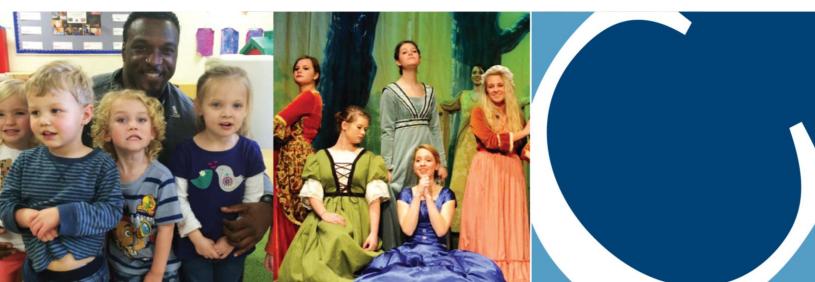




# Southside Christian 2015 Benefits Guide

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 benfeits, discrepencies, or errors are always possible. 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: <a href="https://clarkebenefits.com/southside-christian/">http://clarkebenefits.com/southside-christian/</a>

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 2015 ELECTIONS.

## WHO IS ELIGIBLE

If you are a Southside Christian School regular full-time employee, you are eligible for benefits. Employees who work 1500+ hours per year 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 Southside Christian School employer sponsored benefit plans.

#### HOW TO ENROLL

As our annual renewal approaches we will be having meetings on April 29<sup>th</sup> at 2:00 and 3:30. 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 April 30<sup>th</sup>. We will close the annual open enrollment on May 13<sup>th</sup> You will not be allowed to make changes until renewal (May 2016) 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**

Southside Christian School contributes toward medical and dental coverage and provides employees with Basic Life Insurance and Long Term Disability. You have the option of purchasing more life coverage through payroll deduction.

# 2015 COSTS OF COVERAGE

Medical Cost		Employee M	Ionthly Deductions	
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
Traditional Health Plan	\$88.90	\$368.76	\$320.60	\$589.56
HDHP Health Plan	\$49.67	\$287.02	\$246.62	\$469.20
SCS Cost	\$340.00	\$490.00	\$460.00	\$660.00

Blue Cross Blue		
Shield	Traditional Plan	HDHP Plan
Health Plan	Point of Servic	e Benefits
Primary Care Physician	\$25 co-pay	Deductible
Specialist Physician	\$40 co-pay	Deductible
Preventive Screenings		
(HCR A&B)	\$0 co-pay	\$0 co-pay
Preventive Maximum		
Urgent Care	\$25/\$40 (depends on how they file)	Deductible
Chiropractic	Discount and applied to the deductible	Deductible
Emergency Room Facility	Deductible/Coinsurance	Deductible
	\$20 Generic, \$40 Preferred,	
Prescription Drugs	\$70 Non-preferred	Deductible
	Major Medica	I Benefits
Deductible	\$2000 (2x per family)*	\$3500 (2x family)
Max. Out of pocket	\$2000 (2x per family)	NA
Coinsurance	60% BCBS/40% employee	100%
Hospital		Deskertikle
In and Out-Patient	Deductible & Coinsurance	Deductible
Lifetime Maximum	Unlimited	Unlimited
	Out of Networ	k Benefits
Deductible	\$10,000 (2x family)	\$5200 (2x family )
Max. Out of pocket	\$10,000 (2x family)	\$5200 (2x family)
Coinsurance	50% BCBS/50% employee	60% BCBS/40% employee
Lifetime maximum	Unlimited	Unlimited

\*On both plans – you can earn up to 2 credits valued at \$250 (PPO Plan) \$437.50 (HDHP Plan) each. You can do this by doing two of the following: annual

physical, joining weight management, maternity management, or filling out the health risk assessment online. Credits are automatically applied.

<b>Dental Cost</b>		Employee N	Ionthly Deductions	
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
MetLife Dental Plan	\$15.60	\$46.06	\$46.06	\$46.06
SCS Cost	\$15.60	\$46.05	\$46.05	\$46.05

# DENTAL

MetLife	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 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 MetLife. 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 <u>www.metlife.com</u> and entering your zip code to find a dentist near you.



Vision Cost		Employee N	Ionthly 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 Ben	efits
	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**

Regular full-time employees working 1500 or more hours per year 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. We have secured a true open enrollment for the voluntary life product; this means that if you have not been declined before you can enroll in the guarantee issue amount. Please 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. A spouse's benefit cannot exceed 50% of what the employee elects. All premiums are based on the employee's age. Child(ren) can be insured with a minimum of \$2,000 and max of \$10,000.

				EMP	LOYEE MC	NTHLY DE	DUCTIONS	i		
Age	10k	20k	30k	40k	50k	60k	70k	80k	90k	100k
<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

Southside 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 Southside Christian School

\*Social security normal retirement age.



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lifestyle.

# empowHR ONLINE ENROLLMENT

All benefits (medical, dental, life insurance, disability insurance, flex spending and health savings) will be enrolled through the empowHR online election portal. Online elections can start on April 30th and close on May 13th. Your log in is <u>https://southside.empowhr.com/login.aspx</u> 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: <a href="http://clarkebenefits.com/southside-christian/">http://clarkebenefits.com/southside-christian/</a>. If you have any questions on the enrollment process please contact Amy Colgate at Clarke & Company Benefits at 888-540-9403 or 803-253-6997 or by email at acolegate@clarkebenefits.com.

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https://empowin.empowihr.com/login.aspx	오 ~ 🔒 🖹 C × 📝 Edit Page : Clarke 🖉 Verify Your Infor 🦉	EmpawHR Login 🛠 🛛 Listen Livel 👘 🖈 🖇
× Google	- 🎦 Search - 📓 Share More >>	😥 0 🛛 🚺 Sully Moore + 🔌
	((empowHR	
	User Name:	
	Password:	
	Remember Me?	
	✿ About EmpowHR   ● Forgot Passwort	
	It is recommended that users view EmpowHR with the following browsers: Internet Explorer 7,8%; Firefox 3,3.5,6; Chrome 11	

# **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 called "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 (under the Rally tab). If you are on the PPO plan (traditional plan) you will receive \$250 per credit or \$437.50 on the HDHP Plan. The credits will automatically be applied to your deductible, and you can do two 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.

Ny Health Toolkit®	enefits Welln	iess Resou	irces Profi	ile	
come, MICHAEL TESTING (LC	og Out)	Yo	u have <b>no unrea</b>	d messages. Go to	Message Center   Ask Customer
Family List	Benefits and	l Claims	e	Printer-Friendly	
Health Dental	Viewing inf	formation for MIC	HAEL TESTING	ti	What's in your HIA
MICHAEL TESTING 10/01/1958	Health Ber	Health Benefits			
MARTHA TESTING 09/01/1960 No Access	Deductible	Spent			
TERRI R TESTING		To	tal Spent	Remaining	
10/0 1/2002	Individual	\$250.	00 \$130.00	\$120.00	
	Family	\$500.	\$130.00	\$370.00	
isurance Card	Out of Poc	ket			
ealth Insurance Card Number:			Total Spent	Remaining	G.V.A
CZ065922516805	Individual	\$75	50.00 \$0.00	\$750.00	
ental Insurance Card Number:	Family	\$1,50	0.00 \$0.00	\$1,500.00	-///
ZCZ065922516805			View	Benefits Detail 🧇	
Quick Links	Health Clai				
Personal Health Assessment	Date of Servio		Total Charges	Patient Liability	
Personal Health Record & Find a Doctor or Hospital	JUN 2013	PROCESSED		\$125.00	
Rate Your Visit Freatment Cost Estimator	JUN 2013 06	PROCESSED	\$150.00	\$65.00	
	NOV 2012	PROCESSED	\$120.00	\$120.00	What's New Rate Your Visit
inancial Info					Write reviews for the doctors
Hexible Spending Accounts Medical Balance \$2,500.00		afite	View Mor	e Health Claims 🧇	and hospitals you visit to he other members find the right
earn More Access Account	Service An				care. Get started. Security Enhancements

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

# **FLEXIBLE SPENDING**

Southside Christian School 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 2015 is \$2550. You can also contribute through the plan for dependent care expenses. The maximum you can contribute for 2015 is \$5,000 if you are a single employee or married filing jointly, or \$2,500 if you are married and filing separately. If you want to continue with the Flexible Spending Plan or Dependent Care Plan, **you will have to re-enroll** on empowHR.

## HEALTH SAVINGS ACCOUNT

The Health Savings Account is still an option for those enrolled in the High Deductible Health Plan. The 2015 limits are \$3350 or those covered on the plan as single and \$6650 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. Individuals 65 or older that are enrolled in Medicare A or B cannot contribute to a H S A.

#### **BENEFIT WEBPAGE**

We have created a webpage for Southside Christian School. 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-christian/



## PHYSCIAN NETWORK INFORMATION

Blue Cross Blue Shield Card Website: <u>http://www.bcbssc.com/members/findaprovider.aspx</u> Doctor and Hospital finder Enter in doctor's name or specialty and your zip code.

# DENTAL NETWORK INFORMATION

MetLife Dental Website: <u>https://www.metlife.com/</u>

#### **VISION NETWORK INFORMATION**

Physicians EyeCare Plan Website: <u>http://physicianseyecareplan.com/</u> 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: <a href="https://www.lowell@clarkebenefits.com">https://www.lowell@clarkebenefits.com</a>

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

Employee Model Notices and contracts: <u>http://clarkebenefits.com/southside-christian/</u>