



# Benefits Guide

March 1<sup>st</sup> 2023- February 28<sup>th</sup> 2024



Provided by:



All Full Time

# Introduction

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## Welcome to your 2023 benefits!

iTech strives to provide the best and most flexible plan offerings to its employees and plan members. Please take the time to review this guide in its entirety to see the array of benefits available to you and your dependents. This guide along with other informational materials will be housed on our website for your future reference as well.

iTech is dedicated to the personal, professional and financial health of our employees. We strive to provide meaningful benefits at affordable rates. Our goal is to offer options that enable you to make smart decisions regarding your health.

### Employee Eligibility

iTech offers comprehensive, cost effective benefit options. Employees new to iTech are eligible for coverage the first of the month following date of hire.

- Legal spouse,
- A dependent child under the age of 26 (coverage terminates at the end of the month in which the dependent turns 26)

**Note:** Under the Patient Protection and Affordable Care Act (PPACA), adult children enrolled under their parent's medical plan may maintain their coverage until the age of 26, even if they're a student, married or employed.

### Changing Your Elections

It is very important to consider your choices carefully before you make your benefits elections. The benefits you choose will be in place from your eligibility date through the end of the plan year, unless you have a qualifying event during the year such as:

- Marriage, divorce, legal separation or newly eligible domestic partnership
- Birth or adoption of a child
- Death of a spouse, domestic partner or child
- You or one of your covered dependents gains or loses other benefit coverage due to a change in employment status

**Note:** For additional information and guidelines about qualified events, visit: [www.IRS.gov](http://www.IRS.gov).

## Important Changes to note:

iTech strives to provide the best and most flexible plans at the most affordable costs. Often times ensuring a minimal change in cost means changes in plan design. **The UHC Medical Plan options will change for the 2023-2024 plan year.**

We have 4 UHC Medical Plans comparable to the previously available plans. Employees currently enrolled in the UHC medical plans will automatically be enrolled in the plan that is most aligned with the benefits for the plan you are currently enrolled in. However, we urge you to review all plan options available. If you wish to enroll in a different medical plan through iTech, you must go out to ADP during open enrollment.

After 3 years of no premium increase in dental cost, and to ensure the least impactful increase for the 2023-2024 plan year. **The maximum benefit amount for the Dental Plan has been reduced to \$1,200.**





Medical Coverage	UHC Choice BZCE *NEW*		UHC Choice Plus ASJ8 HSA *NEW*		UHC Choice Plus CKIQ *NEW*		UHC Choice Advanced CKIP *NEW*	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Deductible</b>								
Individual	\$6,000	N/A	\$2,600	N/A	\$2,000	\$5,000	\$500	N/A
Family	\$12,000		\$5,200		\$4,000	\$10,000	\$1,000	
<b>Out-of-Pocket Maximum</b>								
Individual	\$15,000	N/A	\$5,200	N/A	\$6,500	\$15,000	\$6,500	N/A
Family	\$30,000		\$10,400		\$13,000	\$30,000	\$13,000	
<b>Coinsurance</b>	50%	N/A	90%	N/A	70%	50%	70%	N/A
<b>Preventive Care</b>	No Charge	N/A	No Charge	N/A	No Charge	Deductible then 40%	No Charge	N/A
<b>PCP Office Visit</b>	Deductible & Coinsurance	N/A	Deductible, then \$30 copay	N/A	\$20/\$40 copay	Deductible then 40%	\$15/\$30 copay	N/A
<i>PCP selection required?</i>	No		No		No		No	
<b>Specialist Office Visit</b>	Deductible & Coinsurance	N/A	Deductible, then \$60 copay	N/A	\$40/\$75 copay	Deductible then 40%	\$35/\$70 copay	N/A
<i>Referral required?</i>	No		No		No		No	
<b>Urgent Care Facility</b>	Deductible & Coinsurance	N/A	Deductible, then \$75 copay	N/A	\$75 copay	Deductible then 40%	\$75 copay	N/A
<b>Hospital Emergency Room</b>	Deductible & Coinsurance	N/A	Deductible, then \$250 copay	N/A	Deductible then 50%	Deductible then 40%	Deductible then 50%	N/A
<b>Inpatient Facility Services</b>	Deductible & Coinsurance	N/A	Deductible & Coinsurance	N/A	Deductible & Coinsurance	Deductible then 40%	Deductible & Coinsurance	N/A
<b>Outpatient Facility Services</b>	Deductible & Coinsurance	N/A	Deductible & Coinsurance	N/A	\$500 POD	Deductible then 40%	Deductible & Coinsurance	N/A
<b>Prescription Coverage</b>								
<b>Rx Deductible</b>	\$100		Shared with Medical		None		None	
<b>Rx OOP Maximum</b>	Shared with Medical		Shared with Medical		Shared with Medical		Shared with Medical	
Tier I	\$10		Deductible then \$10		\$10		\$10	
Tier II	\$50		Deductible then \$65		\$65		\$65	
Tier III	\$100		Deductible then \$125		\$125		\$125	
Specialty Medication	N/A		Deductible then \$250		\$250		\$250	
90-Day Maintenance	2.5 X Retail Copay		2.5 X Retail Copay		2.5 X Retail Copay		2.5 X Retail Copay	

This booklet is intended to provide an overview of the benefits plans offered.. All specific plan provisions are described in the legal documents governing the plans. If there are any discrepancies between this booklet and the plan's legal documents, the legal documents will govern.

# How to register for myuhc.com and print a temporary ID card.

Working together, UnitedHealthcare and Optum are creating an integrated member experience that starts with quickly and easily creating a HealthSafe ID™. This new username and password can then be used on any site offering the HealthSafe ID sign-in screen.

Integration of HealthSafe ID is occurring in phases with some members already using HealthSafe ID through the UnitedHealthcare Health4Me® app. Over time, additional websites and mobile apps will use HealthSafe ID.

## Register for myuhc.com

### Step 1:

- o Go to [www.myuhc.com](http://www.myuhc.com).
- o Click on Register Now.
- o Fill in **Personal Information**.
- o Click **Yes**, for “Do you have a member ID card?”
- o Click Continue.

### Step 2:

- o Create your HealthSafe ID™ account by completing the fields.
- o Create your password using a capital letter, symbol and numbers.
- o Enter your email address.
- o Select “**mobile phone (text message), non-mobile phone or email**” from the drop down.
- o Check the 2 boxes.
- o Click Create my ID.

### Step 3:

- o To ensure your account is secure we must confirm your information before proceeding.
- o Click **Email me, Call me, or Text me**.
- o Follow the steps on the screen.
- o **Remember** to write down your Username and Password.
- o **Use your HealthSafeID to log on to the Health4Me App.**

## How to print an ID card.

- o Signin to [www.myuhc.com](http://www.myuhc.com).
- o Click on “**View & Print member ID cards.**”
- o Click on blue bar that says “**Print ID Cards.**”

# Check. Choose.

Go.<sup>SM</sup>

When you need care, call your primary care physician or family doctor first.

Your physician has easy access to your records, knows the bigger picture of your health and may even offer same-day appointments to meet your needs. When seeing your physician is not possible, however, it's important to know your quick care options to find the place that's right for you and help avoid financial surprises. Compare your choices today at [uhc.com/checkchoosego](http://uhc.com/checkchoosego).


Quick Care Options	Needs or Symptoms	Average Cost*	
<p><b>24/7 Nurse Line</b> Call the number on your health plan ID card for expert advice.</p>	<ul style="list-style-type: none"> <li>Choosing where to get medical care</li> <li>Finding a doctor or hospital</li> </ul>	<ul style="list-style-type: none"> <li>Health and wellness help</li> <li>Answers to questions about medicines</li> </ul>	\$0
<p><b>Virtual Visits</b> Anywhere, anytime online doctor visits.</p>	<ul style="list-style-type: none"> <li>Cold</li> <li>Flu</li> <li>Fever</li> </ul>	<ul style="list-style-type: none"> <li>Pinkeye</li> <li>Sinus problems</li> </ul>	\$50
<p><b>Convenience Care Clinic</b> Treatment that's nearby.</p>	<ul style="list-style-type: none"> <li>Skin rash</li> <li>Flu shot</li> </ul>	<ul style="list-style-type: none"> <li>Minor injuries</li> <li>Earache</li> </ul>	\$65
<p><b>Urgent Care Center</b> Quicker after-hours care.</p>	<ul style="list-style-type: none"> <li>Low back pain</li> <li>Respiratory (cough, pneumonia, asthma)</li> <li>Stomach (pain, vomiting, diarrhea)</li> </ul>	<ul style="list-style-type: none"> <li>Infections (skin, eye, ear/nose/throat, genital-urinary)</li> <li>Minor injuries (burns, stitches, sprains, small fractures)</li> </ul>	\$190
<p><b>Emergency Room (ER)</b> For serious immediate needs.</p>	<ul style="list-style-type: none"> <li>Chest pain</li> <li>Shortness of breath</li> <li>Severe asthma attack</li> </ul>	<ul style="list-style-type: none"> <li>Major burns</li> <li>Severe injuries</li> <li>Kidney stones</li> </ul>	\$1,700

## Freestanding ERs

Many people have been surprised by their bill after visiting a freestanding emergency room (FSER). FSERs, sometimes referred to as urgency centers, typically bill at ER rates (or higher) and can be \$1,500 more than an Urgent Care Center. Neither located in nor attached to a hospital, FSERs are able to treat similar conditions as an ER but do not have an ER's ability to admit patients.

### Ask before you enter:

- Is this an urgent care center or an ER?
- Is this facility a network provider?

 Learn more at [uhc.com/checkchoosego](http://uhc.com/checkchoosego).



\*Source: Average allowed amounts charged by UnitedHealthcare Network Providers and not tied to a specific condition or treatment. Actual payments may vary depending upon benefit coverage. (Estimated \$1,500.00 difference between the average emergency room visit and the average urgent care visit.) The information and estimates provided are for general informational and illustrative purposes only and is not intended to be nor should be construed as medical advice or a substitute for your doctor's care. You should consult with an appropriate health care professional to determine what may be right for you. In an emergency, call 911 or go to the nearest emergency room.

Virtual Visits are not an insurance product, health care provider or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. Virtual Visits and Urgent Care visits are not intended to address emergency or left-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times or in all locations. The Designated Virtual Visit Provider's reduced rate for a virtual visit is subject to change at any time.

Check your official health plan documents to see what services and providers are covered by your health plan.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by

United HealthCare Services, Inc. or their affiliates. Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates. ©2018 United HealthCare Services, Inc. MT-1169091.0 3/18 18-7438-A

# Health Savings Account (HSA)



## Deposit, Grow, Save and Pay.

Only available if you enroll in the UHC ASJ8 HSA Plan



### Deposit your health care dollars

- **Deposits** — Deposit forms, website and online transfers from your bank.
- **Contribution limits** — The IRS sets guidelines for how much you can contribute to an HSA each year. See below for individual, family and catch-up amounts.



### Grow your savings

- **Earnings** — Deposits to your HSA could earn income tax-free interest.
- **Carry-over** — There is no “use it or lose it.” Unspent funds remain in your account.



### Save on taxes

- **Contributions** — Contributions to your HSA are tax-deductible up to the annual limit.
- **Distributions** — HSA funds used to pay for qualified medical expenses are tax-free.
- **Earnings** — Interest you may earn on your HSA grows income tax free.



### Pay for health care, now or later

- **Qualified medical expenses** — Pay for current and future medical expenses for you, your spouse and your eligible dependents. You can continue to use the funds in your account even if you stop participating in a high-deductible health plan (although you cannot contribute more to it).
- **Payment methods** — Use your debit card to pay pharmacies, doctors, clinics and other health care providers on the spot. Or, withdraw funds to reimburse yourself for out-of-pocket expenses.
- **Tax implications** — It’s up to you to maintain records to verify that funds were used for qualified medical expenses. Funds used for nonqualified expenses will be taxed as income and subject to a 20% penalty. If you are 65 and older, the 20% penalty does not apply.

## Annual HSA Contribution Limits

The IRS sets HSA contribution limits for each calendar year. These limits include employer contributions as well as any contributions you make through payroll deductions.

When you are age 55 or older, you’re also eligible to make “catch-up” contributions which allow employees closer to retirement to save more for post-retirement medical expenses. The HSA catch-up contribution limit is \$1,000.

### Calendar Year 2022 HSA Contribution Limits\*

If you...	You may contribute up to...
Have employee only coverage	\$3,850
Cover dependents	\$7,750
Are age 55+ and have employee-only coverage*	\$4,850
Are age 55+ and cover dependents*	\$8,750

*\*If you do not contribute the max in your base HSA, the catch-up contribution won't be as meaningful because it is meant to allow you to contribute more than the annual limit*

*\*Not everyone is eligible to participate in an HSA. If you are enrolled in TRICARE, Medicare Part A, or another plan that is not a high deductible health plan, you are not eligible to enroll in an HSA.*



		United Healthcare Dental DPPO	
		PPO	Out-of-Network
<b>Plan Highlights</b>	Major Services covered You can visit In-Network and Out-of-Network providers (out-of-network providers can balance bill).  Orthodontia Coverage		
<b>Plan Year Deductible</b>	\$50 Individual \$150 Family		
<b>Annual Plan Year Maximum Benefit</b>	\$1,200		
		Amounts shown are the coinsurance amounts the plan pays	
<b>Preventive Care*</b> (such as cleanings, exams, X-rays)	100%	90% of allowed benefit	
<b>Regular Restorative Care</b> (such as fillings, root canals, and periodontics)	80% after deductible	70% of allowed benefit after deductible	
<b>Major Restorative Care</b> (such as crowns, dentures, and bridges)	50% after deductible	50% of allowed benefit after deductible	
<b>Orthodontia</b> Lifetime Max	50% no deductible \$1000 lifetime max		



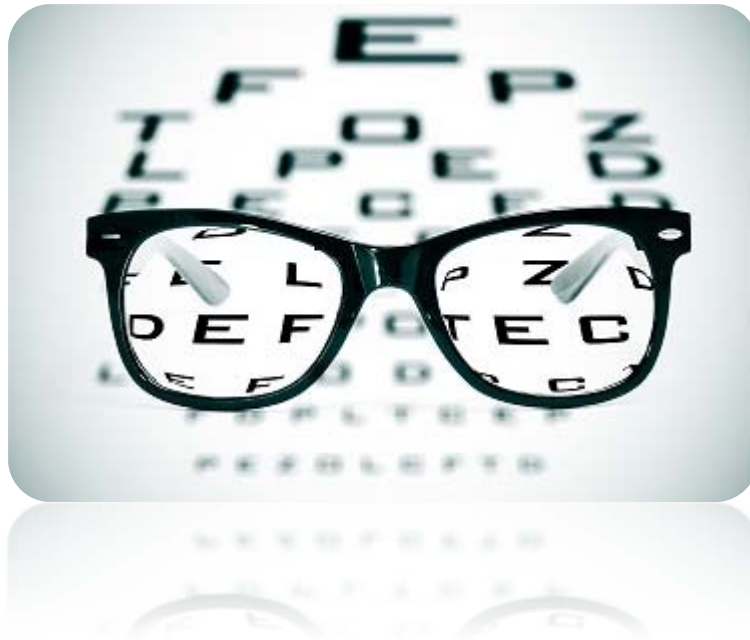
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**VSP  
Vision – NO CHANGES**

	In-Network	Out-of-Network
<b>Eye Exam</b> (once every 12 months)	\$10 Copay	Reimburses member up to \$45
<b>Lenses</b> (one pair every calendar year)	Covered at 100% Covered at 100% Covered at 100%	Member reimbursed up to: \$30 for Single Vision \$50 for Bifocal \$65 for Trifocal
<b>Frames</b> (one pair every 24 months)	Covered up to \$130 20% savings on the amount over your allowance \$70 Costco frame allowance	Reimburses member up to \$70
<b>Contact Lenses</b> (once every 12 months - instead of glasses)	\$130 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation)	Reimburses member up to \$105



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# Income Protection Life Plans



Benefit	Details
<b>Basic Life Insurance and AD&amp;D</b>	Employees working at least 30 hours or more are eligible for a \$50,000 life insurance benefit 1 <sup>st</sup> of the month after 30 days of employment. Benefits reduce 65% at age 65 and 50% (of original amount) at the age 70. Benefits are fully portable and include our travel assistance and EAP program. This benefit is employer paid.
<b>Supplemental Life Insurance and AD&amp;D</b>	Employees can purchase additional life insurance up to 5X their annual salary up to a maximum of \$500,000. Benefits are subject to underwriting and evidence of insurability unless they are electing up to the Guaranteed Issue amount of \$200k when first eligible. This benefit is employee paid and fully portable. See chart below.
<b>Spouse Supplemental Life Insurance</b>	Life insurance for spouses can be purchased by eligible employees in increments of \$5,000 up to a maximum of \$250k. Benefits are subject to underwriting and evidence of insurability unless electing up to the guaranteed issue amount of \$40k when first eligible. This benefit is employee paid and fully portable. See chart below.
<b>Dependent Supplemental Life Insurance</b>	Dependent life insurance allows eligible employees to purchase life insurance for children up to \$10,000 in \$2,000 increments. This benefit is employee paid. See chart below.



Age Banded	Employee Rates per \$1,000	Age Banded	Spousal Rates per \$1,000
<30	\$0.06	25-29	\$0.06
30-34	\$0.08	30-34	\$0.08
35-39	\$0.11	35-39	\$0.110
40-44	\$0.17	40-44	\$0.17
45-49	\$0.27	45-49	\$0.27
50-54	\$0.40	50-54	\$0.40
55-59	\$0.58	55-59	\$0.58
60-64	\$0.76	60-64	\$0.76
65-69	\$1.27	65-69	\$1.27
70-74	\$2.06	70-74	\$2.06
75+	\$6.30	75+	\$6.30

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# Income Protection Voluntary Short-Term Disability



Benefit	Details
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<p><b>Voluntary Short-Term Disability</b></p>	<p>The Voluntary Short-Term Disability (STD) Plan is designed to provide you with continuing income in the event of an immediate illness or injury. The STD plan is rates are based on the employees age (see table insert) through <b>United Healthcare</b>. The plan will provide you with a weekly benefit equal to 60% of your basic monthly earnings, up to a maximum benefit of \$1000 per week, less any other income benefits.</p> <p>Benefit payments will begin after you have been injured or sick for 7 days and will last as long as you remain disabled or for 12 weeks (whichever is later). Pre-existing condition limitations apply.</p>
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Age Banded	Employee Rates per \$10
<25	\$0.435
25-29	\$0.422
30-34	\$0.380
35-39	\$0.306
40-44	\$0.336
45-49	\$0.295
50-54	\$0.356
55-59	\$0.409
60-64	\$0.477
65+	\$0.542

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# Employee Assistance Program & Travel Assistance Program

Life's not always easy. Sometimes a personal or professional issue can get in the way of maintaining a healthy, productive life. Your Employee Assistance Program (EAP) can be the answer for you and your family.

## The help you may need, at no extra cost.

- **Unlimited phone access to master's-level specialists, 24/7.**
  - **Up to 3 referrals for face-to-face counseling sessions.**<sup>1</sup> Our national network includes 144,000+ clinicians.\*
  - **One legal consultation of 30 minutes.** You can choose to meet with an attorney by telephone or in-person to discuss legal concerns. You can also retain an attorney for ongoing services at a 25% discounted rate.\*\*
  - **A 30 – 60 minute financial consultation.** Credentialed financial professionals can help discuss estate taxes and other financial matters with you.
  - **Access to liveandworkwell.com.** From your desktop, mobile device or smartphone, you can easily and securely find a provider, discover community and work-life resources near you, and quickly and confidentially connect to expert guidance. You can also access news, events and thousands of expert articles and advice.
- Maintaining your privacy and confidentiality is of the greatest importance. All records, referrals and evaluations are kept private and confidential in accordance with federal and state laws.

## Access your MAP benefit today.

Call **1-877-660-3806**, TTY **711**, for personal and confidential assistance. Translators are available for non-English speakers.

Visit **liveandworkwell.com**.

There are 2 ways to access: Sign in using your **HealthSafe ID®** to securely access your personal benefit information.

Enter anonymously using access code: **FP3EAP**.

## Included as part of your UnitedHealthcare Life Insurance program

When traveling, the UnitedHealthcare Global Assistance Program provides medical and travel assistance services



GLOBAL  
ASSISTANCE

**Client Name:** UnitedHealthcare  
**UHC Global ID#:** 358231

Notice to Physicians/Hospitals: Call immediately for benefits verification and procedures. Call 24 hours a day (multilingual). If you do not have access to a phone, email for assistance: [assistance@uhcglobal.com](mailto:assistance@uhcglobal.com)

**UnitedHealthcare Global Emergency Response Center**  
24 hours a day, 7 days a week, 365 days a year

United States +1.410.453.6330

[Assistance@uhcglobal.com](mailto:Assistance@uhcglobal.com)

1.800.527.0218 (toll free within U.S. & Canada)

If the condition is an emergency, you should immediately call local emergency services or go to the nearest physician or hospital without delay. Then contact the 24-hour Emergency Response Center. If you have a travel problem, simply call or email for assistance. Carrier charges may be incurred. The Emergency Response Center can obtain a call back number to minimize telecom charges to you.

A multilingual case manager will ask for your name, your organization's name, the UHC Global ID # shown on the front of your ID card, and a description of the situation. We will immediately begin assisting you.

## How to use medical and travel assistance services

Always carry your Global Assistance member ID card with you when traveling in a foreign country.

If you're experiencing a medical emergency, you should immediately call local emergency services or go to the nearest physician or hospital before calling the Emergency Response Center (ERC).

Printed on your member ID card is the contact information for the ERC. Call +1.410.453.6330. Carrier charges may be incurred. The ERC can obtain a call back number to minimize telecom charges to you. You may also email the ERC via [assistance@uhcglobal.com](mailto:assistance@uhcglobal.com)

When you call, be prepared with the following information: your name, your organization's name and ID number, a description of the situation, and a phone number to reach you.

A multilingual Assistance Coordinator will provide assistance and the Emergency Response Team will monitor your case until the situation is resolved.

Visit the Intelligence Center at [www.members.uhcglobal.com](http://www.members.uhcglobal.com), where you can create an account.

1. Click "Create User."
2. Enter your UHC Global ID Number, 358231, and click "Next."
3. Then follow the instructions to complete your account setup.

# Voluntary Accident Insurance

With accident insurance through **United Healthcare**, you'll receive payment(s) associated with a covered injury and related services. 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 the mortgage or your utility bills.

## Coverage Information

This insurance provides benefits when injuries, medical treatment and/or services occur as the result of a covered accident. Unless otherwise noted, the benefit amounts payable under each plan are the same for you and your dependent(s).

Below are just a few highlighted benefits; please refer to official plan documents for a complete list. These benefits are covered off-job only.

Benefits	Plan
Emergency room	\$150
Hospital admission	\$1,000
Urgent care	\$75
X-ray	\$50
Ambulance (ground)	\$300

This chart is intended for comparison purposes only. If there are any discrepancies, the plan document will govern.

## Semi-Monthly Premiums (cost per pay period—26 pays/year)

Coverage Tier	Cost
Employee Only	\$2.52
Employee and Spouse/Partner	\$4.01
Employee and Child(ren)	\$4.94
Employee and Family	\$7.64



# Voluntary Hospital Insurance

With hospital insurance through **United Healthcare**, you'll receive payment(s) associated with a hospital stay. 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 the mortgage or your utility bills.

## Coverage Information

This insurance provides benefits when any sort of a hospital stay is necessary. Unless otherwise noted, the benefit amounts payable under each plan are the same for you and your dependent(s).

Benefits	Plan
Hospital admission	\$1,000
Hospital confinement (up to 364 days/plan year)	\$150
ICU confinement (up to 364 days/plan year)	\$150
ICU admission	\$1,000

This chart is intended for comparison purposes only. If there are any discrepancies, the plan document will govern.

## Semi-Monthly Premiums (cost per pay period—26 pays/year)

Coverage Tier	Cost per Pay
Employee Only	\$4.00
Employee and Spouse/Partner	\$8.49
Employee and Child(ren)	\$7.39
Employee and Family	\$12.63



# Voluntary Critical Illness Insurance

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 through **United Healthcare** can provide a lump-sum benefit upon diagnosis that can be used however you choose—from expenses related to treatment, to deductibles or day-to-day costs of living such as the mortgage or your utility bills.

## Coverage Information

Benefit amounts for covered illnesses are based on the coverage amount in effect for you or an insured dependent at the time of diagnosis.

Below are just a few highlighted benefits; please refer to official plan documents for a complete list. These benefits are covered off-job only. See the premium worksheet for premium details.

Benefits	Plan
Cancer conditions (benign brain tumor; invasive cancer)	100% of coverage amount
Vasulcar conditions (heart attack; heart transplant; stroke)	100% of coverage amount
Coma, end stage renal failure, loss of hearing, loss of speech, loss of vision	100% of coverage amount
Cancer/carcinoma In Situ	25% of coverage amount

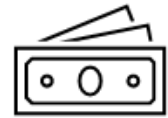
This chart is intended for comparison purposes only. If there are any discrepancies, the plan document will govern

## Semi-Monthly Premiums (cost per pay period—26 pays/year)

Benefit Amount	Coverage Tier	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$10,000 Employee/\$5,000 Spouse/\$2,500 Children	Employee Only	\$0.78	\$1.11	\$1.38	\$1.85	\$2.82	\$4.43	\$6.18	\$8.35	\$11.82	\$16.38	\$8.94	\$15.83
	Employee and Spouse/ Partner	\$1.15	\$1.62	\$2.02	\$2.70	\$4.11	\$6.48	\$9.04	\$12.21	\$17.27	\$23.95	\$13.06	\$23.14
	Employee and Child(ren)	\$0.84	\$1.16	\$1.44	\$1.90	\$2.87	\$4.48	\$6.24	\$8.40	\$11.87	\$16.44	\$8.99	\$15.88
	Employee and Family	\$1.20	\$1.67	\$2.07	\$2.75	\$4.17	\$6.53	\$9.09	\$12.26	\$17.32	\$24.00	\$13.11	\$23.19



# 2023-2024 Benefits Cost - 26 Pays BEC Group



	Total Premium	Employee Contributions (Monthly)	Employee Contributions (Per Pay Check)	Employer Contributions (Monthly)	Employee Contributions (Annually)
<b>Medical Option #1</b>					
ASJ8 EPO HDHP HSA Eligible <i>Plan Design Changed</i>					
Individual	\$662.50	\$414.50	\$191.31	\$248.00	\$4,974.00
Individual+Adult	\$1,596.62	\$1,348.62	\$622.44	\$248.00	\$16,183.44
Individual+Child(ren)	\$1,411.12	\$1,163.12	\$536.82	\$248.00	\$13,957.44
Family	\$2,245.87	\$1,997.87	\$922.09	\$248.00	\$23,974.44
<b>Medical Option #2</b>					
**NEW** CKIQ Traditional PPO Replaces - CHPR					
Individual	\$707.23	\$459.23	\$211.95	\$248.00	\$5,510.76
Individual+Adult	\$1,704.43	\$1,456.43	\$672.20	\$248.00	\$17,477.16
Individual+Child(ren)	\$1,506.40	\$1,258.40	\$580.80	\$248.00	\$15,100.80
Family	\$2,397.51	\$2,149.51	\$992.08	\$248.00	\$25,794.12
<b>Medical Option #3</b>					
**NEW** CKIP Traditional EPO Replaces - CHPQ					
Individual	\$783.96	\$535.96	\$247.37	\$248.00	\$6,431.52
Individual+Adult	\$1,889.35	\$1,641.35	\$757.55	\$248.00	\$19,696.20
Individual+Child(ren)	\$1,669.84	\$1,421.84	\$656.23	\$248.00	\$17,062.08
Family	\$2,657.63	\$2,409.63	\$1,112.14	\$248.00	\$28,915.56
<b>Medical Option #4</b>					
BZCE Traditional EPO <i>Plan Design Changed</i> <b>**Lowest Cost Option**</b>					
Individual	\$506.08	\$258.08	\$119.11	\$248.00	\$3,096.96
Individual+Adult	\$1,219.65	\$971.65	\$448.45	\$248.00	\$11,659.80
Individual+Child(ren)	\$1,077.95	\$829.95	\$383.05	\$248.00	\$9,959.40
Family	\$1,715.61	\$1,467.61	\$677.36	\$248.00	\$17,611.32
<b>UHC Dental</b>					
Individual	\$26.08	\$24.61	\$11.36	\$0.00	\$295.32
Individual+Adult	\$52.09	\$49.22	\$22.72	\$0.00	\$590.64
Individual+Child(ren)	\$69.43	\$65.50	\$30.23	\$0.00	\$786.00
Family	\$105.27	\$99.27	\$45.82	\$0.00	\$1,191.24
<b>VSP Vision</b>					
Individual	\$7.10	\$7.10	\$3.28	\$0.00	\$85.20
Individual+Adult	\$11.96	\$11.96	\$5.52	\$0.00	\$143.52
Individual+Child(ren)	\$12.21	\$12.21	\$5.64	\$0.00	\$146.52
Family	\$19.68	\$19.68	\$9.08	\$0.00	\$236.16





## Benefit Advocate Team

[mybenefits@eonebenefits.com](mailto:mybenefits@eonebenefits.com)

1-877-719-EMP1(3671)

Mon – Fri 9:00am – 5:00pm EST

# You have questions. We're here to help!

The EONE Benefit Advocate Team (BAT) provides answers to employee's day-to-day questions on their group health and welfare benefits. Employees have direct access to our team by emailing [mybenefits@eonebenefits.com](mailto:mybenefits@eonebenefits.com) or calling 1-877-719-EMP1(3671) and we take it from there. BAT has direct access to the systems and insurance carrier contacts needed to resolve issues that can range from minor to complex. Some examples are:

### **Explaining benefits coverage**

Helping you understand the details of your medical, dental, vision and life and disability plans to maximize your benefits

### **Explanation of benefits (EOB)**

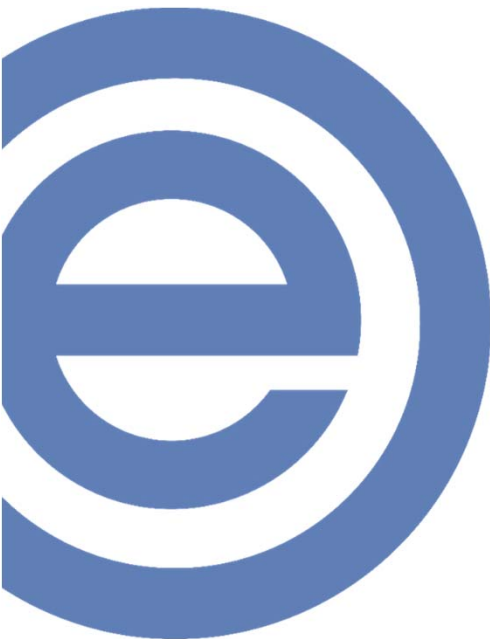
Navigating the information on the EOB can be overwhelming. Our Team has direct access to most carrier EOB's and the knowledge to review with you

### **Resolving claims and provider billing issues**

We will research to ensure the claim has been accurately processed and the provider bill is accurate to eliminate overpayments to the provider

### **Locating participating providers**

Employees have access to the carrier sites, but we are happy to review providers to ensure in-network participation with your current plan





Benefit	Phone	Website/Email
<b>United HealthCare</b> Medical, Dental, HSA and Ancillary Plans	877-201-5328	Myuhc.com
<b>VSP</b> Vision	800-877-7195	Vsp.com
<b>ADP Self Service</b>	N/A	<a href="https://workforcenow.adp.com/public/index.htm">https://workforcenow.adp.com/public/index.htm</a>
<b>Human Resources - Benefits Team</b>	703-637-7299	insurance@iTech.com
<b>Employee One Benefit Solutions</b> <b>Benefit Advocate Team (BAT)</b> Claims Resolution General Plan Information	Direct: 410-719-2222 Toll free: 877-719-EMP1	myBenefits@eonebenefits.com

Instructions for registering for first time self service:

Please send an email to your HR team for your unique Associate ID. Use the following steps to complete enrollment:

1. Click on <https://workforcenow.adp.com>
2. On the login page, select "Register Here"
3. Enter the registration code – iTech-123, click on next, then yes
4. Enter in First Name, Last Name exactly as it is on your iTech Offer Letter
5. Enter your unique Associate ID
6. Follow the prompts to complete your registration



Instructions for enrolling if already registered:

1. Log on the Employee Self Service website <https://workforcenow.adp.com/public/index.htm>
2. Complete all required fields
3. Click OK – Welcome Screen is displayed. A data update wizard will bring you through the process of confirming and updating information on yourself and your dependents
4. Navigate to the Benefits Tab and select Review/Change Benefits. A wizard-based enrollment tool begins the Enrollment process. Please follow the wizard to make your selections

*Have a Happy, Healthy Plan Year!*

