

employee benefits guide

2024



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Welcome to Your Benefits!



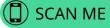
The mission of EAH Housing is to expand the range of opportunities for all by developing, managing and promoting quality affordable housing and diverse communities.

Thank you for being a part of EAH Housing. It is only through the hard work and dedication of our employees that we are able to make a difference in so many communities throughout California and Hawai'i. In recognition of your efforts, EAH provides employees with a competitive and comprehensive benefits package designed to meet the needs of you and your family. It's our goal to ensure that you have the resources to develop and succeed in both your career and your personal life.

This guide provides an overview of EAH's benefits. We encourage you to review the information in this guide before making your benefit elections.

This guide only provides highlights of the benefits offered at EAH. If there are inconsistencies between this document and the legal plan documents, the legal plan documents will govern. All legal plan documents and notices, such as the Summary of Benefits and Coverage (SBC), Summary Plan Description (SPD), HIPAA Privacy Notice and carrier-issued policy documents are available electronically on the EAH
Employee Benefits Website or by scanning the QR code to the right. You may request a printed copy of the Plan Documents by contacting Human Resources. A copy will be provided to you free of charge.







BENEFITS ELIGIBILITY & HOW TO ENROLL



Benefits Eligibility Requirements

you work 20
hours or more per
week, you are eligible
to enroll in EAH's
benefits

EAH employees who work 20 hours or more each week are eligible for benefits effective on the first of the month following 30 days of employment. The benefit elections that you make when you are hired or during annual open enrollment are effective for the entire plan year unless you experience a Qualifying Event (marriage, birth, adoption, or loss of coverage).

EAH holds an annual Open Enrollment. During that time, you can make changes to your benefit plan elections such as adding or deleting your spouse or domestic partner, your dependents and/or changing health plans.

Making Changes to Your Benefits

If you experience a Qualifying Event after open enrollment, you must notify Human Resources within <u>30</u> <u>days of the date of the event</u>; otherwise, you will be required to wait until the next Open Enrollment to make any changes to your benefit plan elections.

For additional information regarding making changes to your benefits, contact Human Resources.

Eligible Dependents

You may cover your dependents under many of the benefit plans as long as they are one of the following:

- 1. Your spouse or domestic partner
- 2. Your child(ren) up to age 26 regardless of student or marital status
- 3. A dependent child, regardless of age, who was covered under the plan prior to reaching age 26 who is incapable of self-support. See policy documents for full information.



How Do I Enroll in Benefits?

New hires will receive instructions from Human Resources regarding the enrollment process through the online benefits enrollment system, UKG. Existing employees will use also UKG to request changes due to a midyear qualifying event and during the Open Enrollment period.

Within UKG, you can enroll yourself and eligible dependents in the plans that fit you and your family best. We have resources to help every step of the way! For additional assistance/questions please contact your Human Resources team. A contact list can be found on page 26.

Tip: Look for the symbol throughout this guide. You will find highlights and key takeaways for you to know / think about that are important for you to fully understand your EAH benefits.





EAH WELLNESS PROGRAM

Vitality

EAH has partnered with Vitality, providing members with free personalized tools for tracking activities, staying inspired, and earning rewards. Our voluntary wellness program is an incentive based wellness program that empowers people with the tools necessary to reach their optimal health.

We all know that our personal health is impacted by the choices we make. We may not realize that our choices also impact the cost of health care: not only personal costs, but the costs of all those covered under the plan. At EAH, we encourage healthy behaviors and reward healthy measures in order to spread the cost of health care coverage more fairly.

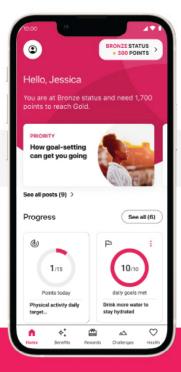


Powering up with Vitality

Vitality helps you be the healthiest you can be for yourself and those you love. Whatever your goals are, Vitality provides a range of tools and resources to navigate your way to a healthier you. Including:

- · Access your personalized journey based on your current health status and preferences
- · Link a health tracker to sync your activity
- · Create and track goals on a variety of health topics
- · Access health content and educational tools relevant to your focus areas
- · Stay motivated and get rewarded by earning points and achieving a status

Get started on January 1 by registering on PowerofVitality.com or on the Power of Vitality app. Contact wellness@powerofvitality.com or 877-224-7117 for assistance.



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Contact wellness@powerofvitality.com or 877-224-7117.



If you need help getting started contact:

Angie Alvarado (415) 295-8877 angela.alvarado@eahhousing.org



Be a Goal-Getter!



STEP 1: REGISTER

Visit the <u>Power of Vitality</u> website and/or download the Power of Vitality mobile app (<u>Apple App Store</u>, <u>Android Google Play</u>). Select "register now". Follow the prompts on the screen which will navigate you through username, password, security questions, etc. Next, earn your first 75 points by answering a two-question onboarding survey that will start customizing the program to you. If you need assistance, contact <u>wellness@powerofvitality.com</u> or 877.224.7117 (8am-5pm CST).

STEP 2: SYNC A DEVICE OR APP



Connect your compatible fitness device and apps (Apple Health, Samsung Health, Garmin, Fitbit, Polar, MapMyFitness, Google Fit) and start earning daily points for steps, workouts, and more.

How to Connect: on the Power of Vitality Website and/or on your mobile app, click on the profile icon (settings), select Apps and Devices, select the device or app you would like to connect, then follow the prompts on the screen.

Share Data: Allow Vitality to read your activity data to maximize your point earning opportunities.

Workouts: Light (5pts): 5,000 steps, 100 calorie burn, 15 min at 60% at Max HR

Standard (10 pts): 10,000 steps, 200 calorie burn, 30 min at 60% Max HR Advanced (15 pts): 15,000 steps, 300 calorie burn, 45 min at 60% Max HR



STEP 3: COMPLETE YOUR HEALTH ASSESSMENT - 500 POINTS

This is a confidential questionnaire focused on exploring your activity levels, daily nutrition, mental wellbeing, biometric measures, and health concerns. You'll be prompted to complete your health assessment after you've registered for Vitality. Your report will give you a Vitality Age (how old you are living) and overall view of your health and lifestyle habits, along with delivering you a more customized experience. There are micro-assessments (typically less than 5 questions) for 75 points each that will personalize the program even more.



Step 4: Set a Goal – Earn Up to 15 Points a Day

Setting goals can help you stay on track to achieve your milestones, whether you're planning your financial future, training for an event, or cultivating a healthy work-life balance. Set your first goal by clicking the Add a Goal icon on your home screen, browse the categories, and select a goal that resonates with you. Each daily goal check-in is awarded 5 points, and you may check into 3 separate goals per day.





Scan to download or open the Power of Vitality mobile app



MEDICAL PLAN OPTIONS



HMSA and Kaiser

EAH employees can enroll in any of our Kaiser or HMSA options. We recommend that you review the plan options and carriers carefully to determine which program is best suited to the needs of you and your family.

HMSA HPH (HMO): The HMSA Health Plan Hawai'i (HPH) requires that members select a Primary Care Physician (PCP). Your PCP works with you to coordinate your health care needs.

HMSA PPP (PPO): The HMSA Preferred Provider Plan (PPP) give members the flexibility to choose from both in- and out-of-network providers. However, medical benefits are paid at a higher level when services are provided through doctors in the HMSA PPO network.

Kaiser (HMO): The Kaiser plans require that members select a Primary Care Physician (PCP). Your PCP works with you to coordinate your health care needs.

Medical Services	HMSA		Kaiser
	PPP (PPO)***	HPH (HMO) Network Only	Network Only
Individual Calendar Year Deductible	None	None	None
Family Calendar Year Deductible	None	None	None
Individual Out of Pocket Max.	\$2,500	\$2,500	\$2,500
Family Out of Pocket Max.	\$7,500	\$7,500	\$7,500
Office & Specialist Visits	\$12	\$20	\$15
Preventive Care	No charge	No charge	No charge
Diagnostic Lab, X-Ray	20%	\$10	\$15
Complex Radiology (CT, MRI, PET) *Requires pre-authorization	20%	20%	20%
Inpatient Hospital	10%	10%	10%
Outpatient Surgery	10% cutting 20% non-cutting	10% cutting 10% non-cutting	10%

^{***}The PPP (PPO) plan provides out of network benefits. To review benefits and costs for out of network providers, refer to the benefits summary and plan documents on <u>EAH's benefit website</u>. We recommend staying in the network to keep your out of pocket costs lower.

Medical Services	HMSA		Kaiser	
Tyledical Sci vices	PPP (PPO)***	HPH (HMO) Network Only	Network Only	
Urgent Care	\$12	\$20	\$15	
Emergency	20%	\$100	\$100	
Prescription (Rx) Drug	g Coverage: 30-day Supply v	vhen filled at an In-Network F	Pharmacy	
RX Individual Out of Pocket Max.	\$3,600	\$3,600	N/A	
RX Family Out of Pocket Max.	\$4,200	\$4,200	N/A	
Tier 1 (Generic)	\$7	\$7	\$10	
Tier 2 (Preferred Brand Name)	\$30	\$30	\$45	
Tier 3 (Non-Preferred Brand Name)	\$75	\$75	\$45	
Tier 4 (Specialty)	\$100	\$100	\$200	
Tier 5 (Specialty)	\$200	\$200	N/A	

Mail-Order Prescription Program

HMSA's Mail-Order service provides a **84-90-day** supply of your Generic (Tiers 1) and Brand Name (Tiers 2 and 3) medications. Sign up for this service through HMSA. Review your Summary of Benefits & Coverage (SBC) for cost share information.

Kaiser's Mail-Order service provides a **90-day** supply of your Generic and Brand Name medications for 2x your copay. Sign up for this service through your Kaiser online member portal www.kp.org.

Specialty medications are not eligible for this service.





YOUR PREMIUM CONTRIBUTIONS

When you enroll in the benefit plans offered through EAH, your contribution to medical, dental, and vision premium costs will be deducted the first two pay periods of each month. For all other benefits, contributions are taken in equal amounts every pay period. Please review the table below with the costs outlined for each plan offered. You may not make any changes to your benefit elections during the plan year, unless a qualifying event occurs.

For employees working 30 or more hours per week, EAH pays 100% of the employee cost for medical coverage. For employees working 20-29 hours per week, employees must contribute \$10 towards the employee only cost of medical coverage.

All employees enrolled in benefits may elect to add dependents and are responsible for any increase in premium.

Your monthly cost to participate in medical benefits is as follows:

HMSA PPP (PPO)			
Total Premium Employee Cost 30+ Employee Cost 20-2 Hours per Week Hours per Week			
Employee Only	\$868.48	\$0.00	\$10.00
Employee + One Dependent	\$1,736.96	\$868.48	\$878.48
Employee + Family	\$2,605.44	\$1,736.96	\$1,746.96

HMSA HPH (HMO)			
	Total Premium Employee Cost 30+ Employee Cost 20-29 Hours per Week Hours per Week		
Employee Only	\$856.28	\$0.00	\$10.00
Employee + One Dependent	\$1,712.56	\$856.28	\$866.28
Employee + Family	\$2,568.84	\$1,712.56	\$1,722.56

Kaiser HMO			
	Intal Premium		Employee Cost 20-29 Hours per Week
Employee Only	\$694.05	\$0.00	\$10.00
Employee + One Dependent	\$1,388.10	\$694.05	\$704.05
Employee + Family	\$2,082.15	\$1,388.10	\$1,398.10

Dental costs can be found on Page 14.

Vision costs can be found on Page 21.

TELEHEALTH - HMSA ONLINE CARE

Sign up for HMSA's Online Care

From a mobile device:

- 1. Search for HMSA Online Care in the Apple or Android app store.
- 2. Download and open the app. It's free!
- 3. Click Sign Up and enter your information as it appears on your HMSA membership card.
- 4. Enter your email address and create a password.
- 5. Select your health plan, enter your subscriber ID number, and click Continue.



From a computer:

- 1. Go to hmsaonlinecare.com.
- 2. Enter your information as it appears on your HMSA membership card and click Sign Up.

Log on to HMSA's Online Care with the email and password you used when you signed up.

See a doctor without an appointment

Online Care gives you quick answers to your health questions or concerns. Whether you have a sudden ailment or a chronic condition, you can have online, real-time video visits with a doctor or specialist to discuss your symptoms and treatment options.

Online Care doctors can help with:

- Sudden or acute conditions like bronchitis or ear and sinus infections.
- Chronic conditions like allergies, diabetes, or high blood pressure.
- Common conditions like headaches, colds, or the flu.
- Managing multiple medications, side effects, or drug interactions.
- Getting you on track with your health and well-being goals.

Online Care complements in-person visits

Sometimes there's no substitute for seeing a doctor in person. However, for those times when you need to see a doctor, but can't because of transportation or schedule challenges, HMSA's Online Care is there for you. Conversations are confidential and treated with the same protections as your medical records.

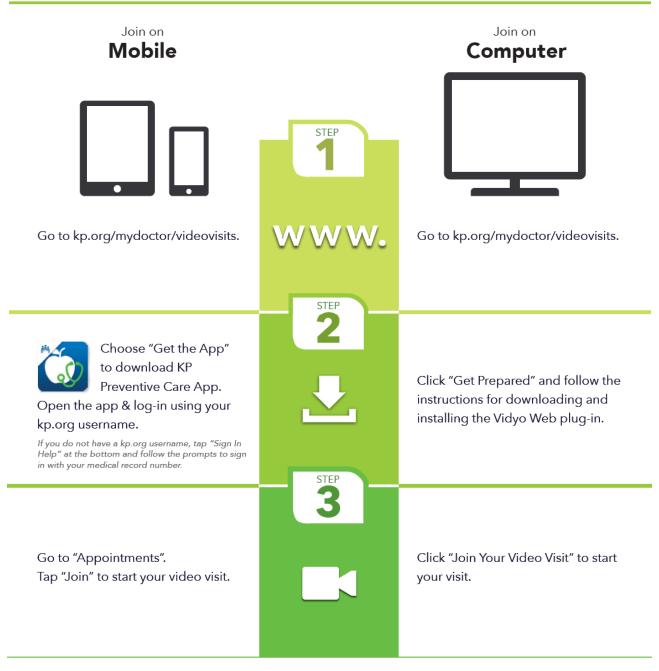
Online Care doctors and specialists include:

- Internists.
- Family physicians.
- Emergency medicine physicians.
- Psychologists.
- Marriage and family therapists.



TELEHEALTH - KAISER

Join Your Video Visit



Need Help? Go to kp.org/mydoctor/videovists and click "Video Visit Support".

EMPLOYEE ASSISTANCE PROGRAM





Confidential Counseling*

In-person, Telephone, Video, Text, Chat Experienced, licensed counselors help with:

- . Stress, anxiety
- . Relationships
- . Major life changes
- . Substance abuse
- . Communication
- . Emotional wellbeing
- . Grief and loss . Job stress

In-the-Moment Support

In distress or just want to talk? Maybe you're worried about kids, anxious about work, or had a fight with a family member. A Concern counselor is here to listen and help you plan a positive next step.

Work-Life Resources

Receive expert guidance for life's expected and unexpected events, helping you find a happier balance at home and less distraction at work.

Help with financial* issues, legal* concerns, adult care* resources, parenting and childcare* referrals.

Guided Mindfulness

Full suite of live and on-demand mindfulness solutions designed for daily use. Discover resources to help you build and sustain healthy habits. Access through your digital dashboard.

Resource Library*

Tools and resources organized by topic with articles, toolkits, webinars, apps, assessments, videos, podcasts, newsletters, and so much more. Click "Services and Resources by Topic" on portal.



EAH Housing

Your all-in-one mental health, employee wellbeing solution at no cost to you or your family

GETTING STARTED IS EASY

Just call **800-344-4222** 24/7 or visit **employees.concernhealth.com*** and log in with your company code **EAH.** Then click on "Get Services" to create your confidential digital dashboard. Check out **this video*** for a brief introduction to Concern.



YOUR BENEFITS

Your Concern benefit is available to employees working 20 or more hours per week, your spouse/domestic partner, and dependent children up to age 26.

- Counseling. Up to 5 visits per person, per issue, per year
- Financial. Free one to two 30minute phone consultations with a financial specialist. 25% discount off regular rates if continue services.
- Legal. Free 30-minute consultations with a qualified attorney. 25% discount off normal hourly rates if you retain their services.

*Open links for more detail



DENTAL PLAN OPTIONS

HDS

Dental benefits are offered to benefit-eligible employees and their families through Hawai'i Dental Service (HDS). The HDS plan is a PPO plan, meaning members can seek care from any dentist; however, benefits are optimized when obtained through an in-network dentist.



HDS uses the Delta Dental network and has the largest network of in-network dentists in the state. Diagnostic and Preventive services will not be deducted from the member's plan maximum. In addition, there is no waiting period for Major Services.

Dental Plan Features	HDS PPO	
	In-Network	Out-of-Network
Plan Year Deductible:	\$30 per person	
Plan Year Maximum:	\$1,500 per member	
Benefit Payment:	Maximum Allowable Charge*	
Preventive (Class I):	100% (ded. waived)	
Basic (Class II):	70%	
Major (Class III):	50%	
Orthodontia:	Not covered	

Your monthly cost to participate in dental benefits is as follows:

Dental Costs			
Iotal Premium			Employee Cost 20-29 Hours per Week
Employee Only	\$35.43	\$0.00	\$17.72
Employee + One Dependent	\$70.86	\$35.43	\$53.15
Employee + Family	\$106.25	\$70.82	\$88.54

LIFE INSURANCE

Mutual of Omaha

EAH provides all eligible employees Basic Life and Accidental Death & Dismemberment (AD&D) Insurance *at no cost* through Mutual of Omaha. Employees who work 20 hours or more per week are enrolled in these coverages on the first of the month following 30 days of employment. *Be sure to complete beneficiary information at time of enrollment and update your information as appropriate.*

Voluntary Life and AD&D Insurance

You have the opportunity to supplement your Basic Life and AD&D Insurance by purchasing Voluntary insurance coverage through Mutual of Omaha for yourself and your eligible dependents. You must elect Life and AD&D coverage for yourself in order to cover your spouse and/or child(ren). If you leave EAH, you may be eligible to port or convert your voluntary life policy.



If you or your spouse do not enroll in the Voluntary Life plan when you are first eligible, you may enroll at a later date. However, ALL coverage amounts will require proof of good health (Evidence of Insurability/EOI) and are subject to approval by Mutual of Omaha. EAH will inform you once Mutual of Omaha has completed their review process.



Basic Life Insurance

In the event of your death, this plan pays your beneficiary a benefit equal to 1 times your annual base salary to a maximum of \$400,000.

Please note, per IRS regulations, premiums paid by the company for amounts of life insurance in excess of \$50,000 are subject to imputed income taxation.

Basic AD&D Insurance

In the event of your accidental death, this plan pays your beneficiary an additional benefit of equal to 1 times your annual base salary to a maximum of \$400,000.

If you are seriously injured as the result of an accident (for example: lose your eyesight, paralysis), this plan will pay a partial benefit to you.

Voluntary Life/AD&D Coverage Options Find rate information here.

Employee

You may purchase increments of \$10,000, to a maximum amount equal to five times your annual salary or \$500,000. Guarantee Issue** = \$150,000.

Spouse or Domestic Partner

You may purchase increments of \$5,000 not to exceed \$100,000 or 100% of your employee elected coverage. Benefits will be paid to the employee. Guarantee Issue** = \$35,000.

Child(ren)

You may purchase life insurance for your child(ren) from ages 14 days to 21 years (or age 25 if full-time student) in \$1,000 increments to a maximum of \$10,000. Each eligible dependent child must have the same amount of insurance.

Annual Increase: Employees who are enrolled in the Voluntary Life/AD&D at the time of the annual enrollment period are eligible to elect an annual Increase of \$10,000 up to the Guarantee Issue and will not be required to submit an EOI. This is an employee only benefit.

**Guarantee Issue means the highest amount of coverage that can be issued to you without Evidence of Insurability (EOI); this is available to New Hires only. If you do not enroll when you are newly eligible, you will need to complete an EOI for any amount of coverage for which you apply.



LONG-TERM DISABILITY INSURANCE

Mutual of Omaha

If you become ill or injured and are unable to work, EAH provides income protection benefits at no cost to you through Mutual of Omaha. These benefits have been designed to protect your income in a situation where you become unable to work due to a disability. Please note that specific restrictions apply to these benefits. In addition, any benefit, if received, is considered income and subject to all applicable taxes.



LTD coverage provides financial assistance if you are not able to return to work after 90 days of disability due to an illness or injury. Regular employees working 20 or more hours per week are automatically enrolled in this coverage on the first of the month following 30 days of continuous employment.



- Any LTD benefits are offset by income from other sources, including Social Security or Workers' Compensation, so that the maximum monthly benefit you receive is not greater than 60% of your monthly earnings.
- LTD benefits can continue until you are able to return to work or you reach the normal retirement age for Social Security benefits as long as you continue to meet the definition of Disabled as defined in the Certificate of Coverage.
- Because LTD is payable through Social Security Normal Retirement Age, active employees who
 become disabled at their retirement age will be guaranteed a set duration of benefits. Please see
 the Certificate of Coverage for complete schedule.

Temporary Disability Insurance (TDI)

To be eligible for TDI benefits, you must have at least 14 weeks of Hawai'i employment during each of which you were paid for 20 hours or more, and earned not less than \$400 in the 52 weeks preceding the first day of disability. The 14 weeks need not be consecutive nor with only one employer. To review the complete eligibility criteria, see your HR department.

- The plan provides 58% of your average weekly wages rounded to the next higher dollar, but not more than the maximum weekly benefit amount annually set by the Disability Compensation Division. Example: The maximum weekly benefit for 2023 is \$765.
- Benefits from the eighth day of disability; in other words, there is a seven-consecutive-day waiting period.
- A maximum of 26 weeks of benefit payments during a benefit year.

If you are collecting disability benefits from both the state and the group LTD plan through EAH, benefit payments will be coordinated so that total payment does not exceed more than 60% of your monthly pre-disability earnings.

FLEXIBLE SPENDING ACCOUNTS (FSA)

WEX Benefits



EAH offers two flexible spending accounts (FSAs) through WEX Benefits: Health Care FSA and Dependent Care FSA. Both of these plans allow you to use pre-tax dollars to pay for IRS qualified health and dependent care expenses. Each year, you decide how much to contribute to your FSA on a pre-tax basis. The annual amount you elect is deducted from your paycheck in equal amounts each pay period.

Health Care FSA

The Health Care FSA allows you to set aside up to \$3,200 annually to pay for certain health care expenses that are not covered or only partially covered by your health care plans (medical, dental, vision and prescription drug).

WEX Debit Card

For the Health FSA, you will receive a debit card to use at participating vendors. Rather than filing a claim and waiting for reimbursement for your out of pocket eligible expenses, you can use your debit card to pay your provider directly for qualified medical care expenses. This card will only work for eligible FSA expenses.

Upon enrollment in the plan you will receive one card in your name. The cards are valid for 3 year periods; if you already have a debit card it will be reloaded with your new election. If you would like additional cards in the name of a spouse or eligible dependent you may request them by contacting WEX. There is a \$5 reissue fee for all additional card requests.



List of Eligible Expenses

- Copays
- Coinsurance costs not covered by your health plan
- Prescription Medications
- Bandaids
- Blood pressure monitor
- Braces
- Cold packs
- Cotton balls
- Reading glasses
- Fertility treatments
- Eye drops
- First aid kit
- Humidifier
- Laser eye surgery
- Lactation consultant
- Massage therapy
- Mouth guard
- Nasal breathing strips
- Over-the-counter medications— no prescription is

required!

- Pregnancy tests
- Prenatal vitamins
- Smoking/Tobacco cessation programs
- Sunscreen
- Suncreen lip balm
- Thermometer



The above list is not exhaustive. To view a complete list, visit:

www.wex.com.

You can also visit <u>www.fsastore.com</u> to purchase eligible items. They have the largest inventory of FSA eligible products and services online.



FLEXIBLE SPENDING ACCOUNTS (FSA) continued

Dependent Care FSA

The Dependent Care FSA is designed for people who need dependent care so that they can work. You are eligible to participate if you are single or married. However, if you are married, your spouse must either work or go to school full-time, or be unable to care for your dependents due to a disability, in order for you to be eligible for the Dependent Care FSA.

Dependent care can be for your children under age 13, spouse or parents. Dependents must live with you and be claimed as a dependent on your federal income tax return. The most you can contribute per year to the Dependent Care FSA is \$5,000 per IRS household. If you and your spouse file separately, you may each contribute \$2,500 to the Dependent Care FSA.

You will need to submit proper documentation to support your claim, per IRS regulations.

Itemized bills or invoices from child care providers are usually sufficient forms of documentation. You do not need to show proof of payment. If your child care provider is an individual or does not give you an itemized bill/invoice showing the above requirements, please use the Day Care Service Form to serve as your documentation. This can be found on WEX's website.



List of Eligible Expenses

- Au Pair
- Babysitter
- Before and after school care
- Childcare by a relative
- Day camps
- Montessori school (for preschool)
- Nanny
- Overnight care
- Preschool/Nursery School



Things You Should Know

- 1. You have a "grace period" which extends 2 1/2 months after the end of the plan year, during which time you can continue to incur claims and use up all amounts remaining in your Health Care Flexible Spending Arrangement or Day Care Flexible Spending Arrangement. After the grace period, any remaining funds are forfeited. This is known as the "Use it of Lose it" rule.
- 2. You cannot change or stop your contributions to the FSAs during the year unless you have a qualifying change in status
- 3. Money cannot be transferred between accounts. For example, you cannot use your Dependent Care FSA for health care expenses or vice versa.

FLEXIBLE SPENDING ACCOUNTS (FSA) continued FSA Comparison Chart

Plan Features	Healthcare FSA	Dependent Care FSA
Maximum Election	\$3,200 per year	\$5,000 per household
HRA Compatible?	Yes. Enrollment in the HRA medical plan, does <u>not</u> disqualify you for the healthcare FSA.	Yes
Pre-funded by Employer	Yes. Full election is available for your use on the first day of the Plan Year.	No. You may only claim what you have contributed at the time the claim is filed.
Grace Period?	Yes. You have 2.5 months to spend down your remaining balance on 12/31/2022.	Yes. You have 2.5 months to spend down your remaining balance on 12/31/2022.
How to Access Your Funds	Debit Card	Debit Card
Eligible Expenses	Medical, Prescription, Dental & Vision	Childcare for children under age 13 while parent is at work, looking for work or going to school.
OTC Medications	Eligible without a prescription.	Not eligible.
Household Items	 First Aid Kits / Supplies Sunscreen Hearing Aid Batteries Heating Pads & Wraps Thermometers Vaporizers & Inhalers Pregnancy & Fertility Test 	
Recordkeeping / Substantiation	Since your reimbursement plan is a tax-based benefit, IRS regulations require you to verify that your expenses are eligible under your plan. WEX is able to auto-verify many of your debit card transactions but there are some expenses that do require the submission of documentation to determine if the expense was eligible.	

To best manage your FSA, file claims online and sign up for direct deposit, register on WEX's member portal. Start here.

Review a list of FSA-eligible expenses here.

Shop online through the FSA Store.



FLEXIBLE SPENDING ACCOUNTS (FSA) continued

You can save approximately 25% of each dollar spent on expenses when you participate in a FSA. Contributions to your FSA come out of your paycheck before any taxes are taken out. This means that you don't pay federal income tax, Social Security taxes, and state and local income taxes on the portion of your paycheck you contribute to your FSA.

It is best to contribute only the amount of money you expect to pay for out-of-pocket eligible expenses for the FSA plan period. If you enroll after the beginning of the plan year, budget for the remaining number of months.

If you do not use the money you contributed, it will not be refunded to you or carried forward into a future plan year. This "use-it-or-lose-it rule" applies to FSA contributions so budget wisely.

	Without FSAs	With FSAs
Gross income	\$40,000	\$40,000
FSA contributions	0	-\$2,850
Gross income	40,000	37,150
Estimated taxes		
Federal	-10,000	-9,325
FICA	-3,000	-2,798
After tax earnings	24,150	25,027
Eligible out of pocket		
Medical and dependent care expenses	-2,850	0
Remaining spendable income	\$21,300	\$25,127
Spendable income increase		\$3,827

^{*}Assumes standard deductions filing as single

This example shows how you can save money with a flexible spending account. The above illustrates your tax savings and spendable income difference when you set aside \$2,750 in your healthcare FSA, filing as Single.



The example above is for illustrative purposes only. Every situation varies and we recommend that you consult a tax advisor for all tax advice.

VOLUNTARY BENEFITS

MetLife Vision through VSP

EAH Housing employees and dependents may elect to enroll in the group vision plan through MetLife The program allows members to access both in- and out-of-network providers; however, greater savings are obtained if care is received through an in-network provider. Choose from a large network of ophthalmologists, optometrists and opticians, from private practices to retailers like Costco® Optical, Walmart, Sam's Club and Visionworks.

If you decide not to see a MetLife provider, you will receive a lesser benefit and typically pay more out of pocket. You are required to pay the provider in full at the time of your appointment and submit a claim to MetLife for partial reimbursement.

Mall !fa	MetLife In-Network	
MetLife	In-Network	Out-of-Network (reimbursement)
Copays Exam Prescription Glasses	\$10 \$25	
Frequency Examination Lenses Frames Contact (in lieu of frames)	Every 12 months Every 12 months Every 24 months Every 12 months	
Exam	Up to \$60	Up to \$105
Lenses Single Lined Bifocal Lined Trifocal Polycarbonate	Up to \$25 Up to \$25 Up to \$25 Covered in full for children to age 19	Up to \$30 Up to \$50 Up to \$65 Not Covered
Frames	Covered in full up to \$180 + 20% off	Up to \$70

Voluntary Vision - Paid 100% by Employees		
Total Monthly Premium		
Employee Only \$7.47		
Employee + One Dependent \$11.61		
Employee + Family \$18.42		



VOLUNTARY BENEFITS continued

Mutual of Omaha

Accident and Critical Illness benefits are a cost-effective solution to help offset out-of-pocket medical expenses by paying you the plan benefits directly instead of your healthcare provider. These benefits are employee-paid and are a great supplement to your medical plan. These plans are fully portable which means that you can keep your coverage at the same rate if you change jobs or retire. Note that the below benefit tables are not an exhaustive list of the available benefits through these plans.

Accident	Critical Illness	Short Term Disability
Plan pays lump-sum benefit based on the type of injury you sustain or the type of treatment you need. Examples of covered benefits include: Dislocation or fracture Accidental death Dismemberment Ambulance	Plan pays lump-sum benefit based on the diagnosis of a covered illness. Covered conditions include: Heart attack Major organ transplant Invasive cancer Stroke End-stage kidney failure	25% of Weekly Earnings up to a maximum weekly benefit \$1,500 7-day Elimination Period 12-week Benefit Duration

We encourage you to to seek additional information and to confirm your costs. This information can be found on the EAH benefits website:

URL: https://mybenefits.cc/eah/

ADDITIONAL BENEFITS

As an employee of EAH, you have access to a large number of additional benefits. Please contact Human Resources for more information about these supplemental benefits.

MetLaw

EAH is pleased to announce a legal voluntary benefit. We want employees to get the help they need how they want it. With MetLaw, employees have a cost effective, multi-channel access to legal help they need to easily handle costly legal matters in their life helping them to feel more financially and emotionally secure. The Legal Plan covers the employee, their spouse and dependents.

Direct Deposit

Save yourself a trip to the bank every other week by enrolling in direct deposit. You may set up direct deposit in UKG.

Visa rapid! PayCard

Save time and money every payday with the rapid! PayCard. You can have your pay automatically deposited to the paycard, giving you instant access to your money the morning of every payday.

Pet Insurance

Like every member of your family, you want to protect your pet in case an unforeseeable injury or illness arises. MetLife Pet Insurance is offered as a supplemental part of your benefits package. Choose from a variety of plans to suit your pets' needs and your budget. Contact MetLife directly for more information. Please see the contact information at the end of this booklet for more information.

Commuter Benefits

Commuter and parking benefits are available to employees who wish to take advantage of paying for related expenses with pre-tax dollars. The plan is administered through Discovery Benefits and allows you to set aside up to \$315 a month for Parking and/or Mass Transit. You will receive a debit card to use for qualified expenses.

Travel Assistance

Mutual of Omaha provides EAH employees with 24-hour, 365-days-a-year travel assistance whenever you or your family members are travelling domestically or internationally 100+ miles from home. Services include but are not limited to:

- Emergency medical assistance such as transportation, evacuation, referrals to doctors / dentists / facilities, and prescription assistance.
- Emergency cash
- Translation and interpretation services
- Locating legal services
- Assistance with lost or stolen baggage
- Pre-trip assistance (obtaining visas or required documentation, consulate / embassy locations, currency exchange rates and more!)

Access the Mutual of Omaha Secure Travel:

- ID number 9900MOO2:
- 800-856-9947 (U.S.)
- 312-935-3658 (International)



RETIREMENT SAVINGS & PLANNING

403(b) Plan

The EAH 403(b) plan provides you with a convenient, tax-advantaged way to save for your future and build on your long-term retirement goals. EAH is pleased to provide you with a range of mutual fund investment options through our retirement program, including stock funds, bond funds, "lifecycle" funds, and a money market fund.

Employees are automatically enrolled in the retirement plan on the first day of the month following 30-days of employment. EAH matches 100% of your contributions up to 4% of pay, so employees are automatically enrolled at the 4% contribution level. You may opt out of the plan at any time; however, you will need to wait for the start of a new quarter if you want to start contributing again.



- Your contributions are deducted from your eligible compensation before federal (and most state)
 income taxes are withheld from your paycheck. As a result, your taxable income is reduced, so you
 pay less in taxes.
- You may increase or decrease your 403(b) contribution percentages on a quarterly basis.
- You can invest your contributions in select investment funds offered by the plan. Each investment
 option has a varying level of risk. Investment fund changes are allowed at any time for most of the
 available funds.
- Rollovers from other qualified retirement accounts, including Individual Retirement Accounts (IRAs), are permitted.
- IRS Maximum contribution limit is \$23,000. If you are over age 50, you can contribute an additional \$7,500 "catch up" contribution.
- We also offer a Roth 403(b) option.

Upon hire, you will be provided with instructions on how to setup your Nationwide account. Links are below:

Step 1: Complete your enrollment through the link below: Nationwide.com/enroll

EAH Case #: 899-80045

Step 2: Access your new account: Nationwide.com/myretirement

You can use this site to:

- Check your balance and personal rate of return
- Reallocate your balance
- Get a summary of your retirement plan account balance

RETIREMENT SAVINGS & PLANNING continued

Wellcents Retirement Solution

WellCents, a guidance based, beginning to end retirement solution to help you create confidence in your financial life. Our goal is to help you reach a successful and financially secure retirement by becoming financially well.

WellCents begins with a Personal Financial Wellness Assessment. You can access the assessment through *OneLogin*. The brief survey will ask you general questions regarding your financial history to gauge your overall financial wellness. Upon completion, you receive a Wellness Score and a customized action plan based on your individual needs and goals.

Financial Wellness Workshops

Based on the aggregated responses to the assessment, financial education workshops covering topics including college planning, investment basics, how to manage debt, planning to buy a home, and more are presented. Get professional guidance from your team of financial planners at Sourjohn-Kim Retirement Solutions.

One-On-One Meetings

Available to you on an ongoing basis, one on one meetings are a great way to discuss your financial life with your financial planners at Sourjohn-Kim Retirement Solutions. Do you have goals for your life?

Let's create a plan designed to achieve them.





CONTACT INFORMATION & RESOURCES

Plan	Phone #	Website / Email	Policy#	
Medical: HMSA	Refer to website or ID card	www.hmsa.com	14127	
Medical: Kaiser	808-432-5955 (Oahu) 800-966-5955	www.kp.org	2113	
Dental: HDS	800-232-2533 x248	www.hawaiidentalservice.com	5421	
Vision: MetLife	1-800-438-6388	www.metlife.com	5398198	
Life, AD&D and Disability: Mutual of Omaha	800-655-5142	www.mutualofomaha.com	G000AHQ9	
Travel Assistance: Mutual of Omaha	800-856-9947 (US) 312-935-3658 (Int'l)	www.mutualofomaha.com	9900MOO2	
EAP: Concern EAP		www.concernhelp.com	EAH	
Flexible Spending Accounts (FSA) / Commuter Benefits: WEX	866-451-3399	www.wex.com	36357	
403(b) Retirement Plan: Empower	800-701-8255	www.empowermyretirement.com	522251-01	
Financial Planners: World Investment Advisors	888-845-4015	www.smartmap.worldadvisors.com	522251-01	
MetLife Pet Insurance	800-438-6388	www.metlife.com/getpetquote	EAH	
Voluntary Benefits: Mutual of Omaha	800-775-8805	www.mutualofomaha.com	G000AHQ9	
For assistance with your benefits program, contact your Human Resources Team at EAH:				
Human Resources	415-295-8851	hr@eahhousing.org	N/A	
All other questions, contact your Acrisure Service Team:				
Erika Estrada	925-299-7202	ebestrada@acrisure.com	EAH	

LEGAL PLAN DOCUMENTS AND BENEFIT NOTICES

As a plan participant, you are entitled to a comprehensive description of your rights and obligations under the EAH Employee Insurance Benefits Program. In order to conserve resources and make the required information as accessible as possible, we post this information to our employee benefits website. This site is available to you and your dependents at any time. In order to ensure that you fully understand the benefits available to you and your obligations as a plan participant, it is imperative that you familiarize yourself with the information contained on this site

You are entitled to receive a *paper copy* of any of the below documents free of charge through the EAH's Human Resources department.

- Summary Plan Descriptions (SPD)
- Women's Health and Cancer Right Acts
- Evidence/Certificates of Coverage
- Medicare Part D Creditable Coverage Notice
- Summary of Benefits and Coverage (SBC)
- Summary Plan Description (SPD) Wrap Document
- Notice for Employer-Sponsored Wellness Programs
- Special Enrollment Notice
- HIPAA Notices
- Health Exchange Model Notice
- COBRA Notices
- Children's Health Insurance Program
- Summary Annual Report (SAR)
- Notice of Patient Protections
- Mental Health Parity & Addiction Equity Act (MHPAEA) Disclosure
- Newborns' and Mothers' Health Protection Act Notice
- Uniformed Services Employment and Reemployment Rights Act (USERRA)

URL: https://mybenefits.cc/eah/







www.eahhousing.org