2025 Employee Benefits





Today's Agenda

Benefit Offering for 2025 – Review

Medical

- UMR- 2 plans
 - PPO 2000
 - PPO 1500
- Kaiser 2 plans
 - HMO 15
 - HMO 2000 HSA

Dental

Reliance Matrix

Vision

VSP

Life and Disability

Reliance Matrix

Flexible Savings Account

Navia

Voluntary Benefits

- AFLAC
 - Critical Illness and
 - Accident
 - Hospital Indemnity (New)
- Reliance Matrix Life and AD&D
- MetLife Legal Plans
- Nationwide Pet Insurance











2025 Premiums and Benefits

Medical

Due to unexpectedly high claims for a second year in a row, AOS received a medical increase from United Healthcare that was similar to 2024. Due to the increase in rates, AOS will be moving to UMR for 2025 to maintain current benefits and contributions. HRA contributions will remain the same, which will continue to minimize the out of pocket costs for employees and their families.

Solution

Understanding the value our employees place on their benefits, we will be moving to UMR to maintain benefits, network similarity and costs. The current plans will still provide rich benefits with office copays covered by the HRA with an Out-of- Pocket Maximum below market. Combined with the AOS HRA contribution, employees now have 2 excellent benefit options to choose from.

Please make sure you go through the ADP online enrollment system to elect the plan that best meets your needs.



2025 Employee Monthly Contributions

	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
UMR HRA 1500 PPO Buy Up	\$227.14	\$470.74	\$429.47	\$656.41
UMR HRA 2000 PPO Base	\$200.20	\$414.18	\$378.29	\$575.60
VSP Vision	\$1.96	\$4.38	\$4.38	\$4.38
Reliance Matrix Dental	\$11.89	\$22.42	\$26.15	\$36.97



2025 Employee Monthly Contributions

Kaiser HSA 2000 Plan				
	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 30	\$88.63	\$223.10	\$190.90	\$261.10
30-39	\$100.83	\$251.30	\$199.10	\$287.90
40-49	\$129.03	\$258.30	\$206.70	\$318.10
50-54	\$165.43	\$337.70	\$235.50	\$369.90
55-59	\$200.23	\$410.70	\$270.10	\$446.50
60-64	\$250.83	\$497.70	\$321.90	\$546.70
65+	\$299.83	\$673.70	\$368.70	\$704.90

Kaiser HMO 15 Copay Plan				
	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 30	\$109.00	\$304.40	\$299.40	\$423.60
30-39	\$120.40	\$327.20	\$307.80	\$468.40
40-49	\$155.40	\$357.40	\$295.20	\$471.60
50-54	\$202.20	\$420.20	\$333.40	\$537.20
55-59	\$255.40	\$536.40	\$381.80	\$617.00
60-64	\$315.00	\$598.40	\$421.40	\$698.60
65+	\$357.40	\$772.20	\$537.20	\$848.80





Open Enrollment 2025



Common health terms



Copayment:

A fixed amount of money you pay a provider for a covered visit or prescription

Deductible:

The amount you'll need to pay before your plan starts to pay for covered services



Coinsurance:

The percentage you pay as your share of a covered health care service

Out-of-pocket limit:

The most you could pay during a coverage period (usually 1 year) for your cost share of covered services. After you meet this limit, the plan will usually pay 100% of the allowed amount

justplainclear.com

For thousands of health care terms defined simply and clearly, this is your site.



The preferred provider organization (PPO) plan



Key features

Freedom to go to almost any doctor or hospital

Not required to have a primary care doctor

No referral needed to see a specialist

Things to consider

You pay less when you use doctors in the plan's network



HRA Overview











0/0

Health reimbursement account (HRA)

• These dollars are used to help pay for your covered medical expenses, like office visits, lab work and tests.

Annual deductible

- You pay a yearly deductible before we start sharing the cost of covered health care you receive.
- The money in an HRA is used to help meet your deductible.

Major medical benefits (your percentage of the costs)

- After you meet your annual deductible, you pay a percentage or copay of the cost of your covered care.
- Once you pay the annual maximum for your percentage of the costs, the plan pays 100% for everything else that's covered the rest of the year.



PPO 1500 and PPO 2000 HRA Plan Benefits - Comparison ALPHA & OMEGA SEMICONDUCTOR



MEDICAL PLAN		In-Network PPO 1500	In-Network PPO 2000	
HRA Funding		\$1,250 - Individual / \$2,250 - Family	\$1,250 - Individual / \$2,250 - Family	
Deductible		\$1,500 - Individual / \$3,000 - Family	\$2,000 - Individual / \$4,000 - Family	
Calendar Year Ou	t of Pocket Max	\$2.500 - Individual / \$5,000 Family	\$5,000 - Individual / \$10,000 Family	
Preventative		No Charge	No Charge	
Office Visits	Doctor	10% after ded	\$30 copay	
Office visits	Specialist	10% after ded	\$60 copay	
Lab / X-Ray @Freestanding Facility		10% after ded	20% after ded / 50% after ded at Hospital Facility	
Complex Imaging – (MRI,CT Scan, PET) @Freestanding Facility		10% after ded	20% after ded / 50% after ded at Hospital Facility	
Chiropractic		10% after ded	\$30 Copay	
Inpatient Hospital		10% after ded	20% after ded	
Outpatient Hospit	tal	10% after ded	20% after ded	
Urgent Care		10% after ded	\$50 copay	
Emergency		10% after ded	20% after ded	
	Tier 1 - Generic	\$10 copay	\$10 copay	
Prescriptions T	Tier 2 - Brand	\$30 copay	\$30 copay	
	Tier 3 - Non-Formulary Brand	\$70 copay	\$70 copay	



How HRA Physician visits are paid under the PPO 2000 HRA

Doctor's visit



You go to the doctor.

Doctor Visit



You as the member will pay the \$30 copay for the Primary Care Visit or the \$60 copay for a Specialist Visit.

HRA



Provided the member hasn't utilized the HRA Funding allotment, UMR will send the member a check for the amount of the PCP or Specialist Visit

Explanation of Benefits



UMR will send you an EOB recap. It's not a bill; it's a summary of how UMR processed the claim.

****All services subject to the deductible will be paid similarly to the PPO 1500 HRA.





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How HRA claims are paid under the PPO 1500 HRA



You go to the doctor.

The doctor sends UMR a claim with a list of services you received.

We review and process the claim based on your plan benefits.

UMR will let the doctor know how much UMR is paying for covered medical services and how much, if anything, you have to pay. If you've got enough money in your account, your HRA will automatically be used to pay the doctor.

UMR will send you a claims recap. It's not a bill; it's a summary of how UMR processed the claim and what, if anything, you owe the doctor.

If you owe the doctor any money, the doctor will bill you for it and you can pay the doctor directly.





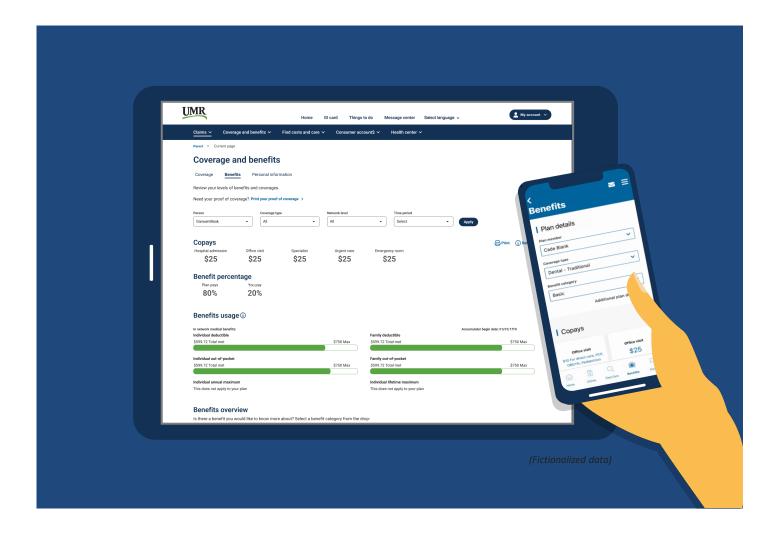
Manage your plan and health online (and on the go)

View claims by service date, family member, status and more

- Clearly organized and easy to sort
- Find out what you owe
- Get all the details in one place
- Safe and secure
- No lost paperwork

Get your answers fast

- Is there a copayment for your office visit? If so, how much?
- What's your deductible, and are you close to reaching it?
- How much have you paid toward your out-of-pocket maximum?

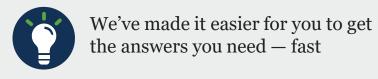


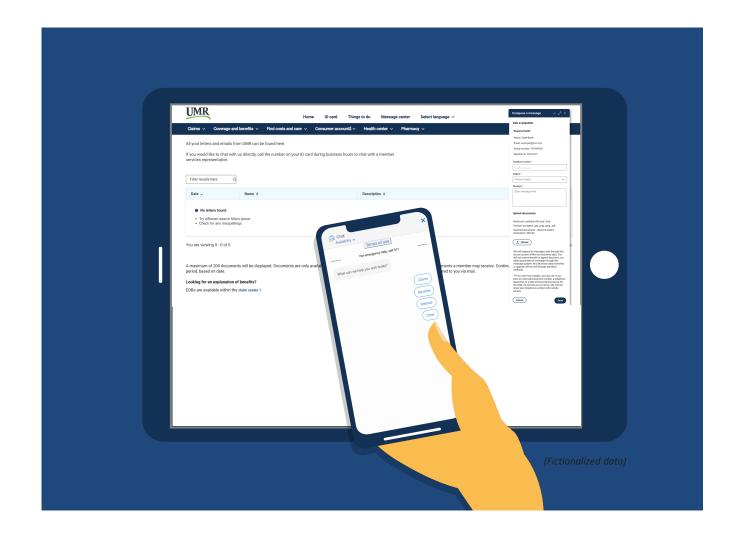




Chat online with UMR customer service

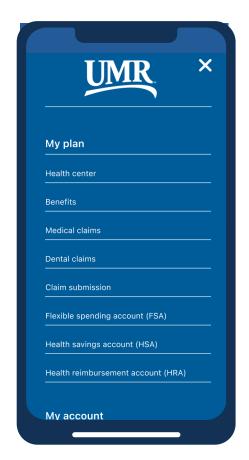
- Simply sign in to umr.com and select the Chat icon to get started.
 On the UMR app, select Contact to access the Live Chat icon
- Team members are available 24 hours a day, seven days a week (excluding major holidays)







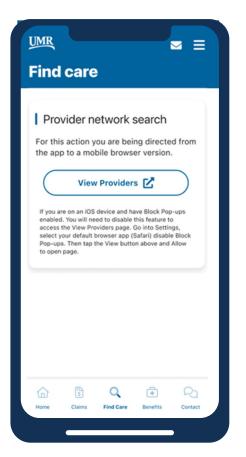
Manage your plan and health online (and on the go)



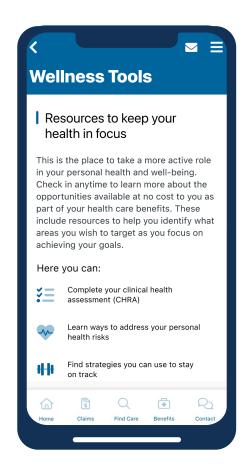
Menu **Note**: Customized by plan



Virtual ID card



Find care (provider network)



Wellness tools



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A better choice for good health





Convenient ways to get care



You have flexible options to get care beyond the doctor's office — and you can manage your care anytime with the Kaiser Permanente app or at kp.org.



Getting care

- Talk with a Kaiser Permanente clinician by video or phone for the same high-quality care as an in-person visit.¹
- Get 24/7 medical advice by phone or online.
- Email your doctor's office with nonurgent questions.²



Managing care²

- Schedule or cancel routine appointments.
- Order most prescription refills.
- Check your medical records and pay bills.



More than 80% of care visits during the COVID-19 outbreak have been phone appointments or video visits.



Kaiser Comparison



Kaiser	HMO 15	HMO 2000 HSA	
Tuisor			
Calendar Year Deductible	None	\$2,000 – Individual / \$4,000 – Family	
Calendar Year Out-of- Pocket Maximum	\$2,500 – Individual / \$5,000 – Family	\$3,500 – Individual / \$7,000 – Family	
HSA Contribution	Not Applicable	\$1,250 – Individual / \$2,250 - Family	
Preventative	No Charge	No Charge	
PCP / Specialist Visit	\$15 copay	\$o after deductible	
Lab / X-Ray	\$10 copay	\$o after deductible	
In Patient – Hospital	\$200 per day	\$300 per day after deductible	
Out Patient – Hospital	\$100 per procedure	\$150 per procedure after deductible	
Complex Imaging	\$50 per procedure	\$50 per procedure after deductible	
Emergency Room	\$100 per visit	\$100 per visit after deductible	
Urgent Care	\$15 copay	\$0 after deductible	
Prescription Coverage Tier 1 – Generic Tier 2 – Brand	\$10 \$25	\$10 after deductible \$30 after deductible	



Your health plan plus a health savings account



- Combines a medical plan with a health savings account
- Provides coverage for current health care expenses with the option to save for future expenses
- In-network preventive care is covered by the plan at 100%*
- You own the account and you, your employer or both can contribute
- Contributions are generally not taxable**
- You have investment options



Your HSA maximum contribution



The IRS has set the following limits for 2024:



Under age 55 and not enrolled in Medicare (based on a 12-month period):

- 2024 up to \$4,150 individual coverage
- 2024 up to \$8,300 family coverage
- 2025 up to \$4,300 individual coverage
- 2025 up to \$8,600 family coverage

Age 55 or older:

- Maximum contribution increases by \$1,000 (considered a "catch-up" contribution)
- Up to \$5,300 individual coverage*
- Up to \$10,600 family coverage*

To make the maximum contribution in a calendar year, you must:

- Meet all requirements to be eligible for HSA contributions on January 1
- Remain qualified through December 1
- If these criteria are not met, maximum contribution is prorated – if 1/12 maximum contribution for each month then individual is qualified

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Dental





Dental Insurance coverage will be provided by Reliance Matrix for all eligible employees and their dependents. PPO benefits allow members to seek services from any Reliance Matrix Dental participating provider or any non-Reliance Matrix dentist you choose. Please keep in mind that Reliance Matrix members will realize the greatest level of benefit by utilizing a Reliance Matrix PPO provider.

Dental Network = Ameritas Classic Network

DENTAL PLANS		Dental PPO	
		In-Network	Out-of-Network (90th UCR)
Deductible	Per Member	\$50	\$50
Deductible	Per Family	\$150	\$150
Annual Maximum Per Member		\$1,500	\$1,500
Diagnostic & Preventive Exams		100%	100%
Restorative (fillings)		80%	80%
Endodontics (root canals)		80%	80%
Periodontics (scaling and root planning)		80%	80%
Oral Surgery		80%	80%
Prosthodontics (crowns, bridges, dentures)		50%	50%
Child Only Orthodontia – \$1,500 Lifetime Max		50%	50%

Vision Plan





• Exam / Material Co-pay

\$20

• Frequency

- Exams every 12 months

- Lenses every 12 months

- Frames* every 24 months

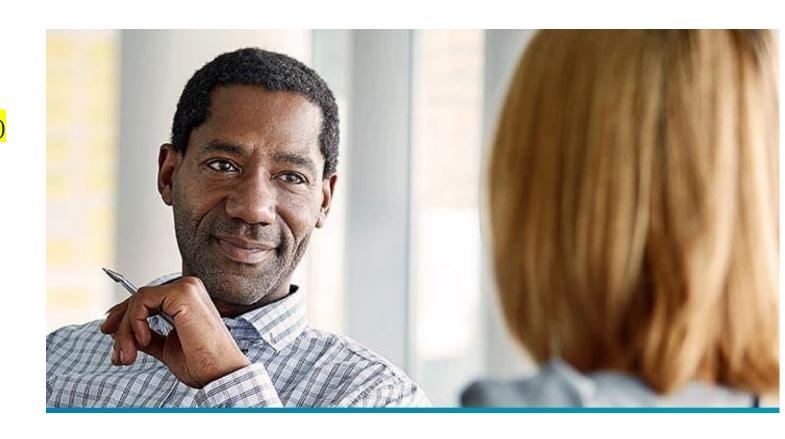
- Contacts (instead of glasses)*every 12 months
 - *The Frame and Contact allowance is \$200.
- Benefits
- Reimbursement benefits available with use of Out-of- Network Providers
- Laser Vision Correction discounts

Life and Disability Offerings



Life Insurance
Short-term Disability (NonCA employees)
Long-term Disability
Voluntary Life and AD&D

- EAP
- Travel Assistance





Term Life & AD&D Benefits



Benefit:

Life: 2 x Salary to \$500,000

AD&D: 2 x Salary to \$500,000

Guarantee Issue

\$500,000

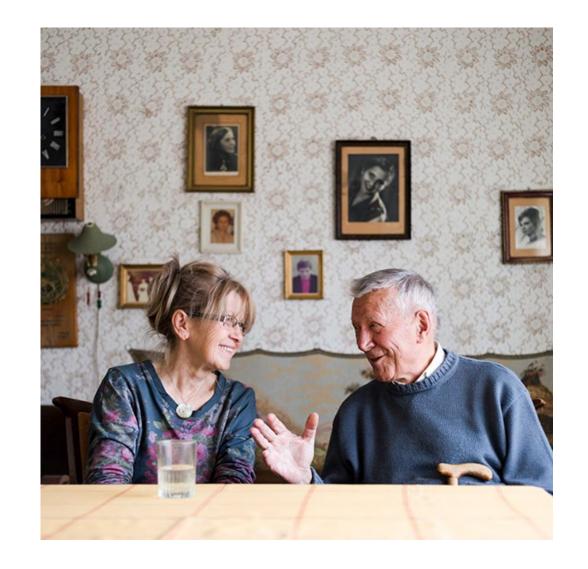
Portability

Living Benefit - 75% of the maximum benefit

Age Reductions:

At age 65 your benefits will reduce to 65% At age 70 your benefits will reduce to 50%

For a copy of the Life & AD&D exclusions, limitations and reductions, please refer to your enrollment packet.







Short-Term Disability Benefit Details

Non-CA employees only

- Elimination Period The time before benefits are payable
 - 7 day elimination period
- Benefit Amount The amount paid directly to you
 - Your benefit amount is 60% of the first \$2,623 of weekly predisability earnings as of the date of disability
 - Maximum Weekly Benefit \$1,574
 - \$50 weekly minimum benefit
- Maximum Benefits Period The length of time that benefits will be paid
 - Your benefit will be paid for 90 day max







Long-Term Disability Benefit Details

- Elimination Period The time before benefits are payable
 - <u>90 days</u>
- Benefit Amount The amount paid directly to you
 - Your benefit amount is <u>60%</u> of your monthly salary, less other income sources.
- Maximum Monthly Benefit
 - \$10,000 Max
- Maximum Benefits Period If you become disabled prior to age 62, benefits are payable to age 65 your Social Security Normal Retirement Age. At age 62 (and older), the benefit period will be based on a reduced duration schedule.





Employee Assistance Plan



Our Employee Assistance Program (EAP) offers comprehensive services to support employees where and when they need it most.

The program includes up to 3 face-to-face visits to support behavioral health as well as options for telephonic or Zoom, in addition to a wealth of support through the online portal and mobile app.

Employee Health

Behavioral Health Sessions

Up to 3 sessions to help manage stress, anxiety and depression, resolve conflict, improve relationships, overcome substance abuse and address any personal issues.

Medical Advocacy

To help navigate insurance, obtain doctor referrals, secure medical equipment or transportation, and plan for transitional care and discharge.

Legal Consultations

To help with a variety of personal legal matters including estate planning, wills, real estate, bankruptcy, divorce and child custody.

Dedicated Member Portal and Mobile App

Access to benefits 24/7/365 with online requests and chat options, and the option to explore thousands of articles, webinars, podcasts and tools covering total well-being.

Employee Productivity

Employee Personal Assistant

To help manage everyday tasks and give back time by providing information and referrals for home services, repairs, travel, entertainment, dining and personal services.

Life Coaching

To help reach personal and professional goals, manage life transitions, overcome obstacles, strengthen relationships, and build balance.

Lifestyle Management

To provide information and referrals when seeking childcare, adoption, special needs support, eldercare, housing, transportation, education, and pet care.





Bereavement Counseling



Employees, family members and beneficiaries are provided confidential support services to cope with the loss of a loved one.

Services include telephonic grief counseling sessions and legal and financial consultation.

For questions or to access services, contact ACI Specialty Benefits at 855-775-4357 or rsli@acieap.com

Grief counseling services

- Available with up to 3 telephonic grief counseling sessions for assessment and referral.
- All sessions are conducted by licensed mental health clinicians.

Legal and financial consultations

- Available for estate planning, deeds, wills and trusts.
- Includes one 60-minute in-office or telephonic consultation with a local attorney and 25% discount for continued services.
- Includes telephonic financial consultation and an optional 30-day financial coaching benefit with a 90-day action plan.







Identity Theft Prevention and Support

Our program offers powerful monitoring and security tools, plus full-service remediation and reimbursement in the event an employee's identity is stolen.

If you think your identity has been compromised, contact InfoArmor at 855-246-7347.

Identity Theft Remediation Services:

- 24/7/365 hotline service to report theft
- Personalized ID Recovery Kit
- Assigned Paralegal ID Theft experts
- Systematic Fraud Alerts
- Ongoing Identity Monitoring





Dark web monitoring

Dark web monitoring looks out for a participant's Social Security number.

Bots and human intelligence will monitor closed hacker forums for compromised credentials and other personal information.



\$25k loss reimbursement

Should fraud occur, employees will receive remediation and up to \$25K in identity fraud expense reimbursement for out ofpocket costs.

*Insurance covering expense and stolen funds reimbursement is underwritten by Assurant.



Encrypted Vault

This security feature allows employees to easily access and replace wallet contents.

The encrypted vault stores:

- User IDs & passwords
- ATM/credit cards
- Driver's licenses
- Health insurance cards





Travel Assistance

24 Hour, worldwide travel assistance for employees and dependents traveling more than 100 miles from home.

Services are available whether traveling for business or leisure.

If you need assistance, contact On Call International at: USA – 800-456-3893 Worldwide – 603-328-1966 Your 24-hour travel emergency companion with round-the-clock travel assistance services.





Medical Assistance

- Emergency Evacuation
- Medically Necessary Repatriation
- Visit by Family Member or Friend
- Medical Referrals for Local Physicians or Dentists
- Medical Case Monitoring
- Prescription Assistance
- Convalescence Arrangements



Safety and Security

- Urgent Message Relay
- Emergency Travel Arrangements
- Return of a Traveling Companion
- Return of Vehicle
- Recovery of stolen items
- Recovery of lost items
- Legal Assistance
- Bail Bond



Travel Support

- Interpretation services
- Translation services
- Passport/Visa requirements
- Currency Exchange Rates
- Weather Information
- Inoculation requirements
- Health Hazard Advisory
- Consulate/Embassy Referral



Aflac Group for Alpha & Omega Semiconductor 2025 Plan Year









Hospital Indemnity Insurance (New)



Group Supplemental

Coverage Level	HSA compatible		
Plan Option	Mid Level w/wellness and mammography		
Benefits Modules	 Hospital Admission - \$1,000 Hospital Confinement \$150/day up to 31 days ICU – additional \$150/day up to 10 days ICU Step Down Unit - \$75/day up to 10 days 		
Plan Features	 Guaranteed issue No pre-existing condition exclusion, including maternity No waiting period Portable 		
Wellness Benefit	 \$50 Health Screening Benefit once per calendar year/insured \$100 Mammography Benefit, once per calendar year – based on a 		



How it works

The insured has a high fever and goes to the emergency room.





The Aflac Group Hospital Indemnity plan pays

\$1,300

Amount payable was generated based on benefit amounts for: Hospital Admission (\$1,000), and Hospital Confinement (\$150 per day).





Accident Benefit Details



Why Accident Insurance?

- Provides a lump-sum cash benefit for injuries you or an insured family member sustain as a result of an accident
- Health insurance pays the doctors and hospitals, Aflac pays you.
- No pre-existing conditions limitations
- Guaranteed-issue no medical questions
- Help supplement your daily living expenses and unpaid time off work

Initial Care & Emergency

Emergency room, urgent care center, initial physician's office visit, ambulance service

- Most treatment/service required within 72 ours of accident, once per accident per insured person.

Specified Injuries

Fractures, dislocations, lacerations, burns and dental

Hospital, Surgical & Diagnostic

– Admission, daily confinement, ICU confinement, rehab facility confinement, surgical and diagnostic



Accident Benefit Details



Coverage Level	24 Hour		
Plan Option	Custom Plan		
	Initial Accident Treatment	 Fractures & Dislocations – up to \$3,000 Diagnostic Testing - \$200 Ambulance- \$400 ground, \$1,200 air Emergency Dental Work- up to \$200 Lacerations – up to \$400 ER/Urgent Care - \$175 	
Benefit Highlights	Hospitalization	 Hospital Admission - \$1,500 Hospital Confinement - \$200/day ICU – additional \$400/day 	
	After Care	 Appliances \$100 Follow-up Care – up to \$300 Physical Therapy – up to \$500 Chiropractic/ Alternative Therapy - up to \$60 	
	Life Changing Events	 Dismemberment – up to \$20,000 Paralysis – Up to \$10,000 Residence/Vehicle Modification – up to \$1,500 	
Accidental Death Rider	 Accidental Death Benefit: 100k employee, 50k spouse and 25k child Accidental Common-Carrier Death Benefit: 100k employee, 50k spouse, 10k child 		
Wellness Benefit	\$50 per yearOnce per calendar year per insured		











Benefit Amounts	Up to \$30,000 Guaranteed Issue for employee and spouse Children covered at 50% at no additional cost				
Plan Option	With Cancer and with Health Screening				
Benefits	Lump sum benefit for:	 Internal/Invasive Cancer Heart Attack Stroke End-Stage Renal Failure Bone Marrow Transplant Sudden Cardiac Arrest 	 Coronary Artery Bypass Surgery (pays at 25%) Non Invasive Cancer (pays at 25%) Major Organ Transplant* Coma Severe Burns Paralysis** Loss of Sight, speech or hearing** 		
	Skin CancerAdditional D		nefit (no lifetime max, separated by 6 months)		
Additional Benefits	 Progressive Diseases Rider (ALS and Sustained MS) – 100% Optional Benefits Rider (Limited Benefit Benign Brain Tumor-100%, Advanced Alzheimer's Disease 25%, Advance Parkinson's Disease - 25%) Childhood Conditions Rider – 7 listed conditions – 50% Autism Spectrum Disorder - \$3,000 				
Plan Features	 No pre-existing conditions limitation (see cancer limitation) No waiting period Portable 				
Wellness Benefit	 \$50 Health Screening Benefit for both employee & spouse per calendar year \$200 Mammography Benefit, once per calendar year based on a schedule of age 				

Aflac Group Claims & Customer Service

To File a Claim

Log into <u>www.myaflac.com</u> OR

Download the MyAflac app

Customer Service

Aflac Group Customer Service 800-433-3036

www.aflacgroupinsurance.com



Flexible Spending Accounts



Flexible Spending Account (FSA) allows you to set aside pre-tax money out of your paychecks to pay for qualified medical, dental and vision expenses

Health Care Expenses

Health Care Reimbursement Limit = \$3,300

Eligible Expenses

Co-pays, co-insurance, deductibles

Prescriptions & Over-the-Counter

Dental (example – orthodontics)

Vision (example – Lasik corrective surgery)

Non-Eligible Expenses

Cosmetic surgery and teeth whitening

Club memberships

Hot tubs

Sonicare-type toothbrushes



Health Care FSA - you may set aside up to \$3,300 annually to use on eligible expenses, including physician fees, deductibles, copayments, dental and vision expenses. The Health Care FSA plan has a \$660 Carryover Provision for unclaimed balances for the 2024 plan year. This means that up to \$640 of unclaimed expenses can be carried over to the following 2025 FSA plan year. Any other unclaimed funds will be forfeited and do not roll over into the following 2024 plan year. Budget wisely.

Dependent Care FSA - you may set aside up to \$5,000 per family annually to use on eligible dependent care expenses. If married and filing separately, you may set aside up to \$2,500 annually. There is no carryover provision for Dependent Care FSA. Any unclaimed funds will be forfeited and do not roll over into the following 2024 plan year.

Limited-Purpose Health Care FSA - If you participate in the Kaiser HSA, you can also participate in the FSA, but you are limited to dental and vision expenses only.



FSA - Reimbursement



Company Code: AOS

Submit your claim to Navia Benefit Solutions using one of the following methods:

- Fax (425) 451-7002 or toll free (866) 535-9227
- Email <u>claims@naviabenefits.com</u>
- Mail Navia Benefit Services, PO Box 53250, Bellevue, WA 98015
- Cellular Phone (Android & iPhone Apps are available)

NOTE: Do not send originals. Keep copies of all documents submitted and fax or e-mail confirmations.

Reimbursements will be issued according to the reimbursement schedule.

Direct deposits will be initiated, and reimbursement checks sent on the scheduled reimbursement date.





COMMUTER BENEFITS



Company Code = AOS

Employees can set aside pre-tax dollars for work related transit and parking expenses.

Maximum monthly pre-tax payroll deductions:

1) Transit: \$325

2) Parking: \$325

Ability to schedule reoccurring monthly deductions.

NOTE: You must enter your election into the Navia Benefits site by the <u>20th of the</u> month, prior to needing the funds











BENEFITS WEBSITE

Filice customized benefits website:

- Plan Overviews
- Physician Directories
- Group Numbers & Carrier Contact Information
- HR Forms
- Filice Account Manager Contact Information

https://mybenefits.cc/aosmd/



REMINDERS



Action Required

Make your Open Enrollment elections in ADP between: October 30th......

It's *mandatory* for all employees Opting for United Healthcare to make the elections this year through the ADP system

Flexible Spending Account (FSA)

If you elected last year and want to continue in 2025, you MUST elect the benefit, it will not automatically rollover.

Health Savings Account (HSA)

To sign up for a personal contribution towards your 2024 HSA, notify Human Resources (Kaiser HSA Participants Only)

Reminder regarding Qualifying EventsYou will need a Qualifying Event, if you want to make a change to your benefits during the Plan Year (01-01-25) through 12-31-25).

Examples include:

Marriage / Divorce Newborn / Adoption Loss of other coverage



AOS Confidential



Thank you for attending the Benefits Open Enrollment Meeting

Any Questions?

For additional questions you can also contact:

Rob Kidwell - rkidwell@acrisure.com

Patti Harvey - pharvey@acrisure.com



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