



Employee Benefits Package

Employee Owned

SCOTT

Benefit Services

**Virginia Lutheran Homes
Benefits Open Enrollment Session**

Benefits Effective

October 1, 2022 – September 30, 2023

A document titled "Employee Benefits package" is shown in the top left corner, partially overlapping a red graphic element.

Welcome to Open Enrollment



Open Enrollment is your annual opportunity to review and make changes to health and welfare benefits without a qualifying event (i.e. birth, marriage, divorce, etc.).

OPEN ENROLLMENT

August 22 through September 2

PLAN YEAR CHANGES EFFECTIVE

October 1, 2022 through September 30, 2023

All employees must log-on to Proliant to make 2022 benefit elections
Benefits will NOT carryover





Benefit Plan Highlights

Medical

- Medical coverage will continue to be offered through Anthem with the same two plan offerings (Healthkeepers POS 25/500 and HealthKeepers HSA 3000)
 - No plan changes
 - Slight decrease to the LiveHealth Online copay on the POS plan
- Due to rising cost of health care, you'll see an increase to your medical premiums except the Employee Only tier on the HSA plan will remain at no cost to employees
- Plan deductibles and out-of-pocket maximums reset on October 1
- Employees enrolling their spouse in VLH's medical plan will need to submit an updated Spousal Affidavit form; Spouses are only eligible to be on VLH's medical insurance if he/she is not offered coverage through their employer



Benefit Plan Highlights

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Health Savings Account (HSA)

- VLH will continue contributing up to \$1,000 towards your HSA by making a one-time contribution of \$250 towards your HSA if you begin contributing on your first payroll deduction; In addition to the \$250, VLH will match dollar for dollar up to \$750.
- Members currently enrolled will keep their current HSA bank card; new members will receive an HSA bank debit card
- IRS 2022 maximum contribution limit: \$3,650 individual/ \$7,300 family

Flexible Spending Account (FSA)

- IRS 2022 maximum contribution limit: \$2,850
- \$570 of unused FSA funds can be rolled over

HSA & FSA will continue to be administered by Flores.

If you would like to enroll or re-enroll, don't forget to elect your contribution!



Benefit Plan Highlights

Dental

- Dental coverage will continue to be offered through Delta Dental, with high and low options
- No plan changes but you will notice less than \$2 increase to your dental premiums
- **New!** Hearing Program through Dental plan in which you have access to Amplifon's hearing care provider network for discounts on hearing exams and aids

Vision

- Vision coverage will continue to be offered through EyeMed
- No plan or rate changes

Life Insurance & AD&D and Disability

- Continued to be offered through The Hartford with no plan or cost changes
- Hartford is offering a TRUE open enrollment in which you can elect in voluntary benefits without submitting EOI

Worksite Benefits (Accident, Critical Illness, Hospital Indemnity)

- Continued to be offered through The Hartford no plan or cost changes

Medical Plan

	Healthkeepers POS 25/500	Healthkeepers HSA 3,000
Annual Deductible (Individual/Family)	\$500 / \$1,000	\$3,000/\$6,000
Annual Out-of-Pocket Maximum (Individual/Family)	\$4,000 / \$8,000	\$4,500 / \$9,000
Co-Insurance (Your responsibility)	20%	0%
Office Visits Primary Care Physician Specialist Adult & Child Preventative	\$25 copay \$50 copay 100% covered	Covered at 100% after deductible Covered at 100% after deductible 100% covered
Labs, X-Rays & Diagnostics	20% after deductible	Covered at 100% after deductible
Hospital Services Emergency Room Urgent Care Inpatient Hospitalization Outpatient Services Surgical Expenses	20% after deductible \$50 copay 20% after deductible 20% after deductible 20% after deductible	Covered at 100% after deductible
Mental Health & Substance Abuse Inpatient Hospital Outpatient / Office Visit	20% after deductible \$25 copay	Covered at 100% after deductible

Pharmacy Plan Review

	Healthkeepers POS 25/500	Healthkeepers HSA 3,000
Medical Deductible Applies?	No	Yes; Deductible then Copays
Generic (30 day supply)	\$10	\$10
Preferred (30 day supply)	\$40	\$40
Non-Preferred (30 day supply)	\$70	\$70
Specialty (30 day supply)	20% up to \$300 max	20% up to \$300 max
Mail Order (90 day supply)	2.5X Retail Copay	2.5x Retail Copay

Rx on the HSA plan:

- You will continue to pay the negotiated amount between your provider and Anthem until your deductible is met. Once your deductible is met, Rx copays will apply. You'll continue to pay the Rx copays until your annual out-of-pocket maximum is met. After annual out-of-pocket is met, then your prescriptions will be at no cost for the plan year.
- Please refer to the Preventive Rx list to see if your medication is covered at no cost

Costs Per Pay Period

	Healthkeepers POS 25/500	Healthkeepers HSA 3,000
Employee Only	\$63.21	\$0.00
Employee + Child	\$216.02	\$67.91
Employee + Children	\$503.94	\$244.00
Employee + Spouse	\$595.75	\$310.94
Employee + Family	\$962.42	\$581.61

Flexible Spending Account (FSA)



- **FSA** is a savings account where you set aside pre-tax dollars to pay for qualified out-of-pocket health care expenses such as:
 - Employee portion of the deductible
 - Rx Copays
 - Vision Expenses
 - Dental Expenses
- **Dependent Care FSA** allows you to contribute pre-tax dollars to qualified dependent care. Eligible dependents include your child(ren) under the age of 13 or your spouse or relative who is physically or mentally incapable of self-care and lives in your home.

	2022 Max Employee Contribution
Health Care FSA	\$2,850
Dependent Care FSA	\$5,000

DON'T FORGET

You must re-elect FSA contribution every year
Use It or Lose It (up to **\$570** carries over to the future plan year)

Best practice: Fund your FSA based on your estimated out-of-pocket expenses.

Health Savings Account (HSA)

A Health Savings Account (HSA) is a tax-advantage account to help you save and pay for qualified medical, pharmacy, dental and vision expenses.

- You must be enrolled in the HSA medical plan to be eligible to open a Health Savings Account (HSA)
- You and VLH can contribute pre-tax funds to the account
- Contributions are taken directly from your paycheck, before taxes, and placed into the account
- Funds accumulate and your balance rolls over from one year to the next
- You own the account therefore it is portable if you change employers
- Triple Tax Savings Advantages:
 - No taxes on the money you save in your HSA
 - Money invested in HSA grows tax-free
 - Withdrawals are tax free when used for qualified medical, pharmacy, vision and dental expenses for you and your tax dependents

DON'T FORGET

You must re-elect HSA contribution every year

HSA Eligibility

In order to be eligible for an HSA you must:

- Covered by a qualified-HDHP plan
- Not be enrolled in Medicare or Tricare
- Not be covered under other health insurance*
- Not be claimed as a dependent on someone else's tax return
- Not have a full medical FSA, including your spouse (you can have a limited purpose FSA)
- Cannot have been treated by a VA Medical Center for a non-service related condition in the past 90 days



*Other health insurance does not include: specific disease or illness insurance, accident, disability, dental care, vision care and long-term care insurance

What Can I Use My HSA For?



Qualified Expenses

- Deductible & Coinsurance
- Dr. Office & Specialist
- Chiropractor / Acupuncture
- Prescription Drugs
- Hospital Stays
- Radiology
- Lab Work
- Speech / Occupational / Physical Therapy
- Vision Check ups
- Eyeglasses & Contacts
- Dental work
- Orthodontia
- Over-the-Counter Medications*
- Menstrual Products *

NOT Qualified Expenses

- Cosmetic Surgery
- Medicine from other countries
- Nutritional Supplements
- Teeth Whitening
- Veterinary Fees
- Weight-Loss Program
- Health Club Dues
- Child Care or Nursing Services

** Please note there is a 20% tax penalty for non-qualified medical expenses withdrawn prior to age 65*

**2020 IRS update*

HSA Contribution

Did you know VLH will contribute to your Health Savings Account?

- VLH's will make a one-time contribution of \$250 towards your HSA if you begin contributing on your first payroll deduction
- In addition to the \$250, VLH will match dollar for dollar up to \$750
- This makes Virginia Lutheran Homes' total contribution to your HSA \$1,000 for the year
- The combined contribution from the employer and employee cannot exceed the annual maximum set by the IRS
- "Catch-up" provision for age 55 or older of \$1,000

	Employee Annual Maximum Contribution	VLH Annual Maximum Contribution	2022 HSA Annual Maximum
Employee	\$2,650		\$3,650
Employee + Child		\$1,000	
Employee + Spouse Family	\$6,300	(Initial \$250 + \$750)	\$7,300

Health Plan Assist

Health Plan Assist helps you determine what medical plan offered by VLH is best for you/your family by:

- **Estimating out-of-pocket costs and premium responsibility for better planning**
- **Comparing the two medical plan options**
- **Determining how much to set aside in your FSA or personal savings account**

No cost to use this service

How do I get started?

Visit www.healthplanassist.com

Access Code: VLH

Answer a few questions then HPA will help you compare the plans

Preventive Care

- Virginia Lutheran Homes' medical plans cover preventive care exams, immunizations and age/gender specific tests at 100% (Deductible, Co-pay and Co-insurance waived)²
- Annual exams establish a baseline of your personal health that allows your doctor to detect unhealthy trends before they become risk factors.
- These exams establish a relationship with a doctor, so that if a health care crisis occurs, you have a doctor that knows you and your medical history.
- Researchers have estimated that **PREVENTABLE** illness makes up approximately 70% of the burden of illness and the associated costs in this country¹



1. Wellness Council of America (WELCOA)
2. Refer to your Summary Plan Description (SPD) for more information.

Maximizing Your Benefits

How can you find savings throughout the plan year?

In-Network Providers

- Utilize in-network providers to limit your out-of-pocket expenses
- Healthkeepers is a Virginia based network

Anthem's Cost Comparison Tool

- Compare costs of procedures and among facilities

ER Alternatives

- Take advantage of emergency room alternatives such as Patient First, CVS Minute Clinic, Urgent Care Facilities and LiveHealth Online

Pharmacy savings

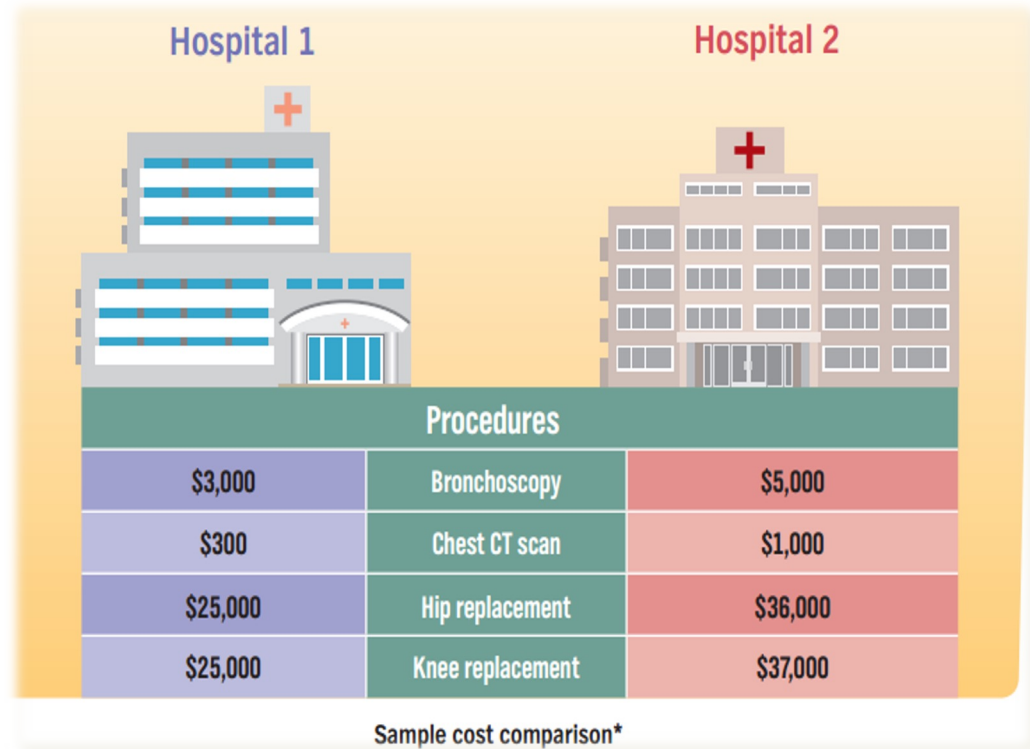
- Use mail order pharmacy benefit to lower costs
- Use generic medications when possible

Copay Comparison (POS Plan)			
	Retail Pharmacy 90-Day Supply <i>(would require 3 refills)</i>	Mail Order 90-Day Supply	Savings
Generic	\$10 x 3 refills= \$30	\$25	\$5
Preferred Brand	\$40 x 3 refills= \$120	\$100	\$20
Non-Preferred Brand	\$70 x 3 refills= \$210	\$175	\$35

*If you are enrolled in the HSA plan, deductible must be met before copays apply

FREE ONLINE TOOL

- View cost of procedures in advance to plan accordingly
- Compare facilities & costs for known procedures based on cost and quality ratings



Be in control of where and how you spend your healthcare dollars!

LiveHealth Online

LiveHealth Online is Anthem's online telemedicine service for common, non-life-threatening illnesses such as cold/flu symptoms, allergies, sinus infections, urinary tract infections, and other common symptoms that a member may be familiar with experiencing.

- Connect with a physician via smartphone, tablet or computer
- Access to physicians 24/7
- Cost: \$5 copay on POS plan and \$59 on the HSA Plan
- Quick access to care
- Available to members while traveling
- Medications can be prescribed during these visits
- Alternative to ER visit or urgent care



Visit livehealthonline.com



Mail Order

In addition to savings & member convenience, mail order leads to decreased plan cost & increased member medication compliance.

MAIL ORDER OPTION

- Medications are sent in an unmarked box by IngenioRx
- Maintenance medications can be delivered in 90-day supply at a reduced copay (2.5x a month copay on the \$500 Plan)
- In most cases your first medication will be sent to your home within 2 weeks

It's as easy as 1-2-3!

Step 1: Log on to www.anthem.com and click on Prescription Benefits. Click "Start A New Prescription." Members can print an order form to mail in with the prescription or print a form to have your doctor fax in with you prescription

Step 2: See your doctor for a prescription for a 90 day supply (or IngenioRx can call your doctor to get this for you)

Step 3: You can pay by e-check, check or credit card

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Employee Assistance Program (EAP)



The Employee Assistance Program (EAP) through Anthem provides you and your family members with quick and easy access to confidential counseling and referral services that help you or your family members cope with daily life challenges. This program is employer sponsored so it is available at no cost.

Services include:

- Up to four face-to-face counseling visits per issue
- Legal & financial consultations
- ID recovery
- Tobacco cessation programs
- Dependent care & daily living resources
- Additional web services

Need help? Call EAP!
1-800-346-5484 | AnthemEAP.com
Company Code: Virginia Lutheran Homes



What is KnovaSolutions?

- **The Purpose:** a personal health service that provides information, education, and decision support for employees & their families
- **The Goal:** to help people own and manage their health and their decisions to use medical services.
- **Target Population:** *proactive* outreach to those employees & dependents who have or are predicted to have complex healthcare and benefit utilization (*multiple illnesses, providers, medications, work, life and health issues*)
- **Intervention:** KnovaSolutions - provided by a master's level educated nurse, health educator and pharmacist clinician team
 - **The service is confidential and free for employees!**

Please note: The inbound call comes from Cheyenne, Wyoming and is preceded by a mailed letter from KnovaSolutions.

What is Lark?

- Lark is a pre-diabetes engagement program
- Confidential & personalized 26-week digital health coaching solution that leverages artificial intelligence, cognitive behavioral therapy and smart connected devices to lower risk of developing type 2 diabetes (Pre-Diabetes engagement program)
- The focus areas are weight loss, physical activity, nutritional counseling, stress management and sleep
- The smartphone-based application provides instantaneous, unlimited, individualized coaching for lifelong behavior change
- **What is the cost?** Lark is included at no extra cost as part of your Anthem health benefits with access to their mobile app and a free wireless connected scale.

Learn if you are at risk for prediabetes

Scan the QR code to download the SydneySM Health mobile app and login using your existing health plan credentials. Once you login, you will find the Lark DPP screen under Programs in My Health Dashboard to take the one-minute survey.



What is Twin Health?

We're excited to introduce you to Twin Health, a new program to help you reduce medication and reverse type 2 diabetes.

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

Twin is a fully-covered medical benefit for employees and dependents over 18 who are diagnosed with type 2 diabetes and enrolled on the health plan.



Learn more and sign up:
visit

partner.twinhealth.com/YourCommunity

or scan the QR code

Dental Insurance

Network: PPO and Premier	Low Plan	High Plan
Annual Deductible	Single \$50 Family \$150	Single \$50 Family \$150
Annual Maximum	\$750	\$1,250
Preventative Services <i>Exams, Cleanings, X-rays</i>	Covered at 100%	Covered at 100%
Basic Services <i>Fillings (white and silver), Stainless Steel Crowns, Simple Extraction, Oral Surgery, Periodontics, Endodontics (root canal therapy), Denture Repair</i>	80%	80%
Major Services <i>Crowns, Prosthodontics, Implants</i>	Not Covered	50%
Orthodontics (to age 26)	Not Covered	50%
Orthodontic Maximum	Not Covered	\$ 1,000
Waiting Period	None	None
Max Over	<i>If you receive at least one preventive cleaning and use less than half of the annual maximum, a portion of your unused annual maximum will automatically be rolled over to the next plan year</i>	
Out of Network		
Preventative	100%	100%
Basic	80%	80%
Major	Not Covered	50%




- Dental Deductibles will re-set on October 1
- No dental benefit changes

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Dental Costs Per Paycheck



	Low Plan	High Plan
Employee Only	\$5.00	\$9.97
Employee + Child(ren)	\$14.35	\$24.80
Employee + Spouse	\$13.50	\$23.44
Employee + Family	\$19.04	\$31.87

Delta Dental Hearing Program



Delta Dental of Virginia's partnership with Amplifon Hearing Health Care provides our members with savings on their hearing care. Below are some frequently asked questions you can reference when speaking to our customers.

1. Who is eligible to use the Amplifon program?

The Amplifon hearing program is available to all current Delta Dental of Virginia members.

2. Do members have to enroll in the service?

No. Members can access Amplifon's services at any time with no additional enrollment.

3. How do members access the service?

Members should call Amplifon at 877.593.0051 to find a hearing care provider. Amplifon will explain the program details and help the member schedule an appointment.

4. Who provides care?

Amplifon's hearing provider network includes a mix of independent audiologists and hearing aid dispensers, who are fully contracted and NCQA-credentialed. That includes more than 145 provider sites in Virginia.

5. How does the program work?

After Amplifon helps the member confirm hearing loss through a virtual hearing assessment, they help them schedule an appointment at a nearby in-network location. Information will be sent to the member and the provider to ensure the program is activated.

6. How much can members save?

Amplifon's hearing program averages savings of up to 66% off retail pricing over more than 1,400 hearing aid options. Members can try their hearing aids for 60 days with one year of followup care, two years of battery support and a three-year warranty.*

For more information about the Amplifon hearing discount, contact Amplifon at 877.593.0051 or visit www.amplifonusa.com/lp/deltadentalva.

Simple pricing

	Level 1	Level 2	Level 3	Level 4	Level 5
Retail price (per ear)	\$2,203	\$2,999	\$4,280	\$6,172	\$7,698
Amplifon price (per ear)	\$995	\$1,495	\$1,795	\$2,195	\$2,645



Risk-free trial: Try your hearing aids for 60 days*



Follow-up care: Ensures a smooth transition*



Battery support: Battery supply or charging station*



Warranty: Three-year coverage*

EyeMed Vision Plan

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

Employee Cost per pay period	
Employee Only	\$0
Employee + Child(ren)	\$2.57
Employee + Spouse	\$2.32
Employee + Family	\$4.99

- No benefit or cost changes



Life Insurance (Hartford)

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Basic Term Life Insurance

	Employer Paid Benefit	Subject to EOI
Employee	Up to 2x your annual earnings up to \$300,000	Not subject to EOI

Voluntary Life Insurance

	Employee Paid Benefit (through payroll deductions)	Subject to EOI
Employee	Up to 5x your annual earnings in \$5,000 increments up to \$250,000	*Up to \$200,000 without submitting an EOI
Spouse	Minimum of \$5,000 up to a maximum of \$50,000 You must elect coverage on yourself in order to have coverage on your spouse	*Up \$25,000 without submitting an EOI
Children	\$10,000 You must elect coverage on yourself in order to have coverage for your child. Dependent children can be covered from 15 days old to 26 years old.	Not Required; guaranteed as long as Employee Voluntary Life is approved.

***For this open enrollment, you may elect up to the guaranteed issue amount without submitting an EOI. If you waive coverage and want to enroll next plan year, you'll be required to submit an EOI form (subject to approval) regardless if under the guaranteed issue amount.**

Don't forget to update your beneficiaries



Disability Insurance (Hartford)

- In the event you become disabled from a non-work-related injury or illness, disability income benefits are provided as a source of income
- Hourly (non-exempt) employees have the option to purchase Voluntary Short-Term Disability and Long-Term Disability Insurance through employee payroll deductions
- Full-time exempt employees are provided employer paid Long-Term Disability Insurance and have the option to purchase Voluntary Short-Term Disability Insurance through payroll deductions
- **For this open enrollment, you may elect in voluntary disability coverage without submitting an EOI. If you choose to waive coverage and want to enroll the next plan year, you will be required to submit an EOI form (subject to approval).**

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

Hartford Voluntary Benefits



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

- **Accident**

Providing you coverage when injury, medical treatment and/or services occur that result from a covered accident. With Accident insurance, you'll receive payments associate with a covered injury and related service. You can use the payment in any way you choose, from expenses not covered by your major medical plan to day-to-day costs of living such as mortgage or utility bills.

- **Critical Illness**

Facing a serious illness can be devastating both emotionally and financially. Major medical insurance may pick up most of the tab but can still leave out-of-pocket expenses that add up quickly. Critical Illness insurance can provide a lump-sum benefit upon diagnosis that can be used however you choose from expenses related to treatment, deductibles or day-to-day costs of living such as mortgage or utility bills.

- **Hospital Indemnity**

Cash benefit for you or an insured dependent (spouse/child) are confined in a hospital for a covered illness or injury. Even with the best primary health insurance plan, out-of-pocket costs from a hospital stay can add up. The benefits are paid in lump sum amounts to you and can help offset expenses that may not be covered under your primary health insurance (deductibles, co-insurance amounts or copays) or benefits can be used for any non-medical expenses (like housing costs, groceries, car expenses, etc.).

Please refer to The Hartford's benefit highlight sheets for detailed information and covered services.

How To Enroll

All elections are due by September 2, 2022

- All employees must log into Proliant to:
 - Review and update your personal contact information
 - Review and submit changes to your elections
 - Review/Update beneficiaries
- Current elections will NOT carry over. This means you MUST elect your coverages for the upcoming 2022-2023 plan year. If you do not, you will not benefit coverage from 10/1/2022 – 9/30/2023.
- Employees newly enrolling or re-enrolling in FSA or HSA must (re)elect their contribution amount (in Proliant)

Please reach out Human Resources if you have any questions



Questions?

