

2024

# Benefits Open Enrollment

# Today's Presenters and our Benefit Partners

- Guy Hatfield, Acrisure VP
- Paulina Klima, Cigna Representative



# What is Open Enrollment



Open Enrollment is your annual opportunity to make benefit elections changes without a qualifying event. You can change health plans or add/remove dependents.

Enrollment elections are effective **1/1/2024 – 12/31/2024**

## **Qualifying events:**

Marriage, divorce, birth of a child, adoption of a child, loss of coverage

Changes must be made within 30 days

## **Important Dates:**

Open Enrollment starts – Wednesday November 1, 2023

Open Enrollment ends – **Friday November 17, 2023**

Open Enrollment Benefit **Elections will be made via the ADP WFN benefits enrollment system**



# What is Open Enrollment



## **Current Qualitest Enrollees:**

If you do not wish to make any changes, your current benefit elections will automatically roll over to the new plan year beginning January 1, 2024 with the exception of your current Flex Plan election and your current MetLife Voluntary Benefits election. You must re-enroll in the Flex Plan if you wish continue the Flex Plan benefit in 2024. MetLife current Voluntary Benefits (Accident Insurance, Hospital Insurance, Critical Illness Insurance) will be replaced by Cigna's Voluntary Benefit plans.

## **Current Q Analysts Enrollees:**

If you do not wish to make any changes, your current benefit elections will automatically roll over to the Cigna medical HSA Base \$3200 plan, Cigna dental DPPO Low Option plan and the Cigna vision plan. More information of these plans to follow. Sun Life current Voluntary Benefit plans (Accident Insurance, Hospital Insurance, Critical Illness Insurance) will be replaced by Cigna's Voluntary Benefit plans. Furthermore, Sun Life's Voluntary Long-Term Disability and Medical Gap plans will no longer be offered. The Commuter Plan administered by The Advantage Group (TAG) will be replaced by the Commuter Plan administered by Wex.



# Health Benefits

Effective January 1, 2024





## Medical

- You will have the option between four medical plans offered through Cigna
  - In many areas throughout the country employees will have the option to select a less costly **Local Plus (LP) narrow network** plan instead of the more costly **Open Access Plus (OAP) full network** plan
- **Walgreens pharmacy**: If you would like Walgreens as your pharmacy in 2024 you will need to contact Cigna after January 1<sup>st</sup> and request Walgreens as your pharmacy of choice. More information on this to follow.
- New cost share arrangement:
  - Employees residing in an LP area the company pay 85% of all employee costs and either 70% or 60% of all dependent costs for the LP plan option. Employees can buy up to the OAP option.
  - Employees residing in an area where there is no LP option available, employees will pay the same \$ amount for the OAP option as those employees are paying for the lower cost LP option.





## Dental

- You will have the Option between two Cigna dental plans. There is no changes to the current Cigna High Option (\$2,000 annual maximum) and Low Option (\$1500 annual maximum)
- Both dental plans offer an orthodontia benefit for adults and children



# 2024 Benefit Highlights

## Company Paid Life / Accidental Death and Dismemberment (AD&D)

- Changing from Anthem to Mutual of Omaha
- \$50,000 Benefit



## Voluntary Life / Accidental Death and Dismemberment

- Changing from Anthem to Mutual of Omaha
- Benefits
  - Employee 5x Annual Salary up to \$300,000 (guarantee issue \$100,000)
  - Spouse up to 100% of employee benefit (guaranteed issue \$25,000)
  - During this open enrollment you and your spouse can elect up to the guarantee issue amounts without providing evidence of insurability.
- Your current Anthem enrollment will automatically be rolled over to the new Mutual of Omaha plan
- Same or lower rates under the new Mutual of Omaha plan







## Company Paid Short Term Disability

- Changing from **Anthem to Mutual of Omaha**
- Weekly benefit of 60% to \$2,500
- You will be automatically enrolled on this benefit

## Company Paid Long Term Disability

- Changing from **Anthem to Mutual of Omaha**
- Monthly benefit of 60% to \$10,000
- You will automatically be enrolled on this benefit





## Voluntary Plans

- Changing from **MetLife to Cigna** for Accident Insurance, Hospital Indemnity Insurance and Critical Illness Insurance.
- Cigna's plans offer an enhanced **\$50 wellness benefit** for each family member that is enrolled on the plan. For annual exams, routine dental or vision exams each enrolled family member will receive \$50 per year.

## Flexible Spending Account (FSA)



- For HSA medical enrollees adding a **Limited Purpose FSA** to cover your eligible dental and vision expenses tax free.



# 2024 Benefits Offered



- Cigna Medical (4 plans) – Base Plan \$2000, OAP Buy-up \$1000, HSA Base \$3200 and HSA Buy-up \$1600
  - (2) Cigna Medical Networks: Local Plus (Narrow Network) and Open Access Plus (Full Network)
- HSA Administrator – HSA Bank (the company funds your HSA Account \$360 annually)
- Flex Spending Account – WageWorks - Health Equity
- Commuter Plan – Discovery Benefits (WEX Administrative Services)
- Cigna Dental (2 plans) – High Option \$2,000 annual maximum, Low Option \$1,500 annual maximum
- Cigna Vision Plan
- Virtual Medicine – MDLive (offered through Cigna)
- Employee Assistance Program (EAP) – Mutual of Omaha
- Company Paid Life/AD&D, Short Term and Long Term Disability – Mutual of Omaha
- Voluntary Life and Accidental Death and Dismemberment Insurance – Mutual of Omaha
- Voluntary Accident, Hospital Indemnity and Critical Insurance – Cigna
- Voluntary Group Legal – MetLife Legal



# 2024 Benefits Offered (Continued)

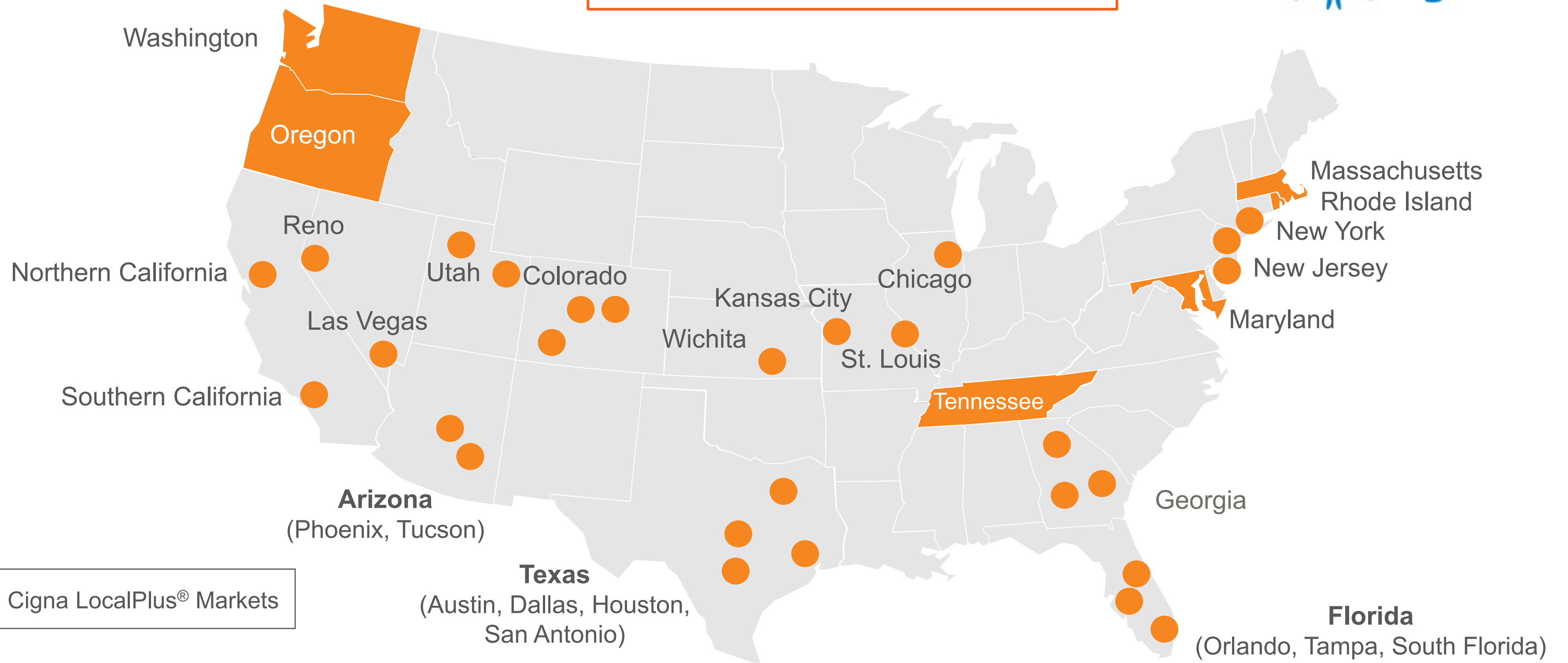


- Pet Insurance - Nationwide
- Auto and Home Insurance Discounts – Farmers Insurance
- ID Theft - Equifax
- Travel Assist Program – Mutual of Omaha
- Will Prep Support Program – Mutual of Omaha
- Hearing Discount Program – Mutual of Omaha



# LOCALPLUS<sup>®</sup> MARKETS

Cigna's Medical Narrow Network



● Cigna LocalPlus<sup>®</sup> Markets

This plan provides access to a network that is smaller than Cigna's national Open Access Plus (OAP) network. In this plan customers have access to in-network benefits only from the health care professionals and facilities in the LocalPlus network when in a LocalPlus Network service area. Please visit the LocalPlus online directory at [Cigna.com](http://Cigna.com) to determine which health care professionals and facilities are included in the LocalPlus network. For a paper copy, contact your Cigna representative. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and complete details of coverage, contact your Cigna representative. All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company. In Texas, LocalPlus plans are considered Preferred Provider plans with certain managed care features. TN policy form: HP-POL43/HC-CER1V1 et al. Map is illustrative. Expected network coverage as of 7/1/23. Availability may vary by location and plan funding type and is subject to change.



# 2024 Bi-Weekly Payroll Deductions per pay period

Your medical cost if you reside in an area that does not offer a Local Plus (narrow network) plan

Bi-Weekly Paycheck Deductions

	Current	2024 - New Plan	2024 - New Plan
	1000 PPO	OAP Buy-Up \$1000	\$ Change
Employee Only	\$112.94	\$45.84	(\$67.10)
Employee + Spouse	\$237.18	\$179.56	(\$57.63)
Employee + Child(ren)	\$214.57	\$155.25	(\$59.32)
Family	\$338.83	\$288.96	(\$49.87)
	2000 PPO	OAP Base \$2000	\$ Change
Employee Only	\$44.77	\$45.45	\$0.68
Employee + Spouse	\$136.62	\$178.02	\$41.40
Employee + Child(ren)	\$136.69	\$153.92	\$17.23
Family	\$204.74	\$286.48	\$81.74
	1500 GHSA	HSA Buy-Up \$1600	\$ Change
Employee Only	\$40.85	\$34.67	(\$6.17)
Employee + Spouse	\$119.49	\$110.04	(\$9.45)
Employee + Child(ren)	\$108.11	\$96.34	(\$11.77)
Family	\$170.70	\$171.71	\$1.01
	2850 GHSA	HSA Base \$3200	\$ Change
Employee Only	\$32.12	\$35.08	\$2.96
Employee + Spouse	\$101.18	\$111.34	\$10.16
Employee + Child(ren)	\$91.54	\$97.47	\$5.93
Family	\$144.54	\$173.73	\$29.19



# 2024 Bi-Weekly Payroll Deductions per pay period

Your medical cost if you **choose a Local Plus** (narrow network) plan

Bi-Weekly Paycheck Deductions

	Current	2024 - New Plan	2024 - New Plan
	1000 PPO	Local Plus - OAP Buy-Up \$1000	\$ Change
Employee Only	\$112.94	\$45.84	(\$67.10)
Employee + Spouse	\$237.18	\$179.56	(\$57.63)
Employee + Child(ren)	\$214.57	\$155.25	(\$59.32)
Family	\$338.83	\$288.96	(\$49.87)
	2000 PPO	Local Plus - OAP Base \$2000	\$ Change
Employee Only	\$44.77	\$45.45	\$0.68
Employee + Spouse	\$136.62	\$178.02	\$41.40
Employee + Child(ren)	\$136.69	\$153.92	\$17.23
Family	\$204.74	\$286.48	\$81.74
	1500 GHSA	Local Plus - HSA Buy-Up \$1600	\$ Change
Employee Only	\$40.85	\$34.67	(\$6.17)
Employee + Spouse	\$119.49	\$110.04	(\$9.45)
Employee + Child(ren)	\$108.11	\$96.34	(\$11.77)
Family	\$170.70	\$171.71	\$1.01
	2850 GHSA	Local Plus - HSA Base \$3200	\$ Change
Employee Only	\$32.12	\$35.08	\$2.96
Employee + Spouse	\$101.18	\$111.34	\$10.16
Employee + Child(ren)	\$91.54	\$97.47	\$5.93
Family	\$144.54	\$173.73	\$29.19



# 2024 Bi-Weekly Payroll Deductions per pay period

Your medical cost if you reside in a Local Plus (narrow network) area but choose an Open Access Plus (full network) plan

Bi-Weekly Paycheck Deductions

	Current	2024 - New Plan	2024 - New Plan
	1000 PPO	OAP Buy-Up \$1000	\$ Change
Employee Only	\$136.08	\$73.34	(\$62.73)
Employee + Spouse	\$285.65	\$237.32	(\$48.32)
Employee + Child(ren)	\$344.52	\$207.52	(\$137.01)
Family	\$408.03	\$371.49	(\$36.54)
	2000 PPO	OAP Base \$2000	\$ Change
Employee Only	\$67.55	\$72.74	\$5.19
Employee + Spouse	\$184.34	\$235.33	\$50.99
Employee + Child(ren)	\$179.88	\$205.77	\$25.89
Family	\$272.45	\$368.37	\$95.93
	1500 GHSA	HSA Buy-Up \$1600	\$ Change
Employee Only	\$58.49	\$57.29	(\$1.20)
Employee + Spouse	\$156.26	\$157.56	\$1.30
Employee + Child(ren)	\$141.40	\$139.33	(\$2.08)
Family	\$223.12	\$239.61	\$16.48
	2850 GHSA	HSA Base \$3200	\$ Change
Employee Only	\$48.52	\$56.02	\$7.50
Employee + Spouse	\$135.33	\$155.35	\$20.02
Employee + Child(ren)	\$122.46	\$137.29	\$14.82
Family	\$193.22	\$236.62	\$43.40





# 2024 Bi-Weekly Payroll Deductions per pay period

## Your dental and vision costs

	<b>Current</b>	<b>2024</b>	<b>2024</b>
	<b>Cigna High DPPO</b>	<b>Cigna High DPPO</b>	<b>\$ Change</b>
Employee Only	\$10.14	\$10.14	\$0.00
Employee + Spouse	\$19.26	\$19.26	\$0.00
Employee + Child(ren)	\$19.87	\$19.87	\$0.00
Family	\$31.43	\$31.43	\$0.00
	<b>Cigna Low DPPO</b>	<b>Cigna Low DPPO</b>	<b>\$ Change</b>
Employee Only	\$7.42	\$7.42	\$0.00
Employee + Spouse	\$14.72	\$14.72	\$0.00
Employee + Child(ren)	\$18.81	\$18.81	\$0.00
Family	\$28.73	\$28.73	\$0.00
	<b>Cigna Vision</b>	<b>Cigna Vision</b>	<b>\$ Change</b>
Employee Only	\$1.47	\$1.47	\$0.00
Employee + Spouse	\$2.80	\$2.80	\$0.00
Employee + Child(ren)	\$2.95	\$2.95	\$0.00
Family	\$4.33	\$4.33	\$0.00

Bi-Weekly Paycheck Deductions



# Cigna Medical Benefits

Effective January 1, 2024



# Cigna Medical Plans at a Glance



## Two PPO Plans

- Annual deductible
- Your choice of doctor
- Self refer to specialist
- Pay less if you use in-network doctors
- In-network preventive care covered at 100%
- (2) Cigna Networks: Open Access Plus (Full Network) or Local Plus (Narrow Network)

## Two PPO Plans with HSA

- Annual deductible
- Your choice of doctor
- Self refer to specialist
- Must pay deductible BEFORE plan pays other benefits
- Pay less if you use in-network doctors
- In-network preventive care covered at 100%. Deductible does not apply
- Paired with hsabank; the company funds your HSA \$360 annually
- (2) Cigna Networks: Open Access Plus (Full Network) or Local Plus (Narrow Network)



MEDICAL PLAN	Cigna LP or OAP Buy-Up \$1000	Cigna LP or OAP Base \$2000	Cigna LP or OAP HSA Buy-Up \$1600	Cigna LP or OAP HSA Base \$3200
Annual Deductible	\$1,000 ind / \$2,000 fam	\$2,000 ind / \$4,000 fam	\$1,600 ind / \$3,200 fam member / \$3,200 fam	\$3,200 ind / \$3,200 fam member / \$6,400 fam
Office Visits	\$20 deductible waived	\$25 deductible waived	20% after deductible	0% after deductible
Specialist Office Visits	\$20 deductible waived	\$25 deductible waived	20% after deductible	0% after deductible
Diagnostic Lab	10% after deductible	\$0 deductible waived	20% after deductible	0% after deductible
Diagnostic X-ray	10% after deductible	\$0 deductible waived	20% after deductible	0% after deductible
Urgent Care	10% after deductible	\$75 deductible waived	20% after deductible	0% after deductible
Emergency Room	10% after deductible	\$125 deductible waived	20% after deductible	0% after deductible
Inpatient Surgery	10% after deductible	0% after deductible	20% after deductible	0% after deductible
Outpatient Surgery	\$100 deductible waived	\$100 deductible waived	20% after deductible	0% after deductible
Annual Out of Pocket Maximum	\$2,250 ind / \$4,500 fam	\$2,500 ind / \$5,000 fam	\$3,200 ind / \$6,400 fam member / \$6,400 fam	\$6,400 ind / \$12,800 fam

Refer to plan summaries for out-of-network benefits



Cigna In-network benefit comparison

Prescription Benefits	Cigna LP or OAP Buy-Up \$1000	Cigna LP or OAP Base \$2000	Cigna LP or OAP Buy-Up HSA \$1600	Cigna LP or OAP HSA Base \$3200
Generic Rx (30 / 90 day supply)	\$5 / \$13	\$5 / \$13	\$5 / \$13 after deductible	\$5 / \$13 after deductible
Brand Name Rx (30 / 90 day supply)	\$25 / \$63	\$25 / \$63	\$25 / \$63 after deductible	\$25 / \$63 after deductible
Non-Preferred Rx (30 / 90 day supply)	\$40 / \$100	\$40 / \$100	\$40 / \$100 after deductible	\$40 / \$100 after deductible



Refer to plan summaries for out-of-network benefits



## Cigna 90 Now Pharmacy Program CVS or Walgreens Pharmacy?

- CVS will remain the anchor pharmacy for Cigna.
- There is nothing you need to do if you would like to continue with CVS or a non-Walgreens pharmacy.
- If you would like to continue with Walgreen's as your pharmacy, you will need to contact Cigna by the phone number on the back of your ID card or online via myCigna.com and request your pharmacy network be changed to Walgreens.
- Please note you can only change pharmacies once a year unless the is a life change event.



# Your pharmacy network options

Choose the network that works best for you.

## Where do YOU want to fill prescriptions?

Choice and convenience are important – especially when it comes to filling your prescriptions. To help, you (and each of your covered family members) can now choose the major retail pharmacy chain you want in your network: CVS Pharmacy® or Walgreens® Pharmacy. To get you started, we've put you in a network that has one of these two pharmacies in it. You have the option to change your network if you want to.

### Your network options.

Both networks have over 55,000 pharmacies\* in them, including local independent pharmacies, grocery stores, retail chains and wholesale warehouse stores – all places where you may already shop.

#### Option 1: Network with CVS Pharmacy in it<sup>1</sup>

- You can fill 30-day supplies at any in-network retail pharmacy, including CVS.
- You can fill 90-day supplies<sup>2</sup> at select in-network retail pharmacies, including CVS.
- *Walgreens is not in this network.*<sup>3</sup> This means your plan may not cover any prescriptions you fill there.<sup>4</sup>
- Both networks include the option to fill 90-day prescriptions through our home delivery pharmacy.<sup>5</sup>

#### Option 2: Network with Walgreens Pharmacy in it<sup>1</sup>

- You can fill 30-day supplies at any in-network retail pharmacy, including Walgreens.
- You can fill 90-day supplies<sup>2</sup> at select in-network retail pharmacies, including Walgreens.
- *CVS is not in this network.*<sup>6</sup> This means your plan may not cover any prescriptions you fill there.<sup>4</sup>

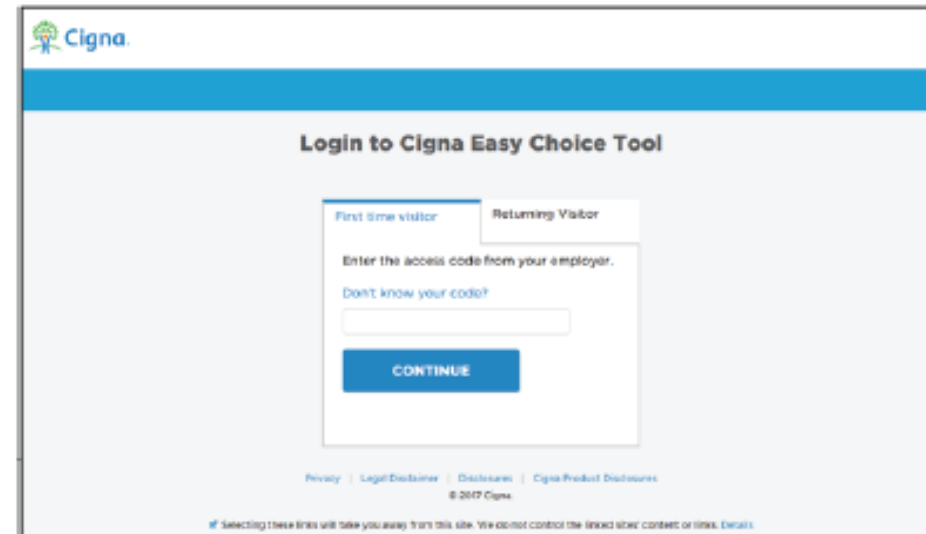
### Here are two ways to change your pharmacy network.<sup>7</sup>

1. **By phone:** Call customer service using the toll-free number on your Cigna Healthcare<sup>SM</sup> ID card. Let them know you'd like to change your pharmacy network.
2. **Online:** Upon your benefit effective date, log in to the myCigna<sup>®</sup> App<sup>8</sup> or myCigna.com<sup>®</sup> and go to the profile section. Follow the on-screen instructions to change your pharmacy network.

# Which plan is the right plan for me?

## Cigna's Easy Choice Tool

- 1 Log in to Cigna Easy Choice Tool at [CignaEasyChoice.com](https://CignaEasyChoice.com).



Cigna Easy Choice Tool login page - *First time visitor* tab

- 2 Enter the access code from your employer in the *First time visitor* tab and click **Continue**.

### Notes:

- Employee access codes change each new enrollment year.
- If you do not know your access code, you can click the *Don't know your code?* link to learn how to get your access code.



*Don't know your code?* pop-up description



# Which plan is the right plan for me?

## “Single” Coverage: 2-day hospitalization scenario

	2024 Cigna	2024 Cigna	2024 Cigna	2024 Cigna	2024 Cigna	2024 Cigna	2024 Cigna	2024 Cigna	2024 Cigna	2024 Cigna	2024 Cigna	2024 Cigna
Network (Local Plus or Open Access Plus)	LP	OAP	OAP	LP	OAP	OAP	LP	OAP	OAP	LP	OAP	OAP
Reside in Local Plus Area	YES	YES	NO	YES	YES	NO	YES	YES	NO	YES	YES	NO
Plan	Buy-Up \$1000	Buy-Up \$1000	Buy-Up \$1000	Base \$2000	Base \$2000	Base \$2000	HSA Buy-Up \$1600	HSA Buy-Up \$1600	HSA Buy-Up \$1600	HSA Base \$3200	HSA Base \$3200	HSA Base \$3200
Bi-Weekly "Single" Contribution	\$45.84	\$73.34	\$45.84	\$45.45	\$72.74	\$45.45	\$34.67	\$57.29	\$34.67	\$35.08	\$56.02	\$35.08
Annual "Single" Contribution	\$1,100	\$1,760	\$1,100	\$1,091	\$1,746	\$1,091	\$832	\$1,375	\$832	\$842	\$1,344	\$842
Annual Employer HSA Contribution	\$0	\$0	\$0	\$0	\$0	\$0	-\$360	-\$360	-\$360	-\$360	-\$360	-\$360
Annual Subtotal	\$1,100	\$1,760	\$1,100	\$1,091	\$1,746	\$1,091	\$472	\$1,015	\$472	\$482	\$984	\$482
Out of Pocket - (Single member - 2 day hospitalization) <sup>1</sup>	\$2,250	\$2,250	\$2,250	\$2,500	\$2,500	\$2,500	\$3,200	\$3,200	\$3,200	\$3,200	\$3,200	\$3,200
Total Annual Cost - "Single" Member	\$3,350	\$4,010	\$3,350	\$3,591	\$4,246	\$3,591	\$3,672	\$4,215	\$3,672	\$3,682	\$4,184	\$3,682
<b>Adding the Cigna Voluntary Benefit Hospital Indemnity Plan</b>												
Cigna Hospital Voluntary Plan - Bi Weekly Premium	\$3.77	\$3.77	\$3.77	\$3.77	\$3.77	\$3.77	\$3.77	\$3.77	\$3.77	\$3.77	\$3.77	\$3.77
Cigna Hospital Voluntary Plan - Annual Premium	\$98.04	\$98.04	\$98.04	\$98.04	\$98.04	\$98.04	\$98.04	\$98.04	\$98.04	\$98.04	\$98.04	\$98.04
Cigna Est Hospital Benefit Payment Directly to You (\$1,000 hospital admission + \$100 per day)	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200
Cigna \$50 Wellness Payment Directly to You	-\$50	-\$50	-\$50	-\$50	-\$50	-\$50	-\$50	-\$50	-\$50	-\$50	-\$50	-\$50
Adjusted Total Annual Cost - "Single" Member	\$2,198	\$2,858	\$2,198	\$2,439	\$3,094	\$2,439	\$2,520	\$3,063	\$2,520	\$2,530	\$3,032	\$2,530
<sup>1</sup> HSA Base \$3,200 HDHP/HSA, \$0 hospital cost after \$3,200 has been met. Member is only responsible for Rx copays after the \$3,200 deductible has been satisfied												





# Which plan is the right plan for me?



## “Employee + Spouse” Coverage: member 2-day hospitalization scenario

	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024
	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna
Network (Local Plus or Open Access Plus)	LP	OAP	OAP	LP	OAP	OAP	LP	OAP	OAP	LP	OAP	OAP
Reside in Local Plus Area	YES	YES	NO	YES	YES	NO	YES	YES	NO	YES	YES	NO
Plan	Buy-Up \$1000	Buy-Up \$1000	Buy-Up \$1000	Base \$2000	Base \$2000	Base \$2000	HSA Buy-Up \$1600	HSA Buy-Up \$1600	HSA Buy-Up \$1600	HSA Base \$3200	HSA Base \$3200	HSA Base \$3200
Bi-Weekly "EE + Spouse" Contribution	\$179.56	\$237.32	\$179.56	\$178.02	\$235.33	\$178.02	\$110.04	\$157.56	\$110.04	\$111.34	\$155.35	\$111.34
Annual "EE + Spouse" Contribution	\$4,309	\$5,696	\$4,309	\$4,272	\$5,648	\$4,272	\$2,641	\$3,781	\$2,641	\$2,672	\$3,728	\$2,672
Annual Employer HSA Contribution	\$0	\$0	\$0	\$0	\$0	\$0	-\$360	-\$360	-\$360	-\$360	-\$360	-\$360
Annual Subtotal	<b>\$4,309</b>	<b>\$5,696</b>	<b>\$4,309</b>	<b>\$4,272</b>	<b>\$5,648</b>	<b>\$4,272</b>	<b>\$2,281</b>	<b>\$3,421</b>	<b>\$2,281</b>	<b>\$2,312</b>	<b>\$3,368</b>	<b>\$2,312</b>
Out of Pocket - (member - 2 day hospitalization) <sup>1</sup>	\$2,250	\$2,250	\$2,250	\$2,500	\$2,500	\$2,500	\$6,400	\$6,400	\$6,400	\$3,200	\$3,200	\$3,200
Total Annual Cost - "Single family" Member	<b>\$6,559</b>	<b>\$7,946</b>	<b>\$6,559</b>	<b>\$6,772</b>	<b>\$8,148</b>	<b>\$6,772</b>	<b>\$8,681</b>	<b>\$9,821</b>	<b>\$8,681</b>	<b>\$5,512</b>	<b>\$6,568</b>	<b>\$5,512</b>
<b>Adding the Cigna Voluntary Benefit Hospital Indemnity Plan</b>												
Cigna Hospital Voluntary Plan - Bi Weekly Premium	\$9.62	\$9.62	\$9.62	\$9.62	\$9.62	\$9.62	\$9.62	\$9.62	\$9.62	\$9.62	\$9.62	\$9.62
Cigna Hospital Voluntary Plan - Annual Premium	\$250.20	\$250.20	\$250.20	\$250.20	\$250.20	\$250.20	\$250.20	\$250.20	\$250.20	\$250.20	\$250.20	\$250.20
Cigna Est Hospital Benefit Payment Directly to You (\$1,000 hospital admission + \$100 per day)	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200
Cigna (2) \$50 Wellness Payment Directly to You	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100
Adjusted Total Annual Cost - "Single" Member	<b>\$5,510</b>	<b>\$6,896</b>	<b>\$5,510</b>	<b>\$5,723</b>	<b>\$7,098</b>	<b>\$5,723</b>	<b>\$7,631</b>	<b>\$8,772</b>	<b>\$7,631</b>	<b>\$4,462</b>	<b>\$5,519</b>	<b>\$4,462</b>
<sup>1</sup> HSA Base \$3,200 HDHP/HSA, \$0 hospital cost after \$3,200 has been met. Member is only responsible for Rx copays after the \$3,200 deductible has been satisfied												



# Which plan is the right plan for me?



## “Employee + Child(ren)” Coverage: member 2-day hospitalization scenario

	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024
	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna
Network (Local Plus or Open Access Plus)	LP	OAP	OAP	LP	OAP	OAP	LP	OAP	OAP	LP	OAP	OAP
Reside in Local Plus Area	YES	YES	NO	YES	YES	NO	YES	YES	NO	YES	YES	NO
Plan	Buy-Up \$1000	Buy-Up \$1000	Buy-Up \$1000	Base \$2000	Base \$2000	Base \$2000	HSA Buy-Up \$1600	HSA Buy-Up \$1600	HSA Buy-Up \$1600	HSA Base \$3200	HSA Base \$3200	HSA Base \$3200
Bi-Weekly "EE + Child(ren)" Contribution	\$155.25	\$207.52	\$155.25	\$153.92	\$205.77	\$153.92	\$96.34	\$139.33	\$96.34	\$97.47	\$137.29	\$97.47
Annual "EE + Child(ren)" Contribution	\$3,726	\$4,980	\$3,726	\$3,694	\$4,939	\$3,694	\$2,312	\$3,344	\$2,312	\$2,339	\$3,295	\$2,339
Annual Employer HSA Contribution	\$0	\$0	\$0	\$0	\$0	\$0	-\$360	-\$360	-\$360	-\$360	-\$360	-\$360
Annual Subtotal	<b>\$3,726</b>	<b>\$4,980</b>	<b>\$3,726</b>	<b>\$3,694</b>	<b>\$4,939</b>	<b>\$3,694</b>	<b>\$1,952</b>	<b>\$2,984</b>	<b>\$1,952</b>	<b>\$1,979</b>	<b>\$2,935</b>	<b>\$1,979</b>
Out of Pocket - (member - 2 day hospitalization) <sup>1</sup>	\$2,250	\$2,250	\$2,250	\$2,500	\$2,500	\$2,500	\$6,400	\$6,400	\$6,400	\$3,200	\$3,200	\$3,200
Total Annual Cost - "Single family" Member	<b>\$5,976</b>	<b>\$7,230</b>	<b>\$5,976</b>	<b>\$6,194</b>	<b>\$7,439</b>	<b>\$6,194</b>	<b>\$8,352</b>	<b>\$9,384</b>	<b>\$8,352</b>	<b>\$5,179</b>	<b>\$6,135</b>	<b>\$5,179</b>
<b>Adding the Cigna Voluntary Benefit Hospital Indemnity Plan</b>												
Cigna Hospital Voluntary Plan - Bi Weekly Premium	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40	\$6.40
Cigna Hospital Voluntary Plan - Annual Premium	\$166.32	\$166.32	\$166.32	\$166.32	\$166.32	\$166.32	\$166.32	\$166.32	\$166.32	\$166.32	\$166.32	\$166.32
Cigna Est Hospital Benefit Payment Directly to You (\$1,000 hospital admission + \$100 per day)	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200
Cigna (2) \$50 Wellness Payment Directly to You	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100	-\$100
Adjusted Total Annual Cost - "Single" Member	<b>\$4,842</b>	<b>\$6,097</b>	<b>\$4,842</b>	<b>\$5,060</b>	<b>\$6,305</b>	<b>\$5,060</b>	<b>\$7,218</b>	<b>\$8,250</b>	<b>\$7,218</b>	<b>\$4,046</b>	<b>\$5,001</b>	<b>\$4,046</b>
<sup>1</sup> HSA Base \$3,200 HDHP/HSA, \$0 hospital cost after \$3,200 has been met. Member is only responsible for Rx copays after the \$3,200 deductible has been satisfied												



# Which plan is the right plan for me?

## “Family” Coverage: Family member 2-day hospitalization scenario

	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024	2024
	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna	Cigna
Network (Local Plus or Open Access Plus)	LP	OAP	OAP	LP	OAP	OAP	LP	OAP	OAP	LP	OAP	OAP
Reside in Local Plus Area	YES	YES	NO	YES	YES	NO	YES	YES	NO	YES	YES	NO
Plan	Buy-Up \$1000	Buy-Up \$1000	Buy-Up \$1000	Base \$2000	Base \$2000	Base \$2000	HSA Buy-Up \$1600	HSA Buy-Up \$1600	HSA Buy-Up \$1600	HSA Base \$3200	HSA Base \$3200	HSA Base \$3200
Bi-Weekly "Family" Contribution	\$288.96	\$371.49	\$288.96	\$286.48	\$368.37	\$286.48	\$171.71	\$239.61	\$171.71	\$173.73	\$236.62	\$173.73
Annual "Family" Contribution	\$6,935	\$8,916	\$6,935	\$6,876	\$8,841	\$6,876	\$4,121	\$5,751	\$4,121	\$4,170	\$5,679	\$4,170
Annual Employer HSA Contribution	\$0	\$0	\$0	\$0	\$0	\$0	-\$360	-\$360	-\$360	-\$360	-\$360	-\$360
Annual Subtotal	\$6,935	\$8,916	\$6,935	\$6,876	\$8,841	\$6,876	\$3,761	\$5,391	\$3,761	\$3,810	\$5,319	\$3,810
Out of Pocket - (Single family member - 2 day hospitalization) <sup>1</sup>	\$2,250	\$2,250	\$2,250	\$2,500	\$2,500	\$2,500	\$6,400	\$6,400	\$6,400	\$3,200	\$3,200	\$3,200
Total Annual Cost - "Single family" Member	\$9,185	\$11,166	\$9,185	\$9,376	\$11,341	\$9,376	\$10,161	\$11,791	\$10,161	\$7,010	\$8,519	\$7,010
<b>Adding the Cigna Voluntary Benefit Hospital Indemnity Plan</b>												
Cigna Hospital Voluntary Plan - Bi Weekly Premium	\$12.25	\$12.25	\$12.25	\$12.25	\$12.25	\$12.25	\$12.25	\$12.25	\$12.25	\$12.25	\$12.25	\$12.25
Cigna Hospital Voluntary Plan - Annual Premium	\$318.60	\$318.60	\$318.60	\$318.60	\$318.60	\$318.60	\$318.60	\$318.60	\$318.60	\$318.60	\$318.60	\$318.60
Cigna Est Hospital Benefit Payment Directly to You (\$1,000 hospital admission + \$100 per day)	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200	-\$1,200
Cigna (3) \$50 Wellness Payment Directly to You	-\$150	-\$150	-\$150	-\$150	-\$150	-\$150	-\$150	-\$150	-\$150	-\$150	-\$150	-\$150
Adjusted Total Annual Cost - "Single" Member	\$8,154	\$10,134	\$8,154	\$8,344	\$10,310	\$8,344	\$9,130	\$10,759	\$9,130	\$5,978	\$7,488	\$5,978
<sup>1</sup> HSA Base \$3,200 HDHP/HSA, \$0 hospital cost after \$3,200 has been met. Member is only responsible for Rx copays after the \$3,200 deductible has been satisfied												



# Health Savings Account (HSA Bank)





- If enrolled on one of the two HSA medical plan options, you will open an HSA through hsabank
- **Triple tax benefits** to individuals:
  - **Tax deductible contributions:** Contributions made to an HSA are tax-deductible, meaning you can reduce your taxable income by the amount contributed.
  - **Tax-free growth:** Any interest, dividends, or capital gains earned on the funds in your HSA grows tax-free. This allows your savings to potentially grow faster over time.
  - **Tax-free withdrawals:** When you use your HSA funds for qualified medical expenses, withdrawals are also tax free. This includes expenses such as doctor visits, prescription medications, dental and vision services.
- Qualitest will contribute \$360 annually into your HSA Bank HSA.





- 2024 IRS Maximum Limits
  - Individual Coverage: \$4,150
  - Family Coverage: \$8,300
  - Catch-up Contribution for age 55+: \$1,000
- Your HSA account balance rolls over year after year, and funds always stay with you (**no use it or lose it rules**)
- Make PERSONAL HSA contributions at any time directly to your HSA account during the year, up until the tax filing deadline (April 15<sup>th</sup>)





- To be eligible for the HSA, you must meet the following requirements
  - You are covered under an HSA qualified high deductible health plan (HDHP)
  - You have no other health coverage
  - You (and your spouse, if you have family coverage) can not have any health coverage other than an HDHP
  - You are not enrolled in Medicare
  - You can not be claimed as a dependent on someone else's tax return



# Cigna Voluntary Benefits





- Cigna's **voluntary Accident Insurance** plan provides you with financial protection in the event of an accident or injury. Plan benefits include:
  - \$1000 hospital admission payment directly to you
  - Additional \$200 per day hospital stay; \$400 per day for intensive care unit
  - Up to \$8,000 payment to you for fractures and dislocations
  - **\$50 Wellness Treatment payment for each enrolled family member per year. Wellness treatment includes annual health exam, routine dental and vision exams.**
  - Monthly rates: Employee \$7.52, EE + Spouse \$14.62, EE + Child(ren) \$17.45, Family \$20.63
  - For more plan details please see plan summary located on the Qualitest benefits website



# Voluntary Benefits – Hospital Indemnity Insurance

- Cigna's **voluntary Hospital Indemnity** Insurance provides benefits specifically for hospitalization expenses. Plan benefits include:
  - \$1000 hospital admission payment directly to you
  - Additional \$1,200 if admitted into the intensive care unit
  - Additional \$100 per day hospital stay; \$200 per day for intensive care unit
  - **\$50 Wellness Treatment payment for each enrolled family member per year. Wellness treatment includes annual health exam, routine dental and vision exams.**
  - Monthly rates: Employee \$8.17, EE + Spouse \$20.85, EE + Child(ren) \$13.86, Family \$26.55
  - For more plan details please see plan summary located on the Qualitest benefits website



- Cigna's **voluntary Critical Illness** Insurance plan provides a lump-sum payment upon diagnosis of a covered critical illness or condition. This plan is designed to help you manage the financial impact of serious illnesses. Types of critical illnesses include cancer, heart attack, stroke, organ failure and others. Plan features include:
  - \$10,000 or \$20,000 employee benefit; spouse and/or dependent(s) 50% of employee issued benefit
  - Rates are based on age and whether or not a tobacco user
  - **\$50 Wellness Treatment payment for each enrolled family member per year. Wellness treatment includes annual health exam, routine dental and vision exams.**
  - For more plan details please see plan summary located on the Qualitest benefits website



# Cigna Medical Member Resources

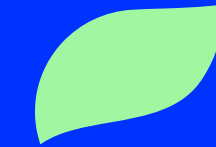
Paulina Klima, Cigna Representative



# myCigna.com®

Your employees' online home for assessment tools, plan management, medical updates and much more

- Find in-network doctors, dentists and medical services
- View digital ID card information
- Review coverage
- Manage and track claims
- Compare cost and quality information for doctors and hospitals
- Access a variety of health and wellness tools and resources
- Sign up to receive alerts when new plan documents are available
- Track account balances and deductibles



**Employees download the myCigna app and access their account with any compatible device.**



# Digital ID cards

- Digital ID cards allow members to access their plan coverage and information more easily, and they are more conveniently available when needed
- Digital ID cards can be downloaded and easily saved, shared, printed, or emailed directly to a provider
- To access their digital ID cards, members can select “ID Cards” on myCigna.com or the mobile app

**Encourage your employees to register on myCigna to access their digital ID cards.**

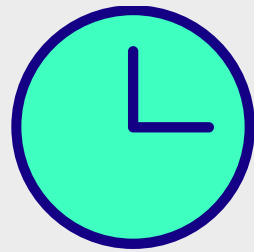


The screenshot shows the myCigna website interface. At the top, there are navigation links for Messages (with a red notification badge), ID Cards (highlighted with a blue box and a blue arrow pointing to the content below), Rx Cart (with a red notification badge), and Lou (with a dropdown arrow). Below the navigation, there are two main sections: "Medical and Pharmacy" and "Dental".

**Medical and Pharmacy**  
Coverage effective date:  
01/01/2023  
[View Lou's ID Card](#)  
Use your digital ID card when you access care. You can [submit a request for Lou's physical ID card](#) if you need one.

**Dental**  
Coverage effective date:  
11/01/2018  
[View Lou's Dental ID Card](#)  
Use your digital ID card when you access care.

## 24/7 customer assistance



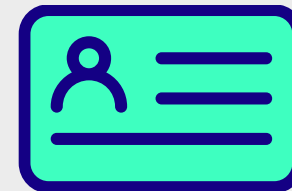
Reach us 24 hours a day,  
seven days a week.



Ask for a Spanish-speaking  
service representative, or  
someone who can translate  
one of 200 languages.



Get answers to your health,  
claims and benefit questions.



Order an ID card, update  
insurance information, check  
claim status and more.



**The answers you need are just a phone call away.  
Anytime you need us, feel free to call the toll-free number on your Cigna ID card.**

## Suite of virtual<sup>1</sup> services

### Primary Care

- Preventive care wellness screenings at no additional cost<sup>2</sup>
- Routine care visits allow employees to establish relationship with same PCP
- Prescriptions available through home delivery or local pharmacies, if appropriate

### Urgent Care

- Available 24/7, including after hours, holidays
- Care for 80+ minor medical conditions
- Less expensive than urgent care and ER

### Dermatology

- Access to board-certified dermatologists (no appointment required)
- Treatment plans and, if necessary, prescriptions, within 24 hours
- Care for the most common hair, skin and nail conditions

### Behavioral Care

- Access to psychiatrists and therapists
- Flexible video and phone options
- Ability to select same provider each session

### NEW to MDLIVE

Chronic care management for hypertension

Virtual Urgent Care from MDLIVE<sup>®</sup>

**\$121**

weighted average savings per visit compared to more costly channels<sup>3</sup>

In low-acuity urgent care episodes, MDLIVE<sup>®</sup> visits generated

**11%**

fewer-than-expected follow-up visits for the same condition than brick-and-mortar providers<sup>4</sup>

**16% less**

duplication of care in urgent care visits vs. other virtual PCPs and specialists<sup>4</sup>

1. Cigna provides access to virtual care through participating in-network providers. Not all providers have virtual capabilities. Cigna also provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas. 2. For legacy clients that have a non-zero preventive care benefit, customers' preventive benefit will be applied when receiving a virtual wellness screening. [https://www.mdliveforcigna.com/mdliveforcigna/landing\\_home](https://www.mdliveforcigna.com/mdliveforcigna/landing_home). 3. Cigna 2019–2020 analysis of total medical costs for medical customers with Cigna Virtual Care. Client results may vary. 4. Cigna "Episodes of Care study comparing virtual vs. brick-and-mortar visits." 2020 book of business. [Pricing study]. Client results may vary.



# 3 easy steps

to connect to  
MDLIVE virtual care



**MDLIVE**<sup>®</sup>

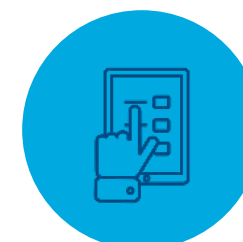
To schedule an appointment:



Access MDLIVE by logging into myCigna.com<sup>®</sup> and clicking on “Talk to a doctor.” You can also call MDLIVE at 888.726.3171. (No phone calls for virtual dermatology.)



Select the type of care you need: medical care or counseling; cost will be displayed on both myCigna.com and MDLIVE<sup>®</sup>.

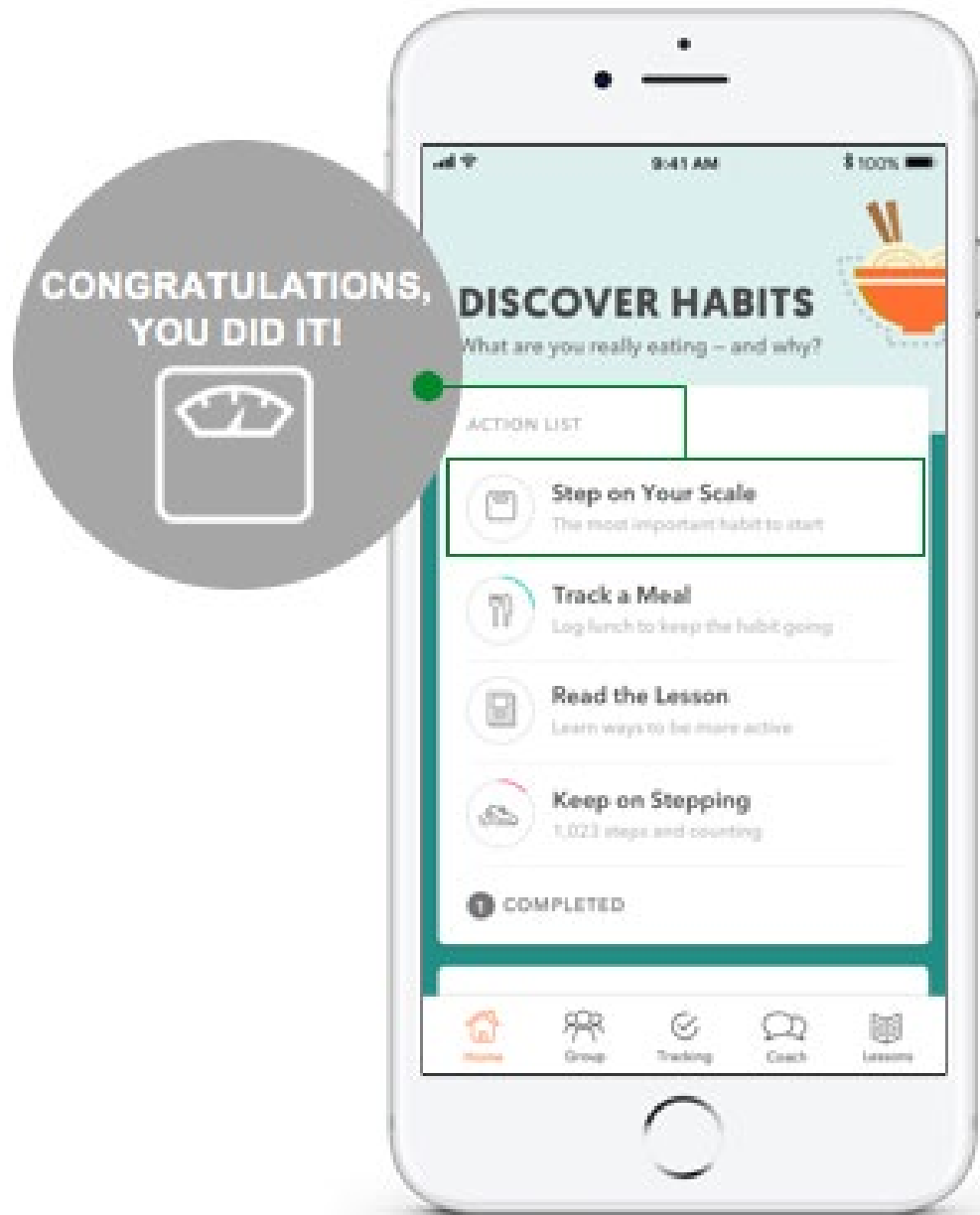


Follow the prompts for an on-demand urgent care visit, to make an appointment for primary or behavioral care, or to upload photos for dermatology care.

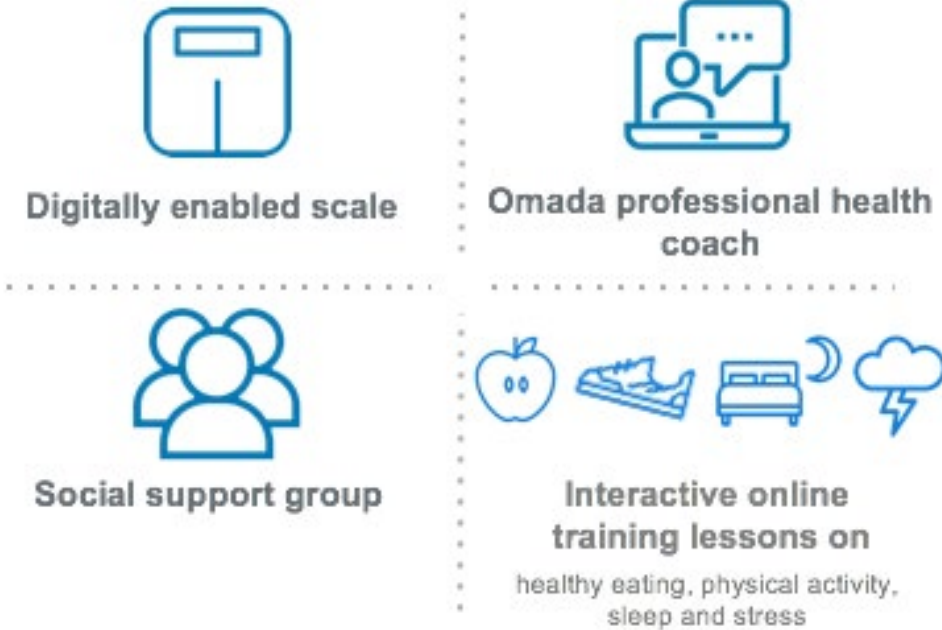
# Cigna diabetes prevention program

**In collaboration with Omada.**

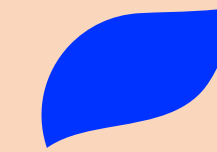
Digital support focused on reducing the risk of type 2 diabetes and heart disease through healthy weight loss, nutrition, sleep and exercise.



**Personalized tools  
at no extra cost to  
your employees\***



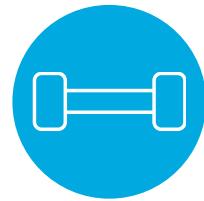
For illustrative purposes only.



## Building healthy habits that last

- Eat healthier – Learn the fundamentals of making smart food choices.
- Increase activity – Discover easy ways to move more and boost energy.
- Sleep better and stress less
- Overcome challenges – Gain skills that allow employees to break barriers to change.
- Strengthen habits – Zero in on what works and find lasting motivation.

# Cigna Healthy Rewards® discounts



## Fitness club memberships

Enjoy access to over 16,000+ local fitness centers and over 4,000 virtual workouts. Participating clubs are part of the Active & Fit network



## Specialty Provider Discounts

Get up to 25% off specialty health practitioner services including acupuncturists, chiropractors, massage therapists, physical and occupational therapists, podiatrists and registered dieticians.



## Yoga, Fitness and Wellness Products

Reduced pricing for Gaiam® yoga mats and fitness accessories, instructional yoga and digital DVDs.



## Wearable Fitness Devices

Track activity, exercise, sleep, and more with Fitbit & Garmin devices at a great discount.



## Hearing Exams and Hearing Aids

Save up to 40% on hearing testing and diagnostics and up to 25% on brand-name hearing aids through Amplifon. You'll also enjoy free screenings and follow-up visits along with a 60-day trial period and money back guarantee.



## Virtual Workouts

Get fit virtually and take advantage of more than 2,000 workouts a reduced month subscription rate from Daily Burn.



## Nutritional Home Delivery Meal Service

Mom's Meals are refrigerated meals that can be purchased for you or a loved one tailored to health needs (wellness, diabetic friendly, heart healthy, etc.) with free shipping.



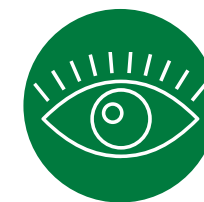
## Save With Cigna Vision

Discounts for routine vision services, exams and eyeglasses from more than 20,000 locations nationwide



## Financial Coaching

Speak with a dedicated Financial Coach that can help you save more, stress less and sleep better by improving your financial wellbeing through My Secure Advantage



## Laser Vision Correction (LASIK)

Enjoy freedom from glasses and contacts with LASIK. Cigna customers can receive up to \$800 off LASIK from one of 600 provider locations nationwide.

Healthy Rewards programs are NOT insurance. Rather, these programs give a discount on the cost of certain goods and services. The customer must pay the entire discounted cost. Some Healthy Rewards programs are not available in all states and programs may be discontinued at any time. Participating providers are solely responsible for their goods and services.



# MotivateMe

**MotivateMe** is Cigna's incentive program that combines rewards, technology and goal setting to inspire employees:

- To improve their health
- To take more action
- To earn more incentives.

**Everybody wins!**

The new MotivateMe goal period will begin January 1<sup>st</sup>, 2024. For the 2023 goal period, you are encouraged to go through your myCigna and try to complete the MotivateMe goals for 2023 to ensure you are able to earn and redeem your goals.



Health assessment

Biometric screening

Biometric outcomes

Apps and activities

Preventive care goals

Telephone coaching

Digital coaching

Maternity program

Centers of Excellence usage

Custom client goals

# Cigna Dental Benefits



# Cigna Dental Benefits



Cigna Dental Complete	High DPPO	Low DPPO
Annual deductible (per person/per family)	\$25/\$75	\$50/\$150
Calendar-year maximum	\$2,000	\$1,500
Preventive/diagnostic services	No charge	No charge
Basic services	10%	10%
Major services	20%	40%
Orthodontia	50%; \$2,000 max	50%; \$1,500 max

Benefits shown are for in-network providers and are based on negotiated fees. Out-of-network coverage is based on reasonable and customary (R&C) charges.



# Cigna Vision Benefits



# Cigna Vision Benefits



Cigna Blue View	Vision PPO
Exam (once per calendar year)	\$10
Prescription glasses	\$25
Lenses (once per calendar year)	Standard services included
Frames (once per calendar year)	\$130 retail allowance
Contact lenses (instead of glasses)	\$130 retail allowance





# Life and Disability Insurance (Mutual of Omaha)



# Life and Accidental Death and Dismemberment (AD&D)



Plan	Insurance Benefit Payment
Basic Life and AD&D Benefit <i>(Employer Paid Premium)</i>	\$50,000 <i>Benefits Reduce at age 65, see plan summary for details</i>
(Employee) Voluntary Life and AD&D <i>(Employee Paid Premium)</i>	\$10,000 increments to a maximum of \$300,000 or 5x salary, whichever is less  Guarantee Issue: \$100,000 This Guarantee Issue amount is only available during this Open Enrollment period
(Spouse) Voluntary Life and AD&D <i>(Employee Paid Premium)</i>	\$5,000 increments to a maximum of 100% of Employee's Benefit  Guarantee Issue: \$25,000 This Guarantee Issue amount is only available during this Open Enrollment period



# Evidence of Insurability (EOI) for Voluntary Life Insurance

Evidence of Insurability is required when an employee (and/or spouse) are **electing coverage above guaranteed issue amounts**, or if enrolling in after the first open enrollment.

To complete this form, please:

- visit: [EOI Link](#) Evidence of Insurability

You will receive an answer from the Mutual of Omaha Underwriting Department within 30 days.



**Group Life Insurance Evidence of Insurability Form**

Underwritten by: United of Omaha Life Insurance Company Home Office: Omaha, Nebraska

**Section 1: Employer Information** (Please print clearly. Required fields are marked with an asterisk (\*).)

Employer's Name*		Group ID Number*	
Street Address		Telephone (xxx)xxx-xxxx	
City*	State*	ZIP Code	

**Section 2: Employee Contact & Employment Information** (Please print clearly. Required fields are marked with an asterisk (\*).)

Last Name*		First Name*	Middle Name
Street Address*		Email Address	
City*	State*	ZIP Code*	Telephone* (xxx)xxx-xxxx
Full-Time Employment Date (MM/DD/YYYY)*		Job Title/Description*	

**Consent to Email Correspondence**

Check this box if you consent to receiving future correspondence regarding this form via email.

**Section 3: Applicant Information** (Please print clearly. Required fields are marked with an asterisk (\*).)

**Part A – Complete if the Employee is Applying for Coverage**

Birth Date (MM/DD/YYYY)*	State of Birth*	Gender*	Weight*	Height*	Annual Salary*
		<input type="checkbox"/> Female <input type="checkbox"/> Male	____ Pounds	____ Ft. ____ In.	\$

**Part B – Complete if Your Eligible Dependent Spouse is Applying for Coverage**

Last Name*		First Name*	MI
Birth Date (MM/DD/YYYY)*	State of Birth*	Gender*	Weight*
		<input type="checkbox"/> Female <input type="checkbox"/> Male	____ Pounds
			____ Ft. ____ In.

*Note: Use of the term "spouse" on this form refers to the person to whom you are legally married, or your domestic partner or equivalent, as recognized and allowed by federal law, or by state law in your state of residence.*

**Part C – Complete for Any Eligible Dependent Children Applying for Coverage**

Last Name*	First Name*	Gender*	Birth Date (MM/DD/YYYY)*	Weight*	Height*
		<input type="checkbox"/> Female <input type="checkbox"/> Male		____ Pounds	____ Ft. ____ In.
		<input type="checkbox"/> Female <input type="checkbox"/> Male		____ Pounds	____ Ft. ____ In.
		<input type="checkbox"/> Female <input type="checkbox"/> Male		____ Pounds	____ Ft. ____ In.
		<input type="checkbox"/> Female <input type="checkbox"/> Male		____ Pounds	____ Ft. ____ In.
		<input type="checkbox"/> Female <input type="checkbox"/> Male		____ Pounds	____ Ft. ____ In.

**Section 4: Requested Coverage Amount** (Please print clearly. Required fields are marked with an asterisk (\*).)

	Employee (IF APPLICABLE)	Spouse (IF APPLICABLE)	Each Child (IF APPLICABLE)
(1) Current Amount of Insurance*			
(2) Additional Requested Amount*			
(3) Total Amount (1+2)*			

7684GA-B-VTL-EZ 08 CA PAGE 1 OF 4 FORM CONTINUES ON PAGE 2



Plan	Insurance Benefit Payment
Short Term Disability <i>(Employer Paid Premium)</i>	60% of weekly salary to a maximum of \$2,500 per week  Benefits begin on the 8 <sup>th</sup> day of disability
Long Term Disability <i>(Employer Paid Premium)</i>	60% of monthly salary to a maximum of \$10,000 per month  Benefits begin after 90 days of disability



# Additional Benefits



Plan	Benefit
Employee Assistance Program <i>(Employer Paid Premium)</i>	There is no cost to employees for utilizing this benefit. For confidential consultation and resources, visit <a href="http://www.mutualofomaha.com/eap">www.mutualofomaha.com/eap</a> , or call 1-800-316-2796. Counselors are available for employees and/or dependents 24/7.
Travel Assistance <i>(Employer Paid Premium)</i>	This service is for employees and dependents when traveling more than 100 miles from home. Mutual of Omaha’s concierge service team can be reached 24/7 just by calling 1-800-856-9947 within US, or 312-935-3658 outside the US (call collect)
Will Preparation <i>(Employer Paid Premium)</i>	Online will preparation <u>is</u> available from Mutual of Omaha. Simply log on to <a href="http://www.willprepservices.com">www.willprepservices.com</a> and register using the code “mutual-wills”



# Flexible Spending Accounts (FSA) and Commuter Benefits



# Flexible Spending Accounts (FSA) and Commuter Benefits



## FSA and Commuter Plans

**Full Purpose** Healthcare Spending Account (WageWorks)

This account is for **non-HSA participants** used to reimburse for out-of-pocket health care expenses such as deductibles, office visit copays, prescription copays, dental and vision expenses. The maximum an employee can contribute to the Full Purpose Healthcare Spending Account is \$3,050/year. **(Only non-HSA medical plan enrollees are allowed to enroll on this plan)**

**(New)**  
**Limited Purpose** Healthcare Spending Account

This account is designed for **HSA participants** and is used to reimburse for out-of-pocket **dental and vision expenses only**. The maximum employees can contribute to the Limited Purpose Healthcare Spending Account is \$3,050/year. **(Only HSA medical plan enrollees are allowed to enroll on this plan)**

Dependent Care Spending Account (WageWorks)

This account is used to reimburse expenses related to the care of eligible dependents while employees and their spouse work. The maximum employees can contribute to the Dependent Care Spending Account is \$5,000/year if they are single or married and filing jointly, or \$2,500/year if they are married and filing separately.

Commuter Benefits (WEX, formerly Discovery Benefits)

This account is used to pay for commuting expenses, such as transit and parking, tax-free. Employees can purchase a variety of products to use for commuting and can elect to have their order recur each month. The IRS limit is \$300/month for parking and \$300/month for public transportation or vanpooling.



# Flexible Spending Accounts

- Remember to estimate carefully
  - FSAs are “use-it-or-lose-it” accounts. You will forfeit any amount remaining in the account at the end of the 2.5 month grace period from the end of the plan year.

## HSA vs. Health Care FSA: What's the difference?

	HSA	Health Care FSA
Available if you enroll in a ...	HDHP	PPO Plan
Eligible for company contributions	Yes	No
Change your contribution amount any time	Yes	No
Access your entire annual contribution amount from the beginning of the plan year	No	Yes
Access only funds that have been deposited	Yes	No
“Use-it-or-lose-it” at year-end	No	Yes
Money is always yours to keep	Yes	No





# Next Steps



# Required Actions



- Log in to [Workforcenow.ADP.com](https://workforcenow.adp.com) the Qualitest benefits enrollment system to make your 2024 benefit elections
- If you do not wish to make any changes your current benefit elections will automatically rollover to the new plan year.
- You **must re-enroll on the FSA** plan if you wish to continue this benefit in 2024
- Important Dates:
  - Open Enrollment begins - Wednesday November 1<sup>st</sup>
  - Open Enrollment ends – **Friday November 17<sup>th</sup>**
- Your Open Enrollment benefit elections will become effective January 1, 2024





Acrisure (formerly Filice Insurance), Qualitest benefits broker, has a team of benefits representatives who can offer health benefits support at anytime, including:

- Answering benefit questions
- Plan education
- Claims
- Eligibility issues



The Acrisure team can be reached by email at [qualitestbenefits@filice.com](mailto:qualitestbenefits@filice.com) or

You can reach out to the Qualitest HR Team for assistance at [benefits@qualitestgroup.com](mailto:benefits@qualitestgroup.com)

Employees can view detailed plan descriptions and documents on the [Qualitest benefits website](#):

<https://mybenefits.cc/qualitest>

All official plan documents relating to the Employee Benefits Program, including the Summary Plan Descriptions, HIPAA Privacy Notice, Initial COBRA Notice, Medicare Part D Notice and any other relevant Plan Documents or Notices, will be made available electronically through the employee benefits website. You may also receive a paper copy by contacting the Qualitest HR Team.



# Q&A

# Thank You