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2023-2024 EMPLOYEE BENEFITS GUIDE

We appreciate the hard work and dedication that you bring to our organization and to the residents! We are thankful for you!

Virginia Lutheran Homes understands the importance of having a well-rounded benefits program available to you and your family with plan options that offer added protection in the case of illness or injury, therefore, we've created a comprehensive and valuable benefits program to you and your eligible family members.

This guide has been developed to assist you in learning about your benefit options and how to enroll.

We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family.

Sincerely,







ENROLLMENT GUIDE

Open Enrollment Dates: August 14 through August 28, 2023

Benefit effective date: Benefits are administered on a plan year from October 1, 2023 - September 30, 2024

Who Is Eligible:

If you're a full-time employee at Virginia Lutheran Homes, you're eligible to enroll in the benefits outlined in this guide. Full-time employees are those who work 37.5 or more hours per week and 30 hours for medical only. New hires are eligible for benefits first of the month following 60 days of employment. In addition, the following family members are eligible for medical, dental and vision coverage:

- Spouse who is not offered affordable coverage (defined by the ACA standards) through his/her employer
- Children up to the age of 26

How to Enroll or Make Changes:

Are you ready to enroll? The first step is to review your current benefits. Did you move recently or get married? Verify all of your personal information and make any necessary changes. Once all of your information is up to date, it's time to make your benefit elections. The decisions you make during open enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully.

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period. Qualifying events include things like:

- · Marriage or divorce
- · Birth or adoption of a child
- · Change in child's dependent status
- Death of a spouse, child or other qualified dependent
- Change in residence
- Change in employment status or change in coverage under another employer-sponsored plan

Virginia Lutheran Homes offers medical insurance through Anthem under the Healthkeepers network. You have the freedom to use providers in and out-of-network, but you will save money by visiting in-network providers. Please visit www.anthem.com for a list of participating providers. In addition, Anthem Healthkeepers has expanded out-of-state coverage, so you now have access to see in-network providers outside of Virginia! Deductible and out-of-pocket-maximums reset October 1.



Please note, if your spouse is eligible for medical coverage through their employer, they will not be eligible to enroll in Virginia Lutheran Home's medical plan.

	HealthKeepers POS 25 / 500 / 20% / 4000	HealthKeepers HSA 3000 / 0% / 4500		
In-Network Benefits				
Deductible (Ind/Fam) Embedded	\$500 / \$1,000	\$3,000 / \$6,000		
Coinsurance	20%	0%		
Out-of-Pocket Maximum (Ind/Fam)	\$4,000 / \$8,000	\$4,500 / \$9,000		
Preventive Care	Covered 100%	Covered 100%		
Adult Vision Exam	\$15 copay, 1 per year	\$15 copay, 1 per year		
Office Visits (PCP/Specialist)	\$25 PCP / \$50 SPC	Covered at 100% after deductible		
Urgent Care	\$50 copay	Covered at 100% after deductible		
Emergency Room Services	20% after deductible	Covered at 100% after deductible		
Diagnostic Labs/X-rays	20% after deductible	Covered at 100% after deductible		
Outpatient Hospital Expenses	20% after deductible	Covered at 100% after deductible		
Inpatient Hospital Expenses	20% after deductible	Covered at 100% after deductible		
Mental Health & Substance Abuse	Outpatient: \$25; Inpatient: 20% after deductible	Covered at 100% after deductible		
Prescription Drugs				
Deductible	None	Combined with medical		
Out-of-Pocket Maximum	Combined with Medical	Combined with medical		
Retail Pharmacy Copays	\$10 / \$40 / \$70 / 20% up to \$300	After deductible: \$10 / \$40 / \$70 / 20% to \$300		
Mail Order Copays	\$25 / \$100 / \$175	After deductible: \$25 / \$100 / \$175		
Out-of-Network Benefits				
Deductible (Ind/Fam)	\$1,000 / \$2,000	\$6,000 / \$12,000		
Coinsurance	Anthem 70% / Employee 30%	Anthem 70% / Employee 30%		
Out-of-Pocket Maximum (Ind/Fam)	\$10,000 / \$20,000	\$11,250 / \$22,500		

Employee Cost Per Pay Period				
HealthKeepers HealthKeepers POS 25 / 500 / 20% / 4000 HSA 3000 / 0% / 4500				
Employee Only	\$67.20	\$0.00		
Employee + Child	\$229.65	\$72.19		
Employee + Children	\$535.74	\$259.40		
Employee + Spouse	\$633.34	\$330.56		
Employee + Family	\$1,023.15	\$618.31		



MAIL ORDER PHARMACY

SKIP THE PHARMACY WITH HOME DELIVERY Set up home delivery through CarelonRx Mail for *the prescriptions you take long-term for conditions like high blood pressure, diabetes, heart disease*, asthma and thyroid problems. You'll receive your medications at your door and enjoy the convenience of not having to visit the pharmacy!

CarelonRx mail at 833-320-1180 or use the live chat feature on Sydney Health or an anthem.com!

Start home delivery now with these steps

- 1. Visit the *Pharmacy* page on anthem.com, then choose the *Pharmacy* tab on the Sydney Heath app, or scan the QR code with your phone's camera. Register your member account if you haven't already.
- 2. Choose Request a New Prescription
- 3. Type in the prescription you'd like delivered.

- Under the name and cost of your prescription, select Request a New Prescription.
- 5. Fill in any blank fields, such as shipping address, payment method and prescriber.
- First-time requestors will need to select Continue to Medical Profile.
- 7. Verify any allergies or health conditions then select **Continue to Submit Order**.



Savings Every 90 days!			
Generic \$5			
Preferred Brand	\$20		
Non-Preferred Brand	\$35		

Medical

Allergy Psychology

Psychiatry

Anthem's LiveHealth Online

SEE A DOCTOR TODAY



Sign up or log in

Using your smartphone, tablet or computer.



Choose a doctor

Review their profile and qualifications to select a doctor that fits your needs.



Feel better faster

Get advice, treatment options and a prescription if needed.

A BETTER WAY TO GET WELL

Common concerns

See a doctor for these conditions and more: √ Flu √ Cold & fever √ Minor rashes √ Sore throat √ Tooth pain √ Skin infections √ Headache √ Pink eye √ Diarrhea √ Allergies

\$0 cost to you!

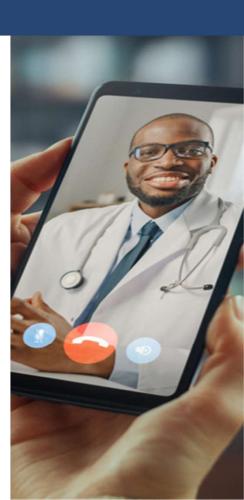
With LiveHealth Online, you have access to primary care doctors anytime, anywhere.

You must be enrolled in the Anthem medical plan to access LiveHealth Online.

LiveHealth Online Benefits

- You can talk to a doctor from wherever you are—day or night.
- Skip the trip to the ER or urgent care (for non-emergency related illnesses or injuries)
- Now offered to you at no cost!
- Convenience of your location and time!

Feel better when you need to! 1-888-548-3432 livehealthonline.com



Building Healthy Families



A new program to support growing families

When you enroll in Building Healthy Families, you can count on personalized support at every stage, from family planning and pregnancy through the toddler years. Plus, if you have a family story that includes adoption, surrogacy, or single parenthood, the resources, tools, and information on your profile will be tailored to what you need. Depending on your situation, you'll have unlimited access to:



Tools to help you stay organized

- Log newborn feedings, diaper changes, growth, vaccinations, and your child's developmental milestones.
- · Monitor prenatal health risks, such as blood pressure and weight.



Health and wellness expertise for you and your family

- Explore a library with thousands of educational articles and videos on everything from family planning to parenting tips.
- Connect with a maternity nurse and access virtual lactation support, if needed.



Personalized pregnancy support

- Chat with a Family Care Coach during pregnancy for help navigating your Building Healthy Families experience.
- Receive updates on your pregnancy progress, like development of your baby and body changes.

Enroll today

- 1. Visit **anthem.com** or log in to Sydney Health.
- 2. Find *Featured Programs* at the bottom of the homepage.
- 3. Select View All then choose the **Building Healthy Families** tile.

You can also scan this QR code with your phone's camera to get started.





Benefits to help you thrive

Interactive health trackers

24/7 access

Personalized content



When you need care quickly

Knowing where to go can save you time and money



When you need care right away, the emergency room (ER) might be the first place that comes to your mind. However, the ER may not be the best choice in every situation. You have options when you have a sudden need for care, and knowing what they are can help you save time and money - and feel better sooner.

Where to go for care

Going to the ER or calling 911 is always your best option for emergencies. If it's not an emergency, you can see your primary care physician (PCP), have a virtual visit with a doctor, or go to a retail health clinic or urgent care center. This chart compares those options:1

PCP

Usually available during normal business hours and may also provide medical advice by phone after hours

Virtual care

24/7 access to doctors through the Sydney HealthSM app, no appointment needed

Retail health clinic

located in certain drugstores and major retailers

Urgent care center

Stand-alone facilities, open extended hours

Emergency room

Stand-alone facilities or part of hospitals, open 24/7



cost7 \$\$

average wait2 18 min

Mild asthma, back pain, flu-like symptoms, allergies, fever, sprains, diarrhea, eye or sinus infection, rash, urinary tract infection (UTI), sore throat, earaches, bumps, minor cuts and scrapes, and other nonemergency symptoms



average wait3

10 min

Flu-like symptoms, allergies, fever, sinus pain, diarrhea, eve infection, rash, UTI



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average wait4 30 min

They help ensure tests Sore throat, earaches, bumps, minor cuts and scrapes, UTI



\$\$\$

average wait5 30 min

Sprain and strains, nausea, diarrhea, ear or sinus pain, minor allergic reactions, cough, sore throat, minor headache, UTI



average wait6 90 min

Signs of a heart attack (chest pain) or stroke (sudden numbness and slurred speech), difficulty breathing, and severe burn or bleeding - and any other symptoms where it is reasonable to think you are having a life-threatening emergency or your health is in serious jeopardy

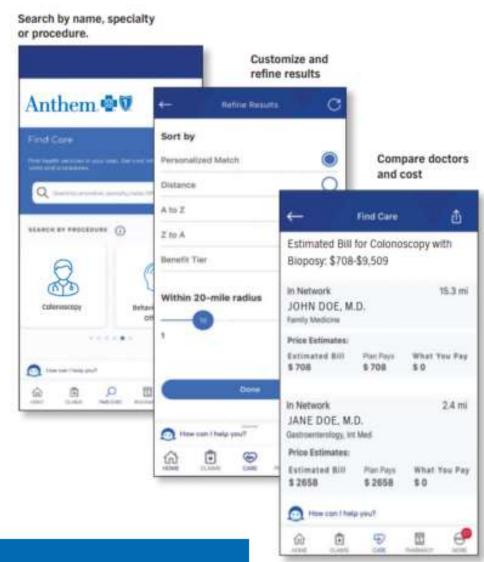
Search for high-quality doctors nearby and compare costs

Choosing a doctor you trust is important — and choosing one in your plan's network can keep your costs down. Using **Find Care** on the SydneySM Health mobile app and anthem.com can help you meet both needs.

Customizing your search

Find Care brings together details about doctors, hospitals, and pharmacies in your plan's network. You can customize your search by name, specialty, or procedure. You can also compare information such as costs, languages spoken, and office hours.*

To make sure your facility and service are in your plan's network, view the doctor or facility profile.



Using the Sydney Health app

You can start using **Find Care** by downloading the Sydney Health app to your mobile device or logging in to anthem.com. Select **Find Care and Cost** from the Care menu.





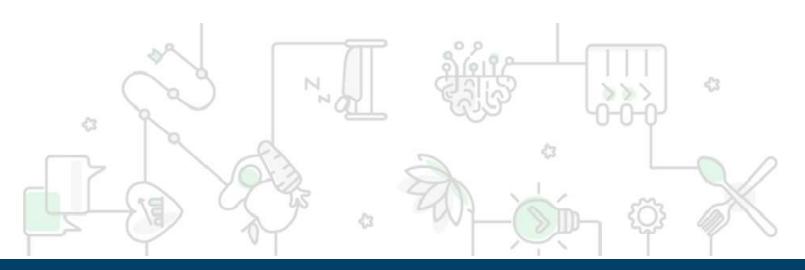
Employee Assistance Program

If you or a loved one need support for coping with life, reducing stress, or living with a mental health issue, you are not alone. Your Employee Assistance Program (EAP) offers work and life support at no extra cost. Each member of your household can have visits with an EAP counselor per issue, per year. Asking for help can be the hardest part. The information below details the resources available to you, including how to reach out when you're ready.

	Face to Face Counseling	Emotional Well-being Resources	Talkspace	LiveHealth Online	Suicide and Crisis Lifeline
What is it?	Confidential in-person sessions with a licensed professional counselor.	Resources and support to help you live your happiest, healthiest life, including self-help digital tools to help improve your emotional well-being.	Personalized match with a therapist. 24/7 access to confidential messaging with therapist via text, audio, or video and the ability to schedule a virtual visit in real time.	24/7 confidential counseling by audio and video messaging or through scheduled virtual visits.	24/7 confidential mental health support, including prevention and crisis resources, for anyone in distress.
When do I use it?	When you need help managing: Depression Stress Anxiety Chronic pain Drug and alcohol use Emotional health issues	When you need help managing: Anxiety Depression Sleep issues Panic Social anxiety Stress Drug and alcohol use Worry	When you need help managing: Anxiety Depression Grief Relationships Sleep Stress Drug and alcohol use Trauma	When you need help managing: Anxiety Stress Depression Grief Relationships/family issues Panic attacks Coping with illness	When you or someone you know are: Experiencing suicidal thoughts or behavior. Experiencing emotional distress. Behaving in a way that could harm others.
What does it cost?	No extra cost.	No extra cost.	No extra cost. Includes sessions per issue, per year, as part of your EAP counseling	No extra cost. Includes sessions per issue, per year, as part of your EAP counseling visits.	No extra cost.
How do I connect?	Call your EAP 24/7 at 800-999-7222.	Visit anthemEAP.com. You can also use the Sydney SM Health mobile app.	Visit talkspace.com/ associatecare, 24/7.	Visit anthem.com, or go to anthemEAP.com and select Connect with a counselor, then LiveHealth Online. You can also use the Sydney SM Health mobile app.	Call or text 988 or chat with someone at 988lifeline.org, 24/7.



Up to four counseling visits per issue 1-800-346-5484 | AnthemEAP.com Company Code: Virginia Lutheran Homes



KnovaSolutions

If you or one of your family members are experiencing a complicated medical situation, KnovaSolutions may be able to help you navigate the healthcare system and receive the best care possible.

Who is KnovaSolutions? KnovaSolutions is a health care service team made up of a nurse, a pharmacist, and a medical research librarian who will work with you to help answer your health care questions and needs. Their team is dedicated to improving you and your family's health and well-being. They are available to help consult you on your important health care decisions and questions.

What does KnovaSolutions do? KnovaSolutions is available to answer your questions regarding: healthcare treatment options, medical care decisions, medication, and work-life balance. This is a secure and confidential program in which your conversations will not be shared with anyone.

How much does it cost? We believe in the importance of their employees' health and well-being and is offering this program at no cost to you.

How do I enroll? Call KnovaSolutions at 1-800-355-0885 to determine your eligibility. If you are eligible for the program, a KnovaSolutions agents will reach out to you by phone to see if you would like to enroll. Please note, the incoming call will show up as Cheyenne, Wyoming on your caller ID.

- · What does my diagnosis mean?
- Where can I go for the best treatment?
- · How do I get a second opinion?
- What are the risks and benefits of this surgery?
- How do I get a copy of my medical records?
- What lifestyle changes will improve my health?
- How can I decrease my stress?

"My KnovaSolutions nurse helped me take the time to look closely at my health. She helped me better understand how my lifestyle choices were impacting my health. With her support, I have been able to make lifestyle changes that I knew I needed to make, but just had not gotten around to doing. It has been so helpful to know I am not alone, and the support I need is just a phone call away."



Twin Health Diabetes Reversal Program

OVERCOMING DIABETES IS POSSIBLE — MEET TWIN HEALTH

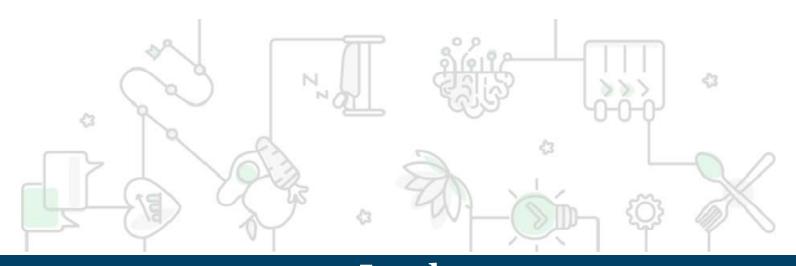
What is Twin Health? Twin Health is a lifechanging program to help you reduce medication, heal your disrupted metabolism and reverse Type 2 Diabetes!

The program centers around a Whole Body Digital TwinTM — a digital representation of your metabolic health. Your Twin uses sensors to see how you respond to food, activity, and sleep. Then, it gives real-time, personalized recommendations via the Twin app. Twin provides everything for success, including the sensors and a dedicated care team.

What is the Cost? Twin is a fully-covered medical benefit for employees and dependents over 18 who are diagnosed with Type 2 Diabetes and enrolled on the health plan.

To learn more and sign up, visit <u>partner.twinhealth.com/YourCommunity</u> or scan the QR code below. If eligible for the program, you will receive a FREE continuous glucose monitor!

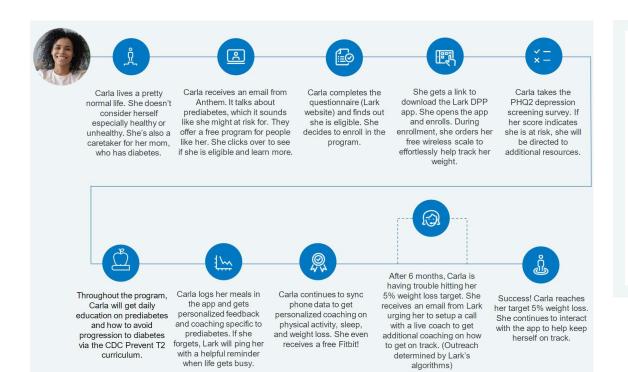




Lark Pre-Diabetes Engagement Program

What is Lark? Lark is a confidential personalized 26-week digital health coaching solution that leverages artificial intelligence, cognitive behavioral therapy and smart connected devices to lower risk of developing type 2 diabetes. The focus areas are weight loss, physical activity, nutritional counseling, stress management and sleep. The smartphone-based application provides instantaneous, unlimited, individualized coaching for lifelong behavior change. Lark is the second largest and fastest growing diabetes program.

What is the cost? Lark is included at no extra cost as part of your Anthem health benefits with access to their mobile app and a free wireless connected scale and fitness tracker.



Scan the QR code or visit the Sydney mobile app to learn if you are at risk for prediabetes.



Medicare Questions?

MEDICARE QUESTIONS? We Have Your Expert Medicare Consulting

When individuals reach age 65, they face the complexity of factoring Medicare into their health care decisions. Trying to understand Medicare – all of the parts, plans and costs – can be very overwhelming and intimidating. When you require assistance navigating the complexities of Medicare, we have the resources and expertise to serve your needs.

We can assist you with questions concerning the following:

- ✓ When should I enroll in Medicare?
- ✓ When can I enroll in Medicare?
- ✓ What is Medicare Part A, B, D, Supplement and Advantage Plans?
 - · What do they cover?
 - How much do they cost?
 - What are income guidelines for higher premiums?
- Should I stay enrolled in my employer's group health plan?



Scott Benefit Services can help you understand Medicare, investigate options and navigate enrollment. Contact us today!

Cheryl Murray cmurray@scottins.com 804-441-6828

Scott Benefit Services, a division of James A. Scott & Son, Inc.



HEALTH SAVINGS ACCOUNT

Health savings accounts (HSAs) are a great way to save money and budget for qualified medical expenses. HSAs are tax-advantaged savings accounts that accompany high deductible health plans (HDHPs). HDHPs offer lower premiums per pay period in exchange for a higher deductible (the amount you pay before insurance kicks in).

Benefits of an HSA

- It saves you money. HDHPs have lower premiums (less money is being taken out of your paycheck).
- It is portable. The money in your HSA is yours (even if you leave the company).
- It is a tax-saver. HSA contributions are made with pre-tax dollars. Since your taxable income is decreased by your contributions, you will pay less in taxes.
- Can use tax-free dollars to pay for eligible medical expenses as well as the opportunity to build a tax-favored savings
 account for future health care expenses
- If you are a taxpayer looking to reduce your Federal and State income taxes
- Balances roll over from year to year
- If you are looking to minimize post-retirement medical expenses or supplement post-retirement income

Please note:

- You cannot contribute to an HSA if you have other forms of health insurance which includes being covered on a spouse or parent's health plan. This also includes any form of Medicare. Please see detailed HSA plan materials from the carrier for more details.
- The funds are available as they are contributed throughout the plan year
- You may change your contribution amount at any time throughout the plan year as long as you don't exceed the annual maximum

How much can be contributed into an HSA?

- The maximum amount that can be contributed to an HSA in 2023 (set by the IRS) is \$3,850 for individual coverage and \$7,750 for family coverage. Additionally, if you are age 55 or older, you may make an additional "catch-up" contribution of \$1,000.
- Virginia Lutheran Homes will contribute to your Health Savings Account! VLH will make a one-time contribution of \$250 towards your HSA if you begin contributing on your first payroll deduction. In addition to the \$250, VLH will match dollar for dollar up to \$750. This makes Virginia Lutheran Homes' total contribution to your HSA \$1,000 for the year.

Enroll through Proliant!
Visit flores247.com to access your HSA balance, history and much more!

What is an FSA

Virginia Lutheran Homes provides you with the opportunity to elect in a Flexible Spending Account where you can pay for out-of-pocket medical, dental, vision and dependent care expenses with pre-tax dollars through Flores. You are not taxed on the money put into your FSA.

What are the Benefits of an FSA?

- It saves you money. Allows you to put aside money tax-free that can be used for qualified medical expenses.
- It's a tax-saver. Since your taxable income is decreased by your contributions, you'll pay less in taxes.
- It is flexible. You can use your FSA funds at any time, even if it's the beginning of the year.

You should only contribute the amount of money you expect to pay out of pocket that year. The maximum FSA amount you can contribute to your FSA for the 2023 plan year is \$3,050. If you do not use it, you lose it. You will only be eligible to carry over up to \$610 into the future plan year.

What is a Dependent Care FSA?

Dependent Care FSAs allow you to contribute pre-tax dollars to qualified dependent care. In general, eligible dependents include your child who is under the age of 13, or your spouse or relative who is physically or mentally incapable of self-care and lives in your home.

The maximum amount you can contribute to your Dependent Care FSA for the 2023 plan year is \$5,000 per household or \$2,500 if married, filing separately.

Examples of FSA Eligible Expenses

- Doctor and Pharmacy copays
- Dental, orthodontic and vision expenses
- Hospital, surgery and lab expenses
- Before and after school care for children
- Care (licensed nursery school or day-care facility)
- Nannies, au pairs & In-home day cares
- Certain day camps

Please note:

- You cannot contribute to both a Healthcare FSA and HSA during the same plan year. You can contribute to both an HSA and Dependent FSA during the same plan year.
- You must (re)elect in FSA to have Fill out the FSA Enrollment Form during Open Enrollment

FSA EXAMPLE			
	Without FSA	With FSA	
Gross income:	\$30,0	000	
FSA contribution	\$0	\$1,500	
Taxable income:	\$30,000	\$28,500	
Estimated Taxes			
Federal	\$5,400	\$5,130	
State	\$1,500	\$1,425	
FICA	\$2,295	\$2,180	
After-tax earnings	\$20,805	\$19,765	
Eligible out-of-pocket expenses	\$1,500	\$0	
Remaining spendable	\$19,305	\$19,765	
income		\$460 SAVINGS	

Savings will vary based upon multiple factors such as marital status, number of exemptions and tax bracket. Please consult with a tax advisor to determine your actual potential savings.



Enroll through Proliant!
Visit flores247.com to access your FSA balance, history and much more!

DENTAL BENEFITS

Offered through Delta Dental is dental insurance to help protect and maintain your oral health through regular checkups, cleanings and X-rays. Delta Dental has a PPO and Premium network with allows for less out of pocket cost than seeing an out-of-network provider. Although providers in the PPO and Premier Network allow for less out of pocket costs, PPO has the steeper discounts the Premier. Deductible and maximum reset October 1 and there is no waiting period on the dental plans. Visit www.deltadentalva.com to find a participating provider near you or to check to see if your provider is in-network!

If you enroll in the one of the Delta Dental plans, you have access to Delta's Hearing Program on Amplifon's network for discounts on hearing exams and aids. Please see the benefit specific flyer for further details.

Employee Cost Per Pay Period				
Low Plan High Plan				
Employee Only	\$5.82	\$11.61		
Employee + Child(ren)	\$16.70	\$28.87		
Employee + Spouse	\$15.72	\$27.29		
Employee + Family	\$22.16	\$37.09		

	Low Plan	High Plan
In Network Benefits		
Annual Deductible	Single: \$50 Family: \$150	Single: \$50 Family: \$150
Annual Maximum	\$750	\$1,250
Preventative Services Exams, Cleanings, X-rays	Covered at 100%	Covered at 100%
Basic Services Fillings, Stainless Steel Crowns, Simple Extraction, Oral Surgery, Periodontics, Endodontics, Denture Repair	80%	80%
Major Services Crowns, Prosthodontics, Implants	Not Covered	50%
Orthodontics (to age 26)	Not Covered	50% \$1,000 lifetime maximum
Out of Network Benefits		
Preventative / Basic / Major	100% / 80% / Not-Covered	100% / 80% / 50%

Max Over: If you receive at least one preventive cleaning and use less than half of the annual maximum, a portion of your unused annual maximum will automatically be rolled over to the next plan year.

Example of savings seeing in-network dentist

	Delta Dental PPO™	Delta Dental Premier*	Out-of- Network
Dentist's charge	\$215	\$215	\$215
Delta Dental's maximum plan allowance	\$126	\$126	\$126
Delta Dental pays up to 80% after any deductible	\$100.80	\$100.80	\$100.80
Patient responsibility	\$25.20	\$68.20	\$114.20

Offered through EyeMed, the vision plan entitles you to specific eye care coverage. Having vision benefits and annual screenings can help you maintain your vision as well as early detect various health problems.

Visit <u>www.eyemed.com</u> for member specific information and support!



	In-Network	Out-of-Network (reimbursement)
Routine Eye Exam	\$15 Copay (once every 12 months)	Up to \$30
Standard Plastic Lenses (Single, Bifocal, Trifocal & Lenticular)	\$25 Copay (once every 12 months)	Single up to \$25 Bifocal up to \$40 Trifocal up to \$60
Progressives	Standard Lens: \$90 Premium Progressive Lens: Tier 1 - \$110 Tier 2 - \$120 Tier 3 - \$135 Tier 4 - \$90, 80% of charge less \$120 allowance	Up to \$40
Contact Lenses Conventional Disposable Medically Necessary	\$0 copay \$130 allowance 15% off balance over \$130 Responsible for balance over \$130 \$0 copay, paid in full	Up to \$104 Up to \$104 Up to \$210
Frame (once every 12 months)	\$0 copay, \$130 Allowance, 20% off balance over \$130	Up to \$65
Lasik	15% off retail price or 5% off promotional price	N/A

Employee Cost Per Pay Period			
Employee Only \$0			
Employee + Child(ren)	\$2.57		
Employee + Spouse	\$2.32		
Employee + Family	\$4.99		

BASIC TERM LIFE INSURANCE May help provide for your loved ones if something were to happen to you. Virginia Lutheran Homes provides full-time employees with 2x their annual salary up to \$ 300,000. Virginia Lutheran Homes pays for the full cost of this benefit—meaning you are not responsible for monthly premiums on this benefit.

VOLUNTARY LIFE INSURANCE While Virginia Lutheran Homes offers basic term life insurance, some employees may want to purchase additional coverage. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future (for example, college tuition for your child)? Depending on your needs, you may want to consider buying supplemental coverage.

With voluntary life insurance, you are responsible for paying the full cost of coverage through semi-monthly payroll deductions. You can purchase coverage for yourself, your spouse and children. Please see election amounts and guarantee issue information below. If you elect an amount above the guaranteed issue, you will be required to complete an evidence of insurability form (answer medical questions) and the benefit will be subject to underwriting approval. Please see The Hartford Benefit Highlight sheet for costs.

- **Employee:** Up to 5x your annual earnings in \$5,000 increments up to \$250,000. Please note: New hires can enroll up to the guaranteed issue amount of \$200,000 with no medical questions but amounts over the guaranteed issue amount require answering medical questions (submitting an Evidence of Insurability Form to Hartford for review/approval). Late entrants/existing employees must submit an Evidence of Insurability form for any amount of coverage even if under the guaranteed issue amount.
- **Spouse:** If you elect coverage on yourself, you may also elect coverage on your spouse up to 100% of the employee voluntary life election with \$5,000 as the minimum benefit but cannot exceed \$50,000.
 - Please note: New hires can enroll up to the guaranteed issue amount \$25,000 with no medical questions but amounts over the guaranteed issue require answering medical questions (submitting an Evidence of Insurability Form to Hartford for review/approval). Late entrants/existing employees must submit an Evidence of Insurability form for any amount of coverage even if under the guaranteed issue amount.
- **Child(ren):** Employees may elect coverage of \$10,000 on child(ren). The cost of this coverage includes all dependent children. The child coverage is guaranteed as long as the employee is enrolled in Employee Voluntary Life Insurance. Children can be covered from 15 days old to 26 years old.

Please see carrier documents for age reduction schedule.

In the event that you become disabled from a non-work-related injury or sickness, disability income benefits will provide a partial replacement of lost income. Please note, you are not eligible to receive disability benefits if you are receiving workers' compensation benefits.

Virginia Lutheran Homes provides all full-time non-exempt employees the opportunity to purchase Voluntary Short-Term Disability and Long-Term Disability Insurance through employee payroll deductions. All full-time exempt employees also have the opportunity to purchase Voluntary Short-Term Disability Insurance through payroll deductions. In addition, all full-time exempt employees are provided Long-Term Disability coverage.

Please note: All future enrollments for existing employees after open enrollment are considered late entrants and will be required to an submit an Evidence of Insurability (EOI) form that is subject to The Hartford approval for coverage. New hires do not need to submit an EOI. Deductions for voluntary benefits will not begin until approval date from The Hartford is received.

	Benefit Amount	Benefits Begin	Maximum Benefit Period
Voluntary Short-term 15 DAY PLAN	60% of your income up to a maximum of \$500 per week	15 days after injury or illness	24 weeks
Voluntary Short-Term Option 30 DAY PLAN	60% of your income up to a maximum of \$500 per week	31 days after injury or illness	22 weeks
Long-Term	60% of your income up to a maximum of \$5,000 per month	180 days, integrated from short- term disability	If you become disabled prior to age 63, benefits are payable to normal retirement age or 42 months if greater. 63 (or older), the benefit period will be based on a reduced duration schedule.

Please refer the carrier documents for further information



The Hartford Voluntary Benefits

Virginia Lutheran Homes offers employees and their eligible dependents the opportunity to enroll in voluntary benefits through The Hartford by semi-monthly payroll deductions. The voluntary benefits offered by The Hartford include the following coverages:

- Accident Providing you coverage when injury, medical treatment and/or services occur that result from
 a covered accident. With Accident insurance, you'll receive payments associated with a covered injury and
 related service. You can use the payment in any way you choose, from expenses not covered by your major
 medical plan to day-to-day costs of living such as mortgage or utility bills.
- Critical Illness Facing a serious illness can be devastating both emotionally and financially. Major
 medical insurance may pick up most of the tab but can still leave out-of-pocket expenses that add up
 quickly. Critical Illness insurance can provide a lump-sum benefit upon diagnosis that can be used however
 you choose from expenses related to treatment, deductibles or day-to-day costs of living such as mortgage
 or utility bills.
- Hospital Indemnity Cash benefit for you or an insured dependent (spouse/child) are confined in a
 hospital for a covered illness or injury. Even with the best primary health insurance plan, out-of-pocket costs
 from a hospital stay can add up. The benefits are paid in lump sum amounts to you and can help offset
 expenses that may not be covered under your primary health insurance (deductibles, co-insurance amounts
 or copays) or benefits can be used for any non-medical expenses (like housing costs, groceries, car expenses,
 etc.).

If enrolled in one or more of the coverages above, you are eligible to receive a wellness check from the Hartford by submitting your Health Screening claim. (\$50 each for Accident and Hospital Indemnity and \$100 for Critical Illness.) Please see Health Screening flyer for more details!

How do I learn more about the costs and elect in these coverages? Simply log into Proliant to enroll!



Visit TheHartford.com/benefits/myclaim
Or for assistance, contact Customer Service 866-547-4205

GLOSSARY OF INSURANCE TERMS

Balance Billing

An out-of-network healthcare provider billing a patient for the difference between what the patient's health insurance chooses to reimburse and what the provider chooses to charge.

Co-Insurance

The percentage of costs of a covered health care service shared between insurance carrier and the insured after you pay your deductible.

Co-Payment

A fixed amount you pay for a covered health care service.

Deductible

The amount you pay for applicable out-of-pocket covered health care services before your insurance plan starts to pay.

Emergency Services

Sudden and unexpected accident or illness that requires advanced or immediate medical treatment.

Formulary

A list of prescription drugs that are covered by your health insurance plan. Depending on the type and brand, drugs are categorized into tiers, which may affect how much you pay for each drug. This is sometimes referred to as Prescription Drug List (PDL).

Non-Preferred Provider

A provider who doesn't have a contract with your health insurer or plan to provide services to you. You'll pay more to see a non-preferred provider and will have more administrative responsibilities.

Out-Of-Pocket Maximum

The maximum amount you can pay during a plan year for your share of the costs of covered services. This includes deductibles, co-pays, and coinsurance, but not premiums. After you meet this limit, the plan will pay 100% of the allowed amount.

Prior Authorization

Certain services or procedures may require written permission or recommendation from a health care professional to validate medical necessity in order to be covered by your insurance.

Preferred Provider

A provider who has a contract with your insurer or plan to provide services to you at a discount. Preferred providers will file claims on your behalf and will not balance bill.

Premium

The amount that must be paid for your insurance plan each month. This amount may be shared by you and your employer.

Primary Care Physician

A physician, nurse practitioner, clinical nurse specialist, or physician assistant, as allowed under state law, who provides, coordinates or helps a patient access a range of health care services.

Specialist

A physician who focuses on a specific area of medicine or a group of patients to diagnose, manage, prevent, or treat certain types of symptoms and conditions.

UCR (Usual, Customary and Reasonable)

The amount paid for a medical service in a geographic area based on what providers in the area usually charge for the same or similar medical services. The UCR amount may be used to determine the allowed amount.

Urgent Care

Care for an illness, injury or condition serious enough that a reasonable person would seek care right away, but not so severe as to require emergency room care.

PAYROLL DEDUCTIONS OVERVIEW

Should you choose to enroll in the offered benefit coverages, you will be required to pay a portion of the premium cost, which is deducted (on a pre-tax basis) from each of your paychecks. In the event you choose to waive these benefits, you will not have another opportunity to elect them until the next open enrollment period unless you experience a qualified life event. Below is a breakdown per pay period of the cost for medical, dental and vision benefits.



MEDICAL (Anthem)				
	HealthKeepers POS 25 / 500 / 20% / 4000	HealthKeepers HSA 3000 / 0% / 4500		
Employee Only	\$67.20	\$0.00		
Employee + Child	\$229.65	\$72.19		
Employee + Children	\$535.74	\$259.40		
Employee + Spouse	\$633.34	\$330.56		
Family	\$1,023.15	\$618.31		

DENTAL (Delta Dental)					
	LOW	HIGH			
Employee Only	\$5.82	\$11.61			
Employee + Child(ren)	\$16.70	\$28.87			
Employee + Spouse	\$15.72	\$27.29			
Family	\$22.16	\$37.09			

VISION (EyeMed)	
Employee Only	\$0.00
Employee + Child(ren)	\$ 2.57
Employee + Spouse	\$ 2.32
Family	\$ 4.99

KEY CONTACTS

HAVE QUESTIONS, PROBLEMS OR CONCERNS?

The following are your carrier numbers and websites should you need assistance understanding your benefits, claims or other insurance related information.

CARRIER CONTACTS			
Medical	Anthem 1-866-755-2680 www.anthem.com		
Pharmacy	Anthem 1-888-809-6084		
Dental	Delta Dental 1-800-237-6060 www.deltadentalva.com		
Vision	EyeMed 1-866-9-EYEMED Eyemed.com		
Life & Disability	The Hartford Email: gbdcustomerservice@thehartford.com 1-800-523-2233 1-888-301-5615 (Disability Claims) Thehartford.com		
Health Savings Accounts & Flexible Spending Account	Flores 1-800-532-3327		
LiveHealth Online (Telemedicine)	LiveHealth Online 1-888-548-3432 Livehealthonline.com		
Employee Assistance Program (EAP)	Anthem 1-800-346-5484 anthemEAP.com		

VIRGINIA LUTHERAN HOMES CONTACTS		
Brian Ard, HR Director	540-562-5443 ext. 8774 bard@vlhnet.org	
Aija Kroll, HR Generalist	540-562-5443 ext. 8782 540-562-5463 (fax) akroll@vlhnet.org	



The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the guide and actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about the guide, please contact HR.

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