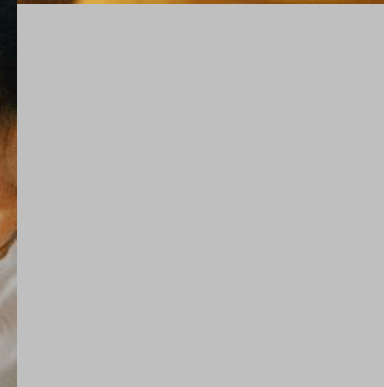


2021-2022

# Benefits Enrollment Guide

CareerSource Central Florida





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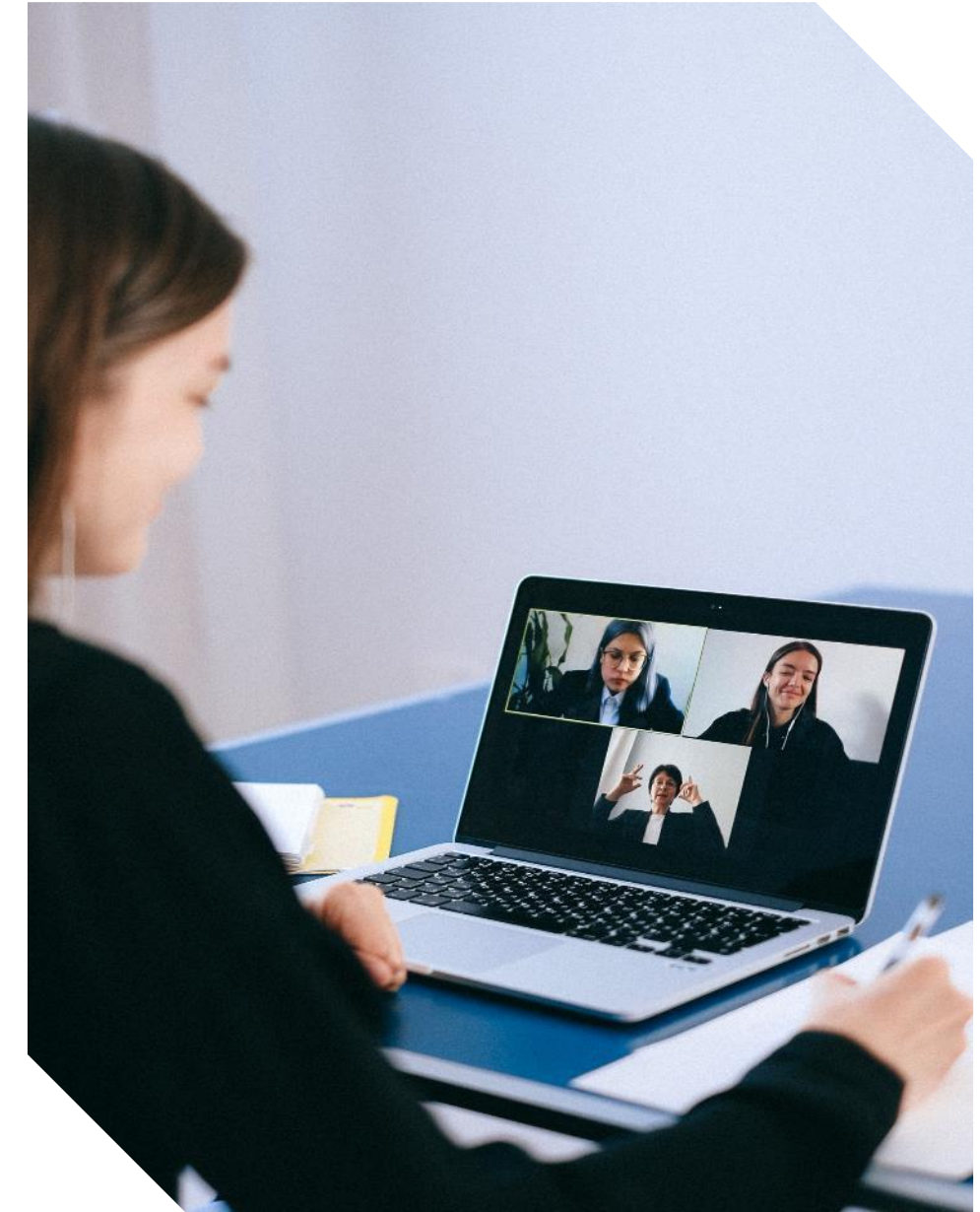
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The following descriptions of available benefit elections options, are purely informational and have been provided to you for illustrative purposes only. Payment of benefits will vary from claim to claim within a particular benefit option and will be paid at the sole discretion of the applicable insurance provider for each benefit option. The terms and conditions of each applicable policy or certificate of coverage will provide specific details and will govern in all matters relating to each particular benefit option described in this summary. In no case will any information in this summary amend, modify, expand, enhance, improve or otherwise change any term, condition or element of the policies or certificates of coverage that govern the benefit options described in this summary.

# ENROLLMENT AND ELIGIBILITY

Offering a comprehensive and competitive benefits package is one way we recognize your contribution to the success of the organization and our role in helping you and your family to be healthy, feel secure and maintain work/life balance. This enrollment guide has been designed to provide you with information about the benefit choices available to you. Remember, open enrollment is your only opportunity each year to make changes to your elections, unless you or your family members experience an eligible "change in status."

As a CareerSource Central Florida employee, you are eligible for benefits if you work at least 30 or more hours per week. Benefits are effective on the first day of the month following 30 days.

## How to Enroll in the Plans

Read your materials and make sure you understand all of the options available.

- Log in to PlanSource ([benefits.plansource.com](https://benefits.plansource.com)) to view your benefits and make changes.
- Update any necessary personal information.
- Make your benefit selections.
- If you have questions or concerns, please contact HR via Managed Engine and submit a ticket under CSCF Open Enrollment

## Whom Can You Add to Your Plan?

### Eligible:

- Legally married spouse
- Domestic partners, same and opposite sex (complete a Domestic Partner Affidavit)
- Your natural or adopted children up to the end of the calendar year in which the dependent turns age 26 (in some cases, dependents can remain on the medical plan until age 30)

### Ineligible:

- Divorced or legally separated spouse
- Sisters, brothers, parents or in-laws, grandchildren, etc.

## Change in Status

Generally, you may enroll in the plan, or make changes to your benefits, when you are first eligible. However, you can make changes/enroll during the plan year if you experience a change in status. As with a new enrollee, you must enter your life event in PlanSource within 30 days of the change or you will be considered a late enrollee.

### Examples of changes in status:

- You get married, divorced or legally separated
- You have a baby or adopt a child
- You or your spouse takes an unpaid leave of absence
- You or your spouse has a change in employment status
- Your spouse dies
- You become eligible for or lose Medicaid coverage
- Significant increase or decrease in plan benefits or cost

*Did you know?*



**Open Enrollment is the only chance to make changes, unless you experience a "change in status."**

# HIGHLIGHT OF OPEN ENROLLMENT CHANGES

## CareerSource Central Florida is pleased to present your 2020-2021 Employee Benefits Open Enrollment options

**Medical:** This year, your new insurance provider will be Florida Blue. Florida Blue will offer four options – 2 HMO and 2 PPO, giving you a choice between networks.

For anyone opting out of the CSCF medical plans with other eligible coverage, the new credit amount will be increasing to \$153.84 per pay period

**Dental and Vision:** New this year: MetLife will be your new dental and vision provider. The plans will remain similar, and the price will decrease!

**Life and Disability:** Your new insurance provider will be The Hartford. **For this open enrollment only**, you can purchase voluntary life and disability insurance up to the guaranteed issue amounts without Evidence of Insurability (EOI). No medical questions!

**Health Savings Accounts (HSA):** CSCF will provide a **\$1,500** contribution into the HSA accounts this year (up from \$1,200)! HSA Bank will remain the vendor for your HSA account, but you will receive a new account number and debit card

**Flexible Savings Account (FSA):** For 7/1/21, all unused funds from the prior plan year will roll over!

Benefits	Carrier	Who Pays	Tax Treatment
Medical Coverage	Florida Blue	CSCF & You	Pre-tax
Dental Coverage	MetLife	CSCF & You	Pre-tax
Vision Coverage	MetLife	CSCF & You	Pre-tax
Basic Life and Accidental Death and Dismemberment (AD&D) Insurance	The Hartford	CSCF	After-tax
Voluntary Life and Accidental Death and Dismemberment (AD&D) Insurance	The Hartford	You	After-tax
Short-Term Disability (STD)	The Hartford	You	After-tax
Long-Term Disability (LTD)	The Hartford	CSCF	Pre-tax
Flexible Spending Accounts (FSA)	PlanSource	You	Pre-tax
Health Savings Account (HSA)	HSA Bank	CSCF & You	Pre-tax
Voluntary Accident and Critical Illness Plans	Allstate	You	Pre-tax
Employee Assistance Program	The Hartford	CSCF	N/A

For more information about your benefits, please visit [benefits.plansource.com](https://benefits.plansource.com) to view your full benefit summaries in the PlanSource library.

## HSA Plan Options

### The HMO HSA Plan

- The company still pays 100% for employee only for this plan
- The plan design remains the same as your current plan. The deductible is \$2,000 for individual or \$4,000 for family and all expenses run towards the deductible
- The company will contribute \$125 per month to your account (\$1,500 annually)
- The HMO means you must use an in-network provider. Only emergencies are covered out-of-network
- The HMO does not cover you out of state except for emergencies
- You will need to elect a primary care physician, however there are no referrals needed to see a specialist

### The PPO HSA Plan

- You will contribute towards the premium for employee only
- The plan design is the same as the HMO plan
- The company will contribute \$125 per month to your account (\$1,500 annually)
- This is an expanded nationwide network that has out-of-network benefits
- **The only difference in the HMO and PPO plans is the network**

## Copay Plan Options

### The HMO Copay Plan (\$1,500 deductible)

- This plan has copays for office visits, urgent care, and other services
- The deductible for this plan is \$1,500 for individual
- The HMO means you must use an in-network provider. Only emergencies are covered out-of-network
- The HMO does not cover you out of state except for emergencies
- You will need to elect a primary care physician, however there are no referrals needed to see a specialist

### The PPO Copay Plan (\$1,500 deductible)

- Similar plan design to the HMO Copay plan, the main difference is the PPO network.
- The deductible for this plan is \$1,500 for individual
- This is an expanded nationwide network that has out-of-network benefits
- **The main difference in the HMO and PPO plans is the network**



# MEDICAL PLANS HIGHLIGHTS

For this plan year, you can choose from the following medical options. Refer to the carrier benefits summaries for the exact benefit levels associated with your plan choice.

Florida Blue	BlueCare HMO HSA	BlueOptions PPO HSA		BlueCare HMO Copay Plan	BlueOptions PPO Copay Plan	
Plan Year Deductible	In-network only	In-network	Out-of-network	In-network only	In-network	Out-of-network
Individual	\$2,000 (applies to employee only coverage)	\$2,000 (applies to employee only coverage)	\$4,000	\$1,500	\$1,500	\$3,000
Family	\$4,000	\$4,000	\$8,000	\$3,000	\$3,000	\$6,000
Plan Year Out-of-Pocket (Includes deductible)						
Individual	\$4,000 (applies to employee only coverage)	\$4,000 (applies to employee only coverage)	\$8,000	\$3,000	\$3,000	\$6,000
Family	Individual in family: \$4,000 Family: \$8,000	Individual in family: \$4,000 Family: \$8,000	\$16,000	\$6,000	\$6,000	\$12,000
Coinsurance (carrier/member)	100% / 0%	100% / 0%	80% / 20%	80% / 20%	80% / 20%	50% / 50%
Professional Services						
Physician/Specialist	Deductible Only	Deductible Only	20% after Deductible	\$35/\$65 Copay	\$35/\$65 Copay	50% after Deductible
Preventive Care	Covered at 100%	Covered at 100%	20% after Deductible	Covered at 100%	Covered at 100%	50% after Deductible
Urgent Care	Deductible Only	Deductible Only	20% after Deductible	\$75 Copay	\$75 Copay	50% after Deductible
Hospital Care						
Inpatient	Deductible Only	Deductible Only	20% after Deductible	20% after Deductible	20% after Deductible	50% after Deductible
Outpatient	Deductible Only	Deductible Only	20% after Deductible	Outpatient Surgical Center: \$250 copay Outpatient Hospital: 20% after deductible	20% after Deductible	50% after Deductible
Emergency	Deductible Only	Deductible Only	Deductible Only	\$250 Copay	\$250 Copay	\$250 Copay
Pharmacy						
Generic/Brand Preferred/ Brand Non-preferred	<u>Deductible then:</u> \$10/\$50/\$80	<u>Deductible then:</u> \$10/\$50/\$80	50% after in-network deductible	\$10/\$50/\$80	\$10/\$50/\$80	50% after Deductible
Mail Order	2.5x Copay	2.5x Copay	50% after in-network deductible	2.5x Copay	2.5x Copay	50% after Deductible

# FIND A PROVIDER



## [FloridaBlue.com](https://www.floridablue.com)

- Go to [FloridaBlue.com](https://www.floridablue.com)
- Click on “Find a Doctor”
- Under “Select a Plan” choose from the following:
- **For HMO: Choose BlueCare (HMO)**
- **For PPO: Choose BlueOptions**
- For the HMO plan, write down the ten digit NPI number for your primary care physician (PCP)  
This will get entered into PlanSource when you enroll
- If you don’t elect a PCP, one will be assigned to you, but you can change this at any time
- **Value Choice Providers:** These providers are designated providers by Florida Blue and you will have reduced costs for visiting a VCP on the copay plan

### Example NPI Number for HMO Plans:

**MORA-RIVERA, DANIEL E., MD**  
Family Practice  
(844) 665-4827

5.0 ★ ★ ★ ★ ★ (1 Review)  
[See Patient Reviews](#) | [Rate this Provider](#) 🔒

[Email](#) | [Save/Print](#)

Provider # 56437  
**NPI # 1275578726**



# Florida Blue Resources

## Value Based Providers

- As a Florida Blue member, you may save time and money when you see a primary care doctor that is designated as a Value Based Provider. Locations include any Sanitas Medical Center or Diagnostic Clinic Medical Group location
- If you are on the copay plan, by visiting a Value Choice Provider, you pay **\$0** for a primary care visit, plus get things like onsite diagnostic testing and X-rays. You pay less when you use a Value Choice Provider
- Visit [Floridablue.com](https://www.floridablue.com) and select “Find a Doctor”

## Florida Blue Mobile App

Save time and get the information you need right away with the Florida Blue Mobile App

Scan with any QR Code app from your mobile phone to visit the [FloridaBlue.com](https://www.floridablue.com) mobile site.







# Telehealth – Virtual Visits

Teladoc gives you 24/7/365 access to US board-certified doctors by web, phone or mobile app. It is a convenient and affordable option for quality medical care. Set up your account today so when you need care, a Teladoc doctor is just a call or click away

Some reasons to call:

- › Sore throats
- › Stomachaches
- › Colds and flu
- › Rashes
- › Acne
- › Headaches
- › Fever
- › Allergies
- › Shingles
- › Bronchitis

**1. REGISTER**

3 easy ways: download the mobile app, visit the Teladoc website or call the number below.

**2. PROVIDE MEDICAL HISTORY**

Your medical history provides Teladoc doctors with the information they need to make an accurate diagnosis.

**3. REQUEST A VISIT**

That's it! A Teladoc doctor is now just a call or click away.



Teladoc.com



1-800-Teladoc (835-2362)

# FLORIDA BLUE RESOURCES

## Wellness Resources


Florida Blue offers Blue365, a discount program with great deals for every aspect of your life. Choose from fitness, nutrition, hearing aids, apparel and more. Visit [Blue365Deals.com](https://Blue365Deals.com) to explore your options for savings

### Gym Membership – Fitness Your Way

Through Blue365, you can access a national network of gyms for \$29 a month with only a \$29 joiner fee. Access any gym in the network. You aren’t limited to one gym. Locations include Anytime Fitness, Curves, YouFit, Winter Park Health & Fitness, Snap Fit, Crunch Fitness and more

Visit [Fitnessyourway.tivityhealth.com/eligibility](https://Fitnessyourway.tivityhealth.com/eligibility) to find a gym near you


## Know Where to Go

 **Teladoc**

Teladoc doctors (including pediatricians) are available via phone or video **24/7, 365** days a year. Use Teladoc for conditions like:

- Upper respiratory infection
- Sinus infection
- Urinary tract infection
- Common cold
- Cough
- Flu


**Learn More**  
Download the Teladoc app from your app store or visit [www.teladoc.com](https://www.teladoc.com) to register.

 **Urgent Care Centers**

Urgent care centers are **less expensive than ERs** and often have **shorter wait times**. Visit an urgent care center for conditions like:

- Cold, flu and fever
- Strains, sprains and/or breaks
- Infections
- Mild burns

To find an urgent care center close to you visit [floridablue.com](https://floridablue.com) and select Find a Doctor.

 **Emergency Room**

Going to an ER for an issue that is not life threatening often results in long wait times and high medical bills. Examples of symptoms that require emergency room care:

- Severe chest pain (a possible heart attack)
- Signs of a possible stroke
- Severe or sudden shortness of breath
- Sudden or unexplained loss of consciousness

**If you do have a life-threatening emergency, call 911 right away.**





# HEALTH SAVINGS ACCOUNT (HSA)

## Option for High Deductible Health Plan (HDHP)

For employees who elect the HDHP, you will have a Health Savings Account to help you pay for your deductible expenses.

- **The money is yours:** The company contributes \$125 a month into your account, plus you can contribute additional money up to the IRS limits in the chart below. Money deposited in the HSA by the employee AND employer immediately become the employee’s asset and is portable
- **Pay now or save for later:** Contributions to an HSA can be made on a pre-tax or post-tax basis, and funds within the HSA grow without incurring taxes. Funds are withdrawn tax-free for healthcare related needs without having to file receipts, although you should keep your receipts in case you are ever audited
- **Please note:** Per IRS regulations you cannot have contributions to the HSA account if you are enrolled in Medicare. However, you can still use any HSA funds you have to pay for qualified healthcare expenses tax-free, but you cannot continue to contribute while enrolled in Medicare

Pre-Tax Plan	What is this account and how does it work?	Maximum Contribution Allowed after Employer Contribution	Can money in accounts be “rolled over”?
Health Savings Account (HSA)	An HSA account can be funded with pre-tax dollars by you and your employer to help pay for eligible medical expenses.	Employee only coverage: \$2,100  Family coverage: \$5,700  Catch up contribution (55 year of age or older): \$1,000	Yes, amounts left in your HSA account can be rolled over year to year and is portable if you leave employment of the company



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# FLEXIBLE SPENDING ACCOUNTS (FSA)

FSA accounts allows you to set aside money pre-tax to be used for qualified health care or dependent care expenses.

## Health Care FSA (cannot elect if you are enrolled in the HDHP plan)

The Health Care FSA account allows you to set aside money pre-tax to be used for qualified health care expenses (copays, deductibles, coinsurance, Rx, etc.)

- ❑ Funds left over from the 2020-2021 plan will now roll over to the new plan year
- ❑ Contributions reduce your taxable income and allow you to save for out-of-pocket expenses (e.g. Lasik) ■
- ❑ The annual maximum you can elect up to is **\$2,750** per year
- ❑ **Note: If you have a current FSA balance, and elect the HSA plan for 7/1/21, you will only be able to use your FSA rollover dollars for dental and vision in a limited purpose FSA**
- ❑ For a list of qualified medical expenses, see the [IRS website](#) for additional information
- ❑ You will receive a debit card to access the funds to pay for services
- ❑ Register online to have access to your balance information or to file
- ❑ Download the PlanSource app to be able to take pictures of your receipts if you need to substantiate any purchases on your debit card
- ❑ **Important Information:** You must make a new election each open enrollment to continue in the plan

## How do I log into my FSA account to check my balance?

- Using your web browser, navigate to [plansource.wealthcareportal.com](https://plansource.wealthcareportal.com)



# FLEXIBLE SPENDING ACCOUNTS (FSA)



## Dependent Care FSA

The Dependent Care FSA account allows you to set aside money pre-tax to pay for qualified dependent day care expenses. Qualified expenses include:

- ☐ Funds left over from the 2020-2021 plan will now roll over to the new plan year.
- ☐ Day-care expenses for dependent children up to age 13
- ☐ Day-care expenses for dependent children and adult dependents that live in your home with qualifying mental or physical disabilities
- ☐ You and your spouse must work or attend school full time in order to be eligible to contribute
- ☐ You can elect up to \$5,000 per year. “Use it or Lose It” rules apply
- ☐ For active employees there is 90 day grace period to file claims at the end of the plan year. For terminated employees you have a 90 day run out to submit claims for services rendered prior to the termination date
- ☐ Funds left over from the 2020-2021 plan will now roll over to the new plan year
- ☐ **Important Information:** You must make a new election each open enrollment to continue in the plan

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# DENTAL PLAN

For this plan year, you can choose from the following dental option. Refer to the carrier benefits summary for the exact benefit level associated with your plan.

MetLife	Low PPO		Mid PPO		High PPO	
Class	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network
Preventive	100%, No Deductible	100%, No Deductible	100%, No Deductible	100%, No Deductible	100%, No Deductible	100%, No Deductible
Basic	20%, After Deductible	20%, After Deductible	20%, After Deductible	20%, After Deductible	10%, After Deductible	10%, After Deductible
Major	50%, After Deductible	50%, After Deductible	50%, After Deductible	50%, After Deductible	40%, After Deductible	40%, After Deductible
Orthodontia	Not Covered	Not Covered	50%, No Deductible	50%, No Deductible	50%, No Deductible	50%, No Deductible
Deductible						
Individual	\$50	\$50	\$50	\$50	\$50	\$50
Family	\$150	\$150	\$150	\$150	\$150	\$150
Plan Maximums						
Plan Year Maximum	\$1,300		\$1,800		\$2,300	
Ortho Lifetime Maximum	N/A		\$1,500 (Children to age 19)		\$2,000 (Adults and children)	

## How do I find a dentist in the network?

- Visit [MetLife.com](https://www.MetLife.com) and click on “Find a Dentist”
- All three plans use the **PDP Plus Network**
- Enter your zip code to search local providers

## Will I receive an ID card?

- MetLife does not require ID cards for services. You can print a temporary ID card if you wish by registering for [MetLife.com/MyBenefits](https://www.MetLife.com/MyBenefits) after July 1st

Out-of-network reimburses as the 90<sup>th</sup> percentile of reasonable and customary for your area. As a result, you could be balance billed if your provider charges more than MetLife reimburses

The benefit plan information shown in this guide is illustrative only. To the extent the benefit plan information summarized herein differs from the underlying plan details specified in the insurance documents that govern the terms and conditions of the plans of insurance described in this guide, the underlying insurance documents will govern in all cases.



# VISION PLAN

For this plan year, you can choose from the following vision option. Refer to the carrier benefit summary for the exact benefit level associated with your plan.

MetLife	Vision	
Exam	In-network	Out-of-network
Copay	\$10 copay	Up to \$45 reimbursement
Frequency	12 months	12 months
Lenses		
Frequency	12 months	12 months
Single	\$25 copay	Up to \$30 reimbursement
Bifocal	\$25 copay	Up to \$50 reimbursement
Trifocal	\$25 copay	Up to \$65 reimbursement
Lenticular	\$25 copay	Up to \$100 reimbursement
Medically Necessary Contacts	Covered in full after copay	Up to \$210 reimbursement
Elective Contacts	Up to \$150 allowance after \$25 copay	Up to \$105 reimbursement
Frames		
Frequency	24 months	24 months
Frames	Up to \$150 allowance + 20% off balance after \$25 copay; \$170 allowance + 20% off balance for featured frames; \$85 allowance after \$25 copay for Costco, Walmart and Sam's Club	Up to \$70 reimbursement
Network	MetLife PPO	N/A

Find a provider at [MetLife.com](https://www.MetLife.com) and click on “Find a Vision Provider” – the network option is **MetLife Vision PPO**



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# LIFE AND AD&D INSURANCE PLAN

## CSCF Paid Basic Life & AD&D

CareerSource Central Florida provide you with a flat \$150,000 of Basic Life and Accidental Death & Dismemberment Insurance coverage at no cost to you – premium is 100% company paid. Coverage amounts may be portable should you change employment. **Please make sure your beneficiary designations are up-to-date.**

You may also elect additional life insurance for yourself, your spouse, and your dependent children

The Hartford	Voluntary Life and AD&D Insurance
Life Benefit	You may purchase life insurance in \$10,000 increments to a maximum of \$500,000
Spouse Benefit	Up to 50% of employee coverage to a maximum of \$100,000, rates are based on the employee's age
Child Benefit	\$10,000 maximum; \$500 maximum for children under 6 months old Not to exceed 50% of the employee coverage
Guarantee Issue (when first eligible for benefits as a new hire)	Employee: \$150,000 Spouse: \$50,000 Dependent Child: \$10,000
Age Reduction	35% at age 65 60% at age 70 75% at age 75
Conversion/Portability	Included
Rates	Rates are age banded – please view rate information online in <a href="#">PlanSource</a>

## Important Information

**For this Open Enrollment only:** The Hartford will be your new insurance carrier. You may purchase voluntary life and AD&D insurance for yourself (up to \$150,000) and for your spouse (up to \$50,000) with **no Evidence of Insurability (EOI) requirements**. You may also increase any amount you currently have up to the guaranteed issue amounts without having to complete the EOI process and be approved

Any amount over the guaranteed issue will require EOI forms to be completed and approved by The Hartford

Future open enrollments will require EOI forms for any new enrollments or increases

The benefit plan information shown in this guide is illustrative only. To the extent the benefit plan information summarized herein differs from the underlying plan details specified in the insurance documents that govern the terms and conditions of the plans of insurance described in this guide, the underlying insurance documents will govern in all cases.



# DISABILITY INSURANCE

The Hartford	Voluntary Short-Term Disability	CSCF Paid Long-Term Disability
Benefit	66.67% of weekly covered earnings	60% of monthly covered earnings
Maximum Benefit	\$750 per week	\$6,000 per month
Elimination Period	14 days (accident or illness)	180 days
Duration of Benefit	Up to 24 weeks	Later of social security normal retirement age or maximum benefit period
Pre-existing condition	3 month look back, 3 month treatment free, 12 month exclusion	3 month look back, 12 month exclusion
Rates	Rates are age banded and based on salary – please view rates online in <a href="#">PlanSource</a>	Paid for by CSCF

**Important Information**  
**For this Open Enrollment only:**

The Hartford is waiving the Evidence of Insurability requirement. You can join this plan even if you waived the coverage before, and not have to complete the EOI paperwork

Pre-existing limitations are still included, but you don’t have to be approved if you elect this benefit for 7/1/21 during open enrollment

Now is the time to enroll if you have been considering this in the past. Future open enrollments will require EOI to be completed before enrolling in this benefit

**What is a Pre-Existing Limitation?**

*“3 month lookback/3 month treatment free/12 month exclusion”* means that any illness or injury that you had or sought treatment for in the 3 months prior to 7/1/21 will not be fully covered within the first 12 months that you are enrolled in the policy. The Hartford provides a partial benefit of up to 4 weeks for a pre-existing condition. They will provide full coverage if you have been treatment free for 3 consecutive months from the pre-existing illness or injury during the first 12 months of coverage. This applies to first time enrollees only. If you were enrolled in the Cigna STD or LTD for at least 12 months, the pre-existing condition limitation does not apply.

The benefit plan information shown in this guide is illustrative only. To the extent the benefit plan information summarized herein differs from the underlying plan details specified in the insurance documents that govern the terms and conditions of the plans of insurance described in this guide, the underlying insurance documents will govern in all cases.

# EMPLOYEE DEDUCTIONS – Medical, Dental and Vision

## Rates for Medical Bi-Weekly Cost (24 Deductions)

Florida Blue Rates	BlueCare HMO HSA	BlueOptions PPO HSA	BlueCare HMO Copoly Plan	BlueCare PPO Copoly Plan
Employee Only	\$0.00	\$21.16	\$20.65	\$53.05
Employee + Spouse	\$37.46	\$89.98	\$98.30	\$175.40
Employee + Child(ren)	\$30.22	\$72.59	\$79.30	\$141.50
Family	\$50.37	\$120.98	\$132.17	\$235.83

If you opt out of the medical plan and provide proof of eligible other coverage, CSCF will provide you with an additional \$153.84 opt out credit per pay period

## Rates for Dental Bi-Weekly Cost (24 Deductions)

MetLife Rates	PPO Low Dental Plan	PPO Mid Dental Plan	PPO High Dental Plan
Employee Only	\$0.00	\$1.27	\$3.12
Employee + Spouse	\$3.21	\$3.60	\$4.15
Employee + Child(ren)	\$4.06	\$5.13	\$6.04
Family	\$6.24	\$7.68	\$9.01

## Rates for Vision Bi-Weekly Cost (24 Deductions)

MetLife Rates	Vision Plan
Employee Only	\$0.00
Employee + Family	\$1.64

For additional rate information, visit:  
[benefits.plansource.com](https://benefits.plansource.com)



The rates shown in this guide are illustrative only. To the extent the rates contained herein differ from those in the insurance documents that govern the terms and conditions of the plans of insurance described in this guide, the rates in the underlying insurance documents will govern in all cases.



# ALLSTATE SUPPLEMENTAL PLANS

## Accident Plan

- Allstate Accident Insurance pays you cash in the event you have an accident
- The cash benefit can be used to help pay deductibles, treatment, rent and more. The money is yours to spend as you see fit
- Outpatient Physician Treatment Benefit- pays \$50 for up to two visits per covered person (max of 4 for family). Can be used for any outpatient service!

Accident Plan: Sample Benefits	
Plan pays a benefit for:	Dislocation or Fracture
Accidental Death	Initial Hospital Confinement
Dismemberment	Ambulance
Hospital Confinement	Lacerations
Intensive Care	Skin Grafts
Medical Expenses	Burns
Common Carrier Accidental Death	Plus many other benefits. See plan summary in <a href="#">PlanSource</a> for full listing



The benefit plan information shown in this guide is illustrative only. To the extent the benefit plan information summarized herein differs from the underlying plan details specified in the insurance documents that govern the terms and conditions of the plans of insurance described in this guide, the underlying insurance documents will govern in all cases.

# ALLSTATE SUPPLEMENTAL PLANS

## Critical Illness

The Voluntary Group Critical Illness plan through Allstate pays you a lump sum benefit if a covered member is diagnosed with one of the specified illnesses (Heart attack, stroke, cancer etc.)

- You can choose a lump sum payment benefit of \$10,000 or \$20,000. Benefits paid directly to you regardless of other insurance.
- Coverage can be elected for both you and your eligible dependents. Dependent benefit amount will be 50% of your benefit election
- Rates include dependent children – no additional premium to add dependent children to the plan
- You are eligible for a \$50 benefit per covered person per calendar year for a covered wellness screening test
- The age banded rates are “issue age” meaning you pay the same rate as long as you are enrolled in the policy
- There is a pre-existing conditions limitation if you have any conditions that you received treatment for during the past 12 months

Critical Illness Sample Benefits	% of Benefit
Heart Related	
Heart Attack	100%
Stroke	100%
Major Organ Transplant	100%
Coronary Bypass Surgery	25%
Cancer Related	
Invasive Cancer	100%
Carcinoma in Situ	25%
Other Illnesses	
Benign Brain Tumor	100%
End-Stage Renal Failure	100%
Coma	100%
Advanced Alzheimer’s Disease	25%
Advanced Parkinson’s Disease	25%

Rates are age banded. See your rates in [PlanSource](#)

The benefit plan information shown in this guide is illustrative only. To the extent the benefit plan information summarized herein differs from the underlying plan details specified in the insurance documents that govern the terms and conditions of the plans of insurance described in this guide, the underlying insurance documents will govern in all cases.



# FINANCIAL WELLNESS

## Reasons to Participate in the 403(b)

- **Your Future:** You can take control of your future finances now by participating in the company's retirement program through Principal Financial
- **Company Matching:** Take advantage of the company match. CSCF matches 100% of the first 6% of the pay you contribute to the plan through salary deferral. The employer match starts first of the month after 6 months from date of hire
- **Vesting:** You are fully vested after 3 years of service, but you are always vested 100% in any money you contribute to the account
- **Tax Savings:** The money you invest in the plan and the earnings on those contributions are deferred from income tax until you withdraw the money. Why is that important? Because postponing taxes on what you earn allows your nest egg to grow faster
- **Time:** The younger you start, the longer your investments can grow
- **Planning:** Social Security might not cover all your income needs when you retire
- **Security:** Loans are permitted for hardship reasons such as medical care needs or purchasing a principal residence



# EMOTIONAL WELL BEING

- Mental health is just as important to take care of as our physical health
- The Hartford offers a free and confidential employee assistance program that helps support your emotional health
- You have access to three face to face visits with a counselor at no cost, plus unlimited telephonic support
- You and your family have support for a variety of things, like job pressures, stress, anxiety, depression, substance abuse, relationships, marital conflicts and childcare issues
- Your whole family has access to the program
- You have access to legal and financial services through the program as well

## Access these resources:

- Call 1-800-96 –HELPS (1-800-964-3577)
- Visit [GuidanceResources.com](https://www.guidanceresources.com)





# REQUIRED NOTICES

## Newborn and Mothers' Health Protection Act

- Group health plans and health insurance issuers generally may not, under federal law restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following vaginal delivery, or less than 96 hours following a cesarean section. However, federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under federal law, require that a provider obtain authorization from the plan or the issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

## Women's Health and Cancer Rights Act

- In October 1998, Congress enacted the Women's Health and Cancer Rights Act of 1998. This notice explains some important provisions of the Act. Please review this information carefully. As specified in the Women's Health and Cancer Rights Act, a plan participant or beneficiary who elects breast reconstruction in connection with a covered mastectomy is also entitled to the following benefits: 1. All stages of reconstruction of the breast on which the mastectomy has been performed; 2. Surgery and reconstruction of the other breast to produce a symmetrical appearance; and 3. Prostheses and treatment of physical complications of the mastectomy, including lymphedemas. Health plans must provide coverage of mastectomy related benefits in a manner to determine in consultation with the attending physician and the patient. Coverage for breast reconstruction and related services may be subject to deductibles and insurance amounts that are consistent with those that apply to other benefits under the plan.





# HIPAA Notice



## HIPAA Privacy Notices

HIPAA requires group health plans to provide a notice of current privacy practices regarding protected personal health information (PHI) to enrolled participants. All employers must distribute HIPAA Privacy Notices if the plan is self-funded or if the plan is fully-insured and the employer has access to PHI. If the employer maintains a benefits website, the HIPAA Privacy Notice must be included on the website.

The HIPAA Privacy Notice must be written in plain language and must describe three things: (1) the use and disclosures of PHI that may be made by the group health plan; (2) plan participants' privacy rights; and (3) the group health plan's legal responsibilities with respect to the PHI.

The Department of Health and Human Services (HHS) has developed three different model Privacy Notices for health plans to choose from: booklet version, layered version, and full-page version.

More information can be found at: <https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/privacy-practices-for-protected-health-information/index.html>

Link to OneDigital's privacy policy: <https://www.onedigital.com/privacy-policy/>



## Model Special Enrollment Notice

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within the appropriate time period that applies under the plan after you or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage). In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within the appropriate time period that applies under the plan after the marriage, birth, adoption, or placement for adoption. To request special enrollment or obtain more information, contact the appropriate plan representative.

For additional information on your employer's privacy policy, please contact your HR department.



# CONFIDENTIALITY NOTICE

Digital Insurance LLC dba OneDigital Health and Benefits does not sell or share any information we learn about our clients and understands you may have to answer sensitive questions about your medical history, physical condition and personal health habits as required by our insurance carrier partners.

We collect nonpublic personal information from the following sources:

- Information from you, including data provided on applications or other forms, such as name, address, telephone number, date of birth and Social Security number
- Information from your transactions with us and/or our partners such as policy coverage, premium, claim, and payment history.

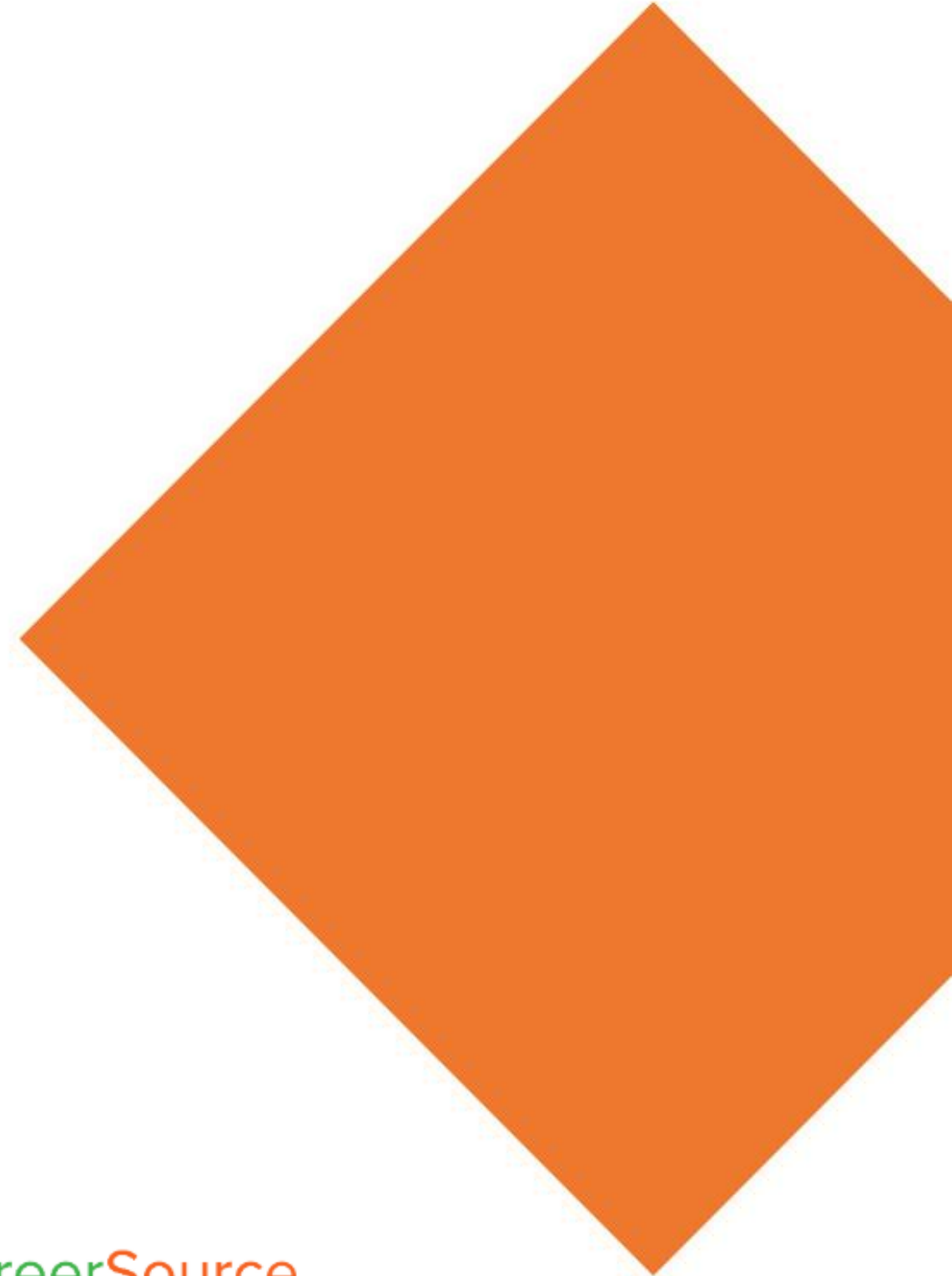
OneDigital Health and Benefits recognizes the importance of safeguarding the privacy of our clients and prospective clients, and we pledge to protect the confidential nature of your personal information. We understand our ability to provide access to affordable health insurance to businesses and individuals can only succeed with an environment of complete trust.

In the course of business, we may disclose all or part of your customer information without your permission to the following persons or entities for the following reasons:

- To an insurance carrier, agent or credit reporting agency to detect, prevent or prosecute actual or potential criminal activity, fraud, misrepresentation, unauthorized transactions, claims or other liabilities in connection with an insurance transaction.
- To a medical care institution or medical professional to verify coverage or benefits, to inform you of a medical problem of which you may or may not be aware or to conduct an audit that would enable us to verify treatment.
- To an insurance regulatory authority, law enforcement or other governmental authority to protect our interests in detecting, preventing or prosecuting actual or potential criminal activity, fraud, misrepresentation, unauthorized transactions, claims or other liabilities in connection with an insurance transaction.
- To a third party, for any other disclosures required or permitted by law. We may disclose all of the information that we collect about you, as described above.

Our practices regarding information confidentiality and security: We restrict access to your customer information only to those individuals who need it to provide you with products or services, or to otherwise service your account. In addition, we have security measures in place to protect against the loss, misuse and/or unauthorized alternation of the customer information under our control, including physical, electronic and procedural safeguards that meet or exceed applicable federal and state standards.









## EMPLOYEE ROSTER

Position/Title	Salary	Incentive
Accounting Manager	\$61,817.60	\$1,000.00
Accounting Specialist	\$45,011.20 - \$47,132.80	\$500.00
Application Support Manager	\$70,324.80	\$1,000.00
Business Analyst	\$61,214.40	\$500.00
Business Services Consultant- Generalist	\$42,099.20 - \$55,390.40	\$500.00
Business Services Consultant- Specialist	\$44,990.40 - \$54,288.00	\$500.00
Career Services Consultant	\$35,318.40 - \$57,761.60	\$500.00
Career Services Consultant- Youth	\$36,171.20 - \$54,184.00	\$500.00
Career Services Manager	\$65,000.00 - \$75,483.20	\$1,000.00
Chief Executive Officer/President	\$212,888.00	\$20,275.84
Chief Financial Officer/First Vice President	\$172,099.20	\$7,032.48
Chief Operating Officer/First Vice President	\$172,099.20	\$8,274.24
Communications Manager	\$68,972.80	\$1,000.00
Communications Specialist	\$48,505.60	\$500.00
Contact Center Consultant	\$35,006.40 - \$55,598.40	\$500.00
Contracts Management Specialist	\$70,948.80	\$500.00
Controller	\$93,600.00	\$1,500.00
CRM Salesforce Manager	\$70,012.80	\$0.00
Customer Service Specialist	\$33,280.00	\$0.00
Data Reporting Specialist	\$54,683.20	\$500.00
Director of Business Services	\$88,400.00	\$1,500.00
Director of Information Technology	\$94,515.20	\$1,500.00
Director of Operations	\$97,344.00	\$1,500.00
Director of Public Affairs	\$90,188.80	\$1,500.00
Director of Youth Operations	\$85,654.40	\$1,500.00
Economic Development Liaison	\$63,668.80	\$1,000.00
Executive Assistant	\$56,118.40	\$500.00
Executive Board Coordinator	\$56,763.20	\$500.00
Executive Operations Coordinator	\$53,705.60	\$500.00
Facilities Manager	\$77,251.20	\$1,000.00
Helpdesk Technician	\$43,929.60	\$500.00
Human Resources Coordinator	\$48,443.20	\$500.00
Human Resources Manager	\$71,406.40	\$1,000.00
IT Operations Manager	\$70,324.80	\$1,000.00
Learning Advisor	\$56,825.60	\$500.00
Learning and Development Manager	\$75,774.40	\$1,000.00
Learning Liaison	\$54,142.40	\$500.00
Marketing Outreach Coordinator	\$57,116.80	\$500.00
Operations Manager	\$88,982.40	\$1,000.00
Program Manager	\$52,915.20 - \$69,201.60	\$1,000.00
Senior Accounting Specialist	\$52,520.00	\$500.00
Senior Director of Business Intelligence	\$109,220.80	\$5,250.96
Senior Manager of Corporate Communications	\$83,220.80	\$1,500.00
Senior Manager of Outreach Marketing	\$91,062.40	\$1,500.00
Senior Manager of Procurement and Contracts	\$85,009.60	\$0.00
Senior Payroll Benefits Analyst	\$56,388.80	\$500.00
Senior Planning Manager	\$80,662.40	\$1,000.00
Senior Project Manager	\$72,113.60	\$1,000.00





## EMPLOYEE ROSTER

Systems Administrator	\$65,208.00	\$1,000.00
User Experience Support Technician	\$53,560.00	\$500.00
Vice President of Human Resources	\$137,446.40	\$5,722.08
Vice President of Innovation and Technology	\$143,353.60	\$5,500.56
Vice President of Strategic Communications	\$137,446.40	\$5,858.32
Virtual Services Coordinator	\$44,012.80	\$500.00
Youth Program Coordinator	\$38,563.20	\$500.00