

2022 Benefits Overview



Agenda

Open Enrollment

- Eligibility
- Oracle HCM
- Benefit Service Center

Benefits Overview

- Medical
- Dental
- Vision
- FSA
- Voluntary Benefits
- Other Benefits and Resources
- Employee Assistance Program
- Retirement/403(b) Overview

Questions



Open Enrollment

Eligibility

You: Full- or part-time employees working under a government contract. Medicare eligible employees must elect or continue Fedcap medical benefit coverage.

Your Dependents: Eligible dependents are your:

- Legal spouse
- Child(ren) up to age 26, including stepchildren, foster children and adopted children (for medical, dental and vision)
- Disabled child(ren) of any age (with documentation of disability) dependent on you for support due to physical or cognitive disability that occurred before reaching age 26

Dependents become eligible for coverage on the same date you do or on the date of a Qualified Life Event

Dependent Documentation required include marriage certificate, birth certificate, adoption papers, etc.

Open Enrollment

Open Enrollment for 2022 plan elections and changes will be held November 3 – November 17, 2021

All plan elections made during Open Enrollment will be effective January 1 - December 31, 2022

Open Enrollment is your annual opportunity to:

- Add or drop coverage
- Add or drop dependents
- Change benefit plans

Changes to your benefit elections outside of the Open Enrollment period are only permitted if you experience a Qualified Life Event such as:

- Marriage or Divorce
- Birth or Adoption
- Loss of Eligibility for Other Coverage

The Benefit Service Center must be notified within 30 days of a Qualified Life Event

- ✓ If you enroll your dependent(s) please make sure you have their SSN as well as their Date of Birth.
- ✓ In order to enroll dependents the required documents for verification are:
 - Spouse:*
 - ✓ Marriage Certificate/Affidavit
 - ✓ Prior year tax return (first page)
 - Children:*
 - ✓ Birth Certificate
 - ✓ Proof of Legal Guardianship
 - ✓ Qualify medical court support order (QMCSO)
 - ✓ Prior year tax return (first page)

Open Enrollment Hub - Internet

Open Enrollment documents will be available on the Open Enrollment Hub on the Fedcap Group page:
<https://fedcapgroup.org/fedcap-employee-benefits-portal/>

There is no need to login or remember passwords.



Please Review your 2022 Open Enrollment Information:

Benefit Guides and Webinar Information:

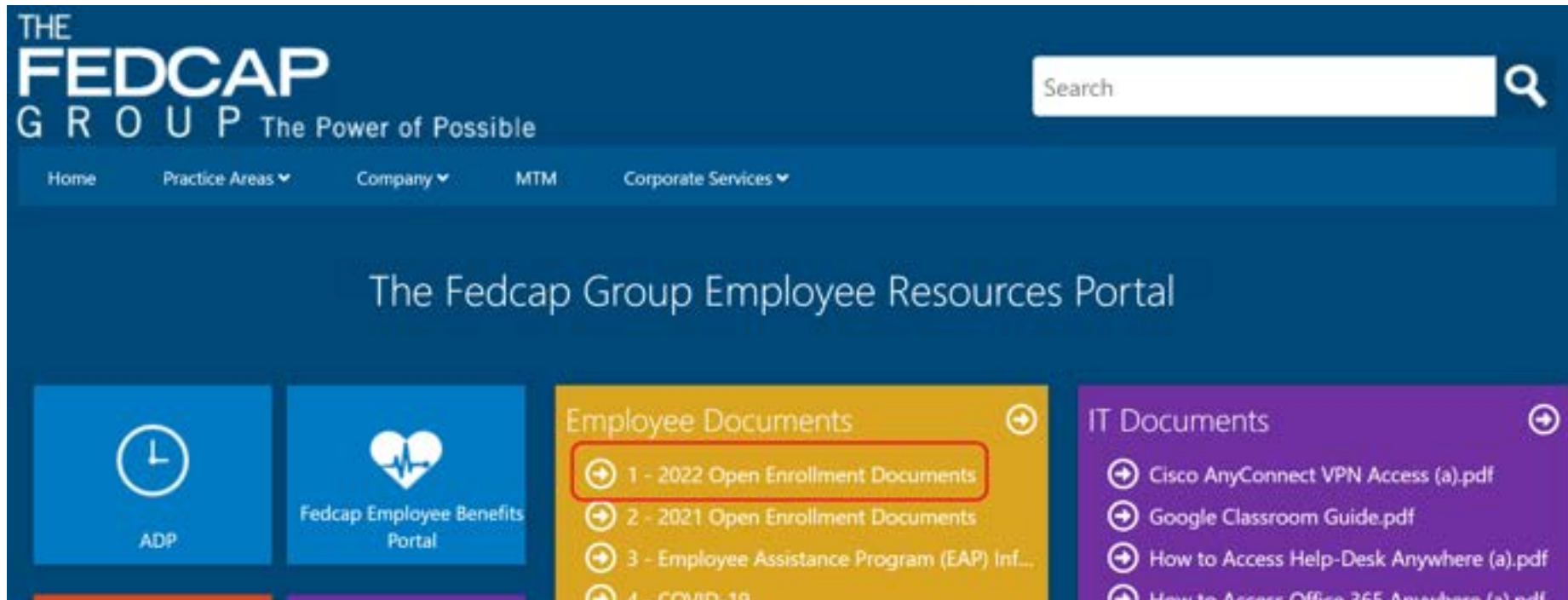


Employee Resources Portal - Intranet

Open Enrollment documents will also be available on the Employee Resources Portal on the Fedcap Group Intranet/Sharepoint website.

<https://Fedcap.sharepoint.com/hr/SitePages/home.aspx>

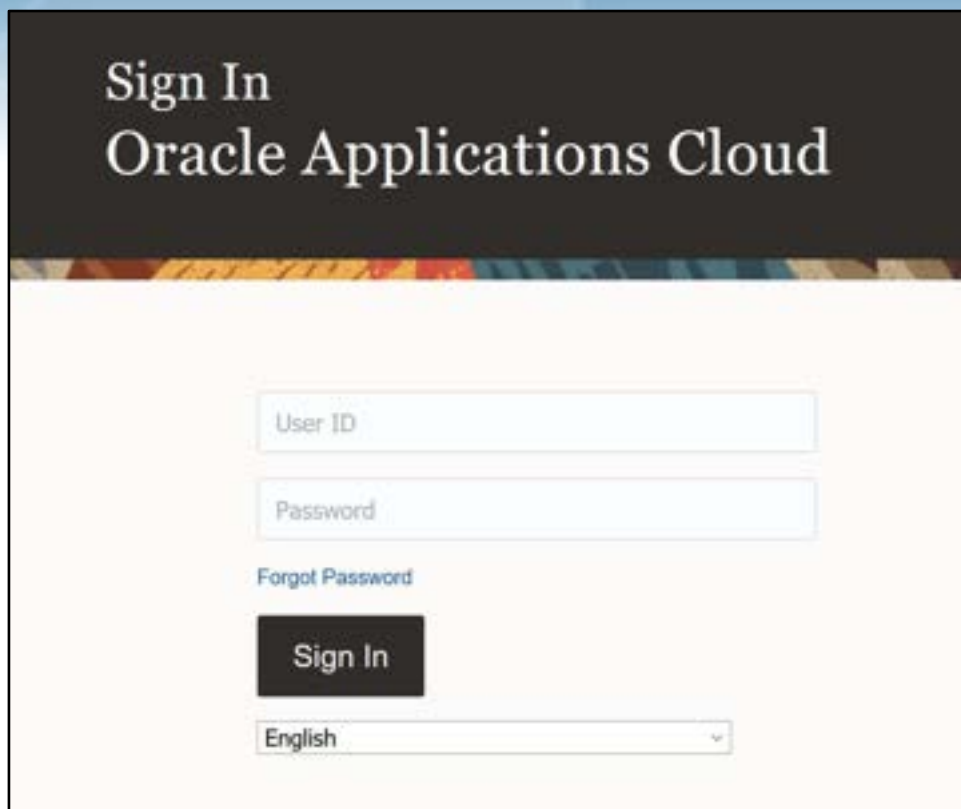
Select “2022 Open Enrollment Documents” folder to view these documents.



The screenshot displays the Fedcap Group Employee Resources Portal. At the top left is the logo for THE FEDCAP GROUP with the tagline 'The Power of Possible'. To the right is a search bar. Below the logo is a navigation menu with links for Home, Practice Areas, Company, MTM, and Corporate Services. The main heading reads 'The Fedcap Group Employee Resources Portal'. Below this are four main content areas: ADP, Fedcap Employee Benefits Portal, Employee Documents, and IT Documents. The 'Employee Documents' section is highlighted with a red box around the first item, '1 - 2022 Open Enrollment Documents'. Other items in this section include '2 - 2021 Open Enrollment Documents', '3 - Employee Assistance Program (EAP) Inf...', and '4 - COVID-19'. The 'IT Documents' section lists items like 'Cisco AnyConnect VPN Access (a).pdf', 'Google Classroom Guide.pdf', 'How to Access Help-Desk Anywhere (a).pdf', and 'How to Access Office 365 Anywhere (a).pdf'.

Open Enrollment – Oracle HCM Login

Oracle HCM URL: <https://eckb.fa.us2.oraclecloud.com>



Sign In
Oracle Applications Cloud

User ID

Password

[Forgot Password](#)

Sign In

English

User ID: work email address

Password: user generated

If you need access to your Oracle HCM account or need help to reset your password, please contact the Oracle Help Desk at oraclehelpdesk@fedcap.org or call 646-931-2374.

Open Enrollment – Oracle HCM Login

After logging in, from the “Me” tab, click on the “Benefits” icon, then click “Make Changes” to start the process

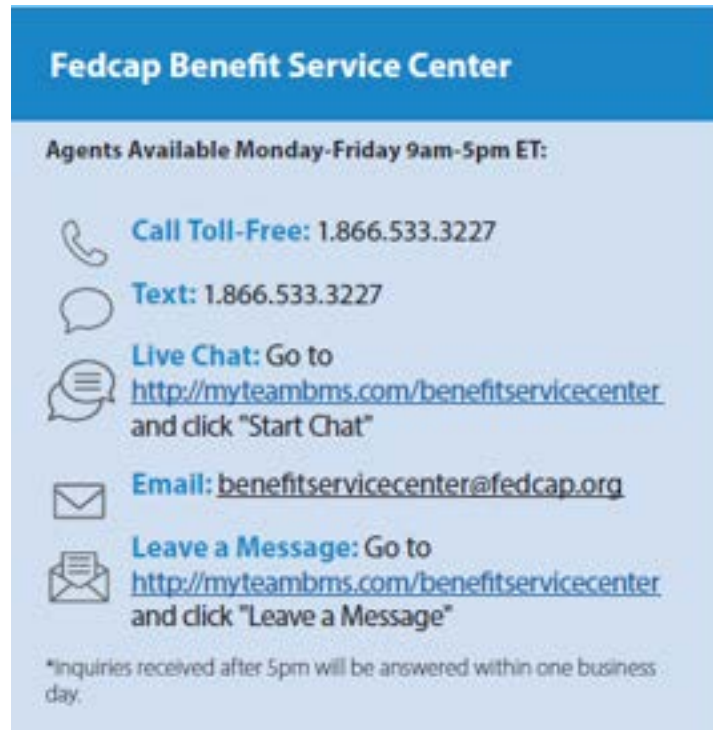
The screenshot displays the Oracle HCM user interface. At the top, there is a navigation bar with tabs: Me, My Employees, Benefits Administration, Projects, Procurement, and Tools. The 'Me' tab is selected. Below the navigation bar, there are two columns of options. The left column, labeled 'QUICK ACTIONS', includes: Personal Details, Document Records, Identification Info, Contact Info, and Family and Emergency Contacts. The right column, labeled 'APPS', includes: Directory, Time and Absences, Career and Performance, Personal Information, Learning, and Benefits. The 'Benefits' app icon is highlighted with a red rectangular box. Below the main content area, a dark blue banner contains the text 'Review your benefits package and relevant info before you enroll.' and a white button labeled 'Make Changes' with a red arrow pointing to it. At the bottom of the page, there are two white boxes. The left box is titled 'Pending Actions' and contains the text 'Address your open items to complete enrollment'. The right box is titled 'Your Benefits' and contains the text 'See your current, past, and future enrollments'.

Benefit Service Center

The Fedcap Benefit Service Center offers you a central location for your benefits questions and should always be your first point of contact for a benefits question or claims issue. The Benefit Service Center is staffed with qualified benefit representatives who understand your benefit plans and can answer your questions and assist with claims resolution.






Contact the Fedcap Benefit Service Center if you are looking for information about:

- Medical, Dental, Vision, Disability, Life, and Accidental Death & Dismemberment (AD&D) benefits
- Health Care and Dependent Care Flexible Spending Accounts
- Commuter Benefits
- Claim Issues
- ID Cards
- Qualified Life Status Changes
- COBRA
- Voluntary Benefits



Fedcap Benefit Service Center

Agents Available Monday-Friday 9am-5pm ET:

-  **Call Toll-Free:** 1.866.533.3227
-  **Text:** 1.866.533.3227
-  **Live Chat:** Go to <http://myteambms.com/benefitservicecenter> and click "Start Chat"
-  **Email:** benefitservicecenter@fedcap.org
-  **Leave a Message:** Go to <http://myteambms.com/benefitservicecenter> and click "Leave a Message"

*inquiries received after 5pm will be answered within one business day.

What's New For 2022?

- Employees who elect or continue their Empire Medical coverage will receive a new Medical ID card at the end of 2021. Any older cards you have will be invalid.
- Empire's BCBS's PPO and EPO2 medical networks will change to Blue Access network for New York State. There are no changes to the Empire plans outside of New York State.
- Empire PPO Plan's out-of-network deductible and out-of-pocket maximum will increase.
- HRA Stipend amounts will increase to:
 - Employee Only: \$750
 - Employee + Spouse: \$1,000
 - Employee + Child(ren): \$1,000
 - Employee + Family: \$1,250



Medical Benefits Overview

Medical

Medical Plans		PPO	EPO2	EPO1	HRA3000	
Network		New York - Blue Access Outside New York - National PPO				
Plan Features		In-Network	Out-of-Network	In-Network Coverage Only	In-Network Coverage Only	In-Network Coverage Only
Deductible	Employee	\$1,000	\$3,000	\$0	\$1,500	\$3,000
	Employee + Family	\$2,500	\$7,500	\$0	\$3,750	\$6,000
Coinsurance	Insurance Carrier	90%	70%	90%	80%	90%
	Member	10%	30%	10%	20%	10%
Office visits	Primary Care Physician	\$20	Deductible & Coinsurance	\$25	\$35	Deductible & Coinsurance
Copay	Specialist	\$35	Deductible & Coinsurance	\$40	\$50	Deductible & Coinsurance
Out-of-Pocket Maximum	Employee	\$3,250	\$5,000	\$7,150	\$6,000	\$7,150
	Employee + Family	\$8,125	\$12,500	\$14,300	\$15,000	\$14,300

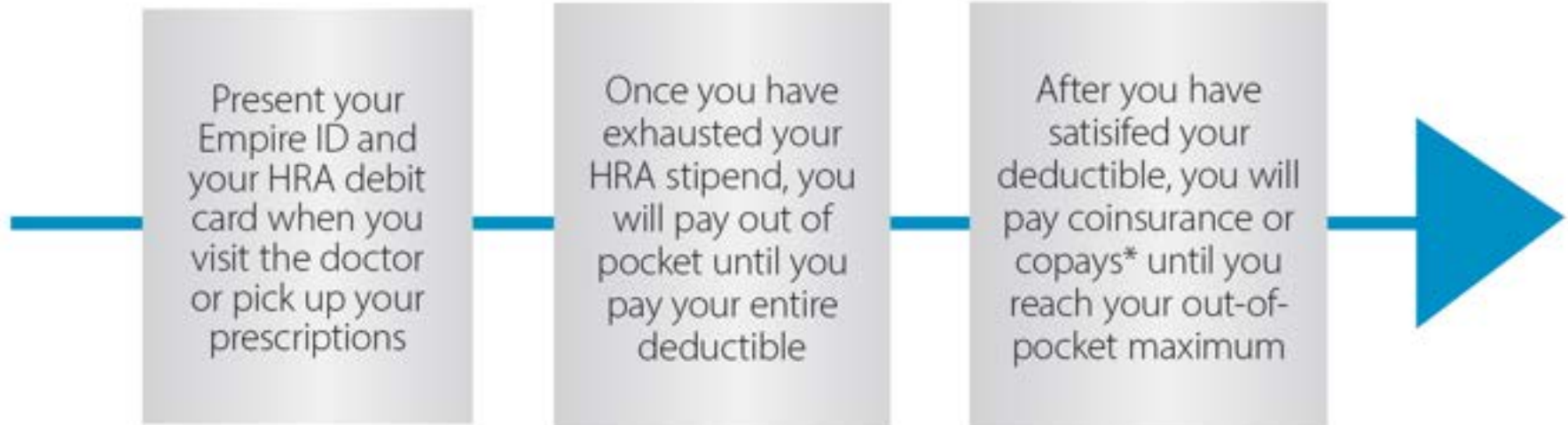
This is only a brief summary of key benefits. Please refer to the Benefits Guide for additional details.

Health Reimbursement Account (HRA)

If you choose the HRA3000 medical plan, The Fedcap Group will provide you with an employer funded HRA (Health Reimbursement Account) you can use to offset your deductible.

The HRA will be administered by Empire and incoming claims are first paid by the HRA.

Coverage Level	Stipend Amount
Employee Only	\$750
Employee + Child(ren)	\$1,000
Employee + Spouse	\$1,000
Employee + Family	\$1,250



Prescription Drug Coverage

The Empire BCBS medical plans include in-network coverage for prescription drugs.

The EPO1 and EPO2 plans require you to satisfy a prescription drug deductible before you begin to pay copays based on drug tier.

Below is a summary of Empire's prescription drug coverage:

Prescription Drug Coverage	PPO		EPO2	EPO1	HRA3000
Retail (30-day supply)	No deductible \$10 copay \$25 copay 20%** \$80 min/\$300 max	Covered in-network only	\$50 deductible* \$10 copay \$35 copay 20%** \$80 min/\$300 max	\$100 deductible* \$10 copay \$35 copay 20%** \$80 min/\$300 max	Deductible then \$10 copay \$35 copay 20%** \$80 min/\$300 max
Tier 1					
Tier 2					
Tier 3					
Mail Order (90-day supply)	No deductible \$20 copay \$50 copay 20%** \$80 min/\$300 max	Covered in-network only	No deductible \$20 copay \$70 copay 20%** \$80 min/\$300 max	No deductible \$20 copay \$70 copay 20%** \$80 min/\$300 max	Deductible then \$20 copay \$70 copay 20%** \$80 min/\$300 max
Tier 1					
Tier 2					
Tier 3					

*per person; does not apply to Tier 1**20% of prescription drug cost

This is only a brief summary of key benefits. Please refer to the Benefits Guide for additional details.

Home Delivery Complete



With Home Delivery Complete, you can get up to two fills of your maintenance medication at your regular pharmacy. By the third fill, you must start using home delivery for your maintenance medication to be covered.

There are three options enroll in Home Delivery:

- 1) Go to empireblue.com. Choose Order and Manage Prescriptions on the home page, then choose Request a New Home Delivery Prescription to get started.
- 2) Download the Sydney Health mobile app. Log in to the Sydney Health app, select Pharmacy, then choose Request a New Home Delivery Prescription to get started.
- 3) Call Empire and they will help you make the switch.



If you do not enroll in home delivery for your maintenance medication, you will have to pay 100% of the cost of your medication.

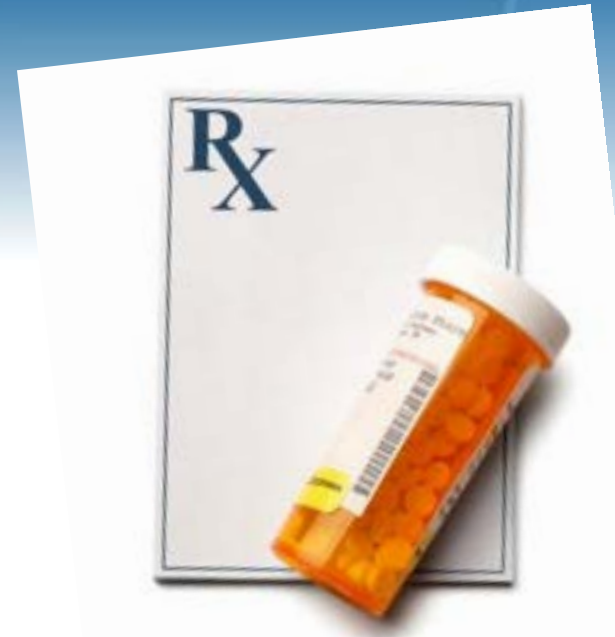
Preferred Generic Rx Program

Switching to Generic Drugs Can Save You Money!

- Generic drugs work just as well as brand-name drugs but often cost less
- If you get a brand-name drug that has a generic option, you will pay the tier 1 (generic) copay plus the difference in cost between the brand-name and generic drug
- If your doctor prescribes a brand-name drug that does not have a generic equivalent, you will pay the tier 2 copay or tier 3 coinsurance



Before you opt for a brand-name drug, remember it will cost you more money



Here's an example of why you pay more for a brand-name drug:

Your tier one (generic) drug copay:	\$ 10
Plus the brand name drug cost:	+ \$ 160
Subtotal:	<u>\$ 170</u>
Minus the generic drug cost:	- \$ 60
You pay more for a 30-day supply of the brand-name prescribed drug:	\$ 110

Empireblue.com – Website

Empireblue.com is a comprehensive resource website that provides you information about your medical, pharmacy, dental, and vision plans as well as a variety of health and wellness resources.

Register at <https://www.empireblue.com/register/> to:

- View benefit plan information, including copayments, coinsurance, deductibles, out-of-pocket maximums
- View claims and Explanations of Benefits (EOBs)
- Find in-network providers
- Print temporary IDs and order new ID cards
- Find information on pre-certification / pre-authorization of medical services and prescriptions
- View the prescription drug list and tier for medications (generic, preferred brand (formulary), non-preferred brand (non-formulary))
- View the maintenance medication drug list
- Find information about mail-order pharmacy benefit

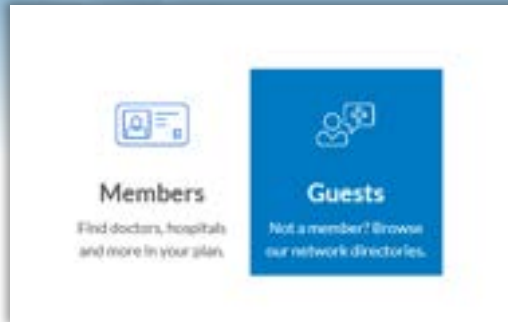
Empire Medical

How to Find a Doctor Online

STEP 1

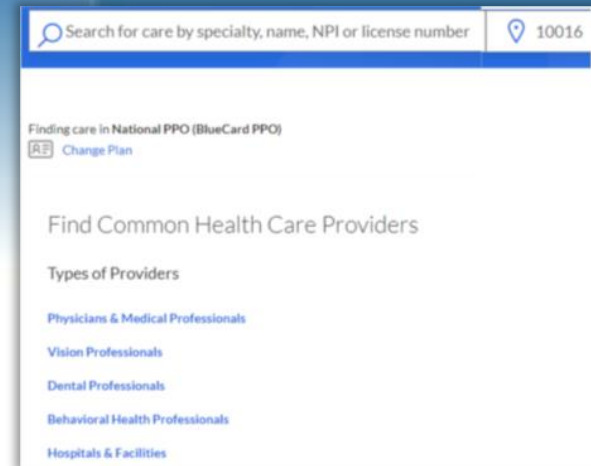
Visit empireblue.com/find-care/ (or visit empireblue.com, and then click “**Find Care**”)

- Search as a Guest: click on “**Guests**”



STEP 3

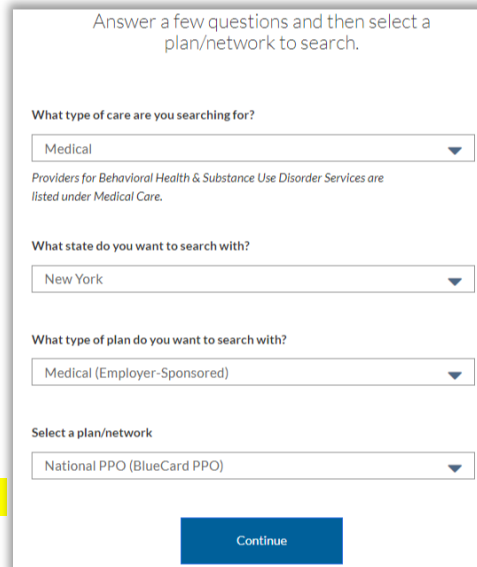
Enter in your zip code and then click Types of Providers



STEP 2

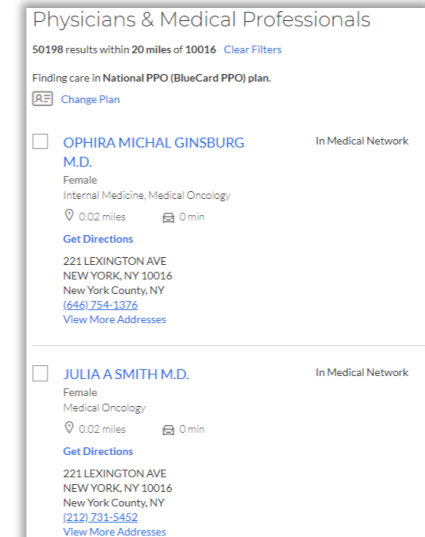
If searching as guest, complete the following fields:

- What type of care are you searching for?
Select “**Medical**”
- What state do you want to search in?
Select a **State**
- What type of plan do you want to search with?
Select “**Medical (Employer-Sponsored)**”
- Select a plan/network
- **PPO/EPO1/EPO2/HRA - Blue Access (Select Network) - NY**
- **All Plans Outside NY – National PPO (BlueCard PPO)**

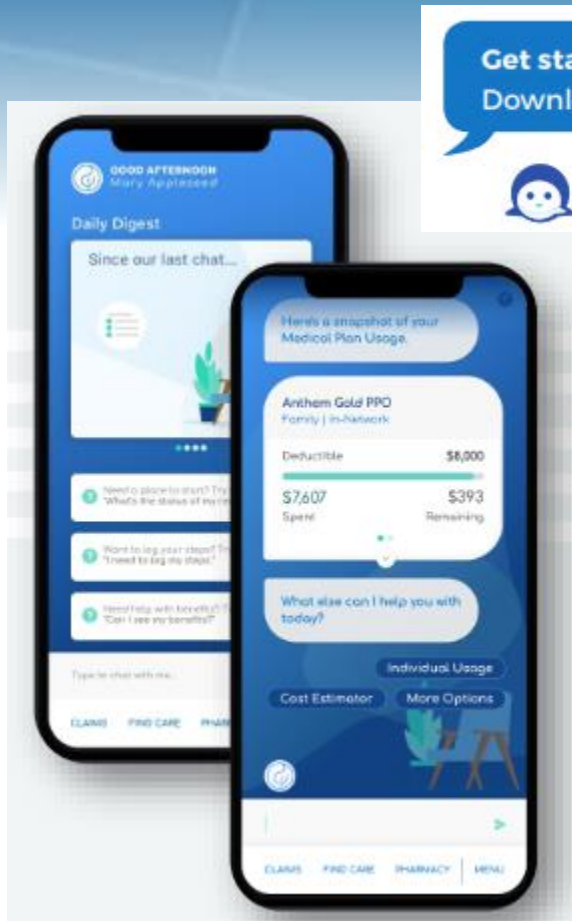
A screenshot of the search filter form on the Empire Blue website. The heading is 'Answer a few questions and then select a plan/network to search.' There are four dropdown menus: 'What type of care are you searching for?' (selected: Medical), 'What state do you want to search with?' (selected: New York), 'What type of plan do you want to search with?' (selected: Medical (Employer-Sponsored)), and 'Select a plan/network' (selected: National PPO (BlueCard PPO)). Below the dropdowns is a blue 'Continue' button. A note states: 'Providers for Behavioral Health & Substance Use Disorder Services are listed under Medical Care.'

STEP 4

View your **search results**.



Sydney Health Mobile App (Empire)



Get started with Sydney Health
Download the app today!



Sydney Health makes health care easier

See your benefits. Find a doctor. Track your fitness. It's personalized and easy!

With Sydney Health, you can find everything you need to know about your medical, pharmacy, dental, vision, life insurance, and disability insurance benefits all in one place. Sydney Health makes it easier to get things done, so you can spend more time focused on your health.

Simple experience

Our **simple experience** makes it easy to find what you need — with one-click access to benefits info, Member Services, LiveHealth Online and wellness resources. And you can use the interactive chat to get answers quickly.

My Family Health Record

My Family Health Record gives you the full picture of your family's health — all in one place. It includes health history and electronic medical records. View, download and share the info right from the app.

My Health Dashboard

My Health Dashboard is your hub for personalized health and wellness. Find programs that interest you, build an action plan to help you meet your health goals, sync your fitness tracker and earn points for your progress.

Personalized Match

Personalized Match helps you find a doctor in your plan who's right for you. You'll get results carefully matched with your unique needs, preferences and plan details.

With just one click, you can:

- Find care and check costs
- See all benefits
- View claims
- View and use digital ID cards
- Use the interactive chat feature to get answers quickly
- Sync your favorite fitness tracker

LiveHealth Online

LiveHealth Online lets you talk face-to-face with a doctor through your mobile device or computer with a webcam. No appointments, no driving, no waiting.

This benefit costs \$59 per use if you are in the HRA3000 plan and have not satisfied your deductible. Once the deductible has been met, your cost is \$5.90 per use.

This benefit is available at no cost to you if you are in the EPO1, EPO2, or PPO plans.

- Access to experienced, board-certified primary care physicians specially trained for online visits 24 hours a day, 7 days a week, 365 days a year.*
- Use LiveHealth Online for colds, the flu, fevers, rashes, infections, allergies, and more. It's less expensive and more convenient than a visit to an urgent care center.
- Enroll today at www.livehealthonline.com or download the mobile app from the Google Play store or the Apple App store.



*Due to state laws LiveHealth Online is not available in all 50 states and state restrictions may limit coverage in states where it is available. For details, go to: <https://livehealthonline.com/questions/>

Support & Resources

24/7 NurseLine

24/7 NurseLine provides access to a registered nurse over the phone 24/7, anytime, anywhere for assistance or just to hear a reassuring voice.

- Helps members understand their symptoms.
- Increases understanding of medical condition or prescribed course of treatment.
- Helps ensure members access the right care in the right setting.

Call **(877) 825-5276 (877-TALK-2-RN)** or **(800) 337-4770** to connect with a nurse today.

Future Moms

Future Moms provides individualized support to expectant moms to help achieve healthier pregnancies and deliveries.

- 24/7 phone access to a nurse coach you can talk to about your pregnancy and health. A nurse may call you to see how you're doing.
- A book that shows changes you can expect for you and your baby over the next nine months.
- Tools to help you, your doctor and, your Future Moms nurse coach track your pregnancy and spot possible risks.
- Resources to help you make decisions and prepare for the birth of your baby.

Call **(800) 828-5891** to learn more.

Condition Care

Condition Care is Empire's disease management program.

The Condition Care Program focuses on 5 conditions:

- Asthma
- Chronic Obstructive Pulmonary Disease (COPD)
- Diabetes
- Heart Failure
- Coronary Artery Disease

When you join the program you'll get tools and resources including:

- 24/7 phone access to a nurse care manager to answer questions and give information about your condition.
- A health review and follow-up calls if needed.
- Tips on prevention and lifestyle choices to help improve quality of life.

Call **(866) 962-0951** to learn more.

You May Have Other Options Available to You:

- If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from Fedcap, there is a premium assistance program that can help pay for coverage, using funds from the Medicaid or CHIP program. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs, but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.
- If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.



Dental Benefits Overview

Dental

Dental Plans	PPO1	PPO2
Carrier	Empire	Empire
Plan Type	PPO	PPO
Out-of-Network Reimbursements	80th% UCR ⁽¹⁾	In-network MAC ⁽²⁾
Deductible	Individual: \$50 Family: \$150	Individual: \$100 Family: \$300
Deductible Waived for Preventive Care	Yes	Yes
Preventive / Basic / Major	In-Network: 100% / 80% / 50% Out-of-Network: 100% / 80% / 50%	In-Network: 100% / 60% / 50% Out-of-Network: 100% / 50% / 50%
Endodontics / Periodontics / Oral Surgery	Basic	Basic
TMJ Benefits	Covered Under Oral Surgery (Basic)	Covered Under Oral Surgery (Basic)
Crowns / Bridges / Dentures	Major	Major
Implants	Not Covered	Not Covered
Annual Maximum	\$1,500	\$1,000
Orthodontia	50%	50%
* Ortho Eligibility	Dependent Children Only (must be banded before age 19)	Adults and Dependent Children
* Ortho Lifetime Maximum	\$1,500	\$1,000
Dependent Age Limit	26	26

This is only a brief summary of benefits. Please refer to the Benefits Guide for additional details.

⁽¹⁾ UCR = Usual, Customary, Reasonable

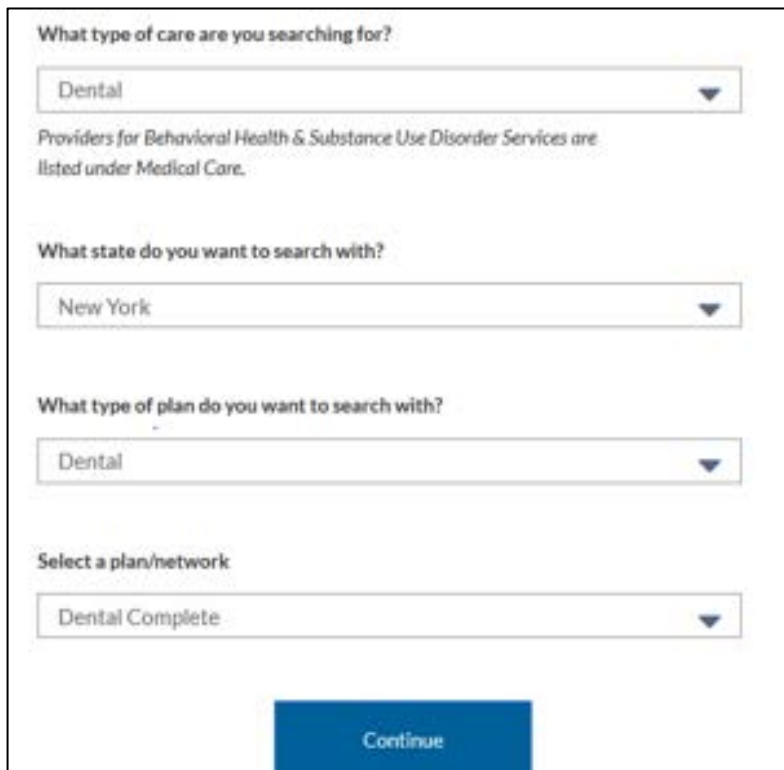
⁽²⁾ MAC = Maximum Allowable Charge

Finding In-Network Dental Providers

To find an in-network dental provider go to www.empireblue.com/find-care/ and select “**Dental Complete**” under “Select a plan/network”. Click “continue” to enter your zip code, and a list of in-network dentists will appear.

You can also search using the Sydney app by clicking on the “Find Care” icon and selecting “Dental Professionals”.

Web search

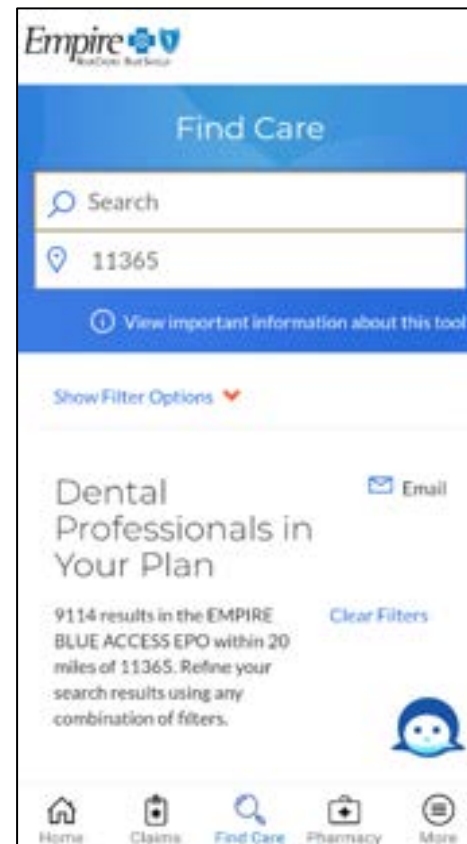


The screenshot shows a web search form with the following fields and options:

- What type of care are you searching for?:** A dropdown menu with "Dental" selected. Below it, a note states: "Providers for Behavioral Health & Substance Use Disorder Services are listed under Medical Care."
- What state do you want to search with?:** A dropdown menu with "New York" selected.
- What type of plan do you want to search with?:** A dropdown menu with "Dental" selected.
- Select a plan/network:** A dropdown menu with "Dental Complete" selected.

A blue "Continue" button is located at the bottom center of the form.

Sydney Health app



The screenshot shows the Sydney Health app interface with the following elements:

- Header:** "Empire" logo and "Find Care" title.
- Search Bar:** A search bar with a magnifying glass icon and the text "Search".
- Location:** A location pin icon followed by the zip code "11365".
- Information:** A link that says "View important information about this tool".
- Filter Options:** A link that says "Show Filter Options" with a downward arrow.
- Results:** A section titled "Dental Professionals in Your Plan" with an "Email" icon. Below the title, it says "9114 results in the EMPIRE BLUE ACCESS EPO within 20 miles of 11365. Refine your search results using any combination of filters." and a "Clear Filters" link.
- Bottom Navigation:** A navigation bar with icons for Home, Claims, Find Care, Pharmacy, and More.



Vision Benefits Overview

Vision

Empire BCBS	In-Network	Out-of-Network	Frequency Period (calendar year)
Exam	\$5 Copay	\$30 Reimbursement	12 months
Lenses			
Single Vision	\$10 Copay	\$25 Reimbursement	12 months (either pair of eyeglass lenses OR 1 order of contact lenses)
Bifocal	\$10 Copay	\$35 Reimbursement	
Trifocal	\$10 Copay	\$45 Reimbursement	
Contact Lenses			
Conventional	\$120 Allowance Additional 15% off balance over allowance	\$120 Reimbursement	12 months (either pair of eyeglass lenses OR 1 order of contact lenses)
Disposable	\$120 Allowance No additional discount	\$120 Reimbursement	
Medically Necessary	\$0 Copay	\$200 Reimbursement	
Frames			
Any Frames	\$120 Allowance Additional 20% off balance over allowance	\$120 Reimbursement	24 months

This is only a brief summary of benefits. Please refer to the Benefits Guide for additional details.



FSA Benefits Overview

Flexible Spending Accounts (FSAs)

FSA programs allow you to pay for unreimbursed health care and/or dependent care expenses on a pre-tax basis.

Account Type	Examples of Eligible Expenses	Contribution Limits	Access to Funds
Health Care FSA For yourself or any dependent claimed on your federal tax return	<ul style="list-style-type: none"> • Medical plan deductibles and coinsurance * • Copays • Prescription drugs • Dental Expenses, including orthodontia and implant expenses • Vision exams • Glasses/contact lenses • Laser eye surgery 	Up to \$2,850 Does not include your contributions toward the cost of medical plan coverage	Immediate access to your entire, annual contribution amount as of January 1
Dependent Care FSA For eligible dependents under age 13, a disabled spouse, a parent or disabled child over age 13	<ul style="list-style-type: none"> • Dependent/childcare centers • Adult day care • Nursery school /pre-school • After school /summer day camp 	Up to \$5,000 <i>(\$2,500 if married and filing separately)</i>	<ul style="list-style-type: none"> • Funds are added to your Dependent Care FSA account on every pay date • Submit claims up to your year-to-date accumulated amount in your account

*** Note for the HRA3000 Medical Plan:** If you are enrolled in the HRA3000 medical plan and elect Health Care FSA, you must meet your annual deductible before you receive reimbursement for medical expenses.

Budget Appropriately: FSAs are considered “**use it or lose it.**” This means you will forfeit your remaining balance if you do not use all of the funds by March 15 of the following year. You have until March 31 of the following year to submit all claims. It is important you budget appropriately and use all of the funds within the FSA plan year. Any Health Care FSA balance from the previous year will not be available on your card.



Voluntary Benefits

Voluntary Supplemental Health Plans

Financial protection when you need it the most

Accident, Specified Disease & Hospital Indemnity Insurance



No medical questions required to enroll



Pay lump-sum benefits when covered events happen



Can help pay for out-of-pocket medical costs



Extended continuation¹



No pre-existing condition limitations²



Cash benefit paid to you, so you decide how to use the money

¹ Extended continuation may not be available in all states. Remains in place as long as the group policy is not terminated.
² Covered accidents or illness must occur after the effective date of coverage.

Accident plan (24 hour coverage)



	Accident plan covers you on or off the job ²
Emergency room	\$250
Hospital admission	\$1,500
Ambulance (ground)	\$400
Urgent care	\$200
X-ray	\$200
Physical therapy (up to 10 visits/within 90 days)	\$50
Concussion	\$300
Laceration (2 to 6 inches)	\$200

¹ Centers for Disease Control and Prevention, National Center for Health Statistics: *National Hospital Ambulatory Medical Care Survey (2014)*: cdc.gov/nchs/data/nhamcs/web_tables/2014_ed_web_tables.pdf.

² This is a partial listing of benefits. Please see plan documents for additional details.

Specified Disease plan



	\$20,000²
Cancer (invasive/non-invasive)	\$20,000 / \$5,000
Stroke	\$20,000
Heart attack (myocardial infarction)	\$20,000
Coronary Artery Disease	\$5,000
Major Organ Failure	\$20,000
End-Stage Renal Disease	\$20,000
Skin Cancer Benefit (Lifetime Benefit)	\$250
Health Screening benefit for each covered member (annually)	\$50

Note: Specified Disease benefits for covered spouse and dependents are 50% of the amount shown above. Specified Disease rates are based on the employees age at five year increments.

¹ Centers for Disease Control and Prevention: *Heart Disease Facts* (updated November 28, 2017); cdc.gov/heartdisease/facts.htm.

² This is a partial listing of benefits. Please see plan documents for additional details.

Hospital Indemnity plan



	Benefit
Hospital confinement first day	\$165
Hospital confinement daily benefit	\$165
Intensive Care Unit (ICU) confinement first day	\$165
Daily Intensive Care Unit (ICU) confinement	\$165
First-day hospital confinement annual max	5 day
Daily hospital confinement annual max	90 days
Pregnancy waiting period	None

¹ U.S. Centers for Medicare & Medicaid Services: *Protection from High Medical Costs* (accessed May 2, 2018); healthcare.gov.

² This is a partial listing of benefits. Please see plan documents for additional details.

Auto-Notification

We know you're busy so Empire will let you know when to file a claim for your Accident, Specified Disease and Hospital Indemnity plans.

- 1 Log in at empireblue.com and register using your member id number
- 2 Your provider files a medical claim
- 3 Empire analyses your claims data and determines if it's related to a supplemental claim
- 4 We email you when your medical claim is approved and include a notification to file your supplemental claim and how to start the claims process
- 5 You connect with our member services department and they will guide you through the claims process

Voluntary Life and AD&D

Employee benefit	\$10,000 increments to a maximum of \$1,000,000 or 5x your annual earnings, whichever is less
Spouse benefit	\$5,000 increments to \$250,000, limited to 100% of employee benefit
Child benefit (to age 29)	\$1,000 increments to \$20,000, limited to 100% of employee benefit; one rate covers all children
Guaranteed issue	Employee: \$200,000 or 3x annual earnings, whichever is less; Spouse: \$30,000; Child(ren): \$20,000
Conversion/portability	If your employment ends, you can apply to convert to another Anthem plan without a health exam/Evidence of Insurability
Age reduction	Benefit is reduced by 35% at age 65; 50% at age 70
AD&D	Automatically included for employees, spouse and children and equal to Voluntary Life benefit elected
Living benefit	Up to 50% of Voluntary Life benefit



Other Benefits and Resources

Basic Life and AD&D

Employee Life & AD&D Benefit	1 times annual salary to a maximum of \$100,000
Age reduction	Benefit is reduced by 50% at age 70
Conversion	If your employment ends, you can apply to convert to another Anthem plan without a health exam/Evidence of Insurability
Living benefit	50% up to \$100,000

New York DBL & New Jersey TBD Benefits

NY Weekly benefit amount	50% of weekly earnings, up to maximum of \$170
Benefit begins for illness & accident	8 th day
Maximum benefit period	26 weeks (in any consecutive 52-week period)
NJ Weekly benefit amount	85% of average weekly wages, subject to a maximum of 70% of the Statewide average weekly wages paid to workers by employers, not to exceed \$993
Benefit begins for illness & accident	8 th day
Maximum benefit period	26 weeks

Outside NY, NJ and RI DBL Benefit

Weekly benefit amount	50% of weekly earnings, up to maximum of \$170
Benefit begins for illness & accident	8 th day
Maximum benefit period	26 weeks

Paid Family Leave (PFL) Benefits

New York Paid Family Leave (PFL)

Benefit Amount: The benefit amount is 67% of your average weekly wages, up to a maximum weekly benefit of \$1,068.36, with a maximum benefit period for up to 12 weeks in any consecutive 52-week period.

To learn more, visit <https://paidfamilyleave.ny.gov/>

New Jersey Family Leave

Benefit Amount: The benefit amount is 85% of your average weekly wage, and the maximum weekly benefit increases to \$993 per week (effective January 1, 2022), with a maximum benefit period for 12 consecutive weeks within a 52-week period.

To learn more, visit <https://myleavebenefits.nj.gov/worker/fli/>

Paid Family Leave (PFL) Benefits

Massachusetts Paid Family and Medical Leave (PFML):

Benefit Amount: The maximum total amount that you can receive in PFML benefits is \$850 per week with a maximum benefit period of 20 weeks during a 52-week period.

To learn more, visit <https://www.mass.gov/paid-family-and-medical-leave-benefits>

Rhode Island Temporary Caregiver Insurance (TCI):

Benefit Amount: You will receive a 60% wage replacement. The maximum benefit rate is \$978 per week, with a maximum benefit period of 4 weeks during a 52-week period.

To learn more, visit <https://dlt.ri.gov/tdi/>

District of Columbia Paid Family Leave:

Benefit Amount: The maximum weekly benefit amount is \$1,009 with a maximum benefit period of 8 weeks during a 52-week period.

To learn more, visit <https://dcpaidfamilyleave.dc.gov/>

Voluntary Short-Term Disability (VSTD)

VSTD Weekly Benefit Amount	60% of weekly earnings, up to maximum of \$500
Benefit begins for accident	8 days
Benefit begins for illness	8 days
Maximum benefit period	26 weeks
Pre-existing conditions	3 months look-back/within 12 months from effective date

Family and Medical Leave Act (FMLA)

The federal Family and Medical Leave Act (FMLA) provides eligible employees with up to 12 weeks of unpaid leave, job protection and health benefits continuation in the event of their own serious health condition or the serious health condition of a qualifying family member.

If you are absent for more than three consecutive days, **on the fourth day** you must contact Anthem at 888-868-7046 to file a claim under the Family Medical Leave Act (FMLA) and/or Disability. In addition, you must also contact your Manager/Supervisor and HR.

You are eligible for FMLA at the time of the qualifying event if you have at least 12 months of service and have worked a minimum of 1,250 hours in the previous 12 months with Fedcap.

Eligible leaves under FMLA: Birth or Placement of a Child, Care for an Immediate Family Member, Employee's Own Serious Health Condition, Qualifying Exigency Leave, Care of Spouse or Next of Kin Injured While on Active Duty in the Armed Forces

Additional Benefits

Commuter Benefit – Beniversal through Benefit Resource Inc.

- IRS regulated benefit allows employees to use pre-tax dollars for transit and parking expenses commuting to and from work up to \$270 per month
- Commuter elections need to be elected every year and can be changed at any time throughout the year

Legal Plan – MetLaw

- Provides legal services from qualified attorneys for employee and dependents
- Must be elected each year and enrollees must remain in the plan for the full year

**Refer to Benefits Guide for
Details**

Employee Assistance Program (CCA)



CCA is a provider of programs that enhance individual and organizational performance and well-being

- No cost
- Confidential
- Available to you and your family members
- Staffed by caring professional counselors and work/life specialists with a depth of expertise
- Types of Assistance
 - Information, resources and referrals
 - In-the-moment support
 - Solutions-focused, short-term counseling
 - Referrals to longer term and/or specialized care

TOLL-FREE:
800-833-8707

WEBSITE:
www.myccaonline.com

COMPANY CODE:
fedcap

Areas of Assistance for Employees and Family Members



CHILD CARE	ADULT AND ELDER CARE	DAILY LIVING	LEGAL AND FINANCIAL	EMOTIONAL WELL-BEING
Locating Child Care	Aging	Home Improvement	Identity Theft	Stress, Anxiety, Depression
Parenting/Child Development	Housing Options	Pet Care	Wills and Estate Planning	Life Transitions
Pre/post-Natal Health	Caregiver Support	Health/Fitness	Divorce and Custody	Relationship and Family Concerns
Adoption	Medicare and Medicaid	Moving and Relocation	Bankruptcy	Grief and Trauma
Education	Community Resources	Event Planning	Budgeting and Debt/Credit Management	Addiction and Recovery
Work/Family Balance	Adults with Disabilities	Travel/Leisure	Saving for the Future	Workplace Issues
		Disaster Recovery		



Retirement / 403(b) Benefits Overview

403(b) Thrift Plan

The 403(b) program through Mutual of America allows you to set aside money on a pre-tax and/or post-tax basis for retirement

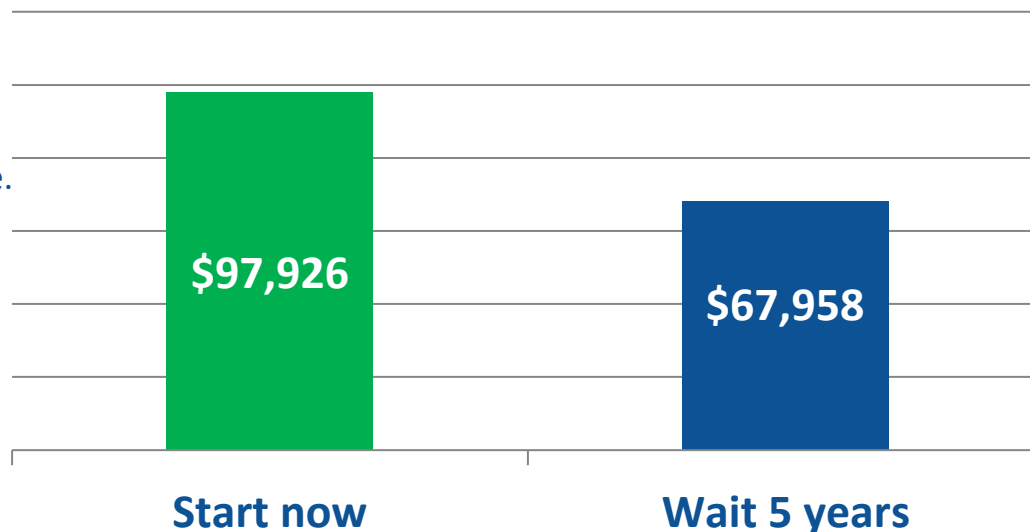
- For Employee contributions: No minimum age or service requirement
- Employee contribution up to \$20,500 (2022 IRS and plan limit)
- Age 50 or over “Catch-up” contribution: an additional \$6,500
- Participant contributions lower taxable income for both federal and, if applicable, state income tax purposes.
- All contributions and any investment earnings accumulate on a tax-deferred basis.
- Invest funds among variety of investment options

403(b) Thrift Plan

Maximizing Savings

Starting Early and Saving Consistently Are Key
Value in 30 years if you contribute \$100 a month

If you start saving early and regularly you will usually save more.



The illustration assumes a beginning balance of \$0 and a tax-deferred investment with an annual rate of return of 6%. This is not a prediction of any type of investment, is not representative of any investment strategy and is provided for illustrative purposes only. Investment returns are not guaranteed, and your actual return may vary significantly from that shown.

Open Enrollment Reminders

Open Enrollment Check List

- ✓ Log into the Oracle HCM between November 3 and November 17
- ✓ Answer the Medicare eligibility question
- ✓ If you want a Health Care FSA, Dependent Care FSA or Parking and Transit plan for 2022, you must enroll, even if you enrolled for 2021
- ✓ Only act if you want to make a change to your elections – if you take no action, your current elections will roll over (except for FSA and Parking/Transit)
- ✓ If you do not want medical coverage, check the box to waive coverage and provide a reason
- ✓ Designate a beneficiary for Life Insurance and AD&D
- ✓ If you are adding dependents, you must provide SSN and DOB along with dependent verification documentation by December 31, 2021. After December 31, 2021, unverified dependents will not be covered.
- ✓ Consider enrolling in the 403(b) Thrift Plan

Questions

