

# Total Rewards

## At The Arc





# Total Rewards Eligibility And Enrollment

## Who Is Eligible

**Employees** | Full-time employees who work at least 30 hours per week are eligible for benefits on the first of the month following date of hire.

**Dependents** | Employees may enroll legal spouses and dependent children up to age 26. If a dependent child is a full-time student enrolled in a training program for a minimum of 24 hours or a minimum of 12 credits, then employees may enroll the dependent student up to age 99.

**Domestic Partners** | A domestic partner is defined as a person who cohabitates or resides with the employee in a domestic partnership, same sex or otherwise, for a minimum of 6 months, and can document evidence of financial interdependence existing for at least six consecutive months prior to application.

## When To Enroll

**New Hire** | If you are a new hire or newly eligible for benefits, you must enroll in your benefit plans within 30 days of your eligibility date. If you waive coverage upon first eligibility, you will be required to wait until the next open enrollment or when you experience a qualifying event.

**Open Enrollment** | Employees may make benefit changes during open enrollment, which is in June for a July 1 effective date. Your coverage will be in place until the next open enrollment.

**Qualifying Event (QE)** | A qualifying event is a documented, life status change. If you experience one of these events during the course of your benefit plan year, you may be able to make changes to your plans and coverage.

## How To Enroll

**Enroll via Paycom Online** | For help contact [totalrewards@thearcCCR.org](mailto:totalrewards@thearcCCR.org)



All benefits offered by The Arc are “a la carte” and voluntary for you to choose to enroll in. Please know that you do not need to enroll in the medical plan in order to enroll in other benefits.

## Qualifying Events

Here is a list of approved qualifying events in accordance with IRS code Section 125:

- Marriage or divorce
- Birth or adoption of a child
- Death of a spouse or a child
- Change in residence or work location that affects benefits eligibility for you or your covered dependents
- You or one of your covered dependents gain or lose coverage due to a change in employment status i.e. employment termination or reduction of hours
- Gain or loss of qualified coverage

While this list contains the most relevant qualifying events, check with People & Culture or your Health Pros to see if you may qualify for other enrollment periods. Depending on the type of change, you may need to provide proof of the qualifying event (for example, a marriage license or birth certificate).



If you do not notify People & Culture within 30 days of your QE, you will have to wait until the next annual open enrollment period to make benefit changes.

# Questions?

## Meet Your Total Rewards Pros!

Our goal is to make sure that you receive the right coverage information regarding your benefit plans. Because the world of healthcare and insurance can be confusing and hard to navigate, we are pleased to introduce your health pros who will be able to assist you with all things related to your benefits.

### 1. Manager of Total Rewards

410.269.1883

[totalrewards@thearcccr.org](mailto:totalrewards@thearcccr.org)

### 2. Freshbenies Health Pro line

877.412.3108

[freshbenies@alight.com](mailto:freshbenies@alight.com)

## Contact Your Total Rewards Pros for Things Such As:

- Resolve claims and billing issues/errors
- Answer benefit questions pertaining to your plans
- Locate in-network facilities, dentists & other healthcare providers near you
- Schedule your appointments
- Research cost and value comparisons



# Benefits Paid For By The Arc

The Arc contributes to the below benefits for benefit-eligible employees.

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## 1. Medical Premium Shared with Employees

The Arc contributes to the majority of the cost of the medical premium. Employees share in a portion of that cost.

## 2. Shared Dental Premium with \$0 Deductible

## 3. Fully Funded Deductible \$2000/\$4000

## 4. Life Insurance

The Arc provides you with Basic Term Life insurance in the amount of 1x your basic earnings and overtime through Mutual of Omaha at no cost to you.

## 5. Long-Term Disability

## 6. Kindbody Family Planning



# Retirement Plan

## Principal 403(B)

The Arc is committed to providing a robust and cost-effective way for all full-time and part-time employees to save and invest for the future through Principal's 403(B) Retirement Plan. All employees are automatically enrolled into the plan at a 1% contribution. The Arc matches that 1% so that on day one of your employment you are saving 2% of your salary.

Additionally, The Arc will match dollar for dollar contributions up to 3%. The Arc will match at fifty percent for 4% and 5% for a maximum match of 4% from The Arc. Everyone is 100% vested on the first day of employment. This means that the money in your retirement fund is always yours. There is no waiting period for you to access the money that The Arc contributes on your behalf.

Principal offers a range of options for every kind of investor from cautious to high risk options.

## Principal Retirement Savings Website Guide

Have questions about how to navigate the online Principal retirement savings portal? Want to see your savings in real time and figure out if you're on track to meet your retirement goals? Check out this [online guide](#) specifically designed for The Arc Central Chesapeake Region!

For more information please scan the QR code below or visit [www.principal.com](http://www.principal.com)



# Medical

## CareFirst Administrators EPO Plan

- Members have access to the national Blue Choice Network.
- Members are not required to appoint a Primary Care Physician (PCP) and do not require referrals to see specialists.
- Care outside of the United States is limited to emergency or urgent care only.
- Pre-certification may be required for some services. Be sure to verify with your provider before performing services otherwise a penalty could apply.
- All copays, coinsurance, deductibles and prescriptions for covered services accumulate towards the out-of-pocket limit.

## CareFirst Administrators EPO

To the right is a snapshot of your benefits. The benefit summary from the carrier will always prevail.

## HRA Details

All eligible employees who participate in The Arc's EPO medical insurance plan will be automatically enrolled in a Health Reimbursement Arrangement (HRA) plan. A HRA is an IRS-approved, employer-funded plan that reimburses employees for out-of-pocket medical expenses that apply to the deductible.

As an added benefit for employees, The Arc will fund the full deductible as outlined below to help pay for deductible expenses.

**Individual:** \$2,000

**Employees and their covered dependents:** \$4,000

BENEFITS	IN-NETWORK
<b>ANNUAL DEDUCTIBLE</b> Individual / Family (embedded)	\$2,000 / \$4,000 (100% funded by The Arc)
<b>ANNUAL OUT-OF-POCKET LIMIT</b> Individual / Family (embedded)	\$5,000 / \$10,000
<b>PREVENTITIVE CARE</b> Well Child Care, Adult Physical, Routine GYN Visits, and More	No Charge
<b>OFFICE VISITS</b> Primary Care Physician (PCP) Specialist MDLive Telehealth Convenience Care	\$15 copay \$25 copay No charge \$25 copay
<b>DIAGNOSTIC SERVICES</b> Labs X-ray Advanced Imaging	\$15 copay \$15 copay \$150 copay
<b>EMERGENCY AND URGENT CARE</b> Urgent Care Center Hospital Emergency Room Non-Emergency Hospital Emergency Room	\$30 copay Ded., then \$200 copay Ded., then \$400 copay
<b>HOSPITALIZATION</b> Inpatient Hospital Services Outpatient Hospital Services	Ded., then \$250 copay Ded., then \$150 copay
<b>PRESCRIPTION</b> Deductible Generic Drugs (30 day / 90 day) Preferred Brand Drugs (30 day / 90 day) Non-Preferred Brand Drugs (30 day / 90 day) Specialty Drugs (30 day)	\$0 \$5 copay / \$12.50 copay \$35 copay / \$87.50 copay \$60 copay / \$150 copay \$75 copay

# Medical (Continued)

## General Prescription Plan: Southern Scripts

Southern Scripts is the Pharmacy Benefit Manager for The Arc's health plan. Southern Scripts has a national network of retail and independent pharmacies where you can fill your prescriptions. The network includes chains and independent pharmacies. Register for your account to access pharmacy locator, drug listing, mail order pharmacy, specialty pharmacy, prescription history and member resource library.

### Register for Your Account

Register for your online account following the steps below:

1. Visit [southernscripts.net](https://southernscripts.net).
2. Navigate to "Members"
3. Select "Member Portal" and create an account.
4. Enter the required information and click "Save".

### First Choice Pharmacy

Members of Southern Scripts have access to reduced prescription costs at participating first choice pharmacies. Take advantage of these reduced Rx costs by using the Pharmacy Locator.

## Medical Contributions

If you choose to enroll in The Arc's CareFirst Administrators EPO Plan, below are the amounts that will be payroll deducted for the coverages you select. Once you enroll, you'll need to wait until open enrollment or experience a qualifying event to change your selection. If you have additional questions concerning tax implications, please consult with the People & Culture or a tax professional.

### Weekly Contributions for Non-Exempt, Hourly Employees

The amounts are listed below on a weekly basis for non-exempt, hourly employees.

PLAN	EMPLOYEE	EMPLOYEE & CHILDREN	EMPLOYEE & ADULT	FAMILY
Carefirst Administrators EPO	\$41.83	\$96.88	\$120.33	\$146.41

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### Bi-Weekly Contributions for Exempt, Salaried Employees

The amounts are listed below on a bi-weekly basis for exempt, salaried employees.

PLAN	EMPLOYEE	EMPLOYEE & CHILDREN	EMPLOYEE & ADULT	FAMILY
Carefirst Administrators EPO	\$83.67	\$193.77	\$240.65	\$292.83



# Concierge Pharmacy Program

## The Arc's Preferred Concierge Pharmacy

### Haloscripts

The Arc has partnered with HaloScripts Pharmacy to bring you a revolutionary new program for our employees taking multiple maintenance medications. HaloScripts is a mail order, concierge pharmacy located in Memphis, TN that serves patients across the country. Eligible members can sign up with HaloScripts for their maintenance medications at no charge. Members will benefit from \$0 generic, brand, and specialty medications shipped directly to your door.

### Who Is Eligible for Haloscripts?

HaloScripts Pharmacy is designed for members who are taking multiple maintenance medications. HaloScripts Pharmacy is able to fill and source chronic generic, brand, and specialty medications. Medications are mailed on a scheduled quarterly basis directly to your home address. It's important to note that only maintenance, ongoing medications are eligible to be filled with HaloScripts Pharmacy. Acute medications like antibiotics or controlled substances are not eligible. You're able to work with your local retail pharmacy to pick up those medications. As a reminder, choose firstchoice pharmacies to keep your Rx costs at a minimum.

### Why Haloscripts?

HaloScripts is a pharmacy built on concierge customer service. You can call/text your pharmacist to discuss any questions related to your existing medications or new prescriptions. The best part is there are no copays for your medications and no postage fee!

### How do I get started?

Eligible members will receive a welcome email inviting you to sign up if you qualify for HaloScripts. You can also call HaloScripts directly or visit the website.



(800) 901-4195



[haloscripts.com](http://haloscripts.com)

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## Variable Copay

The Variable Copay™ Program is designed to combat the rising cost on high cost medications. The Variable Copay™ Program uses coupons provided by the manufacturer to greatly reduce costs for eligible medications. If your medication has a Variable Copay Opportunity and you try to fill your medication at a retail pharmacy, the pharmacy will get a rejection message stating "Variable Copay Opportunity Available". This does not mean your medication is not covered but instead means your medication is eligible for a manufacturer coupon that will reduce the cost to you. All medications that are eligible for the Variable Copay™ Program will be filled through the CRx Specialty Solutions Pharmacy. Below is a sample of medications included in this program. Your copay may be drastically reduced.

- Copaxone
  - Humira
  - Prolia
  - Trulicity
  - Dupixent
  - Humulin 500
  - Stelara
  - Vivitrol
  - Entyvio
  - Novolog
  - Triumeq
  - Xolair
- +250 other Variable Copay Medications



# Family Planning With Kindbody

Employees who participate in The Arc's medical insurance plan will be enrolled in the KindBody Family Planning and Infertility Benefit.

There are many different fertility and family-building journeys, whether you are looking to start your family today or preserve your options for the future. Kindbody provides end-to-end fertility services with a dedicated Care Navigation Team to guide you through your journey and coordinate the full-spectrum of benefits available to you and your covered family members.

## Your Kindbody Benefit Includes

- Up to 1 full KindCycle with fertility medication through Schraft's Pharmacy
- Up to \$15,000 for reimbursement of eligible donor, surrogacy and adoption services
- Dedicated Care Navigation Team
- Access to Kindbody's full suite of services and network of partner clinics
- White-glove guidance for care path
- Live & virtual events
- A personalized patient portal

## How To Get Started with Kindbody

- Head to [kindbody.com/activate-kindbody-benefit](https://kindbody.com/activate-kindbody-benefit)
- Create your Kindbody account using any email address
- Confirm Eligibility by entering your Access Code KINDARC and your Unique ID this is your email address you have on file with The Arc



For more information, or if you have any questions:  
[\*\*employeebenefits@kindbody.com\*\*](mailto:employeebenefits@kindbody.com)

# Dental

## Guardian DentalGuard Preferred Plan Highlights

- Members have access to the national Guardian DentalGuard Preferred network with over 100,000 participating dentists. Members can see any dentist. Participating dentists offer the biggest opportunity for savings when having services performed.
- If seeing non-participating dentists, be prepared for additional costs including balance billing.

## Guardian DentalGuard Preferred Plan Details

Below is a snapshot of your benefits.  
The benefit summary from the carrier will always prevail.



**When seeing nonparticipating dentists, watch out for balance billing!**

BENEFITS	IN-NETWORK	OUT-OF-NETWORK
<b>ANNUAL DEDUCTIBLE</b> Individual / Family (per plan year)	\$0 / \$0	\$50 / \$150
<b>ANNUAL MAXIMUM</b> Maximum amount the plan will pay per year	\$1,500 per person	
<b>CLASS I—DIAGNOSTIC/PREVENTITIVE SERVICES</b> Cleanings, Oral Exams, Fluoride Treatments**, X-rays, Sealants	Plan pays 100% of AB*	Plan pays 80% of AB*
<b>CLASS II—BASIC SERVICES/MAJOR SURGICAL</b> Fillings, Simple Extractions, Surgical Extractions, Periodontics, Scaling and Root Planing, Perio Surgery, Anesthesia	Ded., then plan pays 80% of AB*	Ded., then plan pays 70% of AB*
<b>CLASS III—MAJOR SERVICES/RESTORATIVE</b> Bridges, Dentures, Dental Implants, Inlays, Onlays, Veneers, Single Crowns	Ded., then plan pays 50% of AB*	Ded., then plan pays 40% of AB*
<b>CLASS IV—ORTHODONTIC SERVICES</b> Treatment for the alignment of teeth (Adults & Children up to age 26)	Plan pays 50% of AB*	

\*AB is Allowed Benefit

\*\*Fluoride Treatments only available for dependents under age 19

# Dental Contributions

## Weekly Contributions for Non-Exempt, Hourly Employees

The amounts are listed below on a weekly basis for non-exempt, hourly employees.

PLAN	EMPLOYEE	EMPLOYEE & CHILDREN	EMPLOYEE & ADULT	FAMILY
Dental—Guardian DentalGuard Preferred	\$7.10	\$14.06	\$14.19	\$19.24

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## Bi-Weekly Contributions for Exempt, Salaried Employees

The amounts are listed below on a bi-weekly basis for exempt, salaried employees.

PLAN	EMPLOYEE	EMPLOYEE & CHILDREN	EMPLOYEE & ADULT	FAMILY
Dental—Guardian DentalGuard Preferred	\$14.21	\$28.12	\$28.38	\$38.48



# Vision

## EyeMed Vision Plan Highlights

- You have the freedom to choose any provider, however, as a EyeMed Vision member, you'll receive the deepest discounts in network.
- There are no claims to file when seeing in-network providers.
- When seeing out-of-network providers you may incur additional costs subject to balance billing.
- When utilizing out-of-network providers, you will have to pay for the service in full and submit a claim for reimbursement.

## EyeMed Vision Plan Highlights

Below is a snapshot of your benefits. The benefit summary from the carrier will always prevail.

BENEFITS	IN-NETWORK	OUT-OF-NETWORK
<b>EYE COPAY</b> (Once every 12 months) Eye Exam Materials	\$10 copay \$10 copay	Plan pays up to \$40 Not covered
<b>EYEGLASS FRAMES</b> (Once every 12 months)	Plan pays up to \$150 plus 20% discount off amount over allowance	
<b>EYEGLASS LENSES</b> (Once every 12 months) Single Bifocal Trifocal Lenticular	\$10 copay \$10 copay \$10 copay \$10 copay	Plan pays up to \$30 Plan pays up to \$50 Plan pays up to \$70 Plan pays up to \$70
<b>LENS OPTIONS</b> (Once every 12 months) Progressives Photochromic Lenses	Additional \$65 copay \$75 copay	Plan pays up to \$50 Not covered
<b>CONTACT LENSES</b> (Once every 12 months) Elective Medically necessary	Plan pays up to \$150 plus 15% discount off amount over allowance Covered in full	Ded., then plan pays 40% of AB*
<b>LASIK</b>	15% off retail or 5% off promo price for Lasik or PRK from U.S. Laser Network	Not covered

# Vision Contributions

## Weekly Contributions for Non-Exempt, Hourly Employees

The amounts are listed below on a weekly basis for non-exempt, hourly employees.

PLAN	EMPLOYEE	EMPLOYEE & CHILDREN	EMPLOYEE & ADULT	FAMILY
Vision—EyeMed Vision*	\$1.71	\$5.04	\$3.26	\$5.04

\*The rate for vision for an Employee and one child is \$3.26 per pay

## Bi-Weekly Contributions for Exempt, Salaried Employees

The amounts are listed below on a bi-weekly basis for exempt, salaried employees.

PLAN	EMPLOYEE	EMPLOYEE & CHILDREN	EMPLOYEE & ADULT	FAMILY
Vision—EyeMed Vision*	\$3.43	\$10.08	\$6.52	\$10.08

\*The rate for vision for an Employee and one child is \$6.52 per pay



# Tax Saving Accounts Health & Dependent Care

**Tax Saving Accounts** allow you to reduce your taxable income by setting aside pre-tax dollars to pay for out-of-pocket health and dependent care expenses for you and your family.

Employees make their elections in June for a July 1 effective date.

**Clarity** is the administrator of The Arc's Flexible Spending Accounts.



**To continue your Flexible Spending Account, action is required. You must re-enroll for the plan year 7/1/2022-6/30/2023. You have 30 Days post separation to use funds**

## Healthcare FSA

A healthcare FSA allows you to budget and save for qualified medical expenses incurred over the course of your upcoming plan year. It is a great savings tool for you and your family. You can elect up to \$3,050 to receive for reimbursement for out-of-pocket healthcare expenses related to medical, dental or vision care. The amount elected will be available the first day of your plan year. These medical, dental, vision, or other healthcare-related expenses cannot be eligible for reimbursement through any insurance or other benefit program. Your FSA election is meant for budgeted expenses. **You are unable to change your FSA election during the plan year unless you experience a qualifying event.** Any unused funds at the end of the plan year will be forfeited except for up to \$610 which may be carried over into the next plan year.

## Healthcare FSA Eligible Expenses

- Ambulance
- Artificial limbs
- Birth control
- Braces
- Chiropractor
- Contact lenses
- Crutches
- Dental fees (not cosmetic)
- Diagnostics fees
- Eyeglasses
- Eye exams
- Hospital services
- Immunizations
- Insulin
- Laboratory fees
- Medical services
- Nursing Services
- Prescription drugs
- Psychiatric care
- Psychologist visits
- Transplants (organ)
- Wheelchair
- X-ray

This list is not exhaustive. Some of these expenses may require documentation of medical necessity.

## Dependent Care FSA

A Dependent Care FSA is a simple way to save money on care for your dependents. It allows you to set aside pre-tax dollars to pay for day care expenses. The annual IRS limit for this type of account is \$5,000 per household. The amount you elect is available as each payroll deposit occurs throughout the plan year. Expenses incurred when there aren't enough funds in the account can be reimbursed at a later date. Eligible dependents for this plan include children under the age of 13 and a disabled spouse or disabled dependent(s) of any age.

## Dependent Care Eligible Expenses

- Adult daycare center
- Before and after school care
- Au pair or nanny fees
- Babysitting (work-related)
- Custodial elder care
- Nursery school
- Preschool
- Summer day camp

This list is not exhaustive. Eligible expenses are intended to be incurred for services performed while the parent is at work, looking for work or is a full-time student.



**Please retain copies of all receipts, provider statements, and Explanation of Benefits.**

# Basic Life Insurance And AD&D With Mutual Of Omaha

## Paid For By The Arc

The Arc recognizes the importance of planning for the unexpected. Life insurance helps protect your family from financial risk and sudden loss of income in the event of your death. Accidental Death & Dismemberment (AD&D) insurance provides an additional benefit if you lose your life, sight, hearing, speech or use of your limbs due to an accident.

## Employee Basic Life and AD&D

The Arc provides you with Basic Term Life insurance in the amount of 1x your basic earnings with overtime through Mutual of Omaha at no cost to you.

Employee benefits are reduced to 65% at age 65, reduced to 40% at age 70, and reduced to 25% at age 75.

You have one option for continuing your life coverage if you leave the company:

- Conversion allows you to convert the coverage to an individual policy if any or all of your life insurance ends while you are insured under the group plan.

## Additional Voluntary Life and AD&D Insurance

Voluntary Life Insurance provides employees with a way to purchase additional life insurance outside of what The Arc provides already to you by way of Basic Life. You may purchase additional life insurance amounts through a convenient payroll deduction. Coverage is provided by Mutual of Omaha.

**Employee Coverage** | You may elect up to 5x your annual salary, up to \$500,000 in increments of \$10,000. **Medical underwriting is required for an election above \$80,000 at your first eligibility** and for any amount afterwards should you waive at your first eligibility.

**Spouse Coverage** | You may elect 100% of your employee amount, up to \$250,000 in increments of \$5,000 for your spouse. Medical underwriting is required for an election above \$30,000 at your spouse's first eligibility and for any amount afterwards should your spouse waive at first eligibility.

**Child(ren) Coverage** | You may elect 100% of your employee amount, up to \$10,000, in increments of \$1,000 for your children under age 26. The minimum benefit is \$2,000. Medical underwriting is not required.

You can continue your voluntary life insurance should your employment end. Portability will allow you to keep your term life policy for you and your dependents without providing evidence of insurability. You will be responsible for paying the premium. Conversion will allow you to convert your term policy to an individual life insurance policy without having to provide evidence of insurability. You will be responsible for paying the premium.



**If you waive voluntary life insurance when you are first eligible, any amount elected after that will require Evidence of Insurability!**



# Voluntary Life/AD&D Weekly Contributions For Non-Exempt, Hourly Employees

Voluntary Life Insurance—Below are the weekly deductions for Voluntary Life Insurance. The spouse rate is based on the employee's age bracket. As employee's move between age brackets, the premiums will increase at the policy renewal. One child election covers all children up to age 26.

## How To Calculate Your Voluntary Life Premium

Benefit Amount / \$1,000 x Age Rate = Monthly Premium

Monthly Premium x 12 / 26 = Per Pay Premium

\$ \_\_\_\_\_ / \$1,000 x \_\_\_\_\_ = \$ \_\_\_\_\_

AGE BAND	EMPLOYEE & SPOUSE RATE
<25	\$0.110
25 - 29	\$0.110
30 - 34	\$0.120
35 - 39	\$0.170
40 - 44	\$0.280
45 - 49	\$0.460
50 - 54	\$0.690
55 - 59	\$1.030
60 - 64	\$1.710
65 - 69	\$3.080
70 - 74	\$4.360
75 >	\$9.410
AD&D	\$0.030

		WEEKLY AMOUNT									
		\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
EMPLOYEE	AGE										
	0 - 29	\$0.32	\$0.65	\$0.97	\$1.29	\$1.62	\$1.94	\$2.26	\$2.58	\$2.91	\$3.23
	30 - 24	\$0.35	\$0.69	\$1.04	\$1.38	\$1.73	\$2.08	\$2.42	\$2.77	\$3.12	\$3.46
	35 - 39	\$0.46	\$0.92	\$1.38	\$1.85	\$2.31	\$2.77	\$3.23	\$3.69	\$4.15	\$4.62
	40 - 44	\$0.72	\$1.43	\$2.15	\$2.86	\$3.58	\$4.29	\$5.01	\$5.72	\$6.44	\$7.15
	45 - 49	\$1.13	\$2.26	\$3.39	\$4.52	\$5.56	\$6.78	\$7.92	\$9.05	\$10.18	\$11.31
	50 - 54	\$1.66	\$3.32	\$4.98	\$6.65	\$8.31	\$9.97	\$11.63	\$13.29	\$14.95	\$16.62
	55 - 59	\$2.45	\$4.89	\$7.34	\$9.78	\$12.23	\$14.86	\$17.12	\$19.57	\$22.02	\$24.46
	60 - 64	\$4.02	\$8.03	\$12.05	\$16.06	\$20.08	\$24.09	\$28.11	\$32.12	\$36.14	\$40.15
	65 - 69	\$7.18	\$14.35	\$21.53	\$28.71	\$35.88	\$43.06	\$50.24	\$57.42	\$64.59	\$71.77
70 - 74	\$10.13	\$20.26	\$30.39	\$40.52	\$50.65	\$60.78	\$70.92	\$81.05	\$91.18	\$101.31	
75+	\$21.78	\$43.57	\$65.35	\$87.14	\$108.92	\$130.71	\$152.49	\$174.28	\$196.06	\$217.85	
SPOUSE	AGE	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
	0 - 29	\$0.16	\$0.32	\$0.48	\$0.65	\$0.81	\$0.97	\$1.13	\$1.29	\$1.45	\$1.62
	30 - 24	\$0.17	\$0.35	\$0.52	\$0.69	\$0.87	\$1.04	\$1.21	\$1.38	\$1.56	\$1.73
	35 - 39	\$0.23	\$0.46	\$0.69	\$0.92	\$1.15	\$1.38	\$1.62	\$1.85	\$2.08	\$2.31
	40 - 44	\$0.36	\$0.72	\$1.07	\$1.43	\$1.79	\$2.15	\$2.50	\$2.86	\$3.22	\$3.58
	45 - 49	\$0.57	\$1.13	\$1.70	\$2.26	\$2.83	\$3.39	\$3.96	\$4.52	\$5.09	\$5.65
	50 - 54	\$0.83	\$1.66	\$2.49	\$3.32	\$4.15	\$4.48	\$5.82	\$6.65	\$7.48	\$8.31
	55 - 59	\$1.22	\$2.45	\$3.67	\$4.89	\$6.12	\$7.34	\$8.56	\$9.78	\$11.01	\$12.23
60 - 64	\$2.01	\$4.02	\$6.02	\$8.03	\$10.04	\$12.05	\$14.05	\$16.06	\$18.07	\$20.08	
65 - 69	\$3.59	\$7.018	\$10.77	\$14.35	\$17.94	\$21.53	\$26.12	\$28.71	\$32.30	\$35.88	
CHILD	AGE	\$2,000	\$3,000	\$4,000	\$5,000	\$6,000	\$7,000	\$8,000	\$9,000	\$10,000	
	0 - 26	\$0.11	\$0.16	\$0.21	\$0.27	\$0.32	\$0.37	\$0.42	\$0.48	\$0.53	

# Voluntary Life/AD&D Bi-Weekly Contributions For Exempt, Salaried

Voluntary Life Insurance—Below are the weekly deductions for Voluntary Life Insurance. The spouse rate is based on the employee's age bracket. As employee's move between age brackets, the premiums will increase at the policy renewal. One child election covers all children up to age 26.

## How To Calculate Your Voluntary Life Premium

Benefit Amount / \$1,000 x Age Rate = Monthly Premium

Monthly Premium x 12 / 26 = Per Pay Premium

\$ \_\_\_\_\_ / \$1,000 x \_\_\_\_\_ = \$ \_\_\_\_\_

AGE BAND	EMPLOYEE & SPOUSE RATE
<25	\$0.110
25 - 29	\$0.110
30 - 34	\$0.120
35 - 39	\$0.170
40 - 44	\$0.280
45 - 49	\$0.460
50 - 54	\$0.690
55 - 59	\$1.030
60 - 64	\$1.710
65 - 69	\$3.080
70 - 74	\$4.360
75 >	\$9.410
AD&D	\$0.030

		WEEKLY AMOUNT										
		AGE	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
EMPLOYEE	0 - 29		\$0.65	\$1.29	\$1.94	\$2.58	\$3.23	\$3.88	\$4.52	\$5.17	\$5.82	\$6.46
	30 - 24		\$0.69	\$1.38	\$2.08	\$2.77	\$3.46	\$4.15	\$4.85	\$5.54	\$6.23	\$6.92
	35 - 39		\$0.92	\$1.85	\$2.77	\$3.69	\$4.62	\$5.54	\$6.46	\$7.38	\$8.31	\$9.23
	40 - 44		\$1.43	\$2.86	\$4.29	\$5.72	\$7.15	\$8.58	\$10.02	\$11.45	\$12.88	\$14.31
	45 - 49		\$2.26	\$4.52	\$6.78	\$9.05	\$11.31	\$13.57	\$15.83	\$18.09	\$20.35	\$22.62
	50 - 54		\$3.32	\$6.65	\$9.97	\$13.29	\$16.62	\$19.94	\$23.26	\$26.58	\$29.91	\$33.23
	55 - 59		\$4.89	\$9.78	\$14.68	\$19.57	\$24.46	\$29.35	\$34.25	\$39.14	\$44.03	\$48.92
	60 - 64		\$8.03	\$16.06	\$24.09	\$32.12	\$40.15	\$48.18	\$56.22	\$64.25	\$72.28	\$80.31
	65 - 69		\$14.35	\$28.71	\$43.06	\$57.42	\$71.77	\$86.12	\$100.48	\$114.83	\$129.18	\$143.54
	70 - 74		\$20.26	\$40.52	\$60.78	\$81.05	\$101.31	\$121.57	\$141.83	\$162.09	\$182.35	\$202.62
	75+		\$43.57	\$87.14	\$130.71	\$174.28	\$217.85	\$261.42	\$304.98	\$348.55	\$392.12	\$435.69
SPOUSE	AGE		\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
	0 - 29		\$0.32	\$0.65	\$0.97	\$1.29	\$1.62	\$1.94	\$2.26	\$2.58	\$2.91	\$3.23
	30 - 24		\$0.35	\$0.69	\$1.04	\$1.38	\$1.73	\$2.08	\$2.42	\$2.77	\$3.12	\$3.46
	35 - 39		\$0.46	\$0.92	\$1.38	\$1.85	\$2.31	\$2.77	\$3.23	\$3.69	\$4.15	\$4.62
	40 - 44		\$0.72	\$1.43	\$2.15	\$2.86	\$3.58	\$4.29	\$5.01	\$5.72	\$6.44	\$7.15
	45 - 49		\$1.13	\$2.26	\$3.39	\$4.52	\$5.65	\$6.78	7.92	\$9.05	\$10.18	\$11.31
	50 - 54		\$1.66	\$3.32	\$4.98	\$6.65	\$8.31	\$9.97	\$11.63	\$13.29	\$14.95	\$16.62
	55 - 59		\$2.45	\$4.89	\$7.34	\$9.78	\$12.23	\$14.68	\$17.12	\$19.57	\$22.02	\$24.46
	60 - 64		\$4.02	\$8.03	\$12.05	\$16.06	\$20.08	\$24.09	\$28.11	\$32.12	\$36.14	\$40.15
65 - 69		\$7.18	\$14.38	\$21.53	\$28.71	\$32.88	\$43.06	\$50.24	\$57.42	\$64.59	\$71.77	
CHILD	AGE		\$2,000	\$3,000	\$4,000	\$5,000	\$6,000	\$7,000	\$8,000	\$9,000	\$10,000	
	0 - 26		\$0.21	\$0.32	\$0.42	\$0.53	\$0.64	\$0.74	\$0.85	\$0.96	\$1.06	

# Disability Insurance With Mutual Of Omaha

The Arc understands that there may be times of illness or injury that prevent you from working for a period of time. In fact, statistics show that 1 out of every 4 persons in the U.S. workforce will suffer a disabling injury before retirement. Disability insurance provides financial protection in the event that you become disabled and are unable to work.

## Voluntary Short-Term Disability (STD)

Short-term disabilities are often the most prevalent in the workplace. Disabilities can stem from minor injuries or illnesses to major instances like surgery or maternity. Once you have been disabled for 15 days due to an accident or illness, your STD plan pays 60% of your weekly base salary up to a maximum of \$1,000 per week, for up to 11 weeks.

Eligible employees may enroll in STD insurance at an additional cost. Coverage is offered through Mutual of Omaha.

## Long-Term Disability (LTD) Paid for by The Arc

Long-term disability insurance can play an essential role in protecting your financial and emotional life. Once you have been disabled for 90 days, your LTD plan pays 60% of your pre-tax monthly base salary up to a maximum benefit amount of \$5,000 per month until your Social Security Normal Retirement Age (SSNRA).

Eligible employees will be enrolled in LTD Insurance at no cost. Coverage is offered through Mutual of Omaha.

BENEFITS	VOLUNTARY SHORT-TERM DISABILITY	LONG-TERM DISABILITY
ELIMINATION PERIOD	15th day accident or illness	90 days
BENEFIT PERCENTAGE	60%	60%
MAX BENEFIT AMOUNT	\$1,000 per week	\$5,000 per month
BENEFIT DURATION	11 weeks	SSNRA

# Disability Contributions

## Weekly Contributions for Non-Exempt, Hourly Employees

The amounts are listed below on a weekly basis for non-exempt, hourly employees.

VOLUNTARY SHORT-TERM DISABILITY WEEKLY EMPLOYEE RATES	
AGE BAND	EMPLOYEE & SPOUSE RATE
<25	\$0.13
25 - 29	\$0.13
30 - 34	\$0.13
35 - 39	\$0.12
40 - 44	\$0.12
45 - 49	\$0.13
50 - 54	\$0.16
55 - 59	\$0.20
60 - 64	\$0.24
65 - 69	\$0.27
70<	\$0.30

## Bi-Weekly Contributions for Exempt, Salaried Employees

The amounts are listed below on a bi-weekly basis for exempt, salaried employees.

VOLUNTARY SHORT-TERM DISABILITY WEEKLY EMPLOYEE RATES	
AGE BAND	EMPLOYEE & SPOUSE RATE
<25	\$0.27
25 - 29	\$0.27
30 - 34	\$0.26
35 - 39	\$0.25
40 - 44	\$0.25
45 - 49	\$0.27
50 - 54	\$0.31
55 - 59	\$0.40
60 - 64	\$0.48
65 - 69	\$0.55
70<	\$0.60

# Legal Assistance Plan With Country Wide

## Legal Assistance Plan

The Arc offers a voluntary benefit designed to offer comprehensive legal coverage through a nationwide network of skilled attorneys. Plan members can contact an approved firm in their area to receive advice on a number of legal issues and to accomplish several legal tasks, such as preparation of wills, traffic violations, buying or selling a home and many more. Benefits will be payroll deducted on a pre-tax basis.

Countrywide offers:

- General Legal Services
- Auto Legal Services
- Consumer/Contract Legal Services
- Criminal Legal Services
- Estate Planning Legal Services
- Family Law Legal Services
- Real Estate Legal Services

You must utilize the network of attorneys available under the program in order to receive plan benefits. For those who enroll, a membership kit will be mailed to you that contains information about how to access attorneys.

### The Following Chart Outlines The Benefits Provided Under The Program:

SERVICES	PRIVATE ATTORNEY'S FEES	YOUR FEES WITH COUNTRYWIDE
Unlimited Phone Consultations & Advice	\$250 - \$450 per hour	NO CHARGE
Face-to-face Consultations	\$250 - \$450 per hour	NO CHARGE
Simple Wills	\$400 - \$1,000 each	NO CHARGE
Living Wills & Medical Powers of Attorney	\$250 - \$650 per hour	NO CHARGE
Review of Legal Documents (up to 6 pages)	\$250 - \$450 per hour	NO CHARGE
Advice on Government Programs	\$250 - \$450 per hour	NO CHARGE
Advice on Small Claims Court	\$250 - \$450 per hour	NO CHARGE
Legal Letters & Phone Calls	\$250 - \$450 per hour	NO CHARGE
Consumer Protection & Warranty Problems	\$250 - \$450 per hour	NO CHARGE
IRS State & Tax Relief Advice	\$250 - \$850 per hour	NO CHARGE
Identity Theft Prevention & Assistance	\$250 - \$450 per hour	25% Preferred Discount on Hourly Rates
Guaranteed Reduced Rates on Other Legal Matters	\$250 and up per hour	10% Preferred Discount on Contingency Fees

## Weekly Contributions for Non-Exempt, Hourly Employees

The amounts are listed below on a weekly basis for non-exempt, hourly employees.

PLAN	EMPLOYEE	EMPLOYEE & CHILDREN	EMPLOYEE & ADULT	FAMILY
Legal	\$3.18	\$3.18	\$3.18	\$3.18

## Bi-Weekly Contributions for Exempt, Salaried Employees

The amounts are listed below on a bi-weekly basis for exempt, salaried employees.

PLAN	EMPLOYEE	EMPLOYEE & CHILDREN	EMPLOYEE & ADULT	FAMILY
Legal	\$6.36	\$6.36	\$6.36	\$6.36

# Hospital Indemnity With The Hartford

## Intensive Financial Care for Hospital Admissions

The Hartford offers you a supplemental health plan that softens the financial impact of higher medical plan deductibles and other out-of-pocket costs associated with hospital admissions.

With The Hartford Hospital Indemnity, lump-sum benefits are paid directly to you if admitted to a hospital for a covered sickness or injury. These payments can be used for any purpose, such as meeting everyday expenses, whether medical or non-medical.

## Maximum Flexibility

The Hartford Hospital Indemnity enables you to select features that best fit with your current medical plan, other supplemental health plans and budget.

## Why The Hartford Hospital Indemnity?

### Key features:

- Pays indemnity benefits directly to you whether or not charges are covered by your medical plan
- Reduces the financial burden of high deductibles and co-pays

**New** - Hospital Indemnity plans now include a Health Screening Benefit. Once per year, each covered person may receive \$50 for completing a covered health screening. Covered health screenings include EKG, lipid panel, pap smear, mammography, colonoscopy, fasting blood glucose test, and more.



**DID YOU KNOW?**  
The average cost for a hospital stay is **\$1,986 per day?**

BENEFITS	
First Day Hospital Confinement	\$500 per day
Daily Hospital Confinement (day 2 forward)	\$100 per day
Daily ICU Confinement (day 2 forward)	\$200 per day
Dependent Age Limits	Child Birth to 26 years (26 if full time student)
Treatments Covered	Sickness and Injury
Pre-Existing Condition Limitation	12 month look back period, 12 month exclusion period, Continuity of Coverage

# Critical Illness With The Hartford

## The Hartford Critical Illness Insurance

It takes a lot to beat a serious illness. Unfortunately, it can also cost a lot. When you or a family member suffers a serious illness such as a stroke or heart attack, Critical Illness Insurance can help with expenses that medical insurance doesn't cover such as deductibles or out of pocket costs, or services such as experimental treatment. Critical Illness supplements your medical and your disability income insurance. The lump sum benefit is paid when you need it most, upon diagnosis, so you can rest assured that you will have funds to offset upcoming out of pocket costs, and that you'll have the flexibility to elect treatments with less worry about the cost.

Employees have the opportunity to purchase this plan through a convenient payroll deduction. Contributions are made on a post-tax basis. Employees also have the option of portability.

**New** - Critical Illness plans now include a Health Screening Benefit. Once per year, each covered person may receive \$50 for completing a covered health screening. Covered health screenings include EKG, lipid panel, pap smear, mammography, colonoscopy, fasting blood glucose test, and more.

WHAT YOUR BENEFITS COVER	1ST OCCURRENCE	2ND OCCURRENCE
<b>BENEFIT AMOUNT(S)</b>		
Employee	Choose a lump sum benefit of \$10,000 to \$20,000	
Spouse/Domestic Partner Benefits	Choose a lump sum benefit of \$5,000 to \$10,000	
Child	\$5,000 per child	
<b>CANCER</b>		
Invasive Cancer	100%	
Carcinoma in Situ	25%	
Benign Brain Tumor	100%	
<b>VASCULAR</b>		
Heart Attack	100%	100%
Stroke	100%	100%
Heart Failure	100%	100%
Aneurysm	25%	0%
<b>ADDITIONAL CONDITIONS</b>		
Coma	100%	100%
Paralysis	100%	N/A
Major Organ Transplant	100%	100%
Loss of Hearing	100%	N/A
Loss of Speech	100%	N/A
Loss of Vision	100%	N/A
Bone Marrow Transplant	25%	N/A
<b>LIFETIME MAXIMUM</b>	Employee/Spouse - 500% of Coverage Amount Child - 300% of Coverage Amount	

# Accident With The Hartford

## The Hartford Accident Insurance

Accidents happen every day. If you were injured from an accident, chances are you will have expenses that you were not anticipating. Accident Insurance can help you deal with those expenses. Benefit payments can help you with your medical deductibles and copays, and cover household expenses such as groceries, mortgage payments and childcare, which can begin to pile up if you have to take some time off from work.

Employees have the opportunity to purchase this plan through a convenient payroll deduction. Contributions are made on a post-tax basis. Employees also have the option of portability.

Accident plans include a Health Screening Benefit. Once per year, each covered person may receive \$50 for completing a covered health screening. Covered health screenings include EKG, lipid panel, pap smear, mammography, colonoscopy, fasting blood glucose test, and more.

COVERAGE DETAILS	BENEFITS
<b>ACCIDENTAL DEATH &amp; DISMEMBERMENT</b>	
Employee	\$10,000
Spouse/Domestic wPartner Benefits	\$5,000
Child	\$5,000
<b>FEATURES</b>	
Accident Emergency Room Treatment	\$150
Accident Follow-Up Visit	\$75
Air Ambulance	\$900
Ambulance	\$300
Appliance—wheelchair, brace, crutches, boot	\$100
Blood/Plasma/Platelets	\$200
Burns (2nd Degree/ 3rd Degree)	Schedule up to \$10,000
Coma	\$10,000
Concussions	\$150
Dislocations	Schedule up to \$2,000
Diagnostic Exam (Major)	\$200
Eye Injury	Schedule up to \$400
Fracture	Schedule up to \$6,000
Hospital Admission	\$1,000
Hospital Confinement	\$200 per day
Hospital ICU Confinement	\$400 per day
Urgent Care Facility Treatment	\$75
Joint Replacement	\$2,000
Laceration	Schedule up to \$600
Physical Therapy	\$25/day
Tendon/Ligament/Rotator Cuff	Schedule up to \$1,000
X-Ray	\$50





# Hospital Indemnity, Critical Illness, Accident Contributions

## Weekly Contributions for Non-Exempt, Hourly Employees

The amounts are listed below on a weekly basis for non-exempt, hourly employees.

CRITICAL ILLNESS \$10,000 WEEKLY PREMIUM					CRITICAL ILLNESS \$20,000 WEEKLY PREMIUM				
AGE	EMPLOYEE	EMPLOYEE & CHILD(REN)	EMPLOYEE & SPOUSE	FAMILY	AGE	EMPLOYEE	EMPLOYEE & CHILD(REN)	EMPLOYEE & SPOUSE	FAMILY
18 - 24	\$0.48	\$0.83	\$0.72	\$1.12	18 - 24	\$0.95	\$1.30	\$1.41	\$1.84
25 - 29	\$0.58	\$0.89	\$0.87	\$1.23	25 - 29	\$1.16	\$1.47	\$1.74	\$2.10
30 - 34	\$0.65	\$0.90	\$0.96	\$1.26	30 - 34	\$1.30	\$1.54	\$1.93	\$2.22
35 - 39	\$0.84	\$1.06	\$1.26	\$1.51	35 - 39	\$1.69	\$1.90	\$2.52	\$2.76
40 - 44	\$1.21	\$1.06	\$1.26	\$1.51	40 - 44	\$2.43	\$2.61	\$3.62	\$3.83
45 - 49	\$1.89	\$2.07	\$2.85	\$3.06	45 - 49	\$3.79	\$3.96	\$5.71	\$5.91
50 - 54	\$2.64	\$2.81	\$4.02	\$4.21	50 - 54	\$5.29	\$5.45	\$8.03	\$8.22
55 - 59	\$3.64	\$3.81	\$5.57	\$5.76	55 - 59	\$7.29	\$7.45	\$11.15	\$11.34
60 - 64	\$5.25	\$5.41	\$8.06	\$8.25	60 - 64	\$10.50	\$10.66	\$16.12	\$16.31
65 - 69	\$7.41	\$7.57	\$11.34	\$11.53	65 - 69	\$7.89	\$14.97	\$22.68	\$22.87
70 - 74	\$5.14	\$5.22	\$7.87	\$8.00	70 - 74	\$10.28	\$10.36	\$15.74	\$15.83
75 - 79	\$6.87	\$6.95	\$10.50	\$10.60	75 - 79	\$13.73	\$13.81	\$20.98	\$21.07

  

PLAN	EMPLOYEE	EMPLOYEE & SPOUSE	EMPLOYEE & CHILD(REN)	FAMILY
The Hartford Hospital Indemnity	\$2.12	\$4.39	\$4.06	\$6.62
The Hartford Accident	\$1.86	\$2.93	\$3.07	\$4.84

## Bi-Weekly Contributions for Exempt, Salaried Employees

The amounts are listed below on a bi-weekly basis for exempt, salaried employees.

CRITICAL ILLNESS \$10,000 BI-WEEKLY PREMIUM					CRITICAL ILLNESS \$20,000 BI-WEEKLY PREMIUM				
AGE	EMPLOYEE	EMPLOYEE & CHILD(REN)	EMPLOYEE & SPOUSE	FAMILY	AGE	EMPLOYEE	EMPLOYEE & CHILD(REN)	EMPLOYEE & SPOUSE	FAMILY
18 - 24	\$0.96	\$1.65	\$1.44	\$2.25	18 - 24	\$1.91	\$2.60	\$2.87	\$3.68
25 - 29	\$1.16	\$1.79	\$1.74	\$2.50	25 - 29	\$2.32	\$2.95	\$3.47	\$4.20
30 - 34	\$1.29	\$1.76	\$1.93	\$2.51	30 - 34	\$1.29	\$3.08	\$3.85	\$4.44
35 - 39	\$1.69	\$2.12	\$2.52	\$3.01	35 - 39	\$3.38	\$3.81	\$5.03	\$5.53
40 - 44	\$2.42	\$2.79	\$3.62	\$4.05	40 - 44	\$4.85	\$2.61	\$7.24	\$7.67
45 - 49	\$3.79	\$4.14	\$5.71	\$6.12	45 - 49	\$7.58	\$7.93	\$11.42	\$11.82
50 - 54	\$5.29	\$5.62	\$8.03	\$8.42	50 - 54	\$5.29	\$10.57	\$16.06	\$16.45
55 - 59	\$7.29	\$7.62	\$11.15	\$11.53	55 - 59	\$14.58	\$14.91	\$22.29	\$22.68
60 - 64	\$10.50	\$10.82	\$16.12	\$16.50	60 - 64	\$21.00	\$21.32	\$32.24	\$32.61
65 - 69	\$14.81	\$15.13	\$22.68	\$23.06	65 - 69	\$29.63	\$29.94	\$45.37	\$45.74
70 - 74	\$10.28	\$10.44	\$15.74	\$15.93	70 - 74	\$20.55	\$20.71	\$31.48	\$31.67
75 - 79	\$13.73	\$13.90	\$21.00	\$21.17	75 - 79	\$27.47	\$27.63	\$41.93	\$42.15

  

PLAN	EMPLOYEE	EMPLOYEE & SPOUSE	EMPLOYEE & CHILD(REN)	FAMILY
The Hartford Hospital Indemnity	\$4.25	\$8.78	\$8.13	\$13.25
The Hartford Accident	\$3.72	\$5.86	\$6.14	\$9.69

# Mutual Of Omaha Additional Benefits

## Will Prep Services

Will Preparation Services, powered by Epoq, Inc., offers a secure account space that allows you to prepare a will and other legal documents.

### Services include:

- Last Will and Testament
- Healthcare Directive
- Power of Attorney
- Living Trust

### Here's how it works—life insurance clients simply:

- Log on to [willprepservices.com](http://willprepservices.com) and use the code MUTUALWILLS to register
- Answer simple questions related to your estate
- Download, print and share any document instantly
- Make the document legally binding—clients should check with their state for requirements



This services is provided by Epoq, Inc. To get started, simply visit: [willprep.clientsecured.com/willprep](http://willprep.clientsecured.com/willprep)

## Hearing Discount Service

Mutual of Omaha has partnered with Amplifon USA to provide participants with discount hearing products, hearing aids and batteries. Amplifon works with leading national brands including Phonak, ReSound, Starkey, Siemens and more. Members can take advantage of price guarantees, significant savings and free batteries.

There are no enrollment fees and access to the hearing program is completely free. To start, simple follow the steps below:

1. Call Amplifon at 1-888-534-1747. Amplifon's Patient Care Advocate will help you find a hearing care provider near you.
2. The Patient Care Advocate will explain the details of the Amplifon program, help identify a local hearing care provider and assist you with making an appointment.
3. Amplifon will send you and your provider all the necessary information to activate your program.



For additional information or to sign up, please visit: [amplifonusa.com/mutualofomaha](http://amplifonusa.com/mutualofomaha)

## TRAVEL ASSISTANCE

Travel Assistance can help you, your spouse and dependent children avoid unexpected bumps in the road from 100 miles away from your home to anywhere in the world. Take comfort in knowing that Travel Assistance provided by AXA Assistance USA travels with you worldwide, offering access to a network of professionals who can help you with local medical referrals or provide other emergency assistance services in foreign locations.

### IDENTITY THEFT

- Comprehensive ID theft assistance guide
- Recovery information regarding the steps to recover from credit card, check, fraud or personal information that's been compromised

### PRE-TRIP ASSISTANCE

- Information regarding passport visa or other required documentation for foreign travel
- Travel, health advisories and inoculation requirements for foreign countries
- Daily foreign currency exchange rates

### MEDICAL ASSISTANCE

- Locating medical providers and referrals
- Emergency evacuation if adequate medical facilities are not available, including payment of covered services
- Communication on your medical status with family, physicians, employer, travel company and consulate

### EMERGENCY TRAVEL SUPPORT SERVICES

- Telephonic translations and interpreter services 24/7
- Baggage— assistance with lost, stolen, or delayed baggage
- Emergency payment and cash—assistance with advance funds for medical expenses or other travel emergencies
- Document replacement—coordination of credit card, airline ticket or other documentation replacement

Services are available for business and personal travel 24 hours a day, seven days a week. For inquiries, please call below:



Within the US **1-800-856-9947**  
Outside the US **312-935-3658**

# FREE Employee 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.

## We're Here to Help

Mutual of Omaha's EAP assists employees and their eligible dependents with personal or job-related concerns, including:

- Emotional well-being
- Family and relationships
- Legal and financial
- Health lifestyles
- Work and life transitions

## DON'T DELAY IF YOU NEED HELP.



Visit [mutualofomaha.com/eap](https://mutualofomaha.com/eap)



Call all **800-316-2796** for confidential consultation and resource services

## What To Expect

You can trust your EAP professional to assess your needs and handle your concerns in a confidential, respectful manner. Our goal is to collaborate with you and find solutions that are responsive in your area.

Your EAP benefits are provided through your employer. If additional services are needed, your EAP will help locate appropriate resources in your area.

## EAP Benefits

- Unlimited telephone access to EAP professionals 24 hours a day, seven days a week
- Telephone assistance and referral
- Service for employees and eligible dependents
- Legal assistance and financial services
  - Online will preparation
  - Legal library & online forms
  - Telephonic financial consultation
- Resources for:
  - Financial tools and resources
  - Substance abuse and other addictions
  - Dependent and elder care assistance and referral services

Access to a library of educational articles, handouts and resources via [mutualofomaha.com/eap](https://mutualofomaha.com/eap)

# Pet Insurance - 2 Options

## Total Pet Plan - Discount Plan

The Arc employees have the opportunity to enroll in Total Pet Plan benefits through Pet Benefit Solutions. Total Pet offers discounts on products, prescriptions and veterinary care; 24/7 pet telehealth and lost pet recover services. Specific details for what Total Pet covers is outline below. Visit [petbenefits.com/land/thearcccr](http://petbenefits.com/land/thearcccr) for details.

### Pet Plus: (Discounts on Products and Rx)

- Up to 50% off on products like prescriptions, preventatives, food, toys and more.
- Shipping always free and same-day pickup is available for most human-grade prescriptions.

### Pet Assure: (Discounts on Veterinary Care)

- Instant 25% savings on all of your pet's in-house medical services at participating vets.
- No exclusions due to age, health, pre-existing conditions or type of pet.

### AskVet: (24/7 Pet Telehealth)

- Access real-time vet support, even when your vet's office is closed.
- Unlimited support on your pet's health, wellness, behavior and more.

### PetTag: (Lost Pet Recovery Service)

- Durable tag can be scanned from any smart phone to access your contact information, helping lost pets return home quicker than a microchip.
- Easily update your information online with no need to request a new tag.

## Total Pet Contributions

	SINGLE (1 PET)	UNLIMITED (2+ PETS)
TOTAL PET	\$11.75 / MONTHLY	\$18.75 / MONTHLY

## Wishbone Pet Health Insurance - Insurance Plan

The Arc employees have the opportunity to enroll in Veterinary Discounts through Wishbone Pet Health Insurance.

Wishbone Pet Insurance offers high-value, easy-to-use insurance plans giving you peace of mind knowing your best friend can live their best life. Receive 90% reimbursement with a low deductible and no waiting periods for accidents and illnesses, at exclusive employee benefit rates. Chose from two tiers of routine care optional add-ons to maximize your pet care savings.

### Coverage Includes:

- Accidents and illnesses
- Diagnostics & testing
- Hereditary & congenital conditions\*
- Surgery
- Hospitalization
- Emergency care
- And so much more!

### Example Wishbone Pet Health Contributions

1 Year Old Mixed Breed Dog	\$30.47 / MONTHLY
3 Year Old Jack Russel Terrier	\$27.26 / MONTHLY
4 Year Old Australian Shepherd Dog	\$33.51 / MONTHLY
5 Year Old Domestic Shorthaired Cat	\$21.41 / MONTHLY

Easily submit a claim through your account online and receive fast reimbursement pay outs via direct deposit or check. All Wishbone policies include 24/7 pet telehealth powered by AskVet and a durable pet ID tag from ThePetTag. All you need to fetch a quote is your pets name, breed, age, and your zip code!



To get started, simply visit:  
[wishboneinsurance.com/thearcccr](http://wishboneinsurance.com/thearcccr)

# Additional Total Rewards

## 12 Holidays

Full-time and Part-time employees are eligible for 12 paid holidays per year. At the discretion of the CEO & President additional paid days may be added. Decisions regarding annual paid holidays will be communicated by January 15th of each calendar year.

- New Year's Day
- Martin Luther King's Birthday
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Indigenous People's Day
- Veterans Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Eve
- Christmas Day

Full-time employees will receive eight (8) hours and Part-time employees will receive four (4) hours of holiday pay on the day the holiday is observed. All nonexempt, hourly employees who work on the actual holiday will receive time and half for all hours worked from 12:01am to midnight on that holiday. Days holidays are observed change based on the calendar day the holiday falls on.

## Paid Time Off (PTO)

Paid Time Off (PTO) starts accruing upon hire. To be eligible to earn PTO, employees must regularly work at least 12 hours per week. Employees working less than 12 hours per week or employees who are seasonal or temporary are not eligible for PTO.

## Use and Scheduling of PTO

Employees must use PTO when taking time off from work for any reason, and PTO can be taken in increments as small as one hour for nonexempt hourly employees. For exempt salaried employees PTO may only be taken in full day increments.

All PTO requests are subject to manager's approval and staffing needs. The Arc understands that unscheduled absences occasionally happen; however, when possible, PTO should be scheduled in advance. If the frequency of unscheduled absences becomes excessive, corrective actions will be taken, up to and including termination. Nonexempt, hourly employees must use their PTO hours according to their normal workday. For example, if an employee works an eight (8) hour day and needs to take off a full day, they must request eight hours of PTO. PTO is paid at the Employee's regular pay rate, is not subject to overtime, and cannot exceed forty (40) hours per week.

## Availability

During an employees first ninety (90) days PTO cannot be used unless it was discussed and approved during the interview process. Any exceptions to this policy shall be at the discretion of People & Culture.

# Employee Paid Time Off

## Accrual and Payment of PTO for Nonexempt, Hourly Employees

Accruals are based upon paid hours of up to 2,080 hours (40 hours per week) per year, excluding overtime. If an employee works fewer than 40 hours per week, but at least 12 hours per week, they will earn prorated PTO hours. Time in service with The Arc will determine the rate at which employees accrue PTO. Employees will not accrue PTO during unpaid leaves of absence. Employees are eligible for the next level of accrual on the first day of the pay period of their employment anniversary date according to the table below.

YEARS OF SERVICE	Accrual Rate per Hour Worked
Less than one year	0.05 per hour worked
1-3 years	0.07 per hour worked
4-5 years	0.09 per hour worked
More than 5 years	0.10 per hour worked

The maximum annual carryover on January 1 of each year is 120 hours. Employees may not borrow against their PTO bank; advanced leave is not allowed.

## Accrual and Payment of PTO for Exempt Employees

All exempt employees will accrue 1 day of PTO per pay period. PTO may only be used in whole day units, consistent with The Arc's exempt employee philosophy.

The maximum annual carryover on January 1 of each year is 15 days. Employees may not borrow against their PTO bank; advance leave is not allowed.

## Payment Upon Termination

Employees will not be paid for accrued PTO hours at the end of their employment.

## Paid Family Leave

The Arc supports a healthy start to every child's life. Nonexempt, hourly employees who work an average of 30 hours per week and exempt employees are eligible for up to 160 hours of paid Family Leave in the event of the birth, adoption or placement of a child. Employees utilizing Family Leave are expected to utilize FMLA leave concurrently. Family Leave is available to new parents and may be used in daily increments or all at once but must be used within six months after the birth, adoption, or placement of a child.

Employees are expected to provide as much notice as possible to their managers and People & Culture prior to utilizing Family Leave. Family Leave is not an accrued benefit and will not be paid out upon termination.

## Maryland Flexible Family Leave

The Arc allows employees to utilize PTO accruals to care for a family member who has fallen ill. Notice is required, where foreseeable, and a physician's note may be requested by a manager or People & Culture to verify absences for more than three days.

# Employee Paid Time Off

## Emergency Unpaid Leave

On occasion, it may be unavoidable for an employee to be away from the job due to extenuating circumstances. Employees without accrued PTO may be granted emergency unpaid leave upon approval of the President & CEO or their designee. Emergency unpaid leave should not be used as additional unpaid vacation time.

## Voting Leave

Employees should have ample time to vote outside of their working hours. However, if there is some extenuating circumstance in which an employee cannot vote during early voting or outside of working hours, an employee will be granted up to two (2) hours of paid leave to vote in elections. Employees should make all reasonable efforts to vote outside of their normal working schedule. Employees should consult their manager if they have problems voting outside of working hours so that this may be accommodated.

## Bereavement Leave

Bereavement leave is paid as follows:

- Exempt employees are eligible for three (3) days of paid leave.
- Nonexempt, hourly employees who work an average of 16-24 hours per week are eligible for up to eight (8) hours of paid leave.
- Nonexempt, hourly employees who work an average of 25-40 hours per week are eligible for twenty four (24) hours of paid leave.

This applies per instance, for a death in their family. The Arc does not define family and bereavement leave will be reviewed by the employee's manager. Employees must notify their manager when they will be absent.

# Employee Paid Time Off

## Military Leave

Employees who are absent from work due to service in the uniformed services, including but not limited to service in the armed forces of the United States or the armed forces reserves, the national guard, or another commissioned corps of public service; will be granted leaves of absence in accordance with federal and state laws governing such leaves.

Unless otherwise provided by state law, employees on such leave of absence are generally entitled to certain reemployment rights and benefits if they meet the following requirements:

- **Advance Notice** — The employee must personally or through an officer of the service, give written or verbal notice before the need for military leave begins unless precluded by military necessity or circumstances which make notice unreasonable or impossible.
- **Duration of Leave** — The employee's cumulative period of service in the uniformed services while in The Arc's employ may not exceed five years unless additional service is required to complete an initial period of obligated service, the employee is unable to obtain orders of release through no fault of his/her own, the employee can certify in writing by the Secretary of Defense that additional training is required, or additional service is required during a national emergency or war.
- **Timely Re-Employment Application** — The employee must return to work or apply for reemployment within the required time frame depending on the length of the employee's service.
- **Dishonorable Discharge** — An employee who is dishonorably discharged from the military does not have the protection of re-employment rights.

Employees should contact People & Culture for more details regarding military leave, e.g., what type of service qualifies for this leave entitlement, what constitutes timely reemployment, under what circumstances their application for reemployment may be denied, and their rights and obligations related to employment benefits while on leave and upon returning from leave, etc.

## Court Leave/Jury Duty

Upon receipt of a jury summons, juror questionnaire, or subpoena to testify, employees should notify their manager. The Arc grants paid leave of up to twenty-four (24) hours for nonexempt, hourly employees and three (3) days for exempt employees per year if summoned for service as a juror or subpoenaed to testify as a court witness. Any remaining leave will be unpaid or accrued PTO may be used. Jury Duty or Witness Duty leave will be paid at the employee's regular rate of pay.



## Carrier Contact Information

PLAN	CARRIER	GROUP NUMBER	CUSTOMER SERVICE INFO
Medical	CareFirst Administrators	T8A	Website: cfablue.com Member Services Number: 877-889-2478
Dental	Guardian	00021891	Website: guardiananytime.com Member Services Number: 800-541-7846
Flexible Spending Account	Clarity	BENARCCCR	Website: claritybenefitsolutions.com Member Services Number: 732-428-8282
Vision	EyeMed	1029003	Website: eyemed.com Member Services Number: 866-800-5457
Life and AD&D	Mutual of Omaha	BR4X	Website: mutualofomaha.com Member Services Number: 800-769-7159
Voluntary Life and AD&D			
Long-Term & Short-Term Disability			
Hospital Indemnity	The Hartford	885645	Website: thehartford.com Member Services Number: 866-5474-205
Critical Illness			
Accident			
Legal	Countrywide	—	Website: countrywideppls.com Member Services Number: 800-550-5297
Pet	Pet Benefit Solutions	5793	Website: petbenefits.com/land/thearc Member Services Number: 888-913-7387
Retirement Plan 403(b)	Principal	—	Website: Principal.com 1-800-547-7754
Total Rewards Questions	People & Culture	—	Email: totalrewards@thearc.org or 410.269.1883