

# THE YAHNIS COMPANY

## 2016 EMPLOYEE BENEFITS ENROLLMENT GUIDE



CLARKE & COMPANY  
BENEFITS LLC

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*The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this Guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies, or errors are always possible. In case of discrepancy between the Guide and the actual plan documents, the actual plan documents will prevail. The plan documents will govern all plans covered in this Guide. The Guide is not a contract or a guarantee of your eligibility or benefit. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about your Guide, contact Human Resources. If you sign up for coverage that requires evidence of insurability, even though deductions may start, you are not considered enrolled in the plans until confirmed by the carrier. If declined, you will be reimbursed. You can access benefit information at the following link :<http://clarkebenefits.com/the-yahnis-company-model-notices/>*

, NOW IS THE OPPORTUNITY TO CHOOSE THE BENEFITS THAT ARE BEST FOR YOU AND YOUR LIFESTYLE. THIS BENEFIT ENROLLMENT PERIOD IS YOUR CHANCE TO REVIEW YOUR CURRENT ELECTIONS AND MAKE ANY CHANGES FOR YOU AND YOUR FAMILY. THIS GUIDE HAS BEEN PREPARED WITH ALL THE INFORMATION YOU NEED TO CHOOSE YOUR BENEFITS FOR YOUR 2016/2017 ELECTIONS.

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## WHO IS ELIGIBLE

If you are a Yahnis Company regular full-time employee, you are eligible for benefits. Employees who work 30 hours a week and are not temporary are considered full time employees. You are also eligible to cover your family members in the medical, dental, and voluntary life insurance, through Yahnis Company employer sponsored benefit plans.

### HOW TO ENROLL

The first step is to review your current benefit elections on page 11. Your current coverage's renew on October 1, 2016. We are moving to BlueCross BlueShield for the 2016/2017 plan year. If you would like to make a

change at this time, you can fill out a change form.

### WHEN TO ENROLL

If you are on the current Yahnis Company health plan, you have already been enrolled with BlueCross BlueShield at your current coverage election. If you would like to make any changes you can during this time by filling out a change form. After open enrollment, which concludes on 9/30/2016, to make any changes you will have to have a qualifying change in status.

Qualified changes in status include: marriage, divorce, legal separation, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, change in residence due to an employment transfer, commencement or termination of adoption proceedings, or change in spouse's employment status

### CONTRIBUTION

The Yahnis Company contributes toward medical & dental coverage, and provides employees Basic Life, Long Term & Short Term Disability coverage at no charge to you.

# 2016/2017 COSTS OF COVERAGE

Medical Benefits	Employee Weekly Deductions			
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
Medical Plan Costs	\$35.09	\$177.74	\$144.70	\$289.05

BlueCross BlueShield	Medical Benefits
	Point of Service Benefits
Primary Care Physician	\$30 co-pay
Specialist Physician	\$60 co-pay
Preventive Screenings (HCR A&B)	\$0 co-pay
Preventive Maximum	Unlimited
Urgent Care	\$30 co-pay
Chiropractic	\$30 co-pay, \$1,000 annual max
Emergency Room	\$250 co-pay
Prescription Drugs	\$15 Generic \$40 Preferred \$70 Non-Preferred \$125 Specialty
	Major Medical Benefits
Deductible	\$3,000 (2x per family)
Coinsurance	\$3,000 (2x per family) 70% BCBS/ 30% employee
Max. Out of Pocket	\$6,850 (2x per family) Includes Copays, Deductible, and Coinsurance
Hospital In and Out-Patient	Deductible & Coinsurance
Lifetime Maximum	Unlimited
	Out of Network Benefits
Deductible	\$6,000 (2x per family)
Coinsurance	\$6,000 (2x per family) 50% BCBS/ 50% employee
Max. Out of Pocket	\$12,000 (2x per family) Includes Copays, Deductible, and Coinsurance
Hospital In & Out Patient	Deductible & Coinsurance



# Health Incentive Account

## Get rewarded for making healthy choices

With a Health Incentive Account (HIA), it pays to take care of your health. This is a *free* incentive program that encourages you to take simple steps toward a healthier lifestyle. By participating, you can lower your health plan deductible!

### *How does it work?*

Choose up to two of the activities on the next page. After you complete an activity, we will automatically apply credit to your current, annual deductible amount. You may complete two activities per benefit year, prior to meeting your deductible. Once you meet your deductible, you are unable to earn credits until your next benefit year begins.

### *Who can participate?*

Employees and their spouses can earn deductible credits. Dependents are not eligible.




### *Your activity dashboard*

Visit your online Rewards dashboard to see eligible activities and track your progress.

 Go to [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com) and log in to **My Health Toolkit**<sup>®</sup>. Select the **Wellness** tab, then select **Rally**.

### *Where can you see the deductible credits you've earned?*

The deductible credit(s) will appear in your summary explanation of benefits (EOB).

 To view your online EOB, log in to **My Health Toolkit**. Under **Health Claims** on the main page, click **View More Health Claims**, then **View Your Summary Explanation of Benefits**.

### *Don't miss out!*

Each HIA activity is worth: **\$375**

## How to earn deductible credit

### Step 1: Complete your health survey

Take a fun and interactive health survey to get your Rally age — a number that can be higher or lower than your physical age based on your lifestyle and risk factors. Rally is a product of Rally Health, Inc., an independent company that offers a digital health platform on behalf of your health plan.



To take your health survey:

- Go to **www.SouthCarolinaBlues.com**
- Log in to your **My Health Toolkit** account.
- Select the **Wellness** tab, then click **Rally**.

### Step 2: Choose a second activity to complete

#### Option 1: Complete three missions

Improve the way you move, care, feel or eat by adding missions to your daily routine. You can choose missions as soon as you receive your Rally age. Make sure you follow the instructions to check in daily or weekly. After four weeks, your mission is complete!



To select missions:

- Log in to **My Health Toolkit**.
- Select the **Wellness** tab, then click **Rally**.
- Inside your Rally account, select the **Missions** tab.

#### Option 2: Have a wellness exam

Complete your annual physical using an in-network doctor. Women may complete a routine physical or an annual gynecological exam. Once your doctor files the claim for your visit, you will automatically receive HIA credit. Schedule your exam as far in advance as possible to ensure you receive the credit before the end of your benefit year.



To find a doctor in your network:

- Log in to **My Health Toolkit**.
- Select the **Resources** tab.
- Select **Find a Doctor or Hospital**.



## DENTAL

Our dental plan is administered by Delta Dental. Our plan includes coverage for preventive, basic, and major dental services (see certificate for full coverage details). You may visit the dental provider of your choice but we also have a network available. Costs using a network provider are lower than a non-network provider. You can access the provider network by going to [www.deltadentalsc.com](http://www.deltadentalsc.com). You do not have to be the medical plan to have dental coverage. There are 4 tiers of coverage for you to choose from.

Dental Benefits	Employee Weekly Deductions			
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
Dental Plan	\$1.59	\$6.89	\$10.35	\$15.27

Delta Dental	In and Out of Network	
	Plan Benefits	
Preventive	Pays 100% of costs (UCR)	
Basic Services	80%	
Major Services	50%	
Deductible	\$50/individual \$150/family	
Annual Maximum/Insured	\$1,500	
Orthodontia	Child Only (up to 19)	
Orthodontia Services	50%	
Lifetime Ortho Maximum	\$1,000	

## Vision

Our vision plan is administered by Physicians EyeCare Plan. You may visit the vision provider of your choice but we also have a network available. Costs using a network provider are lower than a non-network provider. You can access the provider network by going to [www.physicianseyecareplan.com/members/](http://www.physicianseyecareplan.com/members/). You do not have to be on the medical plan to have vision coverage. There are 3 tiers of coverage for you to choose from.

Vision Benefits	Employee Weekly Deductions		
	Employee Only	Employee + 1	Employee & Family
Vision Plan	\$1.82	\$3.83	\$5.63

PEP	In Network Benefits	
	Plan Benefits	
Eye Exam	Annually	
Material Allowance	\$150	
Plan Length	12 months	
Material Co-pay (one-time)	\$20	
Exam co-pay	\$10	
Additional Discounts	20% discounts on glasses and 15% discounts on contacts after material allowance. There are also discounts on contact lens fitting exams and a 10-15% discount on LASIK	

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Long Term Disability	Sunlife
	Plan Benefits
Monthly Benefit Max	\$
Income Replaced	60%
Elimination Period	90 days
Partial Disability Paid	Yes
Benefit Payable	To SSNRA*
Cost of Coverage	Provided at no cost by The Yahnis Company

\*Social security normal retirement age.

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Short Term Disability	Sunlife
	Plan Benefits
Weekly Benefit Max	\$1,000
Income Replaced	60%
Elimination Period	8 day accident/8 days sickness
Partial Disability Paid	Yes
Benefit Payable	12 weeks
Cost of Coverage	Provided at no cost by The Yahnis Company

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### LONG- TERM & SHORT- TERM DISABILITY

Yahnis Company provides employees with a Long Term and Short Term Disability plan. Your Long Term plan covers you up to 60% of your income to a maximum of \$ per month. The plans benefit period continues until you reach your social security normal retirement age (see certificate). Your Short Term plan covers you up to 60% of your income to a maximum of \$1,000 per week with a 12 week benefit period. Pre-existing conditions may apply.

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## LIFE INSURANCE & VOLUNTARY LIFE INSURANCE

### Sunlife

Employees are provided with Group Basic Term Life in the amount of 1 x your annual salary per employee at no cost to you. Our coverage includes accidental death & dismemberment coverage. For AD&D our plan pays up to \$50,000 of benefit (See the certificate of coverage for dismemberment benefits). Our coverage may be portable and/or convertible to you if you meet certain requirements\*. You have 31 days from the date of termination to contact Sunlife to port or convert your coverage (see HR for details). The Yahnis Company also offers the ability to purchase additional amounts of coverage through payroll deductions. You can purchase coverage on yourself, your spouse and dependents. This coverage is guarantee issue (no health questions asked) at initial enrollment after your date of hire. If you wish to pick up coverage at a later date you will be subject to evidence of insurability (required to fill out a health questionnaire). You must elect life insurance for yourself to be eligible to cover your family members. **Your dependent life insurance amount cannot exceed 50% of your life insurance coverage.**

#### Voluntary Life Insurance

#### EMPLOYEE COVERAGE

##### EMPLOYEE WEEKLY DEDUCTIONS

Benefit Amount	10k	20k	30k	40k	50k	60k	70k	80k	90k	100k	110k	120k	130k	140k	150k
Employee Cost															

#### Voluntary Dependent Life Insurance

#### SPOUSE COVERAGE

##### EMPLOYEE WEEKLY DEDUCTIONS

Benefit Amount	10k	15k	20k	25k
Employee Cost				

#### Voluntary Dependent Life Insurance

#### CHILD(REN) COVERAGE

	Option 1 Coverage	Option 2 Coverage
Birth to 6 months	\$1,000	\$1,000
6 months to age19	\$5,000	\$10,000
Cost		

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## HEALTH CARE AND DEPENDENT CARE FLEXIBLE BENEFIT ACCOUNTS

The Yahnis Company provides you the opportunity to pay for out-of-pocket medical, dental, vision, and dependent care expenses with pre-tax dollars through Flexible Spending Accounts. You must enroll in the plan to participate for the plan year October 1, 2016 – September 30, 2017. You can save approximately 25% of each dollar spent on these expenses when you participate in a FSA.

A health care FSA is used to reimburse out-of-pocket medical expenses incurred by you and your dependents. A dependent care FSA is used to reimburse expenses related to care of eligible dependents while you and your spouse work.



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, or state/local income taxes on the portion of your paycheck you contribute to your FSA. You should contribute the amount of money you expect to pay out of pocket for eligible expenses for the plan period. If you do not use the money you contributed to the FSA it will not be refunded to you nor will it be carried forward to a future plan year. This is the use-it-or-lose-it rule.

The maximum that you can contribute to the Health Care Flexible Spending account is \$2,550 per year.

The maximum that you can contribute to the Dependent Care Flexible Spending Account is \$5,000 if you are married and filing jointly, or \$2,500 if you are single or married and are filing separately.

# YOUR CURRENT ELECTIONS & NEW DEDUCTIONS FOR THE 2016/2017 PLAN YEAR

Employee:

Effective Date of Benefits:

## PRE-TAX BENEFITS

	Coverage	Deduction Amount
Medical		
Dental		
Vision		
Flex Plan/Dependent Care		
Total Pre-Tax Deduction		

## POST-TAX BENEFITS

	Coverage	Deduction Amount
Group Term Life	Yes	Yahnis Paid
Short-Term Disability	Yes	Yahnis Paid
Long-Term Disability	Yes	Yahnis Paid
Voluntary Life		
Vol. Spouse Life		
Vol. Child(ren) Life		
Total Post-Tax Deduction		
Total Deductions Per Pay Period		



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## CONTACT INFORMATION & RESOURCES

### Clarke & Company Benefits Contact Information

Columbia: 803-253-6997

All other locations: 888-540-9403

Edwin Croft, Client Manager: [ecroft@clarkebenefits.com](mailto:ecroft@clarkebenefits.com)

Michael Wolfe, Client Manager: [mwolfe@clarkebenefits.com](mailto:mwolfe@clarkebenefits.com)

Amy Colgate, Account Manager: [acolgate@clarkebenefits.com](mailto:acolgate@clarkebenefits.com)

### Clarke & Company Benefits Resources:

C&C University: <http://clarkebenefits.com/cc-university-yahnis-company/> Password: Yahnis01

Employee Model Notices: <http://clarkebenefits.com/the-yahnis-company-model-notices/>

### BlueCross BlueShield:

Website: [www.southcarolinablues.com](http://www.southcarolinablues.com) -Here you can find an in-network, and much more!

### Delta Dental

Website: [www.deltadentalsc.com](http://www.deltadentalsc.com)

- Click "Find a dentist" on the right hand side of the page to find a provider near you.

### More Benefit Information

You can access more benefit information online at:

<http://clarkebenefits.com/the-yahnis-company-model-notices/>

Find benefit summaries, network info, certificates of coverage, and much more.

