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**ARE YOU IN?**

Benefits Guide

# Welcome to Open Enrollment!

As a member of the Heritage family, we are proud to give you access to a benefits plan that protects you and your loved ones. We hope you'll sign up, join in and take advantage of everything this program offers.

If you've enrolled in our plans before, you will notice a few changes in 2024. First, I'm very pleased to share **we're offering a lower healthcare deductible plan** this year, based in part on your feedback. We've also capped the maximum individual out-of-pocket expense at **significantly less than required** by IRS regulations.

Our health and wellness plans are designed to provide you a wide range of great benefits to use in the moments you need them in your life. We thoroughly research and evaluate options while maintaining our high standards for your care. The result is a benefits package that has stayed competitive — even in the face of rising healthcare costs — both in terms of overall plan offerings and employee contributions.

While some costs have unavoidably risen, **we continue to offer market competitive benefits**. Likewise, our new coinsurance rates are better than the typical market offering. These rates are possible because we've reviewed each plan inside and out to find every opportunity for savings.

Now, your benefits journey begins! Sign up during your enrollment period to keep you and your loved ones safe, healthy and protected — as part of our Heritage family for a long time to come.

Sincerely,

**Emily Hamrick**

Vice President, Total Rewards

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# Total Rewards & Benefits Portal

With everything you need to know about your benefits all in one place, you can easily decide: *Are you in?*

**Your Total Rewards & Benefits Portal makes access to benefits plans, policies, pay info and perks simpler than ever.**

## Portal Features

**Benefits:** Learn about your core benefits, as well as topics like:

- Health plans, HSAs and prescription drug benefits
- Dental and vision plan information
- Family-planning grants and resources
- Retirement savings, life insurance and other programs for financial well-being

**Wellness:** When we feel well, we do well! Find wellness offerings so you can take Just One Step toward wellness.

**Leave of Absence:** Need to take time away from work due to injury, extended illness or childbirth? Learn more about our Leave of Absence policies through the portal.

**Pay:** Access pay statements, Form W-2s and other pay-related information.

**Extras:** Explore employee discounts, financial assistance programs and other perks!

**Learning:** Discover new growth and development opportunities.

**Payroll Consolidation:** Learn more about changes to your pay schedule in 2024 and the Medical Benefit Holiday.

Want help choosing a health plan? Try out our cost estimator tool to see annual cost estimates for each plan option, empowering you to make a decision with confidence. [Visit medplancompare.com/THG/](https://medplancompare.com/THG/)



# Your Guide to Benefit Decisions

**ARE YOU IN** for a benefits program designed to help you unlock your potential and provide you physical, emotional and financial support? We hope so! The guide below is a tool to help you understand each decision you'll make when enrolling for benefits. Take notes now and keep the guide handy when you log in to enroll at [accessmyhrinfo.com](https://accessmyhrinfo.com).

The enrollment system shows your current (2023) selections. For each entry, click Edit. To choose that benefit, click **Select**; or select **Waive** if you don't want it. Always double-check your Confirmation Statement to ensure you've correctly selected the benefits you want.

## A Tool to Help Compare Costs

Price is an important factor when you're trying to choose between plans. With our Health Plan Cost Estimator tool, you can quickly get an annual cost estimate for each plan option to help you make better decisions. Visit [medplancompare.com/THG](https://medplancompare.com/THG) to get started.

## Your Benefit Decisions Worksheet

Topic	Questions to Ask Yourself as You Decide	Your Answer / Notes	Where to Find More Information About This Topic
Health Insurance	Which plan is best for my situation?		5, 10-18
Dental Insurance	Does the base dental plan included in Medical cover my needs, or do I need to purchase the enhanced dental plan?		23-24
Vision Insurance	Do I need a vision plan?		25
Health Savings Account (my HSA contributions)	How much tax-free money should I contribute to my HSA for medical, dental and vision expenses?		19 and supplement
Limited Health Flexible Spending Account (FSA – dental and vision expenses only)	I will have expenses for dental or vision during the plan year. Should I set aside pre-tax money in an FSA for dental and/or vision expenses to use during the year? How much should I contribute understanding that funding not utilized will be forfeited?		26



Topic	Questions to Ask Yourself as You Decide	Your Answer / Notes	Where to Find More Information About This Topic
Enhanced Critical Illness Insurance Coverage	Do we need critical illness coverage? (Coverage can only be extended to a spouse/partner if employee is covered.)		29
Voluntary Accident Insurance Coverage (self)	Do I /we need the added peace of mind that comes with accident coverage for myself, spouse or children?		30
Voluntary Accident Insurance Coverage (spouse or domestic partner or children)	Do I/we need the added peace of mind that comes with accident coverage for myself, spouse or children?		30
Supplemental Life Insurance (employee)	Do I need coverage beyond the employer paid basic life benefit (2x annual base salary)?		34
Supplemental Life Insurance (spouse/ domestic partner)	If I select supplemental life insurance, do I also want coverage for my spouse or domestic partner?		34
Supplemental Life Insurance (dependent children)	Do I also want coverage for my child(ren)?		35
Dependent care flexible spending account	Should I set aside pre-tax money in an FSA for eligible dependent (elder or child) care expenses? How much should I contribute, knowing that any funds I don't use will be forfeited?		27



# What's New?

In 2024, you may notice a few changes to our benefits plans. In response to your feedback, we are now providing a lower deductible plan option. To accomplish this, we'll be adding coinsurance and out-of-pocket maximums to both plans to remain IRS compliant. Here's what to expect.

We're continuing to offer two High Deductible Health Plan (HDHP) options for medical and pharmacy coverage that are Health Savings Account eligible:

## Health Plan Option 1:

\$2,000 / \$4,000 Deductible

This plan features a lower deductible, with lower out-of-pocket expense compared to Plan Option 2. This plan is suited for employees who expect ongoing moderate to high medical expenses.

## Health Plan Option 2:

\$4,000 / \$8,000 Deductible

This plan has a higher deductible, with higher total out-of-pocket expense potential compared to Plan Option 1. This plan is suited for those who do not anticipate significant medical expenses and are willing to accept more cost risk.

Both plans will include 10% coinsurance after the deductible is met, up to the out-of-pocket maximum. What does that mean?

- The **out-of-pocket maximum** is the maximum amount of money you'll pay for covered services in the plan year, including your deductible. These amounts are referenced later in the guide for each plan.
- **Coinsurance** is the percent amount of the bill paid by the employee after the deductible is met, and up to the out-of-pocket maximum.

**Here's how that looks in action:** Mike has met his deductible, then incurs a claim for \$1,000. Mike will only pay \$100 (or 10% of the full amount). The remaining \$900 is paid by the company. Once Mike hits his out-of-pocket maximum, he will no longer be subject to the 10% coinsurance.

Ready to learn more? Read on to begin your benefits journey!



# Topics

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# Benefits Enrollment 2024: Are You In?

As someone in the #HeritageFamily, we hope you'll be all the way in by taking advantage of your benefits. These plans and programs help you unlock your full potential by offering you a first step toward living healthier, becoming better prepared for retirement and protecting yourself against whatever tomorrow may bring. This guide presents core benefits plans and programs for 2024. Plan information unique to your company can be found in the enclosed supplemental documents.

To be covered under our health plan and other benefits, **you must select them**. If you do not enroll within your enrollment window, you will **NOT** be covered. Prior year elections will **NOT** automatically continue. You do not need to enroll in company-paid benefits such as Basic Life and Accidental Death & Dismemberment (AD&D), Short-Term Disability, Long-Term Disability and family-focused and reproductive health benefits from Carrot. These are provided at no cost to you.\*

A 2024 Benefits Confirmation Statement will be sent to your work email address upon submitting your elections. Review it carefully for accuracy. You can adjust your selections at [accessmyhrinfo.com](https://accessmyhrinfo.com) only within 31 days of your date of hire, during open enrollment or within the qualifying life event (QLE) window. QLEs include but are not limited to a change in your marital status, number of dependents and employment status. Benefits enrollment is also a great time to designate or update your beneficiaries.

\*Union employees please refer to your union contracts or HR Business Partner.

## Are you in for all the plans and programs included for HDHP participants?

- Anthem's Preventive Rx Plus Plan (free preventive prescription drugs)
- Base Dental Plan
- \$5,000 Critical Illness coverage
- Freedom from Smoking Tobacco Cessation Program
- Your Anthem Nurse
- Employee Wellness Centers
- Pharmacy Drug Grant Program
- Maternity Grant Program

## Here are more plans and programs available to support your wellness.

- Family-focused (fertility, surrogacy, adoption) benefits from Carrot
- 401(k) Retirement Savings Account with generous company match (up to 7%)
- 2024 Wellness Incentive Program
- Perspectives Employee Assistance Program (EAP)
- ONE Heritage Fund
- Brothers Scholarship Program
- Educational Assistance Program

**HELP IS HERE FOR YOU!** Contact HR Shared Services (**1-800-303-0408** or **HRSS@thgrp.com**) for help with benefits selection and other HR-related transaction matters. Messages will be returned by the next business day. If you're enrolling dependents, be sure to have their Social Security Number(s) and birth date(s) on hand.

See the **Helpful Terms** section at the end of this guide for definitions of terms.





# Benefits Eligibility

## Who is eligible to enroll in benefits?

- Active, full-time, regular employees and seasonal employees scheduled to work 30+ hours per week
  - ▷ AMI Seasonal employees working 1,200 hours between October – September
- Employees on leaves of absence less than 6 months
- Union employees: refer to your union contract and/or HR Business Partner

## Who can I cover on my health insurance?

- Your lawful spouse
- Your domestic partner (tax implications apply)
- Eligible dependents, if you or your spouse or domestic partner are their parent or legal guardian

## Eligible dependents may include:

- Children younger than age 26 (health care coverage will end the last day of the month in which they turn 26; **COBRA** health coverage is available in this case, if needed)
- A child age 26 or older who is primarily supported by you (or your domestic partner) and is incapable of self-sustaining employment due to a mental or physical disability

## HOW TO VIEW YOUR CURRENT ELECTIONS AND WHERE TO FIND CURRENT ENROLLMENT

### Select and submit! Here's how:

- 1 Go to [accessmyhrinfo.com](https://accessmyhrinfo.com)
- 2 Log in using your company email and password
- 3 Click on the Benefits Details tile
- 4 You will see your current benefit elections on this page
- 5 To see your current elections while you are actively enrolling in your new benefits, see the print directly under the benefit election



# Did You Know...

*In 2024, The Heritage Group will pay 87% of anticipated health care expenses, which helps keep them more affordable for your family.*

## **Annual Share of Premium Cost: Health Plan Option 1 (\$2,000 Employee /\$4,000 Family)**

Coverage Level	You Pay	Company Pays	Total
Employee Only	\$1,698.12	\$9,075.24	\$10,773.36
Employee + Spouse or Domestic Partner	\$4,137.24	\$22,169.28	\$26,306.52
Employee + Child(ren)	\$2,982.84	\$16,320.84	\$19,303.68
Family	\$5,467.20	\$29,468.76	\$34,935.96

## **Annual Share of Premium Cost: Health Plan Option 2 (\$4,000 Employee /\$8,000 Family)**

Coverage Level	You Pay	Company Pays	Total
Employee Only	\$887.16	\$8,975.52	\$9,862.68
Employee + Spouse or Domestic Partner	\$2,161.56	\$21,909.48	\$24,071.04
Employee + Child(ren)	\$1,558.44	\$16,133.76	\$17,692.20
Family	\$2,856.24	\$29,143.68	\$31,999.92



# Costs for High Deductible Health Plan Coverage

## Year-round Employees\*\*

Pay Frequency	Employee Only		Employee + Spouse or Domestic Partner*		Employee + Child(ren)		Family*	
	Weekly	Bi-Weekly	Weekly	Bi-Weekly	Weekly	Bi-Weekly	Weekly	Bi-Weekly
\$2,000/\$4,000 Health Plan Option 1	\$32.66	\$65.31	\$79.56	\$159.12	\$57.36	\$114.72	\$105.14	\$210.28
\$4,000/\$8,000 Health Plan Option 2	\$17.06	\$34.12	\$41.57	\$83.14	\$29.97	\$59.94	\$54.93	\$109.86

## Seasonal AMI Operations and Pavement Maintenance

Rates are increased to cover off season coverage.\*\*

Pay Frequency	Employee Only		Employee + Spouse or Domestic Partner*		Employee + Child(ren)		Family*	
	Bi-Weekly		Bi-Weekly		Bi-Weekly		Bi-Weekly	
\$2,000/\$4,000 Health Plan Option 1	\$130.62		\$318.25		\$229.45		\$420.55	
\$4,000/\$8,000 Health Plan Option 2	\$68.24		\$166.27		\$119.88		\$219.72	

\*While rates for domestic partner coverage are the same as those for covering your spouse or family, there are two income tax implications you should be aware of: 1) the premium amount your employer pays to cover your domestic partner and/or your partner's children is considered taxable income (i.e. imputed income) and is reported as such on your Form W-2; and, 2) the portion of the premium amount that you pay related to your domestic partner is deducted from your pay on an after-tax basis rather than a pre-tax basis. Both implications will result in additional income taxes withheld from your pay.

\*\*Any other company-specific insurance deductions will be provided in the enclosed supplements.

**Hourly (including some union) employees** paid weekly in 2023 will begin receiving bi-weekly paychecks in February, 2024. For work locations where bargaining unit employees are represented by a union, the union contract controls if this information is different from the union contract. During open enrollment, you will elect according to your weekly rates. Once your pay cycle changes to bi-weekly, your premiums will also be paid bi-weekly as a result.

**Salaried employees** paid semi-monthly in 2023 will begin receiving bi-weekly paychecks in January 2024. As a result, your rates will be reflected as bi-weekly in the system during open enrollment.

For more information about these changes, please visit the [Total Rewards & Benefits Portal](#) or the [Payroll Consolidation Appendix](#) at the end of this guide.

# High Deductible Health Plan Benefit Details

In Network	Health Plan Option 1	Health Plan Option 2
Calendar Year Deductible	Individual: \$2,000 Family: \$4,000	Individual: \$4,000 Family: \$8,000
Coinsurance	10%	10%
Out-of-Pocket (OOP) Maximum	Individual: \$3,000 Family: \$5,500	Individual: \$5,000 Family: \$10,000
Embedded Out-of-Pocket (OOP) Maximum (Any single individual on a family plan)	\$3,500	\$5,000
Physician Visit (Primary Care/Specialist)	Up to deductible 100% then 10% until OOP max reached	Up to deductible 100% then 10% until OOP max reached
Preventive Care Services	Covered at 100%	Covered at 100%
ER Visit	Up to deductible 100% then 10% until OOP max reached	Up to deductible 100% then 10% until OOP max reached
Urgent Care Visit	Up to deductible 100% then 10% until OOP max reached	Up to deductible 100% then 10% until OOP max reached
Prescriptions (Generic, Mail Order or Specialty)	10% coinsurance after deductible is met (retail and home delivery)	10% coinsurance after deductible is met (retail and home delivery)
Preventive RX Drug List	Covered at 100%	Covered at 100%



Out of Network	Health Plan Option 1	Health Plan Option 2
Calendar Year Deductible	Individual: \$4,000 Family: \$8,000	Individual: \$8,000 Family: \$16,000
Coinsurance	30%	30%
Out-of-Pocket Maximum	Individual: \$6,000 Family: \$12,000	Individual: \$10,000 Family: \$20,000
Prescriptions (Generic, Mail Order or Specialty)	Retail: greater of \$75 or 50% coinsurance after deductible is met Home delivery: not covered	Retail: greater of \$75 or 50% coinsurance after deductible is met Home delivery: not covered

- All covered services are subject to the deductible and coinsurance, except preventive care services.
- Family refers to any combination of Spouse, Domestic Partner and Dependents.
- Preventive care services received at the doctor's office or in outpatient centers are covered at 100%. Visit the portal for a complete list of preventive services.

## Helpful Terms

### Coinsurance

The percent amount of the claim paid by the employee after the deductible is met, and up to the out-of-pocket maximum.

### Out-of-Pocket Maximum

The maximum amount of money you'll pay for covered services in the plan year.

### Embedded Out-of-Pocket Maximum

The maximum amount of money one family member will pay for covered services in the plan year.

### Preventive RX Drugs

Prescription drugs considered effective in preventing the development of a health condition or a disease.

For more helpful definitions, turn to page 36.



# The Plans in Action

*Wondering how these different benefits plans might play out in real life? Here are four examples to show how they work.*

## Example 1: Deb, Family Plan Option 1

Deb, a Heritage Environmental employee, has multiple medical conditions that require ongoing prescriptions to manage. She also needs a plan that can carry her spouse and two small children. That's why she selected the Family Plan Option 1.

Each year, Deb incurs roughly \$8,000 in total claims for the treatment of her conditions. She pays 100% of her claims until she meets her embedded individual maximum of \$3,500. After that, The Heritage Group pays the remaining balance of \$4,500.

Deb's daughter, Riley, is also covered on the plan. When Riley broke her arm on the playground, it resulted in an additional \$12,000 in claims. Deb paid another \$500 to meet the full family deductible, then paid 10% of the remaining \$11,500 in claims (\$1,150). The company covered the remaining \$10,350 for Riley's broken arm.

In total, Deb paid \$5,150 for herself and her daughter, which means she never met the family out-of-pocket maximum of \$5,500. The Heritage Group also funds \$1,200 into her HSA annually.



In-Network Expenses	Deb's Family Claims Cost	Company Claims Cost
Deductible/Embedded OOP	\$4,000	
Out-of-pocket	\$1,150	
<b>Total Cost</b>	<b>\$5,150</b>	<b>\$14,850</b>

Additional Funds Deb Receives From The Heritage Group Benefits and Wellness to Support Medical Expenses	
Company Health Savings Account Contribution	\$1,200
Annual Wellness Exam	\$400
<b>Total Received</b>	<b>\$1,600</b>

Deb's net claim costs total -\$3,550.

## Example 2: Josh, Employee and Spouse Plan Option 1

Josh, an AMI employee, knew he would utilize a high-dollar drug for the year, and so he elected for Employee and Spouse Plan Option 1.

When he incurred \$15,000 in total claims, he easily met his full \$3,500 embedded out-of-pocket maximum. The Heritage Group paid the remaining \$11,500.

Josh's spouse only had preventive claims, which cost \$500 and were 100% paid by The Heritage Group.

Josh also receives funds through his health savings account. He and his wife receive \$400 for completing their annual physical exam, and The Heritage Group funds an additional \$800 into his HSA annually.



In-Network Expenses	Josh's Family Claims Cost	Company Claims Cost
Deductible/Embedded OOP	\$3,500	
Remaining Claims		\$12,000
<b>Total Cost</b>	<b>\$3,500</b>	<b>\$12,000</b>

Additional Funds Josh Receives From The Heritage Group Benefits and Wellness to Support Medical Expenses	
Company Health Savings Account Contribution	\$800
Annual Wellness Exam	\$400
<b>Total Received</b>	<b>\$1,200</b>

Josh's net claim costs total -\$2,300.

### Example 3: Jon, Employee Only Plan Option 2

Jon, a Heritage Research Group employee, has never utilized much in the way of health care. That’s why he selected the Employee Only Plan Option 2.

Recently, Jon had a routine colonoscopy that was 100% covered by his plan. After the procedure, Jon was diagnosed with colon cancer. Fortunately, since the cancer was caught early, it is treatable.

Jon’s treatments incurred \$120,000 in total claims. This means he quickly met his \$4,000 deductible, after which he paid 10% of claims until he spent another \$1,000—reaching his out-of-pocket maximum of \$5,000.

Having met his deductible, for the rest of 2024, Jon will have no additional in-network expenses. The Heritage Group will fund the remaining \$115,000 while contributing \$400 to his HSA annually. On top of that, Jon will receive an additional \$5,000 through the company-paid critical illness policy.



In-Network Expenses	Jon’s Claims Cost	Company Claims Cost
Deductible	\$4,000	
Out-of-pocket	\$1,000	
Remaining Claims		\$115,000
<b>Total Cost</b>	<b>\$5,000</b>	<b>\$115,000</b>

Additional Funds Jon Receives from The Heritage Group Benefits and Wellness to Support Medical Expenses	
Company Health Savings Account Contribution	\$400
Annual Wellness Exam	\$200
Critical Illness	\$5,000
<b>Total Received</b>	<b>\$5,600</b>

Jon’s additional funds received were more than enough to cover his claims costs.



## Example 4: Stan, Employee and Child Plan Option 2

Stan, an Envita employee, elected the Employee and Child Plan Option 2 to carry himself and his daughter. They have minimal ongoing expenses and only spend \$300 throughout the year.

They also receive regular preventive care through the medical plan, which costs \$500 and is fully covered by The Heritage Group.

The Heritage Group also funds \$800 into Stan's HSA. Stan is also eligible for a \$200 benefit for completing his annual wellness exam.



In-Network Expenses	Stan's Family Claims Cost	Company Claims Cost
Deductible	\$300	
Out-of-pocket	\$0	
Remaining Claims		\$500
<b>Total Cost</b>	<b>\$300</b>	<b>\$500</b>

Additional Funds Stan Receives From The Heritage Group Benefits and Wellness to Support Medical Expenses	
Company Health Savings Account Contribution	\$800
Annual Wellness Exam	\$200
<b>Total Received</b>	<b>\$1,000</b>

Stan's additional funds received were more than enough to cover his claims costs.

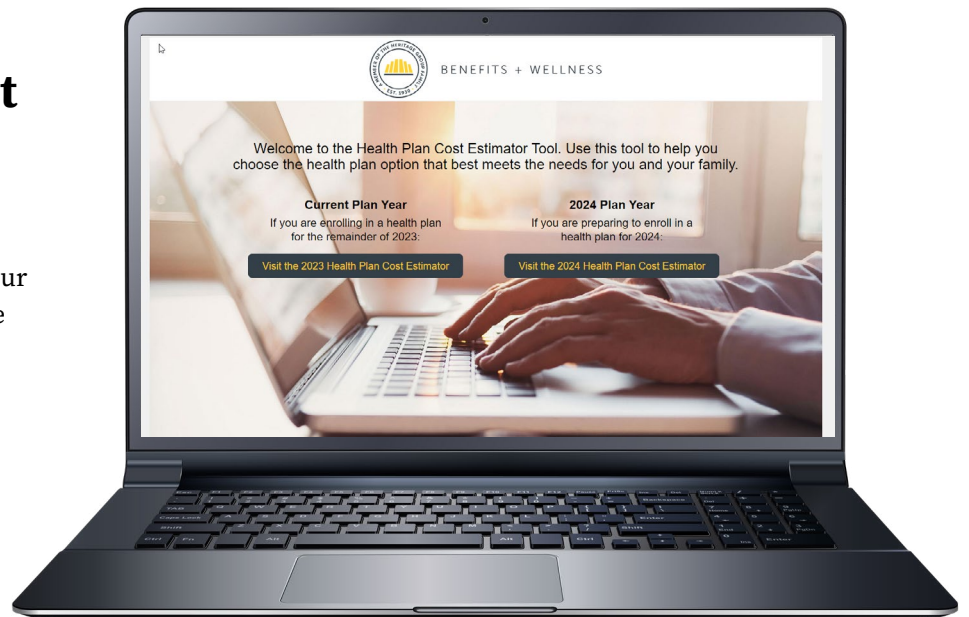
# Are You In for Managing Your Health Care Expenses?

*Manage your health and associated expenses by enrolling in a High Deductible Health Plan (HDHP) and participating in a tax-free Health Savings Account (HSA).*

## The Health Plan Cost Estimator Can Help You Decide!

Customized with your situation and our health plan details, you'll know you're making the best choice.

[medplancompare.com/THG/](https://medplancompare.com/THG/)



## Join In the Health Plan That's Right for You

In 2024, The Heritage Group will pay 87% of anticipated health care expenses, exceeding what other employers might typically offer. That means greater affordability for you — especially considering that Base Dental and Critical Illness coverage is included for high deductible health plan participants and covered dependent(s) at no additional cost.



# Health Savings Account (HSA) from Empower: *you choose how much to contribute*

## Why contribute to your HSA?

Your HSA is a great way to plan for future medical, dental and vision expenses. You can use HSA funds for certain Medicare premiums in retirement. The money you put into your HSA is not taxed when you contribute it, and as long as you spend it on qualified medical, dental and vision expenses, you never pay income tax on it.

Employer contributions to your HSA, called “seed money,” are indeed generous, but they typically are not enough to cover all health care expenses. You will need to decide how much more money you’d like to contribute on a pre-tax basis through automatic payroll deductions. Note: Total annual contributions from you and your employer cannot exceed the annual IRS limits.

## 2024 Annual Employer Contribution (“seed money”) & IRS Contribution Limits

Coverage Level	2024 IRS Limit <sup>1</sup>
Employee Only	\$4,150
Employee + Spouse or Domestic Partner	\$8,300
Employee + Child(ren)	\$8,300
Family	\$8,300

For more information about HSA contributions, **[CLICK HERE](#)**

<sup>1</sup> Prior HSA contributions this year (for example, at another employer or a spouse’s HSA contributions) count toward the annual limit. Employees age 55+ are allowed an annual \$1,000 “catch up” contribution.

### IRS CONTRIBUTION GUIDELINES FOR HSAs:

**In general, you’re eligible to contribute to your HSA and receive employer contributions if:**

- You’re covered by a qualifying HDHP that meets IRS guidelines (ours do!)
- You are not covered by any other health plan
- You are not enrolled in Medicare, TRICARE or TRICARE for Life
- You have not received VA benefits within the past three months, except for preventive care; if you are a veteran with a disability rating from the VA, this exclusion does not apply
- You cannot be claimed as a dependent on someone else’s tax return
- Other restrictions and exceptions may also apply; request help from a tax, legal or financial advisor to discuss your personal situation

See enclosed supplemental documents for employer-specific information about HSA deposit frequency



## **Preventive Rx Plan (prescription drug coverage) from Anthem: *included free for HDHP participants***

If you're being treated for a chronic condition, Anthem's Preventive Rx may cover drugs that could prevent or slow illness or disease progression, free of charge. Select prescription drugs are provided at no cost to you for chronic conditions such as asthma, blood clots, diabetes, heart health and high blood pressure, high cholesterol, osteoporosis and stroke.

**Click here** for the list of free prescription drugs!



## **Your Anthem Nurse: *free for HDHP participants***

As an HDHP plan participant, you can have access to a dedicated, specially trained health guide who can steer you through the complexities of health care — whether it's learning about your diagnosis, navigating your hospital stay or discharge, understanding your medications or other health-related matters.

You can reach Your Anthem Nurse by calling 1-844-441-1513 to ask questions like:

- How can I learn about a diagnosis and what are the next steps?
- How can I prepare for or recover from a hospital stay?
- Do these prescriptions cause any drug interactions?

Should it seem you need a little TLC, Your Anthem Nurse may contact you directly. You're encouraged to speak with them. With their help, you can learn about your condition and take next steps with confidence.

### **LIVE HEALTH ONLINE**

You have lower cost, virtual access to a doctor via Live Health Online.

Call 1-888-548-3432, or enroll at [livehealthonline.com](https://livehealthonline.com) or on the free mobile app Sydney



[livehealthonline.com](https://livehealthonline.com)

# Employee Wellness Centers: *free for HDHP participants*

For HDHP participants and their eligible dependent(s), Employee Wellness Centers provide a convenient, free option for acute, preventive and wellness-focused primary care.

## Services include:



Exams & screenings



Physical & health checks



Vaccine administration



Testing & diagnosis



Minor injury care



Registered dietitian sessions



Mental health counseling



Referrals to specialists

	Indianapolis Wellness Center	Brandenburg Wellness Center	East Liverpool Wellness Center
Address	6625 Network Way, Suite 390 Indianapolis IN 46278	1404 Old Ekron Road, Brandenburg KY 40108	Multiple locations; Check website
Phone	317-713-0430	502-684-8446	330-385-7170
Website	<a href="http://www.hgwellnesscenter.com">www.hgwellnesscenter.com</a>	<a href="http://www.bluminehealth.com">www.bluminehealth.com</a>	<a href="http://www.elch.org/river-valley-physicians/">www.elch.org/river-valley-physicians/</a>

## **2024 Wellness Incentive: *available to benefits-eligible employees and enrolled spouses or domestic partners***

Whether or not you have an immediate health care need, it's important to establish a primary care provider. Yearly check-ups can help find problems before they start, or discover them early, so you can get the treatment you need. The screenings your doctor orders will vary, depending on your age, health history and lifestyle choices.

If you are enrolled in one of our health plans, your yearly check-up and preventive bloodwork cost nothing. Plus, you and your enrolled spouse or domestic partner together can earn \$400 (\$200 each) in wellness incentives!

## **Pharmacy Drug Grant Program: *financial help for eligible employees***

If you need help paying for costly prescription medications, the Pharmacy Drug Grant Program is available. The grant is \$2,000 in HSA funding. To be eligible, you must:

- Be enrolled in an HDHP through the company and enrolled in Optum HSA
- Provide documentation of family prescription drugs totaling more than \$500 within a 30-day period
- Have an annual base salary of \$90,000 or less
- This is a one-time ever benefit, per employee

## **Maternity Grant Program**

The Heritage Group values family. We also know that expanding your family means extra expenses. The Maternity Grant Program is designed to help offset the costs of the prenatal journey and delivery of your newborn by providing you with extra HSA funding to cover maternity/delivery expenses. The grant amount is \$2,000 in HSA funding.

To be eligible for this grant, you must:

- Be a regular, full-time, benefits-eligible employee
- Be enrolled in an HDHP through the company and enrolled in Optum HSA
- If your spouse, domestic partner or dependent child is pregnant and you meet the criteria above, they must be enrolled in one of our HDHPs to be eligible for the grant.



**Find more information** about all these services on your Total Rewards & Benefits Portal! Turn to page 2 of this guide for a link to the portal.

## Base Dental Plan from Delta Dental: *included free for HDHP participants*

A healthy smile is key to your overall physical health. That's why you and your HDHP-covered dependent(s) are automatically enrolled in the Base Dental Plan. The plan pays 100% for preventive dental services, including oral exams, cleanings, x-rays, oral cancer screenings and fluoride treatments. Depending on your dentist's network participation, most other basic and major dental services are covered as well.

## Enhanced Dental Plan from Delta Dental: *optional*

### Why choose an enhanced dental plan?

If you foresee the need for a higher annual benefit maximum and/or orthodontia coverage for children age 18 and under, this may be the dental plan for you. It's available whether or not you're enrolled in an HDHP. You can only be enrolled in one plan, enhanced or base dental. If you are enrolled in a health plan, you may elect the Enhanced Dental plan but must elect it for all dependents(s) enrolled in the health plan in order for everyone to have dental coverage.

Depending on your dentist's network participation (Delta PPO or Delta Premier), the percentages below are applied to Delta Dental's allowance for each service.

Preventive Dental Services <sup>1</sup>	Basic Dental Services <sup>2</sup>	Major Dental Services <sup>3</sup>
Delta PPO Network 100%	90%/10%	60%/40%
Delta Premier Network 100%	80%/20%	50%/50%

<sup>1</sup> Preventive Dental Services include diagnostic and preventive services (oral exams, cleanings and fluoride treatments twice per calendar year, space maintainers once per area for people up to age 16, sealants, oral cancer screenings, x-rays).

<sup>2</sup> Basic Dental Services include temporary pain relief, fillings, root canals, treatment of gum disease, extractions and dental surgery, as well as repairs to crowns, bridges, implants and dentures.

<sup>3</sup> Major Dental Services include crowns, bridges, implants and dentures.

	Base Dental Plan	Enhanced Dental Plan
Calendar Year Deductible (Individual / Family)	\$50 / \$100	\$50 / \$100
Annual Maximum Benefit per Person	\$1,000	\$1,500
Orthodontic Services (examinations, treatment, repositioning of the teeth)	Not Covered	50% (Lifetime Max of \$1,500 per dependent age 18 and under)

## Costs for Dental: *enhanced is optional*

Pay Frequency	Employee Only		Employee + Spouse or Domestic Partner*		Employee + Child(ren)		Family	
	Weekly	Bi-Weekly	Weekly	Bi-Weekly	Weekly	Bi-Weekly	Weekly	Bi-Weekly
Base Dental	Included with HDHP		Included with HDHP		Included with HDHP		Included with HDHP	
Enhanced Dental - Year-round Employees	\$2.40	\$4.80	\$4.83	\$9.65	\$6.52	\$13.05	\$9.87	\$19.73
Enhanced Dental - *Seasonal AMI and Pavement Maintenance	\$4.80	\$9.60	\$9.65	\$19.30	\$13.05	\$26.10	\$19.73	\$39.46

\* The rates paid are adjusted to account for off-season coverage.





# Vision Plan from Anthem

## Why choose a vision plan?

Regular eye exams are part of detecting eye disease early, recommending treatment and preserving your vision. Vision exam services, glasses lenses and frames or contact lenses are included as part of the vision care benefit.

## Vision Plan Highlights

In Network	Benefit Frequency	Copay
Vision Exam Services	Once per calendar year	\$10 Copay
Glasses Lenses <sup>1</sup> (Single Vision/Bifocal/Trifocal/ Lenticular)	Once per calendar year	\$10 Copay
Glasses Frames	Once every two calendar years	Covered up to \$150 then 20% off balance
Contact Lenses (Medically Necessary/Elective Conventional/Elective Disposable)	Once per calendar year	Covered 100%/Covered up to \$150, then 15% off balance/ Covered up to \$150

<sup>1</sup> The plan will not cover both glasses frames/lenses and contact lenses in the same year.

You are responsible for the difference between the actual cost and what insurance pays.

## Costs for Vision: *optional*

Pay Frequency	Employee Only		Employee + Spouse or Domestic Partner*		Employee + Child(ren)		Family	
	Weekly	Bi-Weekly	Weekly	Bi-Weekly	Weekly	Bi-Weekly	Weekly	Bi-Weekly
Year-round employees	\$1.45	\$2.89	\$2.54	\$5.07	\$2.76	\$5.51	\$4.20	\$8.40
*Seasonal AMI and Pavement Maintenance	\$2.89	\$5.79	\$5.07	\$10.14	\$5.51	\$11.02	\$8.40	\$16.81

\* The rates paid are adjusted to account for off-season coverage.

# Limited Purpose Flexible Spending Account (FSA) (dental and vision expenses only) from isolved Benefit Services: *optional*

If you anticipate a major dental or vision care expense this year, you can set aside money on a pre-tax basis with a health FSA. You can pay for eligible expenses using the convenient isolved Benefit Services FSA debit card, which you'll receive upon enrollment. Note: You must enroll in an HDHP to set up an FSA.

## Health FSA Highlights

Eligible to Contribute if enrolled in the:	Sample Expenses	Minimum / Maximum Contribution
Health Plan Option 1 / Health Plan Option 2	ONLY eligible dental and vision expenses	\$250/\$3,050

1. Annual pledged contribution is available on your effective date of coverage.
2. The IRS requires you to keep copies of all expenses for which your FSA funds were used.
3. Funds must be used by December 31. The IRS “use it or lose it” rules apply. The plan includes a rollover feature that allows you to roll over up to \$610 of your unused 2023 funds into 2024.
4. The period to submit claims is 90 days from date of separation or end of calendar year. Claims incurred throughout 2024 must be submitted prior to 3/30/2025.



**TIP!** If you're participating in an HDHP but not maxing out your HSA contributions, contribute the extra money there instead of into a Health FSA.

- You can use your HSA on eligible health, dental and vision expenses.
- HSA funds roll over each year, while FSA funds that are not utilized during the calendar year are forfeited.



# Dependent Care Flexible Spending Account (FSA) from Isolated Benefit Services: *optional*

## Why consider a Dependent Care FSA?

If you expect to need services like daycare, after-school care or eldercare this year, you can save and pay for them with a Dependent Care FSA. This type of account allows you to set aside money on a pre-tax basis to pay for eligible expenses.

Please note, you will not receive a debit card for your Dependent Care FSA account. Instead, once you've enrolled, you will submit eligible dependent care expenses via the Isolated Benefit Services portal. Verify with your care provider that their funds qualify. Funds must be used by December 31, 2024, or they will be forfeited.

## Dependent Care FSA Highlights

Available to all benefits-eligible employees.

Sample Expenses	Minimum/Maximum Contribution
Daycare, After-School Care, Elder Care	\$250 / \$5,000 Single OR married filing a joint return \$250 / \$2,500 Married filing a separate return

1. The IRS requires you to keep copies of all expenses for which FSA funds were used.
2. Annual pledged contribution is available to the extent of employee contribution.
3. The period to submit claims is 90 days from date of separation or end of calendar year. Claims incurred throughout 2024 must be submitted prior to 3/30/2025.

## **Basic Critical Illness Insurance coverage from Unum: *included free for HDHP participants***

Critical illness insurance pays a cash benefit for certain\* policy-defined serious illnesses like stroke, cancer, heart attack and organ failure.

As an HDHP participant, you automatically receive \$5,000 of critical illness coverage for both yourself and your spouse or domestic partner (if also enrolled). Enrolled child(ren) are also covered at \$2,500. This benefit is available to you at no cost from your employer. If you are diagnosed with a covered illness, benefits are paid directly to you.

\*See Total Rewards & Benefits Portal for schedule of benefits.



## Enhanced Critical Illness insurance coverage from Unum: *optional*

### Why consider purchasing enhanced critical illness insurance coverage?

Such coverage provides added peace of mind. You may purchase \$10,000 of additional critical illness insurance each for yourself and your spouse (your spouse is eligible for coverage only if you enroll yourself). If both you and your spouse are employed through The Heritage Group, only one employee is eligible to carry the coverage.

You may be eligible to use this coverage more than once. Refer to the plan document on the portal for more details and to see a full list of covered conditions.

### Are children covered under enhanced critical illness insurance?

Yes! Eligible children from live birth to age 26 are automatically covered at no extra cost. Their coverage amount is 100% of yours, and they are covered for all the same illnesses as well as these specific childhood conditions: cerebral palsy, cleft lip or palate, cystic fibrosis, Down syndrome and spina bifida. The diagnosis must occur after the child's coverage effective date. Disabled children enrolled in the plan prior to their 26th birthday may remain on the plan after the age of 26.

What other benefits are included in optional critical illness coverage? Your critical illness optional benefit also includes a Be Well benefit that allows you to receive \$50 for each family member that gets a covered screening test. See portal for full list of eligible screening tests. **To claim this benefit, please contact Unum.**

### Costs for Enhanced Critical Illness Employee Rates: *optional*

Monthly Rate for Each Employee, Spouse or Domestic Partner Covered

Age	Year-round employees	Teamsters 722	*Seasonal AMI and Pavement Maintenance
<24	\$3.23	\$5.60	\$6.46
25-29	\$3.73	\$6.47	\$7.46
30-34	\$4.73	\$8.20	\$9.46
35-39	\$5.73	\$9.93	\$11.46
40-44	\$7.73	\$13.40	\$15.46
45-49	\$10.83	\$18.77	\$21.66
50-54	\$15.93	\$27.61	\$31.86
55-59	\$22.13	\$38.36	\$44.26
60-64	\$31.83	\$55.17	\$63.66
65-69	\$46.73	\$81.00	\$93.46
70-74	\$69.73	\$120.87	\$139.46
75-79	\$73.43	\$127.28	\$146.86
80-84	\$100.83	\$174.77	\$201.66
85+	\$158.03	\$273.92	\$316.06
Benefit Amount	\$10,000	\$10,000	\$10,000

\*Seasonal employee rates are spread over the expected number of months worked.

Note: Employee, Spouse or Domestic Partner rate is based on the employee's age.

# Voluntary Accident insurance coverage from Unum: *optional*

## Why might voluntary accident insurance be right for you?

Accident insurance provides benefits to help pay for unexpected costs following an accident. Benefits are paid directly to you and may be used in any way you and your family choose. For example, if your child broke their leg while riding a bike, accident benefits would be paid directly to you even if your health plan covered part or all of the expenses. Children are eligible for coverage up to their 26th birthday. Disabled child(ren) enrolled in the plan prior to their 26th birthday may remain on the plan after the age of 26. Spouses are covered through age 64.

- No proof of good health required
- A \$50 annual wellness benefit for each covered individual that meets screening test criteria (call Unum to request this benefit). See portal for eligible screenings.
- Benefits are paid regardless of other coverage you may have
- See portal for complete injury benefit payment schedule

Please note, you are not eligible for family coverage of this benefit if your spouse is also an employee of the company.

## Costs for Voluntary Accident: *optional*

Pay Frequency	Employee Only		Employee + Spouse or Domestic Partner*		Employee + Child(ren)		Family	
	Weekly	Bi-Weekly	Weekly	Bi-Weekly	Weekly	Bi-Weekly	Weekly	Bi-Weekly
Year-round employees	\$2.27	\$4.53	\$3.65	\$7.30	\$4.49	\$8.97	\$5.87	\$11.74
Teamsters 722	\$3.93	\$7.86	\$6.33	\$12.66	\$7.78	\$15.56	\$10.18	\$20.36
Seasonal AMI and Pavement Maintenance	\$4.53	\$9.06	\$7.30	\$14.60	\$8.97	\$17.94	\$11.74	\$23.48

## Family-focused and reproductive health benefits from Carrot

Any benefits-eligible employee covered by an employer-offered health plan (ours or spouse's or domestic partner's) may receive expert assistance, fertility, surrogacy or adoption services from Carrot. A \$20,000 lifetime benefit is offered. Carrot will also reimburse travel expenses for reproductive health procedures that require travel in excess of 75 miles one way.\* For more information about our family-focused and reproductive health benefits, please visit the Total Rewards & Benefits Portal.

\*Travel reimbursement may apply for those procedures not covered by insurance, including elective abortions.



[livehealthonline.com](https://livehealthonline.com)

# Employee Assistance Program (EAP) from Perspectives: *free for all employees*

## Why contact Perspectives?

Sometimes we all need a little help reducing life's stress and anxiety levels. That's where Perspectives comes in. This independent program offers confidential help with personal issues for you, your family members and significant others. Such issues include but are not limited to:

- Family relations: adoption, blended families, kids, custody, dual-career issues, communication
- Emotional matters: anger, anxiety, change, depression, eating disorders, grief/loss, obsessions, PTSD
- Substance abuse or addiction: alcohol, street or prescription drug abuse for yourself or family members
- Work: burnout, career, conflict, job performance, change
- Childcare: before/after school programs, day care, in-home care, sick care, summer camps, tutoring
- Eldercare: day/nursing/respite/hospice care, home health, leisure pursuits, volunteering, nutrition
- Legal: car issues, custody issues, consumer issues, domestic violence, family mediation, housing, wills
- Financial: bankruptcy, budgeting, college planning, consumer credit counseling, debt counseling
- Convenience referrals: apartment locators, house cleaners, consumer comparisons, home repairs

With Perspectives EAP, you have unlimited call center access 24/7 with counselors, attorneys and financial planners. They'll assess your situation, provide supportive consultation when appropriate, refer you to a specialist or help you find other resources as needed. **Click here to download the new Perspectives Ltd App.** It is an easy, confidential and secure way to access your Perspectives' services and curated resources.

You may also take advantage of up to six in-person visits with an EAP counselor. A 25% discount on the 30-minute in-person consultations with local attorneys and financial planners is offered as well.

Visit [perspectives.com](https://perspectives.com) (Username: THG500 or MON501 Password: perspectives) or call **1-800-456-6327**.



# **ARE YOU IN** for plans and programs to help secure your financial well-being?

Your benefits package wouldn't be complete without tools to improve your financial well-being. Financial health does not have to mean "wealth." Being financially well means your debts are payable and you have enough money on hand for emergencies, planned expenditures and retirement expenses. It's feeling confident about your money.

Whether you're early in your career or nearing retirement, it's helpful to set (or re-set) your goals and take actions to ease financial stress and set yourself up for the future. Our retirement savings, income-protection and insurance plans and programs can help. We hope you'll sign up and join in!

## **401(k) Retirement Savings Plan from Empower**

You choose how much to contribute!

A 401(k) is an employer-sponsored retirement savings plan. Your contributions are automatically deducted from your pay, making it a (practically) painless way to start saving!

The Heritage Group Retirement Savings Plan gives you the option to invest on a pre-tax basis, a Roth basis or a combination of the two. You can also get free money from your employer through a generous 7% company match. That means for each dollar you contribute up to 6% of your eligible pay, your employer matches with a \$1.17 contribution. The company match is given pre-tax regardless of whether your personal contribution is pre-tax or Roth.

If you elect to contribute pre-tax dollars, you save and invest a piece of your paycheck before taxes are taken out. The result is that you enjoy two significant tax breaks today: First, the money you contribute to your 401(k) doesn't count toward your gross income, thus lowering your taxable income for the year. Second, your earnings and deferrals are not taxed on that money until you withdraw it.

Choosing the Roth after-tax contribution gives you the option to pay taxes on your contributions to your 401(k) today. While you will not be benefiting from reducing your taxable income levels today, your earnings grow tax-free and you pay no taxes when you withdraw the funds when eligible in retirement (provided withdrawals are taken after age 59 ½ and they're held in a Roth account for at least five years prior to withdrawal).

Unless you opt out, you are automatically enrolled in this savings plan when you begin your employment, with an initial pre-tax employee contribution of 6% of your eligible pay. This rate automatically increases 1% each year until you reach a total of 15% or make a change to your initial election. You may increase or decrease your contribution rate, or opt out entirely, any time. Contact Empower Retirement directly at 1-844-465-4455 or [empowermyretirement.com](http://empowermyretirement.com) with questions or to adjust your contributions.

All employees are eligible to participate in the 401(k). Only full-time employees are automatically enrolled. Part-time and interns can sign up by contacting HRSS to enroll.

**TIP: IF YOU CHOOSE NOT TO CONTRIBUTE AT LEAST 6% OF YOUR ELIGIBLE PAY TO YOUR 401(K), YOU'RE MISSING OUT ON THE FULL EMPLOYER MATCH OF 7%!**



## Short-Term Disability Insurance: *included free for most employees\**

Short-term disability insurance is meant to cover you for a short period of time following an illness or injury that keeps you out of work. **Most employees\*** are automatically enrolled in a company-paid short-term disability benefit. Check your Total Rewards & Benefits Portal for more details.

\*Brandenburg Union employees: short-term disability is available to you for a cost. Please refer to the enclosed supplement for details.

## Long-Term Disability Insurance: *included free for all employees*

If you should become unable to work due to an illness or injury, long-term disability provides a level of income replacement so you can continue paying bills and meeting financial goals. As an hourly or salaried employee, you are automatically enrolled in the long-term disability benefit, paid for by The Heritage Group. If your disability continues for more than 26 weeks and you are approved, benefits begin on the 27th week of continued disability.

### Long-Term Disability for Hourly and Salaried Employees

Benefit Period	Weekly Disability Income Benefit
Week 27 through Social Security Normal Retirement Age	60% of Current Monthly Earnings (Maximum benefit \$17,500 per month)

Now is a great time to add or update your beneficiaries. For helpful instructions on how to make changes, ***click here.***



## **Basic Life and Accidental Death & Dismemberment (AD&D) Insurance: *included free for all employees***

The Heritage Group provides a basic life insurance benefit of two times your base salary (up to a maximum of \$1,000,000). The policy also includes an AD&D benefit payable for accidental death or loss of limb.

## **Supplemental Life Insurance (Employee): *optional***

Is supplemental life insurance right for you?

Supplemental life insurance can bridge the shortfall in basic coverage and provide added financial protection for your loved ones if you should die. You may purchase additional life insurance coverage for yourself at one of three levels: one, two or three times your annual base salary. The cost of this coverage is based upon your age and pay. The maximum guaranteed supplemental life coverage amount is \$500,000.

If your annual base salary (one, two or three times level) exceeds \$500,000 and you're interested in purchasing the extra coverage above this guaranteed limit, proof of good health is required (see box below for details). Your combined coverage — basic life (company-paid) and supplemental life — cannot exceed a maximum of \$1,500,000.

For employees age 65 or older, your employer-paid basic life and employee-paid supplemental life benefit will be reduced by 35% for ages 65–69 and 50% for ages 70+.

If you choose not to select supplemental life for yourself as a new hire and want to select it during open enrollment, or if you experience a qualifying life event, proof of good health (EOI - Evidence of Insurability) will be required for your enrollment.

**Contact HR Shared Services for help with this process.**

## **Supplemental Life Insurance (Spouse/Domestic Partner): *optional***

This supplemental life insurance provides extra protection to cover the life of your spouse or domestic partner. You must elect coverage for yourself in order to elect coverage for your spouse or domestic partner. The cost of this plan is based upon the employee's age.

If you're interested in purchasing this coverage, you may elect up to 50% of your base salary, up to a maximum benefit of \$100,000. You are not eligible for this benefit if your spouse is also an employee of the company. Evidence of Insurability will be required to gain coverage for spouses enrolling outside of their initial eligibility window.

The rates you pay for supplemental life insurance for yourself or your spouse/domestic partner are based on the employee's age and salary. If you receive a base pay change or change age bands due to a birthday, your premium will increase in the pay period following the age or pay change.

## Costs for Supplemental Life (For Employee & Spouse or Domestic Partner): *optional*

To calculate your monthly premium, find the employee age below. Divide your life insurance value by 1,000 and then multiply it by the rate from the table below. Premiums must be calculated individually for each covered individual.

**For example:** \$50,000 / 1000 = 50 X .285  
(for a 50-year-old who works year-round) = \$14.25 per month rate.

### Supplemental Monthly Rate per \$1,000 of Coverage

Age	Year-round	Teamsters 722*	Seasonal AMI and Pavement Maintenance*
<24	.075	.130	.150
25-29	.085	.147	.170
30-34	.105	.182	.210
35-39	.115	.199	.230
40-44	.145	.251	.290
45-49	.195	.338	.390
50-54	.285	.494	.570
55-59	.455	.789	.910
60-64	.685	1.187	1.370
65-69	1.295	2.450	2.590
70-74	2.085	3.614	4.17
75+	4.995	8.658	9.99

\* The rates paid are adjusted to account for off-season coverage. Teamsters 722 is based on 30 pay periods and Seasonal AMI and Pavement Maintenance are based on 26 pay periods.

## Supplemental Life Insurance (Dependent Children): *optional*

This program pays a death benefit if a covered child should die. You may elect a \$5,000 life benefit at flat rate of \$12.60 annually, divided and paid in equal payroll installments throughout the year. This rate includes all eligible children. To be eligible for coverage, dependents between 19 and 23 years of age must be unmarried and a full-time student or disabled. Coverage can continue for disabled children over age 23 if they are currently insured in the plan, are unmarried and the employee is the main source of support and maintenance.

# Helpful Terms

<b>401(k)</b>	A 401(k) plan is a qualified retirement plan that allows you and your employer to save money for your retirement.
<b>COBRA</b>	The Consolidated Omnibus Budget Reconciliation Act, this legislation requires group health plans to offer employees and their families the chance for a temporary extension (or “continuation”) of health coverage in certain instances where coverage under the plan would otherwise end.
<b>Coinsurance</b>	After your deductible is met, your cost share for payments up to the out-of-pocket maximum. With our HDHPs, the amount you pay after the deductible is reached is 10% and the plan pays 90% for in-network providers.
<b>Deductible</b>	The amount you pay for covered health claims with the exception of preventive services before coinsurance begins.
<b>Dependent</b>	A person(s), besides yourself, whom you choose to cover with your selected benefits program(s). These can include your lawful spouse or domestic partner; children under age 26 if you (or your spouse or domestic partner) are their parent or legal guardian; or an individual age 26 or older whom you (or your spouse or domestic partner) support and who is incapable of self-sustaining employment due to a mental or physical disability.
<b>Embedded</b>	The maximum amount of money one individual on our family plans will pay for covered services in the plan year.
<b>FSA</b>	A Flexible Spending Account allows you to set aside money on a pre-tax basis to pay for eligible expenses.
<b>HDHP</b>	High Deductible Health Plan
<b>Imputed Income</b>	Benefits employees receive that are not part of their cash wages but are still taxed as part of your income. For example, the premium amount your employer contributes to cover one’s domestic partner and/or their partner’s children is considered taxable income (i.e., imputed income) and is reported as such on Form W-2.

## HSA

Health Savings Account

## Out-of-Pocket Maximum

The maximum amount of money you will pay for covered services in the plan year including your deductible.

## Premium

A fixed amount that is paid to participate in a given plan. Premium costs are shared between your employer and you as a plan participant.

## Qualifying Life Event

A life-changing situation that can affect you and your health coverage. Such events give you the chance to modify your existing health plan when they occur. Qualifying life events typically include but are not limited to: change in marital status, having or adopting a child, experiencing the death of the insurer in the family, turning 26 and losing your parents' coverage.

You have 31 days from the date of event to change benefits.



# Our Benefit Providers

## **Anthem Blue View Vision Customer Service**

1-866-723-0515 | [www.anthem.com](http://www.anthem.com)

## **Anthem CarelonRx Pharmacy Customer Service**

1-833-267-2133 | [www.anthem.com](http://www.anthem.com)

## **Anthem Medical Customer Service**

1-844-441-1513 | [www.anthem.com](http://www.anthem.com)

## **Brandenburg Wellness Center**

1-502-684-8446 | [www.bluminehealth.com](http://www.bluminehealth.com)

## **BluMine Wellness Clinics**

1-502-384-1917 EXT 5051 | [www.bluminehealth.com](http://www.bluminehealth.com)

## **Carrot**

[CarrotFertility.com](http://CarrotFertility.com)

## **Delta Dental Customer Service**

1-800-524-0149 | [www.deltadentalin.com](http://www.deltadentalin.com)

## **East Liverpool Wellness Center**

1-330-385-7170 | [www.elch.org/river-valley-physicians](http://www.elch.org/river-valley-physicians)

## **Empower Heritage 401(k) Customer Service**

1-844-465-4455 | [www.empowermyretirement.com](http://www.empowermyretirement.com)

## **Empower HSA Customer Service**

1-800-331-5455 | [www.empowermyretirement.com](http://www.empowermyretirement.com)

## **HR Shared Services**

1-800-303-0408 | [HRSS@thgrp.com](mailto:HRSS@thgrp.com)

## **Indianapolis Wellness Center**

1-317-713-0430 | [www.HGwellnesscenter.com](http://www.HGwellnesscenter.com)

## **isolved Benefit Services Customer Service (FSA and COBRA)**

1-866-350-3040 | [www.isolvedbenefitservices.com](http://www.isolvedbenefitservices.com)

## **Perspectives EAP Access Center**

1-800-456-6327 | [www.perspectivesltd.com](http://www.perspectivesltd.com)

## **UNUM Customer Service (Life, Disability, Critical Illness and Accident Policies)**

1-800-421-0344 | [www.UNUM.com](http://www.UNUM.com)

# Tobacco Monthly Surcharge:

## HDHP Participants Who Use Tobacco Will Pay \$75 per Month

If you enroll in a high deductible health plan (HDHP) and use tobacco, you will be required to pay a \$75 monthly surcharge on your plan. A person is considered a tobacco user if they currently use any of the following products, including but not limited to: cigarettes, e-cigarettes, cigars, chewing tobacco, smokeless tobacco, snuff, vapor, etc.

If you and/or your spouse or domestic partner use tobacco and enroll in a company HDHP, a single \$75 monthly tobacco surcharge will be deducted from your pay.

### Want to avoid the surcharge? Here are two ways to do it.

You can avoid the \$75 monthly surcharge by:

- **Quitting your tobacco use for at least three months.**

If you're ready to quit, your body and wallet will thank you! Contact HR Shared Services to report your change in status to waive the tobacco surcharge.

- **Completing the Freedom from Smoking Plus Tobacco Cessation Program.\***

When you complete this eight-week program, you will receive a certificate of completion statement. Submit this to HR Shared Services to waive the tobacco surcharge. To ensure you have no surcharges for the next year, you must complete this program by **December 15**. Please call HR Shared Services at **1-800-303-0408** for a direct link to participate.

\* All regular, full-time employees may participate in the Smoking Plus Tobacco Cessation program. You do not have to be enrolled in one of our HDHPs to participate. Spouses/domestic partners and dependent children (ages 18 -26) may also participate if they are enrolled in one of our health plans.

## FREQUENTLY ASKED QUESTIONS

### When will the surcharge be deducted from my payroll check?

The monthly surcharge will be distributed evenly throughout each month based on your pay cycle. The annual tobacco surcharge is \$900 (\$75 x 12 months). If you are hired mid-year, the annual tobacco surcharge will be prorated.

### My spouse/domestic partner and I do not use tobacco products. How do I avoid the surcharge?

During the benefit enrollment process, you will be asked to affirm your non-tobacco use. It's that simple!

### My spouse/domestic partner and I do not use tobacco products. How will you monitor my tobacco status?

Honesty and integrity are at the heart of our core values. We trust our employees will make the appropriate selection for themselves and their spouses/domestic partners when updating their tobacco status in the system.

Questions? Contact HR Shared Services at [hrss@thgrp.com](mailto:hrss@thgrp.com) or 1-800-303-0408.



# HSA Employer Contribution Deposit Schedule

Coverage Tier	Annual Employer Contribution	Quarterly Deposits*			
		January	April	July	October
Employee Only	\$400	\$100	\$100	\$100	\$100
Employee + Spouse or Domestic Partner	\$800	\$200	\$200	\$200	\$200
Employee + Child(ren)	\$800	\$200	\$200	\$200	\$200
Family	\$1,200	\$300	\$300	\$300	\$300

\*deposited within the first seven business days of the month

Quarterly company HSA contributions are based on the month benefits coverage begins. If you are a current employee and are selecting benefits during Open Enrollment, your HSA quarterly deposits begin in January.

If you are newly hired, your benefits begin the 1st of the month after you are hired. If you were hired on the 1st, your benefits begin the 1st of the following month.

**If your coverage starts:**

- January–March: you’ll receive four quarterly deposits
- April–June: you’ll receive three quarterly deposits
- July–September: you’ll receive two quarterly deposits
- October–December: you’ll receive one quarterly deposit

**Questions?** Contact HR Shared Services at [hrss@thgrp.com](mailto:hrss@thgrp.com) or 1-800-303-0408.