

# **2025 Open Enrollment**



January 1, 2025 - December 31, 2025

# Medical

	Current Plans in Place			1/1/25 Plans				
	Base HSA Elect Choice	Middle HSA Elect Choice		Plan HSA pice Plus	Base HSA Elect Choice	Middle HSA Elect Choice		h Plan HSA oice Plus
	Network Only	Network Only	Network	Non-Network	Network Only	Network Only	Network	Non-Network
Annual Deductible	Embedded	Embedded	Non	Embedded	Embedded	Embedded	Non	Embedded
Individual	\$6,000	\$5,000	\$2,000	\$4,000	\$4,000	\$3,000	\$2,000	\$4,000
Family	\$12,000	\$10,000	\$4,000	\$8,000	\$8,000	\$6,000**	\$4,000	\$8,000
Coinsurance Out-of-Pocket Max.	80%	80%	100%	70%	80%	90%	100%	70%
(Includes deductible) Individual	\$8,000	\$6,000	\$3,500	\$7,000	\$4,500	\$4,000	\$3,500	\$7,000
Family	\$16,000	\$12,000	\$7,000	\$14,000	\$9,000	\$8,000	\$7,000	\$14,000
Net OOP after HSA								
Individual	\$6,650	\$5,150	\$2,650	\$6,150	\$3,150	\$3,150	\$2,650	\$6,150
Family	\$13,300	\$10,300	\$5,300	\$12,300	\$6,300	\$6,300	\$5,300	\$12,300
Office Visits								
Preventive Care	100%	100%	100%	Covered In Network Only	100%	100%	100%	Covered In Network Only
Primary Care	80% after ded.	80% after ded.	100% after ded	70% after ded.	80% after ded.	90% after ded.	100% after ded	70% after ded.
Specialists	80% after ded.	80% after ded.	100% after ded	70% after ded.	80% after ded.	90% after ded.	100% after ded	70% after ded.
Emergency Room	80% after ded.	80% after ded.	100% after ded	70% after ded.	80% after ded.	90% after ded.	100% after ded	70% after ded.
Outpatient Surgery	80% after ded.	80% after ded.	100% after ded	70% after ded.	80% after ded.	90% after ded.	100% after ded	70% after ded.
Inpatient Hospital	80% after ded.	80% after ded.	100% after ded	70% after ded.	80% after ded.	90% after ded.	100% after ded	70% after ded.
Prescription Drug								
Deductible	ded then	ded then	ded then		ded then	ded then	ded then	
Tier 1	\$10	\$10	\$10		\$10	\$10	\$10	
Tier 2 Tier 3	\$35 \$60	\$35 \$60	\$35 \$60		\$35 \$60	\$35 \$60	\$35 \$60	

## **HSA Contributions:**

SterlingRisk will contribute \$1,350 per employee and \$2,700 per family into the Health Savings Account for the Base Plan.

SterlingRisk will contribute \$850 per employee and \$1,700 per family into the Health Savings Account for the Middle and High Plan.

\*\*SterlingRisk's contribution is made on a biweekly basis over 26 pay periods.

## **Medical Plan - Deductibles**

Current Plans in Place				ı	1/1/25 Plans				
	Base HSA	Middle HSA		Plan HSA	П	Base HSA	Middle HSA	_	h Plan HSA
	Elect Choice	Elect Choice	Cho	ice Plus	4 1	Elect Choice	Elect Choice	Ch	noice Plus
	Network Only	Network Only	Network	Non-Network	Ш	Network Only	Network Only	Network	Non-Network
Annual Deductible	Embedded	Embedded	Non E	mbedded	11	Embedded	Embedded	Non	Embedded
Individual	\$6,000	\$5,000	\$2,000	\$4,000	Ш	\$4,000	\$3,000	\$2,000	\$4,000
Family	\$12,000	\$10,000	\$4,000	\$8,000	П	\$8,000	\$8,000**	\$4,000	\$8,000

Embedded Deductible - Each family member has an individual deductible in addition to the overall family deductible. Meaning if an individual in the family reaches his or her deductible before the family deductible is reached, his or her services will be paid by the insurance company.

\*\*The Individual Embedded Deductible on the Middle plan is \$3,300, per IRS guidelines for 2025

Non-Embedded Deducible - There is no individual deductible. The overall family deductible must be reached, either by an individual or by the family, for the insurance company to pay for services.

Preventive care is covered 100 percent in-network.

### This includes:

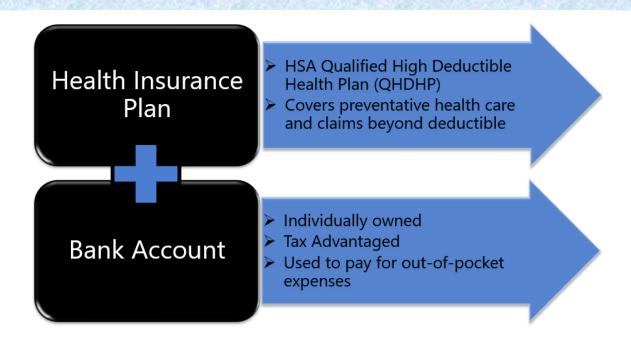
- Immunizations
- Age-appropriate preventive exams and health screenings

# **Health Savings Account – UMB Bank**



- ➤ Leader/advocate in the healthcare marketplace
- > Top 10 custodian of Health Savings Accounts (HSAs)
  - > Provide solutions for:
  - More than 5.6 million healthcare accounts
  - ➤ More than 988,000 HSA accounts with more than
    - ➤ Nearly \$2 billion in HSA assets and deposits
- Leader in Healthcare Payments industry since 1996

# **Understanding How HSAs Work**



- To be eligible:
- You must be covered by an HSA qualified High Deductible Health Plan
  - You cannot be enrolled in Medicare (any part)
  - You cannot be claimed as a tax dependent on someone else's taxes
    - You cannot have any other non-permissible coverage



# **Qualified Medical Expenses**

- Medical out-of-pocket expenses such as deductibles and coinsurance
  - Dental treatment such as fillings, braces, extractions
    - Hearing aids including batteries
      - Prescription drugs
    - Eye exams, eyeglasses, and contact lens
      - Chiropractic Care and Acupuncture
- Premiums for qualified long term care insurance (dollar limits may apply)
  and COBRA
  - Medicare premiums
- Health plan coverage while receiving Federal or State unemployment benefits

<sup>\*</sup>The list provides examples of eligible medical expenses. This list is not all-inclusive. Remember, the IRA may modify its list of eligible expenses from time to time. For additional details on what qualifies or doesn't qualify as a medical expense see IRS tax publication 502.



# Get to know your benefits.



# Access your plan easily with UMR.com®

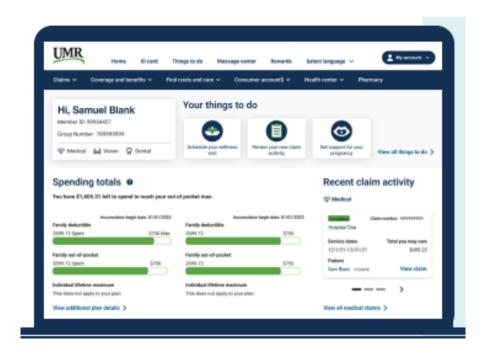
## Make umr.com your first stop

You want managing your health care to be fast and easy, right? You got it. At **umr.com**, you'll find everything you want to know – and need to do – as soon as you sign in.

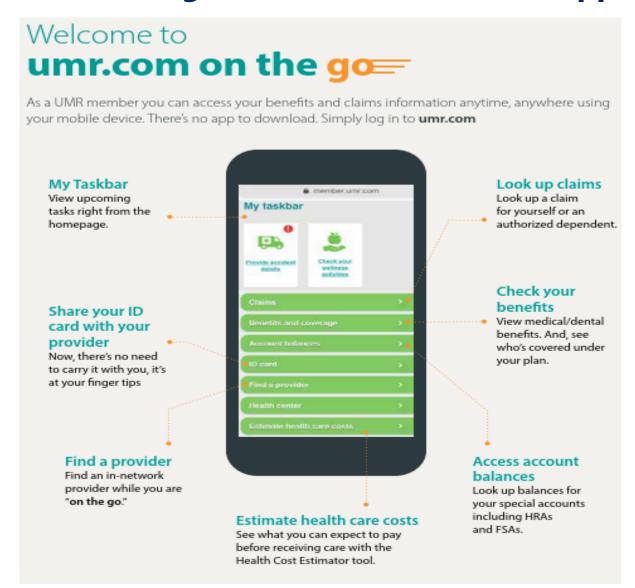
No hassles. No waiting. Just the answers you're looking for anytime, night or day!

#### Sign in now to:

- View Things to do, your personalized benefits to-do list
- Check your benefits and see what's covered
- Look up what you owe and how much you've paid
- · Find a doctor in your network
- Learn about medical conditions and your treatment options
- Access tools and trusted resources to help you live a healthier life



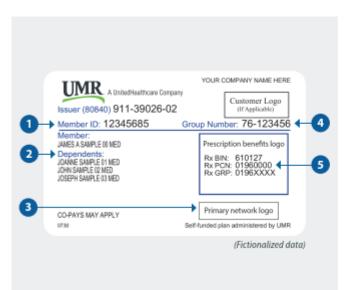
## Get on-the-go access with the UMR® app



#### Want to bookmark umr.com on your mobile device?

iPhone: Touch and hold the open book icon to add umr.com Android: Tap on the menu. Then select "Add Bookmark."

## Understanding and using your new ID card



- Member ID: The number assigned specifically to you to track all of your benefits and claims information.
- Dependents: A list of the family members who are covered under your plan.
- PPO: Your medical provider network, also referred to as your preferred provider organization (PPO). Going to doctors, clinics and hospitals in your network will save you money.
- Group number: The number assigned to identify your group health plan.
- Rx numbers: Information about your prescription drug plan. Pharmacists use this to process your claims.



#### More on the back

Look for contact information and more on the back of your ID card.

- Plan details: Your in-network (In-Net) and out-ofnetwork (Out of Net) medical individual and family deductibles (Ded) and out-of-pocket maximums (OOPM) information.
- UMR CARE number: Call this number only when you need medical services and your plan requires prior authorization for those services.
- Customer service number: This is your main number to call for questions about claims or benefits.
- Pharmacy benefits number: Call this number when you have questions about pharmacy benefits.

## Rediscover your passion for Health with One Pass Select

One Pass Select™ can help you reach your fitness goals while finding new passions along the way. Find a routine that's right for you whether you work out at home or at the gym. Choose a membership tier that fits your lifestyle and provides everything you need for whole body health in one easy, affordable plan. You and your eligible family members or friends can get started with One Pass Select today.

#### Find your fit with One Pass Select:



#### At the gym

Choose from our large nationwide network of gym brands and local fitness studios. Use any gym in the network and create a routine just for you.



#### At home

Work out at home with live or on-demand online fitness classes. Try the workout builder to get routines created just for you, no matter what your fitness level and interests are.



#### In the kitchen

Get groceries and household essentials delivered to your home. One Pass Select makes it easy to plan for everything you need to enjoy delicious, nutritious meals.

Category	Digital	Classic	Standard	Premium	Elite
Monthly fee*	\$10	\$29	\$64	\$99	\$144
Gym network size	N/A (online fitness classes)	11,000+ gym locations	12,000+ gym and premium locations	14,000+ gym and premium locations	16,000+ gym and premium locations
Grocery delivery	×	~	~	~	~

<sup>\*</sup>A one-time enrollment fee will apply.



Learn more and enroll today at OnePassSelect.com



# Will my pharmacy experience change?

For most plan members, there will be little to no change. Go to your usual pharmacy and get your medications.



## Member ID Card

Remember to present your new card at the pharmacy.



## Medication Coverage

You can find your formulary and benefits resources in our Member Portal.



## Member Support

Our dedicated Member Support team is available via 844.454.5201

6 am - 7 pm ☐MT☐ Mon-Fri

9 am - 2 pm □MT□ Sat





## Recommended Resource: Member Portal

Discover easy Rx benefits management in the Member Portal: smithrx.com/portal

#### **Member ID Card**

Access your Member ID

Card and forms

## **Plan Usage Tracker**

Track total spends against your plan deductible and out-of-pocket limits and the total spend breakdown

## View Claims, PA status

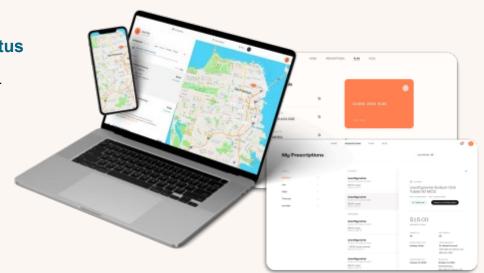
View prescription claims.

Get Prior Authorization

Status Notifications

## **Find My Meds**

Search for the lowest cost pharmacy near you with the Find My Meds tool







# Our nationwide pharmacy network

65,000+ retail locations and growing.

Retail Network











Mail Order Network







**Specialty Pharmacy** 









## SmithRx Member Services

We make it easy and convenient for you to access your medications and Rx benefits.



## Live Chat

Just click the chat icon on the bottom-right of the web page to start.



## **Member Portal**

Create an account on our Member Portal at smithrx.com/portal.

Access answers to FAQs.



## Phone

**□**844**□**454**□**5201

Member Specialists are available:

6 am - 7 pm □MT□ Mon-Fri 9 am - 2 pm □MT□ Sat



### **Email**

Email: help@smithrx.com



## **Dental**

If you go out of network, you have more chance of getting balance billed under the Base Plan.

	PPO Base Dental	PPO High Dental
In-Network Deductible	\$100 Individual (In Network) \$300 Family ( In Network)	\$50 Individual (In Network) \$100 Family (In Network)
Out-of-Network Deductible	\$150 Individual (In Network) \$450 Family ( In Network)	\$100 Individual (Out Network) \$300 Family (Out Network)
Annual Maximum (combined In & Out-of-Network)	\$1,500 per member in-network (In Network Only) \$1,500 out of network (Out Network)	\$1,500 per member in-network (In Network Only) \$1,250 out of network (Out Network)
Preventative Services (deductible waived)	100% In Network/ 70% out of Network	100% in Network / 100% out of Network
Basic Services	80% in Network/ 60% out of Network	80% in Network / 80% out of Network
Major Services	50% in Network/ 50% out of Network	50% in Network / 50% out of Network
Dental Implants	50% in Network/ 50% out of Network	50% in Network / 50% out of Network
Orthodontia	Adult and Child	Not Covered
Orthodontia Max	\$1,000 Lifetime per person	Not Covered
Reasonable and Customary Rates for Out of Network Expenses	Out of network reimbursement rates are based on what an in network provider would have charged.	Out of network reimbursement is based on what 9 out of 10 other out of network dentists charge.

In order to receive In Network benefits under the PPO you must use the National Options PPO 30 Network. If you cannot find a provider in network, you can use any licensed dentist but may be subject to balance billing.

## Vision

- Using in network benefits provides the best reimbursement. Out of network provides limited reimbursement
- For in network benefits, utilize providers within the Spectrum / UHC Network

Benefits	Network	Non-Network
Comprehensive Eye Exam	\$10 Copay / 12 months	Up to \$40
Materials –Eye Glass Lenses/ Frames or Contact Lenses	\$25 Copay / 12 months (Frames every 24 months)	See Below
<ul><li>Single Vision</li><li>Bifocal</li><li>Trifocal</li><li>Lenticular</li></ul>	Covered in Full After Copay Standard Lenses with scratch coating	Up to \$40 Up to \$60 Up to \$80 Up to \$80
Frames	\$120 retail allowance after Copay Additional 30% discount may be available on overage	Up to \$45
Elective Contact Lenses*		
• Covered-in-full contacts (after Copay)	Up to 4 Boxes	Up to \$130
All other elective contacts	Allowance up to \$130	Up to \$130
• Necessary Contact Lenses  *Contact lenses are in lieu of eyeglasses	100% covered after \$25 Copay	Up to \$210



# Access your Dental and Vision Plan easily with myuhc.com<sup>®</sup> and myuhcvision.com

# Activate your myuhc.com account after enrolling and gain access to:

- > See what's covered
- ➤ View claim details
- ➤ Check your plan balances
- ➤ Find network providers Search through National PPO 30



# **Disability Benefits**

## **Voluntary Short-Term Disability**

- After 7 days of disability plan pays 60% of earnings up to a maximum of \$2,000 per week.
- ➤ When enrolling for the first time, there is a pre-existing condition exclusion. Disabilities caused by an illness existing 3 months prior to 1/1/25 will not be covered during the first 6 months of coverage.
- Disabilities are payable for up to 12 weeks (approx. 90 days)
- Payroll deductions are post-tax making the benefit tax free in most states.
- Payroll deductions may change due to a change in your earnings for 2025, for estimated premium please utilize the benefit calculator on STRIVE.

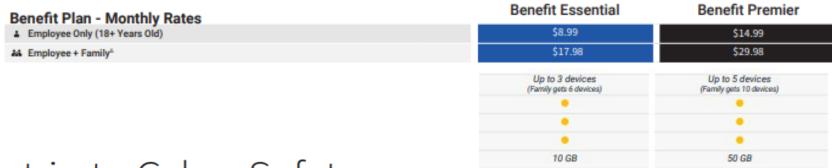
## **Tax Choice Long-Term Disability**

This is a tax choice benefit - if you pay premium, the benefit is tax free. If SterlingRisk pays the premium your benefit will be taxable.

- After 90 days of disability plan pays 60% of earnings up to \$10,000 per month.
- Under age 61 when disabled, benefits are payable to your normal retirement age or 3.5 years whichever is longer.
- > Age 62 Normal retirement age or 3.5 years whichever is longer
- Age 63 Normal retirement age or 3 years whichever is longer
- Age 64 Normal retirement age or 2.5 years whichever is longer
- ➤ Age 65 2 years
- Age 66+ Please refer to our Benefit Guide on STRIVE
- When enrolling for the first time (when first hired) there is a 12 month pre-existing exclusion. Disability caused by an illness existing 3 months prior to your enrollment date will not be covered for the first 12 months you are on the plan
- > Payroll deductions may change due to a change in your earnings for 2025.

## **Norton LifeLock**

## **Choice of 2 different plans:**



## Opt-in to Cyber Safety

No one intends to be unsafe online. Help protect your identity and devices with Norton LifeLock Benefit Plans. Let us help you empower you and your family to live your digital lives safely.

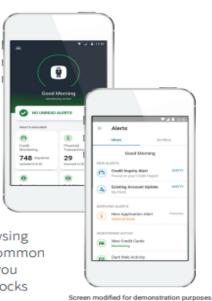


Anti-virus software and multilayered, advanced security helps protect devices against existing and emerging threats, including malware and ransomware.



#### **Online Privacy**

Norton Secure VPN protects devices and helps keep online activity and browsing history private. Privacy Monitor scans common public people-search websites to help you opt-out. And SafeCam alerts you and blocks attempts to access your webcam.<sup>1</sup>



Features may differ depending on plan.



#### Identity

We monitor for fraudulent use of personal information, and send alerts when a potential threat is detected.<sup>†</sup>



#### **Home & Family**

Take action to monitor your child's online activity with easy-to-use tools to set screen time limits, block unsuitable sites, and monitor search terms and activity history.



# Flexible Spending Account

- ➤ The Flexible Spending Account (FSA) is an elective benefit You do not need to be enrolled in your employer insurance plan to participate in the FSA.
- Allows you to set aside **pre-tax** money for eligible expenses incurred by you and your family throughout 2025. You can set aside up to \$3,300.

## Use It Or Lose It Rule -

➤ Per IRS guidelines, you must use all elected amounts prior to the end of the plan year, or these fund will be **forfeited**.

# Flexible Spending Account

- ➤ **Grace period** You have until March 15, 2026, to incur expenses to put towards the 2025 plan year.
- ➤ **Run out Date** You have until March 30, 2026, to submit all expenses incurred between January 1, 2025 March 15, 2026
- No fees paid by you to participate in the FSA.
- The Accounts available for participation are:
  - Medical Reimbursement
  - Dependent Care Reimbursement

## **Limited FSA**

- ➤ If you are currently enrolled in an HSA and wish to enroll in the FSA, you MUST enroll in a Limited FSA.
- Medical expenses must be run through you HSA.
- Eligible items for the limited Health FSA include:
  - Vision expenses (Prescription Glasses, contacts, etc.)
  - Dental Expenses (Orthodontia, Crowns, Fillings, etc)
- ➤ All other rules that apply to a regular Health FSA apply to the Limited FSA

# **Dependent Care**

Both you and your spouse must be employed or seeking employment to be eligible for this benefit.

- For your children under the age of 13, coverage includes:
  - After-school care
  - Daycare
  - Summer day camp (overnight camp is <u>NOT</u> an eligible expense)

## For the care of the elderly or disabled:

- > The person must be a dependent on your tax return
- Employee's spouse can be full time student or mentally or physically incapacitated.

## For the 2025 plan year, you may contribute:

- \$100 minimum \$5,000 maximum
- Save on federal and FICA taxes.
- Pay as you go. Your full annual election is NOT available up front, only as it is deposited.
- You may only change your annual election if you meet a qualifying event such as:
  - Change in work status/shift change
  - Change in daycare cost

# **Transit/Parking Account**

- You can set aside money on a pre-tax basis to pay for your out-of-pocket Transportation expenses you incur on your way to and from work.
- You can set aside a maximum of \$325 per month on a tax free basis for parking and \$325 per month for transportation.
- The account balances roll over from month to month, year to year.
- Once you enroll in the Transit plan, you do not need to re-enroll every year, you amount will carry over to the new year.

## **Start Your Enrollment!**

- Sign into ADP Workforce Starting November 11th Enroll Online
  - You must actively enroll online in ADP or you will not be covered
  - You must make a new benefit election for Medical, HSA and all FSA's.
  - All other benefits are passive enrollments, meaning they will remain in place unless you make a change. This includes Dental, Vision, STD, LTD and LifeLock.
  - ➤ If you are waiving all or any benefits you still must enroll online in ADP and indicate your waiver reason.
  - Online enrollment must be completed by <u>November 20<sup>th</sup>, 2024 there</u> will be <u>NO extensions!</u>