



Employee Benefits Overview

Effective Date: July 1, 2023- June 30, 2024

MEDICAL BENEFITS | AETNA

BENEFIT DESCRIPTION	HSA Eligible			
	Aetna HNOOnly HMO HSA Plan	Aetna HNOOnly HMO Plan	Aetna PPO Plan	
NETWORK	In-Network Local DMV Network	In-Network Local DMV Network	In-Network Nationwide Network	Out-of-Network
Annual Deductible Individual / Family	\$1,500 / \$3,000	\$500 / \$1,000	\$0 / \$0	\$2,500 / \$5,000
Out-of-Pocket Maximum Individual / Family	\$3,000 / \$6,000	\$4,000 / \$8,000	\$2,500 / \$5,000	\$5,000 / \$10,000
Coinsurance Plan Pays / You Pay	100% / 0%	90% / 10%	100% / 0%	80% / 20%
Physician Services Primary Care Physician Specialist Preventive Services	Ded., then No Charge Ded., then No Charge No Charge	\$25 Copay \$50 Copay No Charge	\$20 Copay \$40 Copay No Charge	Ded., then 20% Ded., then 20% Ded., then 20%
Lab and X-Ray & Diagnostics Lab, Tests X-Rays Major Diagnostics (CT/PET, MRI)	Ded., then No Charge Ded., then No Charge Ded., then No Charge	\$25 Copay \$50 Copay \$250 Copay	\$20 Copay \$40 Copay \$250 Copay	Ded., then 20% Ded., then 20% Ded., then 20%
Hospital Services Emergency Room Urgent Care Inpatient Hospitalization Outpatient Services	Ded., then No Charge Ded., then No Charge Ded., then No Charge Ded., then No Charge	\$250 Copay \$75 Copay Ded., then 10% \$300 Copay	\$250 Copay \$75 Copay \$500 per Admission \$300 Copay	Ded., then 20% Ded., then 20% Ded., then 20% Ded., then 20%
PRESCRIPTION				
Rx Deductible Individual / Family	Combined w/ Medical	N/A	N/A	
Retail (Up to 30-day supply) Low Cost Generic Generic Brand Preferred Brand Non-Preferred Specialty Preferred Specialty Non-Preferred	Ded., then \$3 Copay Ded., then \$15 Copay Ded., then \$35 Copay Ded., then \$85 Copay Ded., then 150 Copay Ded., then 150 Copay	\$3 Copay \$15 Copay \$35 Copay \$85 Copay \$150 Copay \$150 Copay	\$3 Copay \$15 Copay \$35 Copay \$85 Copay \$150 Copay \$150 Copay	20% Coinsurance 20% Coinsurance 20% Coinsurance 20% Coinsurance \$150 Copay + 20% \$150 Copay + 20%
Mail Order (Up to 90-day supply) Low Cost Generic Generic Brand Preferred Brand Non-Preferred Specialty Preferred Specialty Non-Preferred	Ded., then \$6 Copay Ded., then \$30 Copay Ded., then \$70 Copay Ded., then \$170 Copay N/A N/A	\$6 Copay \$30 Copay \$70 Copay \$170 Copay N/A N/A	\$6 Copay \$30 Copay \$70 Copay \$170 Copay N/A N/A	20% Coinsurance 20% Coinsurance 20% Coinsurance 20% Coinsurance N/A N/A

HEALTH SAVINGS ACCOUNT | PNC

A Health Savings Account (HSA) is like a 401(k) for health care; a tax-advantaged account that you can use for qualified medical expenses today, or save for the future. HSAs are tax-exempt accounts that accumulate interest and can earn investment returns. The funds can be used to pay for qualified medical expenses today or can be saved for future expenses. It's owned by you and is 100% vested from day one, so you can build up savings for future needs.

- ▶ In 2023, individuals can contribute up to **\$3,850** and families can contribute up to **\$7,750**.
- ▶ If you are 55 or older, you can contribute an additional **\$1,000** catch-up contribution.
- ▶ **You must be enrolled in the Aetna HNOOnly HMO HSA plan to contribute to an HSA.**
- ▶ To be eligible to open the HSA, you cannot be covered by another health insurance plan, be enrolled in TRICARE or enrolled in Medicare, or have VA Benefits in the last 90 days. You or your spouse cannot participate in a Health Care FSA. You or your spouse can however enroll in a Dependent Care FSA. You cannot have an HSA a year prior to enrolling in Medicare.

DENTAL BENEFITS | GUARDIAN

Benefit Description	Guardian Dental Low PPO Plan	
	In-Network	Out-of-Network
Annual Deductible Individual / Family	\$50 / \$150	\$50 / \$150
Annual Maximum Benefit	\$1,500 per Person	\$1,500 per Person
Preventive Services	Plan pays 100% No Deductible	Plan pays 100% No Deductible
Basic Services	Plan pays 80% After Deductible	Plan pays 80% After Deductible
Major Services	Plan pays 50% After Deductible	Plan pays 50% After Deductible
Orthodontics Services Adults & Children	Plan pays 50% No Deductible	Plan pays 50% No Deductible
Lifetime Orthodontia Maximum	\$1,000 per Person	\$1,000 per Person

Benefit Description	Guardian Dental High PPO Plan	
	In-Network	Out-of-Network
Annual Deductible Individual / Family	\$50 / \$150	\$50 / \$150
Annual Maximum Benefit	\$2,000 per Person	\$2,000 per Person
Preventive Services	Plan pays 100% No Deductible	Plan pays 100% No Deductible
Basic Services	Plan pays 90% After Deductible	Plan pays 80% After Deductible
Major Services	Plan pays 60% After Deductible	Plan pays 50% After Deductible
Orthodontics Services Adults & Children	Plan pays 50% No Deductible	Plan pays 50% No Deductible
Lifetime Orthodontia Maximum	\$2,000 per Person	\$2,000 per Person

VISION BENEFITS | GUARDIAN | DAVIS VISION

Benefit Description	Davis Vision Guardian Vision Plan	
	Network	Out-of-Network
Exam (Once Every 12 Months)	\$10 Copay	Reimbursement up to \$50
Frames (Once Every 12 Months)	\$150 Allowance + 20% off remaining balance	Reimbursement up to \$70
Lenses (Once Every 12 Months)		
Single	\$25 Copay	Reimbursement up to \$48
Bifocal	\$25 Copay	Reimbursement up to \$67
Trifocal	\$25 Copay	Reimbursement up to \$86
Lenticular	\$25 Copay	Reimbursement up to \$126
Contact Lenses (Once Every 12 Months)		
Medically Necessary	Covered in Full (up to \$250)	Reimbursement up to \$225
Elective	\$150 Allowance + 15% off remaining balance	Reimbursement up to \$105

LIFE & DISABILITY BENEFITS | GUARDIAN

Basic Life/AD&D Insurance Coverage Features	
Employee Benefit	2x your annual salary to a max of \$200,000
Benefits Reductions	At age 70: coverage amount is reduced to 65% of original amount At age 75: coverage amount is reduced to 50% of original amount

Long-Term Disability Coverage Features	
Employee Benefit	60% of your monthly salary up to \$10,000
When Benefit Begins	After 90 Days
Maximum Benefit Period	To Social Security Normal Retirement Age (SSNRA)

VOLUNTARY BENEFITS | GUARDIAN

Voluntary Short-Term Disability Coverage Features	
Employee Benefit	60% of your weekly salary up to \$1,500
When Benefit Begins	15th day of injury / sickness
Maximum Benefit Period	11 Weeks

Voluntary Life and AD&D Insurance Coverage Features	
Employee Benefit	Increments of \$10,000 up to a maximum of \$500,000
Spouse Benefit*	Increments of \$5,000 up to a maximum of \$150,000, not to exceed 100% of employees amount
Child Benefit	4 Days Old to Age 26: Increments of \$2,000 up to a maximum of \$10,000
Guaranteed Issue**	Employee Under age 65: \$100,000 Age 65-69: \$50,000 Age 70+: \$10,000 Spouse Under age 65: \$25,000 Age 65-69: \$10,000 Child: \$10,000
Benefits Reductions	At age 70: coverage amount is reduced to 65% of original amount At age 75: coverage amount is reduced to 50% of original amount
* Spouse rate is based on employee's age. Spouse coverage terminates at age 70 **The Guarantee issue amount is only available at the time of initial eligibility (as a new hire). If you are a late entrant, then you will be required to complete Evidence of Insurability.	

VOLUNTARY BENEFITS | GUARDIAN

ACCIDENT INSURANCE

Cleaning the gutters. Yoga Class. Soccer Practice. Life offers plenty of opportunities for accidental injuries. When an injury happens, Accident Insurance can help. Accident Insurance provides a benefit payment after a covered accident that results in the specific injuries, treatments and associated non-medical costs. Some of the most common treatments and conditions we pay benefits for include:

- ▶ Emergency room treatment
- ▶ Physical therapy
- ▶ Follow-up doctor treatments
- ▶ X-Rays
- ▶ Stitches
- ▶ And more

CRITICAL ILLNESS INSURANCE

There are more than just medical bills to pay after a heart attack, stroke, or other unexpected covered medical condition. Critical Illness Insurance provides a benefit payment that can help. Critical Illness Insurance provides benefits for the covered medical conditions and diagnoses shown below. The most common conditions we pay claims for include:

- ▶ Heart attack
- ▶ Stroke
- ▶ Kidney Failure
- ▶ Cancer
- ▶ Coronary Artery Bypass
- ▶ And more

FLEXIBLE SPENDING ACCOUNTS | PNC

HEALTH CARE FSA

A Health Care FSA provides you with the ability to save money on a pre-tax basis for any IRS-allowed health expenses not covered by your medical benefits plan. The maximum annual amount you can contribute to a Health Care FSA is **\$3,050**. The full annual amount elected is available to be used for reimbursement on day one of the plan year.

Please Note: If you are enrolled in the Aetna HNOOnly HMO HSA plan you are not eligible to enroll in a Health Care FSA.

Qualified expenses include:

- ▶ Out-of-pocket medical, dental, & vision costs
- ▶ Prescription drug copayments & Over-the-counter medicine
- ▶ Non-covered, non-cosmetic medical, dental, vision, and hearing care expenses

LIMITED PURPOSE FSA

A Limited Purpose FSA provides those enrolled with the ability to save money on a pre-tax basis only for IRS-allowed dental and vision expenses not covered by the plan. The maximum amount you can contribute to a Limited Purpose FSA is **\$3,050**.

Please Note: You must be enrolled in the Aetna HNOOnly HMO HSA plan to enroll the Limited Purpose FSA.

Qualified expenses include:

- ▶ Vision exams, LASIK surgery, contact lenses, and eyeglasses.
- ▶ Dental cleanings, X-rays, fillings, crowns, and orthodontia

DEPENDENT CARE FSA

A Dependent Care FSA provides you with the ability to set aside money on a pre-tax basis for day care expenses for your eligible dependent. The funds must be contributed to your account before reimbursement is available. The maximum annual amount you can contribute to a Dependent care FSA is **\$5,000 (or \$2,500 if married filing separately)**.

Eligible Dependents:

- ▶ Your children, under the age of 13, for whom you are entitled to a personal exemption on your federal income tax return; and/or
- ▶ Your spouse or other dependents, including parents, who are physically or mentally incapable of self-care.

Qualified expenses include:

- ▶ Preschool or nursery school expenses
- ▶ Summer day camp
- ▶ Expenses for a babysitter
- ▶ Adult day care center or in-home care for an adult dependent
- ▶ Day care center/ After-school care

USE IT OR LOSE IT

Any unused funds that remain in your FSA account at the end of the plan year will be forfeited (this includes both health care and dependent care accounts). Plan carefully and use all the money in your FSA by the end of the plan year.

PET INSURANCE | WISHBONE

WISHBONE PET INSURANCE

Wishbone offers high-value, easy-to-use pet health insurance at exclusive employee benefit rates. Get reimbursed for vet bills that resulted from an accident or illness with your pet.

Coverage includes diagnostics and testing, unexpected surgery, hospitalization, emergency care, hereditary and congenital conditions, and more.

With Wishbone, you get:

- ▶ 90% reimbursement on accidents and illnesses
- ▶ A low \$250 annual deductible
- ▶ Fast claims processing
- ▶ Visit any licensed veterinarian
- ▶ Easy-to-use member account
- ▶ Includes added benefits: AskVet and ThePetTag
- ▶ And so much more!

Plus, choose from two tiers of optional routine care add-ons to maximize your savings on everyday pet care.

Submit a claim from your account online. Claims are processed within five business days, and you'll receive fast reimbursement payouts via check or direct deposit. Wishbone includes a durable ID tag with lost pet recovery service and 24/7 pet telehealth support for each insured pet.

Get a quote & directly enroll at www.wishboneinsurance.com/everymind.

401(k) RETIREMENT PLAN | EMPOWER

All employees will become eligible to participate after completing 90 days of employment and 240 hours of work. All eligible employees will be automatically enrolled at the initial deferral rate of 6%. Employees may change the deferral rate or waive participation by contacting the vendor directly. You may voluntarily contribute from 1% to 100% of your pay each plan year up to the maximum amounts established by the IRS.

Employees, who are 50 years of age or older, are also eligible to make "catch-up" contributions (up to \$7,500) to their 401(k) account. Employee's taxable income is reduced by the amount you save through your salary 401(k) deferral contribution. Employees also have the option of electing ROTH contributions.

EveryMind will match the first 6% of the pay you contribute to the plan through salary deferral. Work with financial advisors to assist you in making your decisions. Federal law also limits the amount you may elect to defer under the Plan (\$22,500 in 2023).

FOR MORE INFORMATION

Contact a EveryMind plan sponsor consultants to schedule an appointment with an expert advisor:

- ▶ Evan Anderson | Phone: **301-985-2327** | Email: evan@afplans.com
- ▶ Or contact Empower directly at **800-338-4015**

RESOURCES

- ▶ Empower Register/Login: www.empowermyretirement.com
- ▶ Empower Participant Services: **800-338-4015**
- ▶ Anderson Financial: www.afplans.com
- ▶ Schedule a Meeting with an AF advisor: go.oncehub.com/everymind

ADDITIONAL BENEFITS

EMPLOYEE ASSISTANCE PROGRAM (EAP) | GUARDIAN

Sometimes it helps to consult with a professional when it comes to personal situations or balancing work and family. The Employee Assistance Program, administered through Guardian, is CONFIDENTIAL service, free of charge to you and your family and designed to help with personal, job and family concerns. EAP services offer a confidential source of initial counseling and referral assistance regarding work and family problems, substance abuse, financial, legal, or other personal problems. You and the members of your household are entitled to 3 face to face visits with a licensed clinician per incident, per individual, per calendar year. The counseling sessions are available through the EAP for personal difficulties such as:

- ▶ Family, marital problems or parenting concerns
- ▶ Emotional difficulties like depression and anxiety
- ▶ Drug and alcohol dependence
- ▶ Stress and burnout
- ▶ Conflicts at work
- ▶ Questions about legal or financial concerns
- ▶ Questions about child or elder care

If you need assistance, call and speak to an EAP counselor at **800-386-7055** or visit them online at worklife.uprisehealth.com. Using the access code: **worklife**.

EMPLOYEE ASSISTANCE PROGRAM (EAP) | LIFEWORX STRATEGIES

This plan is offered at no cost to you through Lifework Strategies. Sometimes balancing work and family creates stress that's hard to handle on your own. The EAP is a CONFIDENTIAL service, free of charge to you and your family and designed to help with personal, job and family concerns. Anyone in your household is eligible, even if you are not related or covered on the insurance programs such as medical, dental or vision. Eight face to face counseling sessions per issue, per year are available through the EAP for personal and professional needs such as:

- ▶ Stress, Anxiety, Depression
- ▶ Life transitions
- ▶ Divorce/Separation
- ▶ Grief & Loss
- ▶ Substance abuse
- ▶ Work-Life counseling
- ▶ Legal consultations
- ▶ Financial Consultations

You can contact Lifework Strategies by telephone toll at **877-252-8550** or by visiting www.lifeworkstrategies.com and use the Username: **everymindeap** and Password: **employee**. You're responsible for any fees resulting from referrals outside the EAP, including those associated with medical benefits.

WILL PREPARATION SERVICES

Will Preparation Services offers a secure account space that allows you to prepare wills and other legal documents. These range from a library of online planning documents to accessing experienced professionals that can help you with the more complicated details. This benefit is free & confidential to you and your family

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

For more information call **800-386-7055** or visit the website at willprep.uprisehealth.com. Using the username: **WillPrep** and password: **GLIC09**.



Need more information about your benefits? Scan or click on the QR code to view a list of benefit summaries and resources available to you.

PAYROLL CONTRIBUTIONS

EveryMind contributes \$515 per month towards premium for the HNOOnly HSA HMO, the HNOOnly HMO or PPO medical plans. Please refer to the chart below for your semi-monthly pay-check deductions.

Semi-Monthly Per Pay Period Employee Contributions				
Coverage Level	Employee	Employee + Spouse	Employee + Child(ren)	Family
Medical Plans				
Aetna HNOOnly HMO HSA Plan	\$4.62	\$251.03	\$244.21	\$573.19
Aetna HNOOnly HMO Plan	\$26.50	\$322.50	\$286.00	\$642.00
Aetna PPO Plan	\$73.08	\$417.88	\$375.23	\$790.10
Dental Plan				
Guardian Dental Low PPO Plan	\$13.24	\$25.82	\$34.92	\$51.42
Guardian Dental High PPO Plan	\$16.90	\$33.20	\$44.46	\$65.18
Vision Plan				
Davis Vision Guardian Vision Plan	\$2.38	\$4.46	\$5.06	\$7.50
Employer Paid Life & Disability Plans - For all benefit eligible employees				
Guardian Basic Life and AD&D Insurance	100% Employer Paid			
Guardian Long-Term Disability Insurance	100% Employer Paid			
Employee Paid Voluntary Plans				
Guardian Voluntary Short-Term Disability	100% Employee Paid			
Guardian Voluntary Life and AD&D	100% Employee Paid			
Guardian Accident Insurance (Monthly Premium)	\$15.65	\$23.99	\$24.80	\$33.14
Guardian Critical Illness Insurance	Based on Age Rate. Click Here to view the full chart			
Wishbone Pet Insurance	100% Employee Paid			

Need more information about your benefits? Scan or click on the QR code to view a list of benefit summaries and resources available to you.



CONTACT INFORMATION

PLAN	CONTACT NUMBER	WEBSITE EMAIL
Medical Aetna	888-702-3862	www.aetna.com
Aetna Teladoc Teladoc	800-835-2362	www.teladoc.com
Health Savings Account PNC	844-356-9993	pnc.com/pncbenefitplus
Dental Guardian	800-541-7846	www.guardianlife.com
Vision Guardian Davis Vision	877-393-7363	microsite.davisvision.com/guardian/
Life & Disability Insurance Guardian	Life: 877-814-8970 STD: 800-268-2525 LTD: 800-538-4583	www.guardianlife.com
Flexible Spending Accounts PNC	844-356-9993	pnc.com/pncbenefitplus
Employee Assistance Program (EAP) Guardian	800-386-7055	worklife.uprisehealth.com Access Code: worklife
Employee Assistance Program Life Work Strategies	877-252-8550	www.lifeworkstrategies.com
Will Preparation Services Guardian		willprep.uprisehealth.com Username: Willprep Password: GLIC09
401(k) Retirement Empower Retirement	800-338-4015	www.empowermyretirement.com
Voluntary Benefits Guardian	800-541-7846	www.guardianlife.com
Pet Insurance Wishbone	800-887-5708	www.wishboneinsurance.com/everymind Email: help@wishboneinsurance.com
EveryMind Debra Cuadrado-James, HR Generalist	301-738-8538	Email: djames@every-mind.org
NFP Elaina Best, Client Advocate	240-387-4759	Email: elaina.best@nfp.com

NOTE: In the event there is any discrepancy between the descriptions of the program elements contained within this Benefits Guide and the official plan documents, the language of the official plan documents shall prevail. Please refer to the plan-specific documents published by each of the respective carriers or third party administrators for detailed plan information. You should be aware that any and all elements of our Benefits Program may be modified in the future to meet Internal Revenue Service rules, or otherwise as determined by EveryMind.

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