



2022

Health and Welfare Benefits Overview

Contract Part-Time
averaging less than 30 hours per week

Aleron *sdi*

 **ACARA**

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Welcome to the 2022 Open Enrollment Period

We're pleased to offer comprehensive, competitive benefits to our employees and their eligible dependents. This overview is designed to help you better understand the choices available to you and your family.

Once you make your benefit selections, they remain in effect until our next annual benefits open enrollment period—therefore, it is important to thoroughly review your choices. However, if you have a qualifying life event (e.g., get married, have a baby, get a divorce, etc.), you may be able to change certain benefits during the year. You must make any changes within 30 days of the life event.

If eligible, new hires have 30 days to enroll in benefits from their start date. Benefits become effective the 1st of the month following 60 days of employment.

Domestic Partner Coverage is available for some benefit plans. An Affidavit of Domestic Partnership will be required with proper documentation.

Questions? We're here to help!

Tel: 1.800.568.8310

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Dependent Eligibility

Plan	Dependents Covered Up to Age	Effective Date of Plan	Termination Date of Plan
Transamerica	26	1st of the month following 60 days of employment	End of month

*New York "Age 29" law—call the benefits department for details.

**If a full-time student, insurance company needs an official letter/statement of enrollment and once per semester from the accredited college, university, or technical training program, verifying the dependent's full-time status.

Determining Affordable Care Act (ACA) Eligibility

How is it Determined if I may be Eligible for the Health and Welfare Benefits Employer Contribution to the BlueCross BlueShield (BCBS) Medical Plan?

Current employees may be offered an employer contribution to the BCBS medical insurance plan during the annual benefits open enrollment period if during a “look-back” period of 12 months working for company, the employee was averaging 30 or more hours per week.

If you are a new hire, it will be determined at the time of hire if you will be a “full-time” employee (working 30 hours average per week), or if you will be a “variable” hour employee (your schedule will vary sometimes under 30 hours a week).

- Those employees determined to be **full-time employees** at the time of hire will be offered the company’s BCBS medical coverage (effective the 1st of the month following 60 days).
- Those employees that are listed as a **“variable” hour employee** will have to wait until the 12 month “look-back” period is calculated before company can determine if the employee is considered a full-time employee (averaging 30 hours or more per week) or not.

Those employees determined to be “full-time” after the look-back period calculation, will be offered the company’s BCBS medical coverage (no matter how many hours they work during that time period) or until termination from employment.

How to Enroll (or Decline) in the Health and Welfare Benefits

New Hires

If you are determined to be working 30 hours or more per week at the time of your hire, **after you receive your first paycheck**, you can then access your information and enroll or decline in the benefits.

You have 30 days from your start date to complete enrollment.

Annual Benefits Open Enrollment

If you are determined to be a full-time employee using the “look-back” period of 12 months, you will be able to enroll in or decline the benefits during our annual benefits open enrollment period (usually held in November). You will be notified of your eligibility and open enrollment dates by email and other methods. **Always keep your personal information up-to-date by notifying your branch office representative of any changes.**

New Hires

You have 30 days from your start date to complete your benefits enrollment or decline the benefits.

Instructions to Enroll (or Decline) in the Health and Welfare Benefits

Two Ways to Enroll or Waive Coverage

The special enrollment period for new hire employees is **30 days from your employment start date**. If you do not affirmatively elect benefit coverage during your allotted enrollment period, you will be unable to elect such coverage again until the next annual open enrollment period, unless you experience a qualifying event that entitles you to a new special enrollment period.

Here's how to enroll:

- You can self-enroll online at your own pace at <https://www.employeenavigator.com/benefits/> (see login instructions), OR
- Call our Benefit Call Center at 1-888-592-2681, Mon – Fri, between the hours of 11 a.m. – 8 p.m. EST to speak to a benefits counselor and have them enroll for you (or waive) any coverage.

If you do not enroll or waive benefit coverage within 30 days of your start date or during our annual open enrollment period, you will be considered to have waived all benefit coverage.

How to Decline Medical Coverage (as a New Hire)

As a new hire through the onboarding system, you will be asked to complete a Waiver of Medical Coverage form.

You have two options:

1. Tell us you need up to 30 days from your employment start date to decide what benefits you would like or to decide if you want to waive coverage. **If you do not complete enrollment or waive coverage through the Benefit Call Center within the 30 days of your employment start date, you will be considered to have waived coverage. OR**
2. Immediately decline the medical coverage and complete the medical waiver form.

The weekly medical plans have no waiting period

You can call the Benefit Call Center to enroll in those plans after getting your first paycheck (i.e., when your employee data will be transferred to the enrollment portal).

Employee understands and agrees to the following terms:

You cannot change your benefit elections or salary reduction agreement (including stopping your deductions) as of any date prior to the next annual open enrollment, unless that change or revocation is on account of and consistent with a change in your family status as listed in the IRS regulations. Changes based on: financial reasons, not reading the provided information, not calling the insurance company's customer service department with any questions (or the company's Benefit Call Center or Benefits Department), or because you found a less expensive direct pay plan, are not allowed under IRS regulations.

Transamerica - Hospital Indemnity Plan

2022	Transamerica Plan 1	Transamerica Plan 2
	Monthly Rates	Monthly Rates
Employee Only	\$77.72	\$110.99
Employee + Spouse/ Domestic Partner	\$165.25	\$239.64
Employee + Child(ren)	\$130.53	\$186.04
Employee + Family	\$199.58	\$288.14
Hospital Indemnity Benefits		
Daily Hospital Indemnity Benefit	\$300 per day / 31 days per confinement	\$700 per day / 31 days per confinement
Hospital Confinement Indemnity Benefit	\$500 per day / 2 days per calendar year	\$1000 per day / 2 days per calendar year
Off the Job Accidental Injury Benefit	\$500 / 1 day per accident / 5 accidents per calendar year	\$700 / 1 day per accident / 5 accidents per calendar year
Outpatient Diagnostic Laboratory Test Indemnity Benefit	\$15 / 2 days per calendar year	\$25 / 2 days per calendar year
Outpatient Select Diagnostic Test Indemnity Benefit	\$75 / 1 day per calendar year	\$125 / 1 day per calendar year
Outpatient Advance Studies Diagnostic Test Indemnity Benefit	\$300 / 1 day per calendar year	\$500 / 1 day per calendar year
Intensive Care Indemnity Benefit	\$400 / 30 days per calendar year	\$800 / 30 day per calendar year
Ambulance Indemnity Benefit	\$300 / 3 days per calendar year / 6 days per lifetime	\$300 / 3 days per calendar year / 6 days per lifetime
Emergency Room Sickness Indemnity Benefit	\$200 / 2 days calendar year maximum	\$200 / 4 days calendar year maximum
Critical Illness Indemnity Benefit	Employee: \$2500 / Dependents: 25%	Employee: \$2500 / Dependents: 25%
Wellness Indemnity Benefit	\$100 / 1 day per calendar year maximum	\$100 / 1 day per calendar year maximum
Prescription Drug Indemnity Benefit	\$10 generic / \$20 brand / 36 days per calendar year	\$15 generic / \$30 brand / 36 days per calendar year
Ambulance Indemnity Benefit Rider	\$100 / 1 day per accident / 5 accidents per calendar year	\$300 / 1 day per accident / 5 accidents per calendar year
Outpatient Physician Office Visit Indemnity Benefit Rider	\$100 / 6 days per calendar year	\$100 / 10 days per calendar year
Surgical & Anesthesia Indemnity Benefit Rider	Inpatient Surgery: \$2000 / Outpatient Surgery: \$1000 Outpatient Minor Surgery: \$200 If anesthesia is administered, pays an additional 20%	Inpatient Surgery: \$2500 / Outpatient Surgery \$1250 Outpatient Minor Surgery: \$250 If anesthesia is administered, pays an additional 30%
Multiplan Network	Included	Included

Be aware that Hospital indemnity insurance is not the same as major medical insurance.

It's an affordable, standalone or supplemental medical insurance that pays fixed-dollar benefits for costs associated with health care, such as one wellness visit, doctor's office visits, prescriptions, and hospital stays. There are annual limits on how much the plan will pay.

For more information on the Multiplan Network, [click here](#) or visit:

<https://www.multipian.com/webcenter/portal/poviderSearchproviders/>

401(k) Retirement Savings Plan

401(k) Retirement Savings Plan Enrollment

IMPORTANT

Please wait to enroll in the 401(k) Retirement Savings Plan until you have completed one (1) day of work and have met the waiting period (if any).

401(k) contributions and changes made by Friday at noon EST will go into effect for the upcoming paycheck. Any changes made after this time will go into effect the next paycheck.

You have the option to contribute (100% employee-paid) to a Traditional or Roth 401(k), or a combination of the two. The company's 401(k) plan also offers loans and hardship distributions. Once you have had your first 401(k) payroll deduction and your account is set up, you can also rollover any Traditional pre-tax or Roth balances from a previous plan. The 2022 IRS limits apply to the total sum of your Traditional and Roth 401(k) contributions—those under 50 years of age are limited to \$20,500 and for those age 50 and over, an additional catch-up contribution of \$6,500 is allowed for a contribution limit of \$27,000.



Please go to <https://panda401k.com/enrollinplan.aspx> to enroll or make changes.
Temporary password for new enrollees: **ENROLL12**

Note: If there are any discrepancies with this document and the plan documents or contracts with the carriers, the plan documents or contracts apply. Benefits and premiums are subject to change and can be terminated at the employer's sole discretion.