



## 2020 Choices CCS Benefits Summary

<b>Medical &amp; Prescription Coverage - United Health Care</b>					
		High Deductible Health Plan HSA 1		High Deductible Health Plan HSA 2	
		In Network	Out of Network	In Network	Out of Network
Medical Preventative Care		100% Covered	Not Covered	100% Covered	Not Covered
HSA - Choices funded	Individual/Family	\$500 EE/\$1,000 EE+Dep. *Divided equally and deposited Jan 1st & July 1st			
Deductible	Individual/Family	\$2,000/\$4,000	\$4,000/\$8,000	\$4,000/\$8,000	\$8,000/\$16,000
Co-Insurance		80%	60%	70%	50%
Max Out of Pocket	Individual/Family	\$5,000/\$10,000	\$10,000/\$20,000	\$6,000/\$12,000	\$12,000/\$24,000

<b>Dental Coverage - Delta</b>	
Deductible	0
Preventative Care	100%
Basic Care	80%
Major Care	50%
Orthodontia	50%
Annual Maximum	\$1,250 per person

<b>Vision Coverage - UHC</b>	
Annual Eye Exam	\$10 Co-Pay
Frames	\$130 Allowance
Eyeglass Lenses	\$25 Co-Pay
Contact Lenses	\$130 Allowance

<b>Choices Paid Benefits</b>			
<b>Life Insurance - Unum</b>	Date of Hire	\$50,000	
<b>AD&amp;D - Unum</b>	Date of Hire	\$50,000	
<b>Short Term Disability - Unum</b>	90 Days After Hire	60% of weekly earnings, up to \$500, 2 week elimination period	
<b>Long Term Disability - Unum</b>	90 Days After Hire	60% of monthly earnings, up to \$5000	
<b>401(k) Retirement Plan - Principal</b>	Date of Hire	Match 100% of 6% deferral, 100% Vested	
<b>Professional Dues Expense Allowance</b>	Date of Hire	\$300.00	Per Calendar Year

<b>Bi-Weekly Premium Rates</b>					
Coverage Tier	HDHP HSA 1	HDHP HSA 2	Dental	Vision	Voluntary Life
Employee Only	\$85.00	\$60.00	\$1.11	\$2.64	See Summary
Employee + Spouse	\$200.00	\$160.00	\$9.31	\$4.64	
Employee + Child(ren)	\$180.00	\$140.00	\$9.31	\$5.03	
Family	\$325.00	\$250.00	\$13.65	\$7.68	

<b>Savings Accounts Options</b>	
Health Savings Account	Annual Max Contribution of \$3,550 for Single, \$7,100 for Family. Additional \$1,000 for age 55 and up.

## Miscellaneous Benefits

<b>Employee Assistance Plan</b>	Coverage for employee and all legal dependents
<b>Choices Employee GAP Fund</b>	Created for employees in times of need
<b>Wellness Program</b>	WellSteps.com
<b>Gym Reimbursement</b>	Up to \$20/month reimbursement
<b>Verizon Cell Discount</b>	18% employee discount on most voice and data plans
<b>Annual Anniversary Gifts</b>	Select a gift, bonus every 5 years
<b>Tuition Reimbursement</b>	Full-time employees eligible to apply after one year of employment
<b>Publishing Award</b>	Peer-Review Journal \$500, Non-Peer Review Journal \$250.00

## Time Off Benefits

<b>Paid Time Off (PTO)</b>	Accrual starts on first pay period	Year 1 - 7.08 per pay	Year 2 - 7.70	Year 3 on - 8.62
*Includes sick, vacation, berevment **PTO cash out option				
<b>Professional Development Days</b>	Date of Hire	32 hours	Per Calendar Year	
<b>Holidays Observed - Office Closed</b>	Date of Hire	New Year's Day		Thanksgiving Day
		Martin Luther King Jr's		Day after Thanksgiving Day
		Memorial Day		Christmas Eve
		Independence Day		Christmas Day
		Labor Day		Extra Floating Holiday

## Contact List

Coverage	Provider	Phone	Website	App
Medical	UMR/UHC	800-826-9781	<a href="http://www.umar.com">www.umar.com</a>	Available
Mobile Doctor	Teledoc	800-835-2362	<a href="http://www.teladoc.com">www.teladoc.com</a>	Available
Rx	Southern Scripts	800-710-9341	<a href="http://www.southernscripts.net/">www.southernscripts.net/</a>	Available
Specialty Pharmacy	CRx	800-710-9341	<a href="http://www.crxspecialty.com">www.crxspecialty.com</a>	
Dental	Delta			
Vision	UHC	800-638-3120	<a href="http://www.myuhcvision.com">www.myuhcvision.com</a>	
Life & Disability	Unum			
Health Savings Account	BMO	866-472-4632	<a href="http://www.bmoharris.com/has">www.bmoharris.com/has</a>	Available
EAP	Optum	855-205-9185	<a href="http://www.liveandworkwell.com">www.liveandworkwell.com</a>	Available
401(k)	Principal	800-547-7754	<a href="http://www.principal.com">www.principal.com</a>	Available