)	(877) 393-6740	www.ibx.com	
Independence Blue Cross (Rx)	(888) 678-7012		
Magellan Healthcare (Behavioral Health)	(800) 220-1570	www.magellanascend.com	
MD Live	(888) 632-2738	www.mdlive.com/IBX	
MVP New York (Medical)	(800) 318-8575	www.mvphealthcare.com	
Savi (Student Loan Debt Solution)	(833) 604-1226	www.tiaa.org/studentloanhelp-devereux	
TIAA (Retirement)	(800) 842-2252	www.tiaa.org/Devereux	
Optum Bank (Health Savings Account)	(866) 234-8913	www.optumbank.com	

"Servant Leadership is a philosophy and set of practices that enriches the lives of individuals, builds better organizations and ultimately creates a more just and caring world. At Devereux, we strive to incorporate Servant Leadership into our culture and every aspect of our organizational framework; from the delivery of quality services to individuals served, their families, and other stakeholders to the development and empowerment of our employees. At Devereux, we are committed to being the employer of choice, and we know that offering high quality, affordable benefits is a key component. I am honored to partner with you in service of our important mission. Please reach out to People Operations if you have questions or comments on these materials."

— Carl E. Clark II, Devereux President and CEO



www.benefits.devereux.org