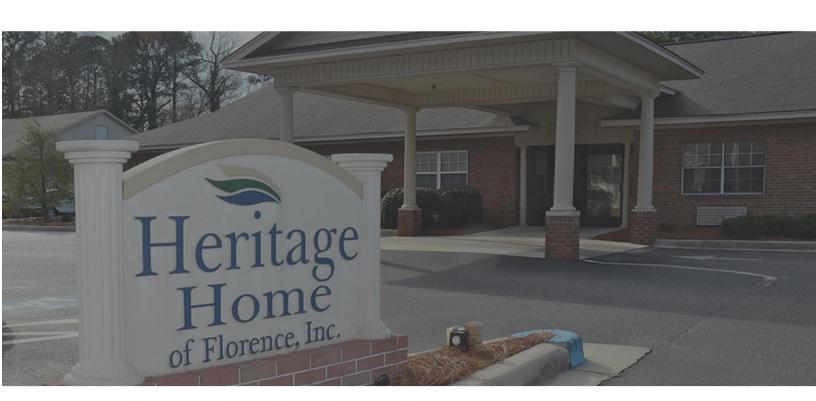


2018 Employee Benefits







It's that time of year again! **OPEN ENROLLMENT!** Below are some changes we want you to be aware of as well as some updated information regarding the Affordable Care Act (ACA).

- First and foremost, Heritage Home of Florence has negotiated and worked hard with BlueCross BlueShield to minimize cost
  changes to our plan. In an environment where annual costs continue to go up, we are pleased that we were able to
  minimize that impact.
- The one area we have no control over is the Affordable Care Act (ACA) which continues to impact the cost of Medical
  Insurance across our country and for each and every Heritage Home of Florence employee.

As you consider your healthcare options, please remember two things:

- 1) If you enroll in any of the Medical plans offered by Heritage Home of Florence, you will **meet the current ACA**Individual Mandate and will not be subject to IRS penalties.
- 2) You will not be eligible for any premium subsidies offered in the marketplace. As a full time employee, Heritage Home of Florence already subsidizes your cost of medical insurance and meets the affordability requirement of the employer mandate under ACA.

This **benefit enrollment period** is your opportunity to choose the benefits that are best for you and your lifestyle. This guide has been prepared with all the information you need to select your 2018-2019 benefit coverages.

#### WHO IS ELIGIBLE

If you are a Heritage Home of Florence regular full-time employee, you are eligible for benefits. Employees who work over 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, vision, and Voluntary products through Heritage Home of Florence employer sponsored benefit plans.

#### **HOW TO ENROLL**

All Employees will meet with a benefit specialist one-on-one to enroll in coverages starting from June 4th through June 6th. You must elect coverages at this time via the master application. If you do not elect coverages by June 6th you could have a lapse in coverage. Your current coverages end on June 30th, 2018. New Coverage begins on July 1st, 2018. Our carriers will be BlueCross BlueShield, Guardian Life, and Physicians Eyecare Plan.

#### WHEN TO ENROLL

Open Enrollment begins June 4th through June 6th. During this open enrollment period you must complete the enrollment elections via our master application. If you do not complete your elections you could have an interruption in insurance coverage. After open enrollment, which concludes on 06/6/2018, 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.

Class 1 - Administration, R.N's, & L.P.N's

Class 2 - All other employees except non-certified nursing assistants.

Class 3 - Non-certified Nursing Assistants

# 2018-2019 COSTS OF COVERAGE

<b>Medical Benefits</b>	Bi-Weekly Deductions *Offered to Class 1, 2, & 3					
	Employee Only		Employee & Children	Family		
BCBS Base PPO Plan	\$37.83	\$378.08	\$273.44	\$509.07		
BCBS Buy-Up PPO Plan	\$55.58	\$418.92	\$307.18	\$558.78		

	<b>Basic PPO Plan</b>	Buy-Up PPO Plan		
BCBS	In Network Benefits			
Primary Care Physician	\$25	\$25		
Specialist Physician	\$50	\$50		
Preventive Screenings (Consult Policy) Preventive Maximum	Covered 100%	Covered 100%		
Urgent Care, Dr. Care or CVS Minute Clinic	\$25 or \$50	\$25 or \$50		
Office Surgery	Deductible/Coinsurance	Deductible/Coinsurance		
Emergency Room	Deductible/Coinsurance	Deductible/Coinsurance		
Prescription Drugs	\$20 Generic \$40 Preferred \$70 Non Preferred Specialty- Deductible/Coinsurance	\$20 Generic \$40 Preferred \$70 Non Preferred Specialty Rx \$125		
	Major Medic	cal Benefits		
Deductible	\$5,800 (2x family)	\$2,500 (2x family)		
Coinsurance Max	\$1,350 (2x family)	\$3,850(2x family)		
Max Out of Pocket	\$7,350 (2x family)	\$7,350 (2x family)		
Coinsurance	60% BCBS/40% Employee	60% BCBS/40% Employee		
Hospital In and Out-Patient	IP: Deductible/Coinsurance OP: Deductible/Coinsurance	IP: Deductible/Coinsurance OP: Deductible/Coinsurance		
Lifetime Maximum	Unlimited	Unlimited		
	Out of Netwo	ork Benefits		
Deductible	\$10,000 (2x family)	\$10,000 (2x family)		
Max. Out of pocket	\$20,000 (2x family)	\$20,000 (2x family)		
Coinsurance	40% BCBS/60% Employee	40% BCBS/60% Employee		

Medical insurance is an important part of your benefit package. Medical costs continue to rise at double-digit rates, and must work together to control costs. You can help control costs by taking responsibility of your health by:

- Living a healthy lifestyle, exercise, eat a healthy diet, and take part in our health screenings and have an annual
  physical
- Identify health risks by taking the Personal Health Assessment (PHA)
- Be a wise health care consumer, take generic drugs when possible
- Take advantage of our wellness offerings
- Use preventive care services as much as possible

The BlueCross BlueShield PPO plans have co-pays, deductibles, coinsurance, and out of pocket maximums. The traditional PPO plans allows you to see any participating physician. BlueCross BlueShield has a comprehensive network in your area. Please visit Clarke & Company Benefits website to learn more about the terminology used in this guide. <a href="https://clarkebenefits.com/benefits-101">https://clarkebenefits.com/benefits-101</a>



Heritage Home of Florence

## Guardian ental Benefits

### Employee Bi-Weekly Deductions \*Offered to Class 1, 2, & 3

Dental Benefits	<b>Employee Only</b>	Employee & Spouse	Employee & Children	Family
Dental Plan	\$12.47	N/A	N/A	\$30.83

# **DENTAL**

Heritage Home of Florence offers employees and their families a comprehensive dental plan. Our dental plan is administered by Guardian Life. 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 <a href="www.guardiananytime.com">www.guardiananytime.com</a> and enter your zip code or your dentist's name. You do not have to be the medical plan to have dental coverage. There are 2 tiers of coverage for you to choose from.

	In and Out of Network	
Guardian		
	Plan Benefits	
Preventive	Pays 100% of costs (UCR)	
Basic Services	80%	
Major Services	50%	
Deductible	\$50/individual \$150/family	
Annual Maximum/Insured	\$1,000	
Orthodontia	Not Covered	
Orthodontia Services	N/A	
Max Rollover Amount	\$1,000	



Employee Bi-Weekly Deductions \*Offered to Class 1, 2, & 3

	Employed Bi Woolkiy Boudonoile Cherea to Class 1, 2, a c					
Vision Benefits	Employee Only	Employee & Spouse	Employee & Children	Family		
Vision Plan	\$3.65	\$7.52	\$7.20	\$11.54		

PEP	In Network Benefits		
Frames	\$175 allowance		
Contact Lenses	\$175 allowance		
Allowance Frequency: Eye Exams, Lenses, Contact Lenses, Frames	Annually		
Standard Lenses	\$175 allowance		
Material Copay	\$25 Copay		
Exam co-pay	\$15		
Fitting Fee	*\$49 standard contact lens fitting fee or 15% discount off the usual or customary fitting for non-standard contact lenses**at most providers*.		
Network/Website	www.physicianseyecareplan.com		

## **VISION**

We are now offering employees and their families a comprehensive vision plan. Our vision plan is administered by Physicians Eyecare Plan. Our plan includes an annual eye exam, \$175 of material allowance, material co-pays and other discounts. You may visit the vision provider of your choice but we also have a network available consisting of retail stores such as Walmart, Target, JC Penny, Optical, Pearle Vision & other private practices. Costs using a network provider are lower than a non-network provider. You can access the provider network by going to <a href="https://www.physicianseyecareplan.com">www.physicianseyecareplan.com</a> and entering your zip code in the provider search. You do not have to be on the medical plan to have vision coverage. There are 4 tiers of coverage for you to choose from.





Guardian Life

Employees are provided with Group Basic Term Life in the amount of \$15,000 for \$1.03 per pay period. You may also cover any spouse and/or dependent in the amount of \$5,000 for \$1.03 per pay period. Our coverage includes accidental death & dismemberment coverage. For accidental death our plan pays 100% of the life benefit (See the certificate of coverage for dismemberment benefits).

#### **Health Incentive Account**

Employees and covered Spouses have the opportunity to lower their deductible by signing up for My Health Tool Kit on the Blue Cross website and completing 2 tasks. See example below and reference page 10.

Enhanced	Without HIA	With HIA
Deductible	\$ 2,500	\$ 2,000
Coinsurance	\$ 3,850	\$ 3,850
Max OOP	\$7,350	\$ 6,850

Basic	Without HIA	With HIA
Deductible	\$ 5,800	\$ 4,550
Coinsurance	\$ 1,350	\$ 1,350
Max OOP	\$7,350	\$ 6,100

# Voluntary Life Insurance – Employee Bi-Weekly

As a new full time employee you have the opportunity to purchase up to \$100,000 of life insurance Guarantee Issue. You may also purchase life insurance on your spouse for 50% of the Employee coverage, and your Child up to 10% of the Employee amount. If you do not elect this at initial Open Enrollment, you will have to complete an EOI before approval. These coverages are portable with age and other restrictions, including evidence of insurability. \*See certificate for full details.

A	ge	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69
Employee	\$ 25,000	\$ 0.58	\$ 0.92	\$ 1.27	\$ 1.96	\$ 3.58	\$ 6.12	\$ 10.04	\$ 16.50	\$ 25.27
Spouse	\$ 12,500	\$ 0.29	\$ 0.46	\$ 0.64	\$ 0.98	\$ 1.79	\$ 3.06	\$ 5.02	\$ 8.25	\$ 12.64
Child	\$ 2,500	\$ 0.20	\$ 0.20	\$ 0.20	\$ 0.20	\$ 0.20	\$ 0.20	\$ 0.20	\$ 0.20	\$ 0.20
Employee	\$ 50,000	\$ 1.15	\$ 1.85	\$ 2.54	\$ 3.92	\$ 7.15	\$ 12.23	\$ 20.08	\$ 33.00	\$ 50.54
Spouse	\$ 25,000	\$ 0.58	\$ 0.92	\$ 1.27	\$ 1.96	\$ 3.58	\$ 6.12	\$ 10.04	\$ 16.50	\$ 25.27
Child	\$ 5,000	\$ 0.39	\$ 0.39	\$ 0.39	\$ 0.39	\$ 0.39	\$ 0.39	\$ 0.39	\$ 0.39	\$ 0.39
Employee	\$ 75,000	\$ 1.73	\$ 2.77	\$ 3.81	\$ 5.89	\$ 10.73	\$ 18.35	\$ 30.12	\$ 49.50	\$ 75.81
Spouse	\$ 37,500	\$ 0.87	\$ 1.39	\$ 1.90	\$ 2.94	\$ 5.37	\$ 9.17	\$ 15.06	\$ 24.75	\$ 37.90
Child	\$ 7,500	\$ 0.59	\$ 0.59	\$ 0.59	\$ 0.59	\$ 0.59	\$ 0.59	\$ 0.59	\$ 0.59	\$ 0.59
Employee	\$100,000	\$ 2.31	\$ 3.69	\$ 5.08	\$ 7.85	\$ 14.31	\$ 24.46	\$ 40.15	\$ 66.00	\$101.08
Spouse	\$ 50,000	\$ 1.15	\$ 1.85	\$ 2.54	\$ 3.92	\$ 7.15	\$ 12.23	\$ 20.08	\$ 33.00	\$ 50.54
Child	\$ 10,000	\$ 0.79	\$ 0.79	\$ 0.79	\$ 0.79	\$ 0.79	\$ 0.79	\$ 0.79	\$ 0.79	\$ 0.79

Guardian	Employee Bi-Weekly Deductions				
Accident Benefits	Employee Only	Employee & Spouse	Employee & Children	Family	
Accident Coverage	\$ 6.64	\$ 11.29	\$ 11.69	\$16.33	

Guardian's Accident Insurance can pay benefits based on the injury you receive and the treatment you need, including emergency-room care and related surgery. The benefit can also help offset the out-of-pocket expenses that medical insurance does not pay, including deductibles and copays. Family coverage is available. The coverage is portable, so you can keep your coverage if you change jobs or retire.

Guardian Accident	Plan Benefits
	*See certificate for full details
AD&D Benefit Amount	Employee \$25,000, Spouse \$12,500, Child \$5,000
Wellness Benefit	\$50
Accident Emergency Room	\$175
Ambulance/Air	\$175/\$1,000
Hospital Admission	\$1,000
Fracture	Schedule up to \$5,500
Initial Physician's Office/Urgent Care	\$75
Child Organized Sport	20% increase to child benefits

# **Critical Illness Benefit Summary**

Guardian's Critical Illness Insurance can help protect your finances from the expense of a serious health problem, such as a stroke or heart attack. Cancer coverage is also available. You choose a lump-sum benefit of \$5,000 to \$25,000 that is paid directly to you at the first diagnosis of a covered condition. You can use the benefit any way you choose. The coverage is portable, so you can keep your coverage if you change jobs or retire. \*Please see certificate for full details.

A	ge	<30	30-39	40-49	50-59	60-69	70+
Employee	\$ 5,000	\$ 2.17	\$ 2.96	\$ 5.17	\$ 8.95	\$ 13.39	\$ 25.51
Employee	\$ 10,000	\$ 3.69	\$ 5.20	\$ 9.40	\$ 16.50	\$ 24.86	\$ 48.26
Employee	\$ 15,000	\$ 5.21	\$ 7.44	\$ 13.62	\$ 24.04	\$ 36.33	\$ 71.01
Employee	\$ 20,000	\$ 6.73	\$ 9.67	\$ 17.84	\$ 31.59	\$ 47.80	\$ 93.77
Employee	\$ 25,000	\$ 8.26	\$ 11.91	\$ 22.07	\$ 39.13	\$ 59.27	\$ 116.52
Spouse	\$ 2,500	\$ 1.35	\$ 1.79	\$ 3.02	\$ 5.13	\$ 7.62	\$ 14.08
Spouse	\$ 5,000	\$ 2.11	\$ 2.91	\$ 5.13	\$ 8.90	\$ 13.35	\$ 25.46
Spouse	\$ 7,500	\$ 2.88	\$ 4.03	\$ 7.24	\$ 12.68	\$ 19.09	\$ 36.84
Spouse	\$ 10,000	\$ 3.64	\$ 5.15	\$ 9.35	\$ 16.45	\$ 24.82	\$ 48.21
Spouse	\$ 12,500	\$ 4.40	\$ 6.27	\$ 11.47	\$ 20.23	\$ 30.56	\$ 59.59

# **Hospital Indemnity Benefit Summary**

Guardian's Group Hospital Indemnity Insurance can complement your health insurance to help you pay for the costs associated with a hospital stay of \$1,500 per admission/per year. It can also provide funds for the out-of-pocket expenses your medical plan may not cover, such as co-insurance, co-pays and deductibles. You may also purchase coverage for your spouse and dependent children. The coverage is portable, so you can keep your coverage if you change jobs or retire. \*Please see certificate for full details.

Age	<50	50-59	60-64	65-69
Employee	\$ 10.30	\$ 10.70	\$ 17.62	\$ 24.83
Employee and Spouse	\$ 15.06	\$ 22.22	\$ 37.01	\$ 51.89
Employee and Child(Ren)	\$ 14.76	\$ 15.16	\$ 22.08	\$ 29.29
Family	\$ 19.52	\$ 26.68	\$ 41.46	\$ 56.35

# **Cancer Benefit Summary**

Guardian's Group Cancer Insurance can supplement your medical and disability income and help protect you and your family from the financial hardship while fighting the disease. The coverage is portable, so you can keep your coverage if you change jobs or retire. \*Please see certificate for full details and benefit amounts.

Age	<30	30-39	40-49	50-59	60-64	65+
Employee	\$ 2.51	\$ 5.44	\$ 12.40	\$ 20.52	\$ 30.18	\$ 41.63
Employee and Spouse	\$ 4.37	\$ 8.68	\$ 19.68	\$ 37.59	\$ 61.79	\$ 92.28
Employee and Child(ren)	\$ 3.77	\$ 6.70	\$ 13.66	\$ 21.78	\$ 31.44	\$ 42.89
Family	\$ 5.63	\$ 9.94	\$ 20.94	\$ 38.85	\$ 63.05	\$ 93.54

## 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.

With a **Health Incentive Plan (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. Both Employees and Spouses can participate. Dependents are not eligible.

Each HIA activity is worth: \$625Basic Plan, \$250 Enhanced Plan



BlueCross BlueShield of South Carolina is an Independent licensee of the Blue Cross and Blue Shield Association.

## **DISABILITY INSURANCE**

Heritage Home of Florence provides employees the opportunity to purchase Long and Short Term Disability. Long Term Disability plan covers up to 60% of your income to a maximum of \$5,000 per month should you get injured. The Long Term plan could cover you to Social Security Normal Retirement Age. The Short Term Disability plan covers up to 60% of your income to a maximum of \$500.

	Guardian Life *Offered to Class 1		
Long-Term Disability	Plan Benefits		
Monthly Benefit Max	\$5,000		
Income Replaced	60%		
Elimination Period	180 days		
Benefit Duration	1st of 2 Years or Age 70		
Benefit Payable	To SSNRA*		
	Guardian Life *Offered to Class 1, 2, & 3		
Short-Term Disability	Plan Benefits		
Weekly Benefit Max	\$500		
Income Replaced	60%		
Benefits Begin	1st day accident / 8th day sickness		
Benefit Duration	13 Weeks		

# Your Employee Benefit Enrollment Package

This guide contains an oveview of the benefit package offered by Heritage Home of Florence. It is open enrollment for all benefits at this time. Please return your election form to Elaine Dodge in Human Resource by June 15<sup>th</sup> to elect coverages. If you have any questions on your benefit package or deductions, please direct them to a Clarke & Company representative at the open enrollment meeting you attend. Your benefits in this package willl take effect on July 1, 2018 and run through June 30, 2019.



**Download the Clarke & Company Smart Phone App** 

and register your name and email address.

Company id: heritagehome

### **CONTACT INFORMATION AND RESOURCES**

# **Clarke and Company Benefits Contact Information**

122 S Irby Street, Florence, SC 29501 Florence: 843-662-1500

Derek Hemmingsen, Client Manager: <a href="mailto:dhemmingsen@clarkebenefits.com">dhemmingsen@clarkebenefits.com</a>

Holly Clark, Account Manager: <a href="https://doi.org/10.1016/j.com/">https://doi.org/10.1016/j.com/</a>

Judy Hanna, Customer Service Rep: <a href="mailto:jhanna@clarkebenefits.com">jhanna@clarkebenefits.com</a>

## **Clarke and Company Benefits Resources:**

Website: <a href="https://clarkebenefits.com/heritagehome">https://clarkebenefits.com/heritagehome</a>

### BlueCross BlueShield:

### 1-800-868-2500

Website: <a href="www.bcbssc.com">www.bcbssc.com</a> Here you can find an in-network provider, manage claims, take your health risk assessment and much more.

### **Guardian Life:**

#### 1-800-627-4200

Website: <a href="www.guardiananytime.com">www.guardiananytime.com</a> Click "Find a dentist" on the right hand side of the page to find a provider near you.

## **Physicians Eyecare:**

#### 1-800-368-9609

Website: www.physicianseyecareplan.com

-Click "Find a provider" on the top left side of the home page.

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

