



Fellowship Greenville 2017 Benefits Guide

CLARKE & COMPANY BENEFITS



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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 discrepencies, or errors are always possbile. In case of discrepency 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, contat 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/southside-fellowship/

NOW IS THE OPPORTUNITY TO CHOOSE THE BENEFITS
THAT ARE BEST FOR YOU AND YOUR PLACE IN LIFE. 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 2017 ELECTIONS.

WHO IS ELIGIBLE

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

HOW TO ENROLL

As our annual renewal approaches we will be having meetings on May 3rd at 1:00. Once we have this meeting the online enrollment tool will be open to

confirm benefits or change benefits.
The link is:

https://southside.empowhr.com/login.aspx

WHEN TO ENROLL

The enrollment tool will be open on May 4rd. We will close the annual open enrollment on May 11th.

You will not be allowed to make changes until next renewal (May) without a qualifying event. Please see below for an overview. 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

Fellowship Greenville contributes toward medical & dental coverage and provides employees basic Life Insurance and long term disability. You have the option of purchasing more life coverage through payroll deduction.

Available to you now is an accident plan and a critical illness plan.

2017 COSTS OF COVERAGE

Coinsurance

Medical Cost	Employee Monthly Deductions						
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family			
Traditional Health Plan	\$131.34	\$442.01	\$383.56	\$652.68			
HDHP Health Plan	\$85.55	\$373.43	\$319.64	\$560.89			
Blue Cross Blue							
Shield	Traditio	nal Plan	HDHP Plan				
Health Plan		Point of Service Benefits					
Primary Care Physician	\$25 (co-pay	Deduc	ctible			
Specialist Physician	\$40 (co-pay	Deduc	ctible			
Preventive Screenings							
(HCR A&B)	\$0 c	o-pay	\$0 co-pay				
Preventive Maximum							
Urgent Care	\$25/\$40 (depend	ls on how they file)	Deduc	ctible			
Chiropractic	Discount and applied to the deductible		Deduc	ctible			
Emergency Room Facility	Deductible/	Coinsurance	Deduc	ctible			
	\$20 Generic,	\$40 Preferred,					
Prescription Drugs	\$70 Non-	preferred	Deduc	ctible			
		Major Med	ical Benefits				
Deductible	\$2000 (2	x family)*	\$3500 (2x family) Now embedded				
Max. Out of pocket	\$2000 (2	2x family)	NA				
ACA Max OOP	\$7150 (2	2x family)					
Coinsurance	60% BCBS/40% employee		100%				
Hospital In and Out-Patient	Deductible &	Coinsurance	Deduc	ctible			
		Out of Netw	ork Benefits				
Deductible	\$10,000	(2x family)	\$5200 (2x family)				
Max. Out of pocket	\$10,000	(2x family)	\$5200 (2x family)				
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^{*}On both plans – you can earn up to 2 credits valued at \$250 (PPO Plan) \$375 (HDHP Plan) each. You can do this by following the HIA overview on the website. . Credits are automatically applied.

50% BCBS/50% employee

60% BCBS/40% employee

Dental Cost		Employee M	Ionthly Deductions	
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
BCBS Dental Plan	\$21.10	\$64.88	\$64.88	\$64.88
Fellowship Greenville Cost	\$21.10	\$64.88	\$64.88	\$64.88

DENTAL

Blue Cross Blue Shield	In and Out of Network				
	Plan Benefits				
Preventive	Pays 100% of costs (UCR)				
Basic Services	80%				
Major Services	50%				
Deductible	\$50/individual \$150/family (does not apply in network)				
Annual Maximum Per Insured	\$1250				
Orthodontia	Child only (up to 19) – Covered at 50%				
Lifetime Orthodontia Maximum	\$1250				

We offer employees and their families a comprehensive dental plan. Our dental plan is administered by BCBS. 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.bcbssc.com and entering your zip code to find a dentist near you.



Vision Cost	Employee Monthly Deductions					
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family		
PEP Base Vision Plan	\$4.25	\$8.50	\$8.25	\$13.95		
PEP Buy Up Vision Plan	\$10.90	\$21.80	\$21.20	\$34.90		

VISION

Plan	In and Out of Network Plan Benefits		
	Base Plan	Buy Up Plan	
Eye Exam	Annual	Annual	
Material Allowance	NA	\$200	
Plan Length	12 Months	12 Months	
Material Copay	No Copay - Discount Only	\$25	
Exam Copay	\$15	\$15	

We offer employees and their families' two valuable vision options. Our vision plan is administered by Physicians Eye Care Plan. The two options allow us to fit most of your vision needs (see certificate for full coverage details). For a list of network providers please see the link below.

http://physicianseyecareplan.com/members/

Use network tool to the right of this page or find a provider link in the middle of the page.



LIFE INSURANCE & VOLUNTARY LIFE INSURANCE

Mutual of Omaha

Employees working 30 hours/week are provided with Group Basic Term Life in the amount of \$25,000 per employee at no cost to you. Our coverage includes accidental death & dismemberment coverage (See the certificate of coverage for dismemberment benefits). We also offer 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. If you didn't elect coverage at your initial enrollment EOI will be needed. See the chart below for the cost of voluntary term life insurance for yourself. Coverage can be purchased for the employees in \$10,000 increments and the spouses in \$5000 increments. Guarantee issue at initial enrollment is up to \$100,000 (employee), but the employees can buy up to 5x salary or a max of \$500,000 with evidence of insurability filled out (located on the empowHR website). Guarantee issue for spouse at initial enrollment is \$50,000 with max benefit of \$100,000. Spouse's benefit cannot exceed 50% of what the employee elects. All premiums are based on the employee's age. Child(ren) available, minimum of \$2,000 max of \$10,000.

		EMPLOYEE MONTHLY DEDUCTIONS								
Age	10k	20k	30k	40k	50k	60k	70k	80k	90k	1 00k
<30	0.80	1.60	2.40	3.20	4.00	4.80	5.60	6.40	7.20	8.00
30-34	0.90	1.80	2.70	3.60	4.50	5.40	6.30	7.20	8.10	9.00
35-39	1.11	2.20	3.30	4.40	5.50	6.60	7.70	8.80	9.90	11.00
40-44	1.70	3.40	5.10	6.80	8.50	10.20	11.90	13.60	15.30	17.00
45-49	2.90	5.80	8.70	11.60	14.50	17.40	20.30	23.20	26.10	29.00
50-54	4.70	9.40	14.10	18.80	23.50	28.20	32.90	37.60	42.30	47.00
55-59	7.40	14.80	22.20	29.60	37.00	44.40	51.80	59.20	66.60	74.00
60-64	11.50	23.00	34.50	46.00	57.50	69.00	80.50	92.00	103.50	115.00
65-69	20.70	41.40	62.10	82.80	103.50	124.20	144.90	165.60	186.30	207.00

LONG TERM DISABILITY

Fellowship Greenville also pays 100% of your long term disability plan with Mutual of Omaha. These benefits are taxable in the event of a disability.

Mutual of Omaha	LTD	
	Plan 1 Benefits	
Monthly Benefit	Up to a max. of \$5000 per month	
Income Replaced	66 2/3%	
Elimination Period	90 days	
Partial Disability Paid	Yes	
Benefit Payable	SSNRA*	
Cost of Coverage	Paid for By Fellowship Greenville	
		_

^{*}Social security normal retirement age.

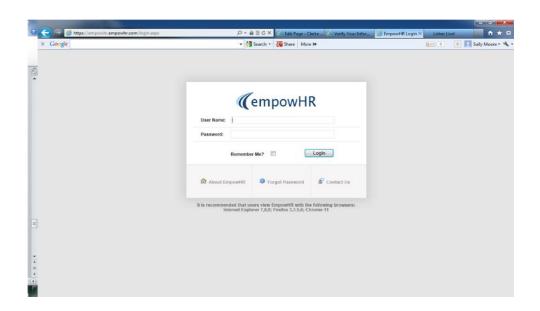


Want to get healthy.
Go to the C&C University
on the Clarke & Company
website and learn more
about living a healthy
lifestyle.

empowHR ONLINE ENROLLMENT

All benefits (medical, dental, life insurance, disability insurance, flex spending & health savings) will be enrolled through the empowHR online election portal. Online elections can start on May 4st. and close on May 11th. Your log in is https://southside.empowhr.com/login.aspx Your empowHR username will be the first letter of your first name, then your last name, plus the last four digits of your social security number. For example, John Doe's username will be jdoe1234. Your empowHR password will default to your social security number. Upon your first login, you will be prompted to change your password prior to enrollment. The empowHR login screen is below. You can find out more information online at the:

http://clarkebenefits.com/southside-christian/. If you have any questions on the enrollment process please contact Laura Howell at Clarke & Company Benefits at 888-540-9403 or 803-253-6997 or by email at acolgate@clarkebenefits.com.

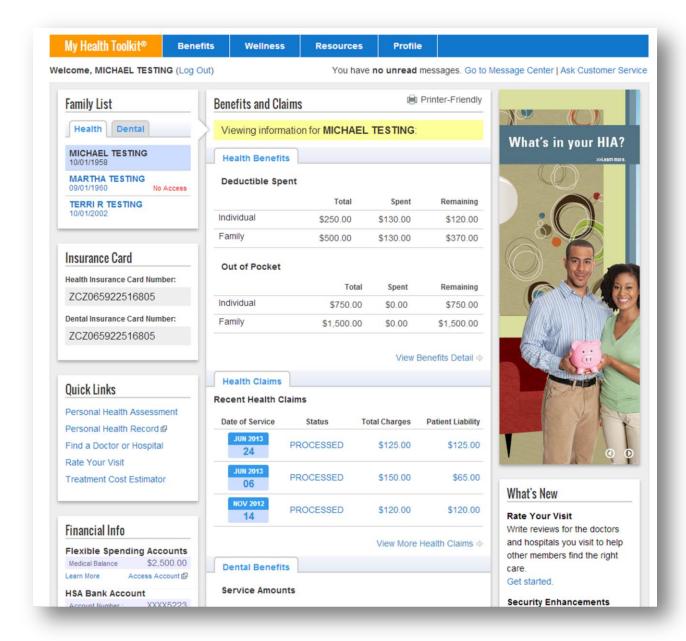


CURRENT COVERAGES

Your current benefit elections are on the empowHR website when you log in. You will have to go online and sign up for new benefits unless you are not changing your elections. If you elect a benefit that requires evidence of insurability, you will not be enrolled in that benefit plan until you have been approved by the carrier. You will find the EOI (evidence of insurability) form on empowHR.

MY HEALTH TOOKIT

Blue Cross Blue Shield has a great online resource call "My Health Toolkit". On this site, you can view your explanation of benefits, do a treatment cost estimator, view the estimated cost of a prescription and so much more. You can also do your Health Risk Assessment. If you are on the PPO plan (traditional plan) you will receive \$250 per credit or \$375 on the HDHP Plan. The credits will automatically be applied to your deductible, and you can do 2 per year. If you have never logged on to "My Health Toolkit" you will need your member number and will need to create a profile. The link for my health toolkit is below.



https://member.southcarolinablues.com/wps/portal/scm/member/home

FLEXIBLE SPENDING

Fellowship Greenville provides you the opportunity to pay for out-of-pocket medical, dental, vision, and dependent care expenses with pre-tax dollars through the Flexible Spending Account. The maximum you can contribute for 2016 is \$2550. You can also contribute through the plan for dependent care expenses. The maximum you can contribute for 2016 is \$5,000 if you are a single employee or married filing jointly, or \$2,500 if you are married and filing separately.

HEALTH SAVINGS ACCOUNT

The Health Savings Account is still an option for those enrolled in the High Deductible Health Plan. The 2017 limits are \$3400 for those covered on the plan as single and \$6750 for those covered as family (or employee/spouse and employee/child.) If you are over 55 there is a \$1000 catch up allowed. Accounts are held at Greenville First. Employees over 65 cannot contribute to a H S A if you are enrolled in Medicare Part A or B.

BENEFIT WEBPAGE

We have created a webpage for Fellowship Greenville. This webpage houses all of your benefit summaries for medical, dental, vision, disability and life. Also found on this webpage will be all of the required documents for HealthCare Reform. The CHIPRA notice, Summary of Benefits and Coverage, Women's Health Notice, and many more. We want to make it easier for you to manage your benefits; on this webpage we also have your Blue Cross preferred drug list, quantity management list for prescriptions and prior authorization drug list. The link to this site: http://clarkebenefits.com/southside-fellowship/



PHYSCIAN NETWORK INFORMATION

Blue Cross Blue Shield

Website: http://www.bcbssc.com/members/findaprovider.aspx

Doctor and Hospital finder

Enter in doctor's name or specialty and your zip code.

DENTAL NETWORK INFORMATION

Blue Cross Blue Shield

Website: http://www.bcbssc.com/members/findaprovider.aspx

VISION NETWORK INFORMATION

Physicians EyeCare Plan

Website: http://physicianseyecareplan.com/

Members on the top tool bar

On the right side of the page fill in zip code or doctors name to locate of doctor.

CONTACT INFORMATION & RESOURCES - CLARKE AND COMPANY BENEFITS

Greenville: 864-232-6723 Columbia (Laura/Amy): 888-540-9403

Jennifer Holly, Client Manager: jholly@clarkebenefits.com

Laura Howell, Account Manager: lhowell@clarkebenefits.com

Amy Colgate, Account Manager: acolgate@clarkebenefits.com

C&C University: http://clarkebenefits.com/cc-university-2/ Password: Clarke01

Employee Model Notices and contracts: http://clarkebenefits.com/southside-fellowship/