

2024

EMPLOYEE BENEFITS GUIDE

Welcome to Jireh! This guide provides an overview of coverage choices and enrollment information so you can build the best benefits package for you and your family.

# **Employee Benefits Overview / Eligibility Requirements**

Jireh is committed to providing exceptional benefits to our employees. Keeping in mind the unique and diverse needs of our employees, we have put together a benefits program that will help protect the personal and financial well-being of you and your family.

Upon joining Jireh, your benefits will begin on the first of the month following your date of hire. The plan and dependent 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).

Jireh holds an annual Open Enrollment for a January 1st effective date. During that time, you can make changes to your benefit plan elections such as adding or deleting your spouse, dependents and/or changing health plans.

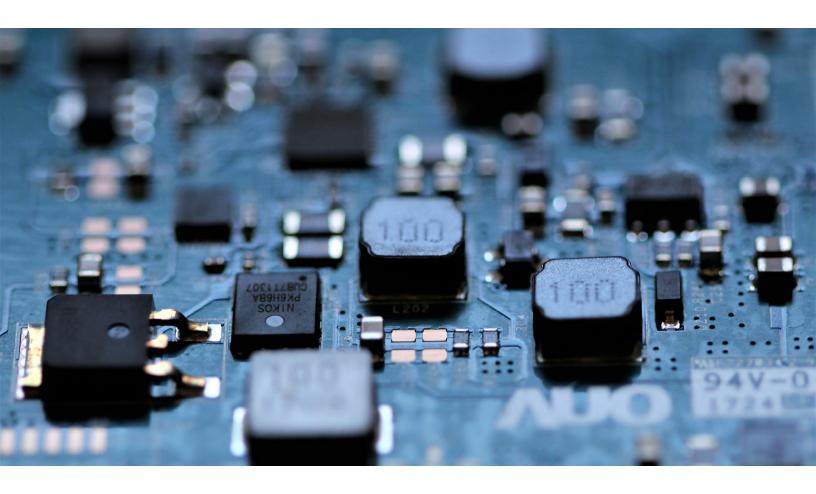
If you experience a qualifying event after Open Enrollment, you must notify Human Resources within 30 days, otherwise you will be required to wait until the next Open Enrollment to make any changes to your benefit plan elections.

# **Eligible Dependents**

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

- Your spouse
- Your child(ren) up to age 26 regardless of student or marital status
- Your disabled child(ren) regardless of age if incapable of self-sustaining employment, and if the disability began before the limiting age

If
you work
30 hours or
more per week,
you are eligible to
enroll in
the benefit
plans.



#### **Medical Insurance**

Jireh is proud to offer medical benefits to all eligible employees through Kaiser Permanente and United HealthCare.

Kaiser Permanente's plan offers a wide range of care and support to help you stay healthy. As a Kaiser member you can receive medical care at any Kaiser facility, simply present your ID card to receive services.

United Healthcare's plans give members the ability to manage their care with a PCP or, if they choose, see any doctor (including specialist) without a referral. Pre-authorizations may be required. Please note that

# **Health Reimbursement Account (HRA)**

Jireh will fund your qualified HRA when enrolled in the UHC plan, up to: **\$1,250 per individual & \$2,250 per family per year.** All Individual HRA Deductible amounts will count toward the Family Deductible, but an individual will not have to pay more than the Individual Deductible amount.

## JIREH EMPLOYEE BENEFITS - 2024

Kaiser Permanente	\$15 Copayment Plan In-Network		
Individual Deductible	\$0		
Family Deductible	\$0		
Individual Out of Pocket Maximum	\$1,500		
Family Out of Pocket Maximum	\$3,000		
Primary Care Office Visit	\$15		
Specialist Office Visit	\$25		
Preventive Care	No Charge		
Acupuncture	\$25 (up to 12 vists max.)		
Diagnostic Lab/X-Ray	\$15		
Complex Radiology (CT, MRI, PET)	\$50		
Inpatient Hospital	\$200 per day		
Outpatient Surgery	\$50		
Urgent Care	\$35		
Emergency Room	\$200		
Rx Tier 1	\$10		
Rx Tier 2	\$20		
Rx Tier 3	\$40		
Group No. Phone No. Web	18529 800-813-2000 www.kp.org		

<sup>\*</sup>after deductible

Ilinita d Ila alkh Cava	HRA 1500 PPO Buy-Up		
United HealthCare	In-Network	Out-of-Network	
Individual Deductible	\$1,500	\$3,000	
Family Deductible	\$3,000	\$6,000	
Individual Out of Pocket Maximum	\$2,500	\$5,000	
Family Out of Pocket Maximum	\$5,000	\$10,000	
Primary Care Office Visit	10%*	30%*	
Specialist Office Visit	10%*	30%*	
Preventive Care	No Charge	Not Covered	
Acupuncture (12 visits per year)	10%*	Not Covered	
Outpatient Chiropractic (24 visits per year)	10%*	Not Covered	
Diagnostic Lab/X-Ray	10%*	30%*	
Complex Radiology (CT, MRI, PET)	10%*	30%*	
Inpatient Hospital	10%*	30%*	
Outpatient Surgery	10%*	30%*	
Urgent Care	10%* 30%*		
Emergency Room	10%*	10%*	
Rx Tier 1	\$10	\$10	
Rx Tier 2	\$30 \$30		
Rx Tier 3	\$70 \$70		
Group No. Phone No. Web	919337 866-314-0335 www.uhc.com		

<sup>\*</sup>after deductible

11-21-111-111-0	HRA 2000 PPO Base			
United HealthCare	In-Network	Out-of-Network		
Individual Deductible	\$2,000	\$6,000		
Family Deductible	\$4,000	\$12,000		
Individual Out of Pocket Maximum	\$5,000	\$15,000		
Family Out of Pocket Maximum	\$10,000	\$30,000		
Primary Care Office Visit	\$30	50%*		
Specialist Office Visit	\$60	50%*		
Preventive Care	No Charge	Not Covered		
Acupuncture (12 visits per year)	\$30	Not Covered		
Outpatient Chiropractic (24 visits per year)	\$30	Not Covered		
Diagnostic Lab/X-Ray at Freestanding Facility	20%*/ 50%* at Hospital Facility	50%*		
Complex Radiology (CT, MRI, PET) at Freestanding Facility	20%*/ 50%* at Hospital Facility	50%*		
Inpatient Hospital	20%*	50%*		
Outpatient Surgery	20%*	50%*		
Urgent Care	\$50	50%*		
Emergency Room	20%*	20%*		
Rx Tier 1	\$10	\$10		
Rx Tier 2	\$30	\$30		
Rx Tier 3	\$70	\$70		
Group No. Phone No. Web	919337 866-314-0335 www.uhc.com			

<sup>\*</sup>after deductible

#### **Dental Insurance**

Dental coverage is offered to you and your family members through United HealthCare's Dental network. The PPO plan offers you the most flexibility when choosing a dentist as you can seek services in and out of network. This Dental PPO uses the National Options PPO 30 Network.

UHC Dental Plan	In-Network	Out-of-Network (90th UCR)
Preventive Care (exams, cleanings, x-rays)	100%	100%
Basic Care (basic fillings, extractions and oral surgery)	80%	80%
Major Care (crowns, inlays and on-lays, bridges and dentures)	50%	50%
Deductible	\$50 individual/\$150 family	\$50 individual/\$150 family
Maximum Benefit	\$2,000 per insured	\$2,000 per insured
Orthodontia	50% up to \$1,500 lifetime	50% up to \$1,500 lifetime
Group No. 919337	877-816-3596	www.uhc.com

#### **Vision Insurance**

Vision coverage is provided for you and your family members through VSP Vision Care. VSP's Choice Network has over 23,000 eye care providers located in rural and metropolitan areas throughout the nation.

VSP Vision Plan	In-Network	Out-of-Network	
Office Visit Exam (every 12 months)	\$20 copay	up to \$45	
Lens Replacement (every 12 months)	\$20 copay		
Single Vision	100%	up to \$30	
Bifocal	100%	up to \$50	
Trifocal	100%	up to \$65	
Frame Replacement (every 24 months)	\$200 allowance + 20% discount	up to \$70	
Contact Lenses (in lieu of glasses, every 12 months)	\$20 up to \$180	up to \$105	

**Group No. 12217482 800-877-7195** *www.vsp.com* 

### **Group Term Life / AD&D Insurance**

Jireh provides all eligible employees with a Group Term Life/AD&D policy for a benefit amount 2 times salary up to \$500,000 through The Standard. You will automatically be enrolled in this benefit at no cost to you.

### **Voluntary Life / AD&D Insurance**

You may choose to purchase Voluntary Life Insurance from The Standard for yourself, your spouse and your child(ren). You must elect coverage for yourself to purchase coverage for your dependents. The rates are based on the age of the employee at plan anniversary.

- Employee Amount is \$50,000, \$100,000, \$150,000 or \$200,000.
- Spouse Amount is \$25,000.
- Child(ren) amount is \$10,000.

# **Voluntary Long-Term Disability**

Jireh offers employees the option to choose Long Term Disability (LTD) coverage through The Standard. The LTD benefit provides you with income if you are not able to return to work after 90 days of disability due to an illness or injury. The Standard will pay up to 60% of your salary to a maximum benefit of \$10,000 per month. LTD benefits are offset by income from other sources such as Social Security and Workers' Compensation.

#### **Critical Illness Insurance**

The Aflac Group Critical Illness Plan provides cash benefits when an insured person is diagnosed with a covered critical illness and these benefits are paid directly to you. The plan provides a lump-sum benefit to help with out-of-pocket medical expenses and the living expenses that can accompany a covered critical illness. Your guarantee issue amount is up to \$30,000.

### **Accident Insurance**

The Aflac Group Accident plan provides cash benefits directly to you that help with out-of-pocket expenses - medical and nonmedical - associated with treatment in the event of a covered accident. This benefit is available for all family members.

## **Health Care Flexible Spending Account (FSA)**

You have the opportunity to pay for out of pocket medical, dental, and vision costs for you and your eligible dependents with pre-tax dollars through the Flexible Spending Account with Navia Benefit Solutions. Employees may contribute an annual maximum of \$3,200 for Healthcare FSA. You can carryover up to \$640 to the following plan year. If you are enrolled in the Kaiser HSA, you may participate in a limited purpose FSA for dental and vision only.

# **Dependent Care Flexible Spending Account (FSA)**

This flexible spending account with Navia Benefit Solutions allows participants to save on dependent care expenses by pre-taxing up to \$5,000 of their families eligible dependent care expenses. Some eligible expenses include: after school programs, extended care, nanny, nursery school and more.

#### **Commuter Benefits**

Jireh offers you the option to set aside tax-free money to pay for transit and parking expenses. It can be used for mass transit, rideshares, qualified paid parking, etc. For 2024, the maximum monthly contribution for Transit and Parking Benefits is \$315.

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

EAP is offered through The Standard to Jirch employees. Counseling assistance and professional resources are available at no cost to employees. These services are there to help you and your family members deal with life's challenges.

- 24/7 toll-free access to EAP professionals.
- Telephone assistance & referrals for personal & professional matters.
- Up to three face-to-face sessions with a counselor
- healthadvocate.com/standard3; Call 888-293-6948 and TTY Services: 711

#### **Travel Assistance**

Toll-free world-wide travel assistance is available through Assist America which includes 24/7 emergency medical transportation and medical assistance when employees and their families are traveling 100 miles or more from home.

- Call 800-872-1414 (U.S., Canada, Puerto Rico, U.S. Virgin Islands and Bermuda)
- Call 1-609-986-1234 (everywhere else) or Text 1-609-334-0807
- Email medservices@assistamerica.com

# **Voluntary Legal Plan**

A cost-effective plan from Metlife that provides access to more than 18,000+ experienced network attorneys. Your cost for this benefit is only \$19.75 per month.

- Zero co-pays or deductibles.
- Unlimited use of network attorneys for covered issues.
- Assistance for a wide range of legal needs, including money matters, home and real estate, family and personal matters, civil lawsuits, elder care issues, and vehicles and driving.
- Online digital estate planning tool—create wills and trusts, healthcare proxys, and power of attorney documents from the comfort of home.

# **Voluntary Pet Insurance**

- Up to 70% back on vet bills and exclusivity—unavailable to the general public.
- One set price, regardless of the pet's age. An average savings of 40% from other pet insurers.
- Wellness plan from Nationwide that includes spay/neuter, preventive dental cleaning and more.

### 401(k) Retirement Plan

You can start saving for your retirement by participating in the company-sponsored 401(k) plan administered by Fidelity Investments. This plan provides you with a convenient, tax-advantaged way to save for your future.

Your 401(k) plan is a powerful tool to help you reach your retirement goals. As a supplement to other retirement benefits or savings that you may have, this voluntary plan allows you to save and invest money for your retirement with tax-deferred dollars. It costs less than you think to save a little more and plan for your future through a 401(k) plan.

- Eligible employees may enroll in the 401(k) plan immediately or they will be auto-enrolled
- You can contribute from 1% 75% of your base salary (excludes all stock-based compensation)
- The company matches 50% of employee contribution up to 4% of eligible compensation for a 2% maximum match.
- Website: https://401k.com; Customer Service # 800-294-4015
- The maximum employee annual contribution for 2024 is \$23,000; if you are over 50 years of age, you may contribute an additional amount, up to a maximum of \$7,500.
- Auto-enroll Feature: Newly eligible employees will automatically be enrolled at 4%, unless a
  different amount is chosen. Auto-increase deferral amount by 1%, until you reach 5%. Autoincrease will occur in January. You may opt-out, or change your election at anytime.
- Money will be invested in an age-appropriate Fidelity Freedom Fund.

### 401(k) Retirement Plan Continued

- After-tax 401(k) contributions: The AOS 401(k) Plan also allows participants to contribute additional after-tax money to your 401(k) account. After-tax contributions are not limited to the \$23,000 (\$30,500 if age 50 or older) 2024 IRS limit. Instead, they are included in the larger \$69,000 (age 49 and younger) and \$76,500 (age 50 and older) Annual Additions limit for 2024, which is the total amount that can be contributed to a 401(k) account, including employee and employer contributions.
- **In-Plan Roth Conversions:** An In-Plan Roth Conversion will immediately allow you to convert your after-tax contributions to a designated Roth account within your AOS 401(k) plan. To turn on the automated In-Plan Roth Conversions of your after-tax money source, you will need to call Fidelity at 800-294-4015.

# **Employee Monthly Contributions**

Benefit Plans	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Kaiser HMO	\$137.38	\$274.77	\$247.29	\$412.15
UHC HRA 1500 PPO Buy-Up	\$227.14	\$470.74	\$429.47	\$656.41
UHC HRA 2000 PPO Base	\$200.20	\$414.18	\$378.29	\$575.60
VSP Vision	\$1.96	\$4.38	\$4.38	\$4.38
UHC Dental	\$11.89	\$22.42	\$26.15	\$36.97

### Who Do You Contact for Benefits Assistance?

Contact your Human Resources team if you have questions after contacting member services at one of the insurance providers.

For additional questions, please contact your Client Services Manager:

Patti Harvey

Email: pharvey@acrisure.com

Phone: 408.350.5738

**Please Note:** For more information about the plans, visit *https://mybenefits.cc/jireh/* to review plan designs, required notices, evidence of coverage, documents and much more.



This summary is not intended to provide a complete plan description. If there is an actual or apparent conflict between this benefit summary or the Evidence of Coverage (EOC) booklet and the official plan documents, the provisions of the EOC prevail.

IMPORTANT: All official documents relating to the Jireh Employee Benefits Program, including the Evidence of Coverage (EOC) booklets, HIPAA Privacy Notice, Initial COBRA Notice, Medicare Part D Notice and any other relevant Plan Documents or Notices, are available electronically through the Jireh benefits website. You may also receive a paper copy of any of the documents by contacting HR.