

## **Annual Benefits Enrollment** 2023



#### **2023 Annual Enrollment Highlights**

October 19th to November 4th, 2022



#### What's Changing:

- Plus Plan and QHDHP plan design changes to help control costs
- Medical Employee Premiums increase (for those not in the subsidized salary band); salary band change
- Long-Term Disability Premium increase (no changes to coverage limits)

#### What's Staying the Same:

- Continued partnership with SLUCare/ SSM Health in Tier 1 Medical Plans
- No administrator, network or carrier changes
- Maintaining Wellness discount via completion of biometric screening
- Enrollment through Workday

This presentation highlights your benefits. Official plan and insurance documents govern your rights and benefits under each plan. For more details about your benefits, including covered expenses, exclusions and limitations, refer to the individual summary plan description, plan document or certificate of coverage. If any discrepancy exists between this presentation and the official documents, the official documents will prevail. Saint Louis University reserves the right to make changes at any time the benefits, costs and other provisions relative to benefits.



# Medical and Prescription Drug Benefits



### **State of Health Care**



#### ■ Medical & Prescription Drug Costs

- Healthcare spend continues to trend upward year over year due to rising treatment costs, increased health risk amongst consumers, underlying inflation, and other factors
- SLU continues to evaluate all possible opportunities to offset rising medical and prescription costs, while continuing to offer competitive and comprehensive benefits to employees and eligible dependents

#### SLU Plan Costs

- Health plan costs in 2021 were higher than expected, and costs in 2022 year to date are trending higher than anticipated
- Similar to Universities and Employers nationwide, SLU's healthcare spend is expected to experience an increase in 2023

#### Peer Institutions

■ In an effort to offer competitive benefits, SLU continues to monitor its peers and uses data collected from that review to support benefit design and program decisions.

## **Medical and Prescription Drug Plan**



#### Medical: UnitedHealthcare

- Continue to offer two plan options: Plus Plan and QHDHP Plan
- Continued partnership with SLUCare/ SSM Health in Tier 1
- Tier 1 (SLUCare/SSM), Tier 2 (UHC In-Network), and Tier 3 (Out-of-Network) plan design adjustments (single/family) to help control costs:
  - Plus Plan:
    - Deductibles (single/family): Tier 1 \$400/\$800 to \$500/\$1,000, Tier 2 \$1,000/\$2,000 to \$1,200/\$2,400, Tier 3 \$3,000/\$6,000 to \$3,600/\$7,200
    - OOP (single/family): Tier 1 \$2,500/\$5,000 to \$2,700/\$5,400, Tier 2 \$3,050/\$6,100 to \$3,300/\$6,600,
       Tier 3 \$8,000/\$16,000 to \$9,900/\$19,800
    - Coinsurance: Tier 1 10% to 15%
    - PCP/Specialist Visit: Tier 1 PCP Copay \$10 to \$20, Tier 1 Specialist Copay \$20 to \$40

#### HDHP:

- Deductible (single/family): Tier 1 \$1,500/\$3,000 to \$1,750/\$3,500, Tier 2 \$2,000/\$4,000 to \$2,500/\$5,000, Tier 3 \$4,000/\$8,000 to \$5,000/\$10,000
- OOP (single/family): Tier 1 \$2,600/\$5,200 to \$3,000/\$6,000, Tier 2 \$4,500/\$9,000 to \$5,000/\$9,100,
   Tier 3 \$9,000/\$18,000 to \$10,000/\$20,000
- Coinsurance: Tier 1 10% to 15%

## 2023 Cost Sharing: Monthly & Bi-Weekly

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Plan	Monthly Premium	<b>Monthly Premium</b>	Bi-Weekly Premium	Bi-Weekly Premium
Fidil	Non-Wellness	Wellness	Non-Wellness	Wellness
Plus Plan				
Employee Only	\$190.00	\$140.00	\$87.69	\$64.62
Employee and Spouse	\$508.00	\$433.00	\$234.46	\$199.85
Employee and Child(ren)	\$443.00	\$393.00	\$204.46	\$181.38
Family	\$698.00	\$623.00	\$322.15	\$287.54
Plus Plan—Employees Earning up to \$40,060				
Employee Only	\$70.00	\$0.00	\$32.31	\$0.00
Employee and Spouse	\$370.00	\$295.00	\$170.77	\$136.15
Employee and Child(ren)	\$308.00	\$258.00	\$142.15	\$119.08
Family	\$553.00	\$478.00	\$255.23	\$220.62
Plus Plan—Employees Earning over \$150,000				
Employee Only	\$206.00	\$156.00	\$95.08	\$72.00
Employee and Spouse	\$555.00	\$480.00	\$256.15	\$221.54
Employee and Child(ren)	\$483.00	\$433.00	\$222.92	\$199.85
Family	\$760.00	\$685.00	\$350.77	\$316.15
QHDHP Plan				
Employee Only	\$110.00	\$60.00	\$50.77	\$27.69
Employee and Spouse	\$341.00	\$266.00	\$157.38	\$122.77
Employee and Child(ren)	\$292.00	\$242.00	\$134.77	\$111.69
Family	\$459.00	\$384.00	\$211.85	\$177.23
QHDHP Plan — Employees Earning over \$150,000				
Employee Only	\$128.00	\$78.00	\$59.08	\$36.00
Employee and Spouse	\$383.00	\$308.00	\$176.77	\$142.15
Employee and Child(ren)	\$326.00	\$276.00	\$150.46	\$127.38
Family	\$518.00	\$443.00	\$239.08	\$204.46

## **2023 Medical Plan Options**



		Plus Plan			QHDHP Plan	
UHC	SLUCare+SSM	In-Network	Out-of-Network	SLUCare+SSM	In-Network	Out-of-Network
Deductible				(One member o	Non-Embedded: can satisfy entire fam	nily deductible)
Individual	\$ <b>500</b>	<mark>\$1,200</mark>	\$ <mark>3,600</mark>	<mark>\$1,750</mark>	\$2,500	\$5,000
Family	<b>\$1,000</b>	<mark>\$2,400</mark>	<mark>\$7,200</mark>	<mark>\$3,500</mark>	\$5,000	<b>\$10,000</b>
Coinsurance	<mark>15%</mark>	20%	40%	<mark>15%</mark>	20%	50%
Out-of-Pocket Maximun	n (includes medical de	eductibles and medica	ıl copays)	(One member	Non-Embedded: can satisfy entire fan	nily OOP Max)
Individual	\$ <mark>2,700</mark>	<mark>\$3,300</mark>	<mark>\$9,900</mark>	\$3,000	\$5,000	\$10,000
Family	<mark>\$5,400</mark>	<mark>\$6,600</mark>	<b>\$19,800</b>	<mark>\$6,000</mark>	\$9,100	\$20,000
Physician Office Visits						
Primary Care	<mark>\$20 copay</mark>	200/ ofterded	100/ ofterded	0% after ded.	200/ afterded	50% after ded.
Specialist Care	<mark>\$40 copay</mark>	20% after ded.	40% after ded.	15% after ded.	20% after ded.	50% after ded.
Preventive Care	100%	100%	100%	100%	100%	100%
Inpatient Hospital						
	15% after ded.	20% after ded.	40% after ded.	15% after ded.	20% after ded.	50% after ded.
Emergency Room						
	\$250 copay	\$250 copay	\$250 copay	15% after ded.	20% after ded.	20% after ded.
Urgent Care Center						
	\$60 copay	\$60 copay	40% after ded.	15% after ded.	20% after ded.	50% after ded.

## **2023 Pharmacy Plan Options**



	Plus	Plan	QHDHP Plan	
Express Scripts	Retail (34-day supply)	Mail Order (90-day supply)	Retail (34-day supply)	Mail Order (90-day supply)
Prescription Drug Costs				
Tier 1	\$10	\$25	Medical deductible, then 10% coinsurance	
Tier 2	25% coinsurance \$30 min-\$50 max	25% coinsurance \$75 min-\$125 max	Medical deductible, then 10% coinsurance	
Tier 3	50% coinsurance \$50 min-\$100 max	50% coinsurance \$125 min-\$250 max	Medical deductible, then 25% coinsurance	
Tier 4	20% coinsurance up to \$200 max	N/A	Medical deductible, then 10% coinsurance	N/A
Preventive Medications	Priced according to the	e tier in which they fall	Covered at 100	%, no deductible
Out-of-Pocket Maximum (Includes Rx Copays and Coinsurance)				
Individual	\$1,500 Combined with Medical		with Medical	
Family	\$3,000		Combined with Medical	

### ESI Smart90 – Maintenance Rx



- Maintenance medications are required to be filled on 3-month supplies rather than 30-day supplies; members must visit Walgreens or contact Express Scripts by phone or online
- Filling a 3-month supply of your long-term medication can help you save time, money and trips to the pharmacy
- Register at <a href="https://www.express-scripts.com/">https://www.express-scripts.com/</a> or call 888-778-8755 to avoid paying a higher cost



- Delivered to your door with FREE standard shipping
- Transfer prescriptions easily online, by phone or via Express Scripts® mobile app
- Auto-refills and refill reminders available
- Talk with a pharmacist by phone 24/7

## Walgreens

- Multiple convenient locations, many open 24/7
- Transfer your prescriptions easily instore, by phone, online or via
   Walgreens mobile app
- Auto-refills and refill reminders available

## **SLUCare/SSM Tier 1 Partnership**



#### **REMINDER:**

- SLUCare providers and St. Louis area SSM physicians and facilities are designated as Tier 1 under the medical plan.
- When you choose to use a Tier 1 provider you will pay less out of pocket through lower deductibles, out-of-pocket maximums, coinsurance and copays.
- To find an SSM Tier 1 Physician, visit <u>SSMHealth.com</u> and search for providers listed as <u>SSM Health Medical Group.</u>
- In addition to these providers, <u>SSM Urgent Care Centers</u> and St. Louis area <u>SSM Health</u> <u>Express Clinics</u> (formerly Walgreens Take Care Clinics) are also part of the Tier 1 Network

### Wellness



#### **Wellness Program Discount**

- Saint Louis University is requiring biometric screening for anyone that wishes to receive a wellness premium discount in 2023
- New for 2023 2022 new hires that completed a biometric screening upon hire will not be required to complete an additional Fall 2022 screening to receive the 2023 premium discount
- Biometric screening must be completed by December 31, 2022
- Wellness discount will remain the same
  - \$50 for employees and \$25 additional for covered spouses
    - If you make less than \$40,060, complete a biometric screening and have employee only coverage, your healthcare will continue to be free of charge

#### **Employees of Saint Louis University**

- Screenings will include height, weight, blood pressure, calculation of body mass index (BMI), glucose, hemoglobin A1C (this is a measurement of your average blood sugar over the past 3 months) and a cholesterol screening (HDL, LDL, and triglycerides).
- Glucose and cholesterol testing requirements: fast for 8 hours prior to your screening appointment (no food or liquids other than water; take medications as normal)

## **Decision Support Tools**



#### ALEX by Jellyvision

- Benefit assistance tool using interactive, online applications to walk members through plan design decision-making. Information provided to ALEX is confidential.
  - Helps compare options between SLU's Plus Plan and QHDHP Plan based on individual member needs
- Available to all members during Open Enrollment period



## **Price Transparency Tool Options**



#### myuhc.com and Health4Me app

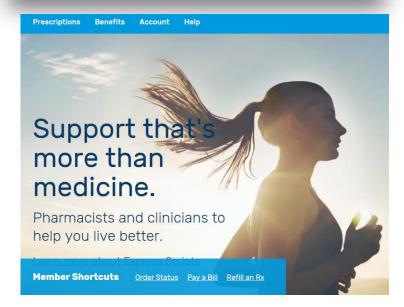
- View Benefit summaries
- View Deductible accumulator
- Find an in-network doctor or facility
- Use Treatment cost estimator to price out services
- Check statements
- Pay bills to healthcare providers
- Contact a registered nurse 24/7

#### express-scripts.com

- Automatically refill and renew prescriptions
- Price and compare different prescriptions and pharmacies
- See how you can save with My Rx Choices
- View your claims and balances
- Connect with pharmacists
- Track your home delivery orders
- Compare plans at: <u>www.express-scripts.com/saintlouisuniversity</u>

Download the apps for UHC and ESI's!







## Health Savings Account



#### **HSA Contributions**



Maximum contribution limits

2023	IRS Maximum	SLU Seed Money *	Your Max Contribution
Individual	\$3,850	\$400	\$3,450
Family	\$7,750	\$800	\$6,950

- IRS maximum reflects a combined employer + employee contribution
- You must make new elections for the 2023 plan year during Open Enrollment; current elections cannot be carried forward
- 55+ can fund an additional \$1,000/year; "catch-up" contribution
- SLU will only contribute money into an OptumBank administered HSA; if you choose to go to a financial institution of your choice, you will not receive the seed money
- HSA seed money will be deposited on the first paycheck in January 2023
- Funds must physically be in your account before disbursements can be made
- Any money remaining in the account at the end of the calendar year rolls over into the next year

## **HSA Qualified Eligible Expenses**



#### **Eligible Expenses**

- Medical deductible and coinsurance payments
- Medical, dental and vision care services not covered through plan design
- Medical, dental and vision care services for your spouse or tax code dependents
- Medicare Part A, B, & D and COBRA coverage premiums
- Over-the-counter medications

#### **Ineligible Expenses**

- Insurance premiums
- Babysitting/childcare
- Cosmetic surgery
- Health club costs

Visit www.irs.gov and view Section 213(d) of the IRS Tax Code publication 502 "Medical and Dental Expenses" for a complete list



## Flexible Spending Accounts



## Flexible Spending and Dependent Care Accounts



- For Plus Plan participants, or those not enrolled in a medical plan at SLU
- Administration remains with Optum (formerly known as ConnectYourCare)
- You must make new elections for the 2023 plan year during Open Enrollment; current elections cannot be carried forward
  - Healthcare FSA: Total election amount less previous reimbursements are available at the time of transaction
  - <u>Dependent Care FSA</u>: Only the cash balance in your account is available at the time of transaction
- You cannot roll over unused balances from one year to the next
  - Use it or lose it rule applies
  - Grace period through March 15<sup>th</sup> for Healthcare FSA only
- Debit card allows direct payment
  - Eases payment, but does not substantiate claims receipts may still be needed!
- If you are enrolling in HSA for 2023, you must use all of your FSA funds by 12/31/2022 or your employer seed money and employee contributions will be delayed until April

2022 IRS Funding Limits on FSAs			
Healthcare FSA	\$2,850*		
Dependent Care FSA	\$5,000**		

<sup>\*</sup>IRS has not yet issued 2023 FSA limits

\*\*\$2,500 if married and filing separately

## **Eligible FSA Expenses**



#### **Healthcare FSA Eligible Expenses:**

- Copays, coinsurance, and deductibles for medical, prescription, and dental plans
- Eye exams, contacts, and eyeglasses
- Laser eye surgeries
- Hearing aids
- Over-the-counter medical supplies
  - Bandages, splints, contact lens solution, etc.
- Over-the-counter medications
- Menstrual care products

#### **Dependent Care FSA Eligible Expenses:**

- Child care, after-school care
- Care for an aging parent

Visit www.irs.gov and view Section 213(d) of the IRS Tax Code publication 502
"Medical and Dental Expenses" for a complete list



## Long-Term Disability



## **Long-Term Disability – NY Life**



- NY Life will continue to be SLU's Long-Term Disability (LTD) insurer
- Coverage limits are not changing from 2022
  - Available Benefits: 60% of base earnings up to \$15,000 per month
- NY Life is requiring a modest rate increase for 2023
  - The University pays the entire cost of coverage up to a base annual earnings of \$36,000; Employees pay for coverage above \$36,000
  - Current LTD rate: \$0.275 per \$100 of covered payroll
  - New LTD rate: \$0.320 per \$100 of covered payroll
  - For example, if your annual earnings are \$50,000, SLU covers the LTD premium for the first \$36,000, thus your LTD premiums would be based on the remaining \$14,000 of earnings; this results in \$3.73 in monthly contributions for LTD coverage
- Current LTD elections will rollover into 2023 based on the new rate, no action required



## **2023 Annual Enrollment**



### **2023 Annual Enrollment**



- Plan elections are effective January 1, 2023 and are binding for the 2023 plan year, unless you experience a qualifying life event
  - Marriage
  - Birth/adoption
  - Divorce
  - Death
  - Change in employment status
  - Change in dependent status
- Changes to Dependent Care FSA are allowed in limited circumstances
- Life status changes allow you to make benefit election changes
- Benefit changes must be requested in Workday within 31 days of life change

### **2023 Annual Enrollment**



- Open enrollment will be held from October 19<sup>th</sup> through midnight November 4<sup>th</sup>, 2022
- If making changes, do so through Workday
  - Open enrollment is a good time assess your benefits, review your benefits for the upcoming year and review your life insurance beneficiaries
  - Current medical, dental, vision, life and accident elections will carry forward
    - If you are planning to cover your spouse on the medical plan in 2023, then you are required to complete a Medical Plan affidavit in Workday.
  - All HSA, dependent care and healthcare FSA participants will need to make an election for 2023; current deductions will not carry forward
- For more information, refer to your 2023 Benefits Guide
- More questions? Contact <u>benefits@slu.edu</u>



## **Appendix**

## **Working Spouse Rule**



- Applies to spousal eligibility on the medical plan only
- Full time working spouses who have access to medical coverage through their employer are not eligible for SLU's medical plan
- Spouses are eligible if they:
  - Are not employed or are self employed
  - Do not have access to qualifying coverage where his/her employer contributes at least 50% of the premium for single coverage
  - Are on Medicare and do not have access to an employer plan
- Completion of the annual Medical Plan affidavit will be required through the Workday system during open enrollment benefits selections. You will be required to attest to your spouse's eligibility during the online open enrollment process. The University reserves the right to request completion of the Medical Plan affidavit to be covered by the medical plan.

## **Considerations of the QHDHP**



- Enrolling in the QHDHP plan may provide advantages depending on your individual and family healthcare needs.
  - Premiums are lower for the QHDHP option
  - You're able to set aside money for future medical and prescription drug costs through a tax advantaged Health Savings Account (HSA)
  - SLU is contributing to your HSA, providing \$400 for individual and \$800 for family coverage
- Unlike the PPO, there are no copays so when using the plan you could have higher out of pocket expenses.
  - You will pay 100% until your deductible is met, and then coinsurance will apply
  - If you're on a higher cost monthly medication or obtain costly services earlier in the year you could be responsible for larger out of pocket cost
- Alex will continue to be offered as a decision tool to determine if the QHDHP maybe the right option for you

## **Health Savings Accounts**



- For Qualified High Deductible Health Plan participants only
- HSAs are designed to help you save and pay for your healthcare now and when you retire
- Triple tax savings:
  - Put money in pre-tax
  - Grow your savings tax free
  - Pay for qualified medical expenses income tax free
- Account is always yours

#### Health Savings Accounts A health-wise investment that helps you ...









Deposit your health care dollars. Grow your savings.

Save on taxes.

Pay for health care, now or later.

## **HSA Eligibility for Account Holders Only**



You are eligible to open and contribute to an HSA if you:



Are covered by a qualified high deductible health plan (QHDHP)



Are not covered by any other health plan which is not a QHDHP



Are not enrolled in Medicare, Medicaid, or TRICARE



Have not received VA benefits within the past 3 months (Exception for service related disabilities)



Are not claimed as a dependent on someone else's tax return



Are not covered by a Health FSA (Must have \$0 in your Health FSA before contributing to an HSA)

If you don't meet one of these eligibility requirements, you can still enroll in the QHDHP plan, you just cannot open and contribute to a Health Savings Account

## **Voluntary Dental Benefits**



- Coverage remains with Delta Dental, no changes in plan designs or rates
- Continue to have the choice between 2 dental plans
- Find a provider on www.deltadentalmo.com
  - Highest level of benefits with PPO dentists
  - Dental cards issued to new enrollees only

#### 2023 Dental Rates

	Flex	Basic Plus			
Monthly					
Single	\$34.45	\$20.16			
Two-Person	\$67.45	\$38.77			
Family	\$115.48	\$69.46			
Bi-Weekly					
Single	\$15.90	\$9.30			
Two-Person	\$31.13	\$17.89			
Family	\$53.30	\$32.06			

## **Voluntary Dental Plan—Delta Dental**



#### 2023 Dental Plan Design

	Flex Plan		Basic	Plus
	PPO Network	Premier/ Out-of-Network	PPO Network	Premier/ Out-of-Network
Deductible				
Individual	\$50	\$50	\$25	\$25
Family	\$150	\$150	\$75	\$75
Calendar Year Maximum				
Per Person	\$1,500	\$1,500	\$1,000	\$1,000
Preventive Care (member responsib	pility shown)			
	0% no deductible	0% no deductible	0% no deductible	50% no deductible
Basic Restorative Care (member res	ponsibility shown)			
	10% after deductible	30% after deductible	30% after deductible	65% after deductible
Major Restorative Care (member re	sponsibility shown)			
	40% after deductible	60% after deductible	60% after deductible	80% after deductible
Orthodontia				
Lifetime Maximum (per person)	\$1,000	\$1,000	\$1,000	\$1,000
Orthodontia	50% For all members	60% For all members	50% For children to age 19 only	75% For children to age 19 only

## **Voluntary Life Benefits – NY Life**



- NY Life will continue to offer Voluntary Life coverage
- Evidence of Insurability is required to add new coverage or increase current coverage amount
- Guaranteed Issue and Maximums
  - Employees may elect Voluntary Life in an amount up to 3 times annual earnings to a maximum of \$600,000; Evidence of Insurability is required if you previously declined to elect Voluntary Life coverage in previous years
  - SLU provides a Basic Life benefit of one times annual earnings to a maximum of \$400,000
  - Combined maximum benefit of \$1,000,000 between SLU provided and Voluntary Life

#### **2023 Voluntary Life Rates**

	Voluntary Life Plan			
Age	Monthly rate per \$1,000	Bi-Weekly rate per \$1,000		
<30	\$0.039	\$0.018		
30-34	\$0.052	\$0.024		
35-39	\$0.059	\$0.027		
40-44	\$0.072	\$0.033		
45-49	\$0.124	\$0.057		
50-54	\$0.221	\$0.102		
55-59	\$0.383	\$0.177		
60-64	\$0.584	\$0.270		
65-69	\$0.974	\$0.450		
70-74	\$1.532	\$0.707		
75+	\$2.06	\$0.951		

## **Voluntary Vision Benefits – VSP**



- Coverage remains with Vision Service Plan (VSP)
  - No change to benefits
  - Decrease to rates
- In-network vs. out-of-network
  - In-network = no claim forms to complete
  - Out-of-network = must submit claim form for reimbursement
- VSP.com
  - Find a provider (Network: <u>Choice</u>)
  - Register and review benefit information
  - Discounts available
  - Print an ID card if desired (not needed to use benefits)

#### **2023 Vision Rates**

	Vision Plan	
Tier	Monthly	Bi-Weekly
Employee Only	\$6.99	\$3.22
Employee and Spouse	\$12.71	\$5.87
Employee and Child(ren)	\$13.32	\$6.15
Family	\$20.57	\$9.49

## **Voluntary Vision Plan—VSP**



#### **2023 Vision Plan Design**

	Vision Plan		
	In-Network	Out-of-Network	
Exam			
Wellvision Exam	\$10 copay	Up to \$45 allowance	
Lenses			
Single	\$10 copay	Up to \$30 allowance	
Bifocal	\$10 copay	Up to \$50 allowance	
Trifocal	\$10 copay	Up to \$65 allowance	
Frames			
	\$150 allowance for a wide selection of frames; \$170 allowance for featured frame brands; 20% on the amount over your balance	Up to \$70 allowance	
Contacts (in lieu of glasses)			
	\$150 allowance for contacts; including the contact lens exam (fitting and evaluation)	Up to \$105 allowance	
Frequency			
Exam/lenses/contacts (in lieu of glasses)	Every calendar year		
Frames	Every other calendar year		

## **Voluntary Accident Benefits – Voya**



- Benefit offered through Voya Financial
  - No change to benefits or rates!
- Plan helps reimburses expenses that occur due to an accident
  - 24-hour coverage accidents on- or offthe-job are eligible
  - When you have an expense, you must submit a claim form; reimbursement will then be mailed as a check
  - \$100 wellness benefit
- Coverage is guarantee issue no health questions asked
- No "network"

#### **2023 Accident Rates**

	Accident Plan	
	Monthly	Bi-Weekly
Employee Only	\$18.42	\$8.50
Employee and Spouse	\$32.59	\$15.04
Employee and Child(ren)	\$36.09	\$16.66
Family	\$50.26	\$23.20

## **Voluntary Accident Plan—Voya**



Below is a sample list of benefits, it does not include all the benefits available under the policy.

#### **2023 Accident Plan Design**

Service	Benefit Amount	Service	Benefit Amount
Accident Hospital Care		Common Injuries — Dislocations	
Surgery (open abdominal, thoracic)	\$1,200	Hip Joint	\$3,850/\$7,700
Hospital Confinement	\$375/day up to 365 days	Knee	\$2,400/\$4,800
Coma (14 or more days)	\$17,000	Shoulder	\$1,600/\$3,200
Follow-Up Care		Common Injuries — Fractures	
Medical Equipment	\$120	Hip	\$3,000/\$6,000
Physical Therapy	\$45/treatment	Leg	\$2,500/\$5,000
Prosthetic Device	\$750 (1) / \$1,200 (2 or more)	Ankle	\$1,800/\$3,600
Emergency Care		Kneecap	\$1,800/\$3,600
Ground Ambulance Transport	\$360	Nose	\$600/\$1,200
Air Ambulance Transport	\$1,500	Other Benefits	
Emergency Room Treatment	\$225	Wellness Benefit	\$100/employee or spouse
Common Injuries		(completion of health screening test)	\$50/child (max of 4)
Burns, Laceration, Torn Knee Cartilage, Paralysis, Tendon/Ligament/Rotator Cuff	Varies	Sickness Hospital Confinement Benefit	\$100/day for employee or spouse \$75/day for children

Note: Closed reduction is non-surgical reductions of a completely separated joint. Open Reduction is surgical reduction of a completely separated joint.

## **Voluntary Legal Benefits - MetLaw**



- MetLaw provides access to a wide-range of legal services and resources, for you and your family, including unlimited access to a top-quality network of attorneys.
- Use the benefit for a variety of personal legal needs related to events such as: getting married, starting a family, buying or selling a home, caring for aging parents, or sending kids off to college

#### 2023 MetLaw Rates

	MetLaw Plan	
	Monthly	Bi-Weekly
Family	\$18.00	\$8.31

- Advantages include:
  - Access to telephonic advice or office consultations,
  - No copays or deductibles to pay and no claims forms when you use a network attorney
  - Use of a convenient app
- For more information, visit www.metlife.com/mybenefits.

## **Voluntary Identity Theft-LifeLock**



- LifeLock Identity Theft provides comprehensive protection for your identity, personal information, and connected devices.
- Features include more options than Lifelock's retail products:
  - LifeLock Identity Alert<sup>™</sup> System
  - Dark Web Monitoring
  - LifeLock Privacy Monitor
  - Online account monitoring
  - 24/7 Live Member Support
  - Fictitious Identity Monitoring
  - Credit, Checking & Savings Account Activity Alerts
  - Three-Bureau Credit Monitoring, Annual Credit Reports & Credit Scores
  - 401K & Investment Account Activity Alerts

#### **2023 LifeLock Rates**

	LifeLock Plan	
	Monthly	Bi-Weekly
Employee Only	\$11.49	\$5.30
Family	\$22.98	\$10.61

- Lost Wallet Protection
- U.S.-Based Identity Restoration Specialists
- Million Dollar Protection™ Package
- Plus Norton Features: Parental Controls, Cloud Backup, SafeCam, Password Manager, Online Threat Protection and Smart Firewall
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