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Welcome



#### ABOUT THIS BENEFITS GUIDE

If there is any discrepancy between the description of the programs as contained in these or other materials you receive and the official plan documents, the language of the official plan documents shall prevail as accurate.

Please refer to the plan specific documents published by each of the respective carriers for detailed plan information. You should be aware any of these benefits may be modified in the future to meet legislative requirements or otherwise as decided by MERS Missouri Goodwill.

## **WELCOME**



## **ABOUT MERS MISSOURI GOODWILL**

MERS Missouri Goodwill is a mission-driven, not-for-profit that provides a variety of programs and services to support this mission. Our programs and services are embedded within our five divisions; Retail, Employment, Contract Services, Auto Donation, and Excel Centers. We continue to be a leader in providing social services dating back to 1918. Currently, we serve our 11,000 individuals within 89 counties in Missouri and Illinois.

Our MISSION is "Changing Lives Through the Power of Work."

Our **VISION** is a community where each individual has the opportunity to learn, work, and achieve their greatest potential.

#### Our CORE VALUES are:

- **INTEGRITY:** We work openly, honestly, and ethically with all people. We follow through on commitments, protect confidential information, are truthful, and admit our mistakes.
- RESPECT: We recognize and show empathy for others. We demonstrate appreciation for accomplishments, make an effort to see challenges from other perspectives. We treat people with courtesy, politeness, and kindness.
- **DIVERSITY:** We create a community where everyone can be themselves. We acknowledge the value of diversity within others, consider and honor different opinions, styles, and ways of working. We positively contribute to a work climate where people feel they belong.
- PASSION: We take ownership in what and how we work. We take initiative to improve current work, spread awareness of the mission through words and deeds, and strive to exceed expectations with a sense of urgency.
- PROFESSIONALISM: We maintain high standards for ourselves and our work. We maintain safe work
  practices, exhibit competence, skill, and the preparation needed for our roles. We demonstrate
  punctuality, reliability, and attention to detail.
- RESPONSIBILITY: We are stewards of people, communities, resources, and capital. We make people THE priority, invest in others so they can do their best work, and maximize the value of all assets.

At MERS Missouri Goodwill, we think it is important to offer an attractive suite of employee benefits. We evaluate our benefit offerings and strive to provide a comprehensive and cost-effective program that allows you to chose your coverages and services.

This 2023 benefits guide provides you with an overview of your Medical, Dental, Vision, Life, and Disability insurance benefits.

To prepare for enrollment, please read this guide carefully to get answers to your questions and consider your options. Choose the plans which best fit your needs and make sure to include any family members who will be affected by your elections in the decision making process.

Our Human Resources Administration department is here to help if you have specific questions or require assistance in the benefit enrollment process.

## MAXIMIZING YOUR EMPLOYEE BENEFITS



MERS Missouri Goodwill is a leader in career advancement and growth. With us. We will also provide a comprehensive benefit program. If you are an employee represented by a collective bargaining agreement, we ask that you refer to your contract. For all remaining employees your benefit package is as follows:

	ELIGIBILITY/ NEW HIRE WAITING PERIOD	PART-TIM E CONTRACTS	PART-TIM E OTHER DIVISIONS	FULL-TIM E EXCEL CENTERS	FULL-TIME OTHER DIVISIONS <sup>1</sup>
M EDICAL INSURANCE	EM PLOYEES AVERAGING 30+ HOURS PER WEEK ARE ELIGIBLE ON DATE OF HIRE	✓	✓	✓	✓
M EDICAL FSA	EM PLOYEES AVERAGING 30+ HOURS PER WEEK ARE ELIGIBLE ON DATE OF HIRE	✓	✓	✓	✓
DEPENDENT FSA	EM PLOYEES AVERAGING 30+ HOURS PER WEEK ARE ELIGIBLE ON DATE OF HIRE	✓	✓	✓	✓
VOLUNTARY DENTAL INSURANCE	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE FIRST ELIGIBLE AFTER 30 DAYS OF EM PLOYM ENT		✓	✓	✓
VOLUNTARY VISION INSURANCE	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE FIRST ELIGIBLE AFTER 30 DAYS OF EM PLOYM ENT		✓	✓	✓
ER PAID BASIC LIFE AND AD&D INSURANCE	EM PLOYEES AVERAGING 37.5+ HOURS PER WEEK WITH QUALIFYING JOB TITLES ARE ELIGIBLE ON DATE OF HIRE			✓	✓
VOLUNTARYLIFE AND AD&D INSURANCE	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE FIRST ELIGIBLE AFTER 30 DAYS OF EM PLOYM ENT		✓	✓	✓
VOLUNTARYSHORT TERM DISABILITY INSURANCE	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE FIRST ELIGIBLE AFTER 30 DAYS OF EM PLOYM ENT		✓	✓	✓
PAID HOLIDAYS	EM PLOYEES ARE ELIGIBLE ON DATE OF HIRE			10 DAYS	10 DAYS
VACATION TIME	ACCRUAL BEGINS ON <b>DATE OF HIRE</b> FOR EACH HOUR WORKED			UP TO 7 DAYS	UP TO 10 DAYS
SICK LEAVE	ACCRUAL BEGINS ON <b>DATE OF HIRE</b> FOR EACH HOUR WORKED			UP TO 5 DAYS	UP TO 10 DAYS
JURY DUTY	EM PLOYEES ARE ELIGIBLE AFTER 90 DAYS OF EM PLOYM ENT		✓	✓	✓
FUNERAL LEAVE	EM PLOYEES ARE ELIGIBLE AFTER 90 DAYS OF EM PLOYM ENT			✓	✓
403(B) RETIREM ENT	EM PLOYEES OVER AGE 21 AVERAGING 20+ HOURS PER WEEK ON DATE OF HIRE		✓	✓	<b>✓</b>
401(A) RETIREM ENT	EM PLOYEES OVER AGE 21 AVERAGING 20+ HOURS PER WEEK AFTER ONE YEAR OF EM PLOYM ENT			✓	✓
EM PLOYEE ASSISTANCE PROGRAM (EAP)	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE ELIGIBLE ON DATE OF HIRE	✓	✓	✓	✓

<sup>&</sup>lt;sup>1</sup> Full-time contract supervisor titles—benefits are based on specific contract.

## MAXIMIZING YOUR EMPLOYEE BENEFITS



MERS Missouri Goodwill is a leader in career advancement and growth. With us. We will also provide a comprehensive benefit program. If you are an employee represented by a collective bargaining agreement, we ask that you refer to your contract. For all remaining employees your benefit package is as follows:

RETAIL	ELIGIBILITY/ NEW HIRE WAITING PERIOD	ASSOCIATES	SENIOR ASSOCIATES	LEADS, ASSISTANT M ANAGERS, M ANAGERS	CDL DRIVERS	RETAIL M ANAGEM ENT
M EDICAL INSURANCE	EM PLOYEES AVERAGING 30+ HOURS PER WEEK ARE ELIGIBLE ON DATE OF HIRE	✓	✓	✓	✓	✓
M EDICAL FSA	EM PLOYEES AVERAGING 30+ HOURS PER WEEK ARE ELIGIBLE ON DATE OF HIRE	✓	✓	✓	✓	✓
DEPENDENT FSA	EM PLOYEES AVERAGING 30+ HOURS PER WEEK ARE ELIGIBLE ON DATE OF HIRE	✓	✓	✓	✓	✓
VOLUNTARY DENTAL INSURANCE	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE FIRST ELIGIBLE AFTER 30 DAYS OF EM PLOYM ENT	✓	✓	✓	✓	✓
VOLUNTARY VISION INSURANCE	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE FIRST ELIGIBLE AFTER 30 DAYS OF EM PLOYM ENT	✓	✓	✓	✓	✓
ER PAID BASIC LIFE AND AD&D INSURANCE	EM PLOYEES AVERAGING 37.5+ HOURS PER WEEK WITH QUALIFYING JOB TITLES ARE ELIGIBLE ON DATE OF HIRE		✓	✓	✓	✓
VOLUNTARYLIFE AND AD&D INSURANCE	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE FIRST ELIGIBLE AFTER 30 DAYS OF EM PLOYM ENT	✓	✓	✓	✓	<b>✓</b>
VOLUNTARYSHORT TERM DISABILITY INSURANCE	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE FIRST ELIGIBLE AFTER 30 DAYS OF EM PLOYM ENT	✓	✓	✓	✓	✓
PAID HOLIDAYS	EM PLOYEES ARE ELIGIBLE ON DATE OF HIRE	5 DAYS	5 DAYS	5 DAYS	5 DAYS	10 DAYS
VACATION TIME	ACCRUAL BEGINS ON DATE OF HIRE FOR EACH HOUR WORKED	UP TO 5 DAYS	UP TO 5 DAYS	UP TO 5 DAYS	UP TO 5 DAYS	UP TO 10 DAYS
SICK LEAVE	ACCRUAL BEGINS ON DATE OF HIRE FOR EACH HOUR WORKED	UP TO 10 DAYS	UP TO 10 DAYS	UP TO 10 DAYS	UP TO 10 DAYS	UP TO 10 DAYS
JURY DUTY	EM PLOYEES ARE ELIGIBLE AFTER 90  DAYS OF EM PLOYM ENT	✓	✓	✓	✓	✓
FUNERAL LEAVE	EM PLOYEES ARE ELIGIBLE AFTER 90  DAYS OF EM PLOYM ENT	✓	✓	✓	✓	✓
403(B) RETIREM ENT	EM PLOYEES OVER AGE 21 AVERAGING 20+ HOURS PER WEEK ON DATE OF HIRE		<b>√</b>	✓	✓	✓
401(A) RETIREM ENT	EM PLOYEES OVER AGE 21 AVERAGING 20+ HOURS PER WEEK AFTER ONE YEAR OF EM PLOYMENT		✓	✓	✓	✓
EM PLOYEE ASSISTANCE PROGRAM (EAP)	EM PLOYEES AVERAGING 20+ HOURS PER WEEK ARE ELIGIBLE ON DATE OF HIRE	✓	✓	✓	✓	✓



## **ELIGIBILITY**

## MEDICAL ELIGIBILITY

You and your eligible dependents may enroll if you are an active employee working a minimum of 30 hours per week. Your eligible dependent includes your legal spouse or domestic partner (with signed affidavit) and your children<sup>2</sup> up to age 26. Children will be covered in the medical plan until the end of the month in which they turn 26.

<sup>2</sup> Children includes your natural born, legally adopted or foster child; your stepchild (or child of your domestic partner); your grandchild(ren); any other child who lives with you in a regular parent/child relationship and who qualifies as your dependent as defined in the United States Internal Revenue Code; or an Incapacitated person for whom you have been appointed legal guardian and who qualifies as your dependent as defined in the United States Internal Revenue Code.

## VOLUNTARY DENTAL, VOLUNTARY VISION, VOLUNTARY LIFE AND AD&D, AND VOLUNTARY SHORT TERM DISABILITY ELIGIBILITY

You and your eligible dependents may enroll if you are an active employee working a minimum of 20 hours per week. Your eligible dependent includes your legal spouse or domestic partner (with signed affidavit) and your children<sup>3</sup> up to age 26. Children will be covered in the medical plan until the end of the month in which they turn 26.

## **EMPLOYER PAID BASIC LIFE AND AD&D ELIGIBILITY**

You will receive a Basic Life and AD&D benefit if you are an active full-time employee, with a qualifying job title, and working a minimum of 37.5 hours per week.

<sup>&</sup>lt;sup>3</sup> Children includes your natural born, legally adopted or foster child; your stepchild, or child of your domestic partner.

## ENROLLMENT PROCESS



## WHEN TO ENROLL

If you are a newly hired full time employee that meets the requirements above, your medical and employer-paid Basic Life and AD&D coverage is effective on your date of hire while Voluntary Dental, Voluntary Vision, Voluntary Life and AD&D, and Voluntary Short Term Disability coverage are effective 30 days following your date of hire.

MERS Missouri Goodwill provides a monthly Medical open enrollment opportunity. This means employees may enroll or they may terminate Medical Insurance for themselves and enrolled dependents. Unless you experience a qualifying life event, you cannot make monthly changes to dependent only medical coverage or your dental and vision elections until the next open enrollment period. A list of qualifying life events is located on page 8.

TYPE OF COVERAGE	ENROLLM ENT FREQUENCY	DETAILS
M edical/ Rx	Monthly	Medical Insurance can be changed monthly for employee and dependents if eligibility is a result of working 30 or more hours per week in the preceding month (effective first of the following month)  Employees continuously enrolled in medical coverage can add or delete dependents during annual open enrollment unless they have a qualifying life event.
Flexible Spending Accounts Voluntary Dental Voluntary Vision Voluntary Life and AD&D Voluntary Short Term Disability	Annual	FSA, Dental, Vision, Life and Short Term Disability Enrollment occurs in December with a January 1st effective date
403(b)	Monthly	403(b) investment contribution percentages may be changed monthly.

TYPE OF COVERAGE	FORM S NEEDED TO ENROLL
Medical/Rx, Voluntary Dental, & Voluntary Vision	<ul> <li>M ERS Missouri Goodwill Group Enrollment/ Change Form</li> <li>Affidavit of Domestic Partnership</li> </ul>
Basic Life & AD&D	Reliance Standard Designation of Beneficiary Form
Voluntary Life and AD&D	<ul> <li>Reliance Standard Enrollment Form</li> <li>Reliance Standard Designation of Beneficiary Form</li> <li>Reliance Standard Statement of Health Form*</li> <li>* For Requests Over the Guarantee Issue Amounts or Late Entrants Only</li> </ul>
Voluntary Short Term Disability	Reliance Standard Enrollment
Flexible Spending Accounts	Flexible Benefit Accounts Election/Enrollment Form
403(b)	<ul> <li>Enroll Online at oneamerica.com/ register</li> <li>Enroll by phone by calling 1-800-249-6269</li> </ul>



## **ELIGIBILITY**

Internal Revenue Service (IRS) regulations stipulate that eligible employees may only make plan elections once a year. Elections are binding through **December 31, 2023**.

The following qualifying life events are reasons you may change your benefit election during the plan year provided you inform Human Resources in writing within **30 days** of the event date:

- Marriage
- Birth, adoption, or placement of a child for adoption
- Divorce or legal separation
- Termination or commencement of your spouse's coverage in general when coverage is maintained through your spouse's plan.
- Shift from part-time to full-time status (or vice versa) by you or your spouse
- Death of spouse or dependent

Changes requested due to a "change of mind" cannot be allowed until the next open enrollment period.

# 2023 MEDICAL, DENTAL, & VISION RATES AT-A-GLANCE



HEALTHCOM P M EDICAL RATES —Per Pay Period (Semi-Monthly—24 Deductions)					
Employee Cost BASE PPO PLAN CHOICE PPO PLAN					
Employee Only	\$15.00	\$71.00			
Employee + Spouse	\$57.50	\$165.00			
Employee + Child(ren)	\$47.50	\$116.00			
Family	\$95.00	\$201.00			

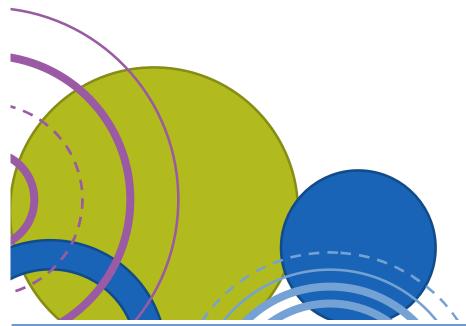
Note: medical premium payroll deductions are taken on a pre-tax basis.

RELIANCE STANDARD DENTAL RATES—Per Pay Period (Semi-Monthly—24 Deductions)			
Employee Cost			
Employee Only	\$15.33		
Employee + Spouse	\$28.89		
Employee + Child(ren)	\$37.44		
Family	\$51.00		

Note: dental premium payroll deductions are taken on a post-tax basis.

RELIANCE STANDARD VISION RATES—Per Pay Period (Semi-Monthly—24 Deductions)			
	Employee Cost		
Employee Only	\$4.00		
Employee + Spouse	\$7.60		
Employee + Child(ren)	\$8.01		
Family	\$11.96		

Note: Vision premium payroll deductions are taken on a post-tax basis.



## **MEDICAL INSURANCE**

HEALTHCOMP / MERCY / PHCS / ELAP SERVICES

HealthComp (formerly BAS) will continue to be the Medical Third Party Administrator (TPA) for MERS Missouri Goodwill in 2023. As of October 1, 2022, BAS rebranded under a new name, HealthComp. All medical ID cards will now have the HealthComp logo below.







Health Comp will process and pay the claims, send Explanation of Benefits (EOBs) to employees, and act as the main point of contact for employees with questions regarding the Medical plan.

### MEDICAL CARE OPTIONS

FROM A PHYSICIAN, YOU HAVE THREE OPTIONS TO **CHOOSE FROM:** 

- 1. Mercy Network
- 2. PHCS Practitioner Only Network
- 3. ELAP Referenced Based Pricing—All Other **Physicians Network**

While you may utilize any physician (PCPs, Specialists, ENTs, OBs, etc.), it is most cost effective to choose providers and facilities in Mercy's network. When seeking care from a physician outside the Mercy or PHCS Practitioner Only Network, ELAP Services—our Reference Based Reimbursement Coordinator—will act as the advocate for our employees for claims.

**AT A FACILITY OR HOSPITAL**, YOU HAVE TWO **OPTIONS TO CHOOSE FROM:** 

- 1. Mercy Network
- 2. ELAP Referenced Based Pricing

When seeking care from a hospital or facility outside the Mercy Network, ELAP Services—our Reference Based Reimbursement Coordinator—will act as the advocate for our employees for facility/hospital claims.

### SEARCHING YOUR PROVIDER OPTIONS

### **MERCY NETWORK**

Use to search for in-network PROVIDERS, **HOSPITALS, & OUTPATIENT FACILITIES** 

- 1. Go to mercyoptions.net and click 'Find a physician'.
- 2. Select 'MERS Goodwill' from the Employer dropdown menu.
- 3. Enter your search criteria and click 'Search'.

### PHCS PRACTITIONER ONLY SEARCH

Use to search for PRACTITIONERS ONLY (PCPs, Specialists, ENTs, OBs, etc.)

- 1. Go to mulitplan.com and click on 'Find a **Provider'** in the top right corner.
- 2. Click the green 'Select Network' box and choose 'PHCS' and select 'Practitioner Only'.

IMPORTANT NOTE: If you seek medical care from a practitioner (PCPs, Specialists, ENTs, OBs, etc.) and you are outside of Mercy's network area, HealthComp will automatically check to see if the practitioner is in-network with PHCS. If the provider is outside of the PHCS network, they will route to ELAP.









## LAB & MAJOR DIAGNOSTIC IMAGING OPTIONS



QUEST DIAGNOSTIC / US IMAGING NETWORK

## NO COST LAB SERVICE OPTION - QUEST DIAGNOSTIC LAB CARD

Quest Diagnostics Lab Card program is a value added benefit enhancement to your current Health Plan. When you choose to use your Lab Card to obtain outpatient lab work covered by your medical plan, there is no cost to you – the testing will be covered at 100% by your medical plan. This is an optional benefit designed to save you money on your outpatient laboratory needs.

### Using Your Lab Card Is Easy

- 1. When your physician orders lab work for you, show your Lab Card or Healthcare ID card with the Lab Card logo on it and verbally request to use the Lab Card program. Your physician will collect your specimen and send to Quest Diagnostics under the Lab Card benefit.
- 2. Any physician can collect specimens and call Quest Diagnostics Lab Card Client Services at **1-800-646-7788** for courier pick-up and supplies.
- 3. If your physician does not participate with the Lab Card Program, take your test orders to an approved Lab Card collection site for the draw. These locations can be found by calling Lab Card Client Services or by visiting **LabCard.com**.
- 4. Your specimens will be processed through the Lab Card program at an approved Quest Diagnostics facility and results sent back to your physician (usually within 24-48 hours).

## **NO COST MAJOR DIAGNOSTICS OPTION - US IMAGING NETWORK**

US Imaging Network (USIN) is a concierge scheduling program for MRI, CT, and PET scans. USIN educates members about their advanced radiology scan, offers transparency concerning safety and cost of radiology services, as well as takes care of all the scheduling details at a time and place convenient to you (typically within 24-48 hours). Members who use one of US Imaging Network's 2,200 network facilities for their MRI. CT, & PET, scan will receive it at no cost – it will be covered 100% by your medical plan. This is an optional benefit designed to save you money on outpatient major diagnostics.

#### How It Works:

- 1. When a doctor prescribes an advanced imaging test (MRI, CT, or PET scan), you or your doctor should call USIN at 877-874-6385 to schedule an appointment.
- 2. USIN will arrange for an appointment at a time/location convenient for you. USIN will also provide pricing transparency regarding the cost of your test.
- 3. USIN will provide you with a written appointment confirmation and directions. They will also let you know what you can expect during your exam.
- 4. After your exam is complete, USIN will send a satisfaction survey asking you about your USIN and radiology facility experience





## WHY CHOOSE MERCY

As we resume regular, in-person appointments and procedures, please be assured that your safety remains our highest priority. New, enhanced procedures and protocols are in place so that you can get in-person care as safely and effectively as possible. Among these new safety protocols and to protect our limited supply of masks, we ask that you bring and wear a mask when visiting any Mercy facility for your safety and the safety of others.

## **MERCY IS READY FOR YOU**

If your health care has been on hold, it's time to return for the care you need. Mercy is open with measures in place to help you come back safely.

See us in person – All Mercy locations and services are now open, with strict standards to keep patients and caregivers safe.

Video Visits – For your convenience and comfort, we offer video

visits. Meet with a primary care provider or specialist on your phone, tablet, laptop or desktop computer.

## MAKING SURE YOU GET THE CARE YOU NEED

At Mercy, our goal is to keep you and your family healthy and happy. We focus on preventive care – maintaining and improving your health.

Why is it important to have a Primary Care Physician?

- Your Primary Care Physician (PCP) gets to know you, your history, and your family health history.
- Your PCP can identify health issues in their early stages before they become major problems – preventive care is key to staying ahead of illness and other health problems.
- Your PCP is your main contact for preventive care (immunizations, regular tests and screenings).
- In case you get sick Your established PCP can get you in for a sick visit, prescribe medication, and connect with you over the MyMercy Patient Portal.
- If you have a condition that requires more specialized care, your
   PCP can refer you to the proper specialist.



#### MYMERCY PATIENT PORTAL

#### M YM ERCY.NET

MyMercy is a free, online tool and app for PCs, tablet devices, and smartphones that makes it easy to manage your whole family's health.

MyMercy lets you:

- Track your test results
- Schedule appointments
- Request prescription refills
- Message your providers
- Review and pay your bills

## FINDING IN-NETWORK PROVIDERS

Online Provider Search:

MERCYOPTIONS.NET

For further assistance with finding providers or answering any questions you may have, email your dedicated Mercy support team: MERCYEHS@MERCY.NET



## **ELAP SERVICES**

## ADVOCATING FOR MEMBERS AND THEIR FAMILIES



Heather Kunz is your Dedicated Employee Success Associate from ELAP Services, an Imagine 360 company, which provides price protection for your medical benefits. She works directly with MERS Missouri Goodwill employees and family members.

When you work with Heather, you'll never stand alone in the face of resolving a bill for healthcare services that exceed your responsibility.

### HOW WILL YOU KNOW IF YOU'RE CHARGED TOO MUCH?

After receiving medical care, you will get an Explanation of Benefits (EOB) from your plan administrator specifying what you owe for services. If you receive a bill for more than this amount, immediately contact Heather.

## WHAT WILL ELAP DO FOR YOU?

Once Heather receives your bill, she will provide you with personal support every step of the way. After you give ELAP written permission to advocate on your behalf, our team begins working to resolve the claim with your healthcare provider.

## WHO TO CALL WITH QUESTIONS?

Heather is your first point of contact when you have a question about your medical benefits. You and your family can reach out anytime if you want to change on the status of a claim, have a question about how much to pay for a medical service, receive a bill from a provider that you are unsure about, need assistance on a balance bill, or need help understanding what ELAP does.

Additionally, you have a dedicated Member Services Advocate, Lindsey Carmen, that will provide regular updates and guidance throughout the process. You can contact Lindsey if you have any questions about a bill.

## **KEEP AN EYE ON YOUR MAIL**

If it sounds easy, it's because it is. If you receive any billing correspondence in the mail, send it to ELAP right away. Heather and Lindsey will take it from there, keeping you in the loop throughout the process.

**ELAP MOTTO:** ADVOCATE, ENGAGE, EMPOWER



Any time you have questions about a medical bill, contact Heather or Lindsey

Heather Kunz: **801-566-6060** | **hkunz@imagine360.com** Lindsey Carmen: **314-442-6887** | **lcarmen@imagine360.com** 

## MEDICAL PLAN RATES & SUMMARY - BASE PPO PLAN

M EDICAL RATES—Per Pay Period (Semi-Monthly—24 Deductions)				
Employee Cost				
Employee Only \$15.00				
Employee + Spouse \$57.50				
Employee + Child(ren) \$47.50				
Family	\$95.00			

Note: medical premium payroll deductions are taken on a pre-tax basis.

HEALTHCOM P/ M ERCY/ PHCS/ ELAP	M ERCY NETW ORK	PHCS PRACTITIONER ONLY NETW ORK	ELAP REFERENCED BASED PRICING (ALL OTHER PROVIDERS)		
Calendar Year Deductible					
Individual	\$1,500	\$2,500	\$2,500		
Family	\$3,000	\$5,000	\$5,000		
Coinsurance	20%	30%	40%		
Out-of-Pocket Maximum	M ercy Network	PHCS Practitioner Only	ELAP Referenced Based Pricing		
Individual	\$4,500	\$6,000	\$6,000		
Family	\$9,000	\$12,000	\$12,000		
Office Visit Setting Services	M ercy Network	PHCS Practitioner Only	ELAP Referenced Based Pricing		
Wellness / Preventive	Covered in full	Covered in full	Covered in full		
Primary Care Physician	\$15 copay	\$30 copay	\$20 copay		
Specialist Physician	\$15 copay	\$30 copay	\$20 copay		
Chiropractic and Therapy	Deductible then 20%	Deductible then 30%	Deductible then 40%		
Diagnostic Lab & X-Ray	Covered in full	Covered in full	Covered in full		
Urgent Care	\$15 copay	\$30 copay	\$20 copay		
NEW Virtual Care Visit	TelaDoc (Virtual	TelaDoc (Virtual Visits Are Not Covered By Any Other Provider)			
Virtual Visit		Covered in full			
Outpatient Lab Services	M ercy Network	PHCS Practitioner Only	ELAP Referenced Based Pricing		
Quest Diagnostic Lab Card	Covered in full	Covered in full	Covered in full		
Lab Services	Deductible then 20%	Deductible then 30%	Deductible then 40%		
Outpatient Radiology Services	M ercy Network	PHCS Practitioner Only	ELAP Referenced Based Pricing		
US Imaging Network	Covered in full	Covered in full	Covered in full		
Outpatient Minor Diagnostic	Deductible then 20%	Deductible then 30%	Deductible then 40%		
Outpatient Major Diagnostic	Deductible then 20%	Deductible then 30%	Deductible then 40%		
Hospital/ Facility Services	M ercy Network	ELAP Reference Based Pricing			
Emergency Room	\$100 copay	\$100 copay			
Inpatient Hospital Stay	\$200 per confinement then 20% No Deductible	\$250 copay then 30% No Deductible			
Outpatient Surgery	<b>\$50 copay then 20%</b> No Deductible	\$75 copay then 30% No Deductible			
Physician/Surgeon fees	Deductible then 20%	Ded	uctible then 30%		

Percentages listed in the table represent the amount paid by the member.

## MEDICAL PLAN RATES & SUMMARY - CHOICE PPO PLAN

M EDICAL RATES—Per Pay Period (Semi-Monthly—24 Deductions)				
Employee Cost				
Employee Only	oloyee Only \$71.00			
Employee + Spouse \$165.00				
Employee + Child(ren) \$116.00				
Family	\$201.00			

Note: medical premium payroll deductions are taken on a pre-tax basis.

HEALTHCOM P/ M ERCY/ PHCS/ ELAP	M ERCY NETW ORK	PHCS PRACTITIONER ONLY NETW ORK	ELAP REFERENCED BASED PRICING (ALL OTHER PROVIDERS)	
Calendar Year Deductible				
Individual	<b>\$0</b>	\$0	\$0	
Family	\$0	\$0	\$0	
Coinsurance	10%	10%	20%	
Out-of-Pocket Maximum	M ercy Network	PHCS Practitioner Only	ELAP Reference Based Pricing	
Individual	\$2,000	\$2,500	\$2,500	
Family	\$4,000	\$4,500	\$4,500	
Office Visit Setting Services	Mercy Network	PHCS Practitioner Only	ELAP Reference Based Pricing	
Wellness / Preventive	Covered in full	Covered in full	Covered in full	
Primary Care Physician	\$15 copay	\$30 copay	\$20 copay	
Specialist Physician	\$15 copay	\$30 copay	\$20 copay	
Chiropractic and Therapy	10%	10%	20%	
Diagnostic Lab & X-Ray	Covered in full	Covered in full	Covered in full	
Urgent Care	\$15 copay	\$30 copay	\$20 copay	
NEW Virtual Care Visit	TelaDoc (Virt	ual Visits Are Not Covered By	Any Other Provider)	
Virtual Visit		Covered in full		
Outpatient Lab Services	M ercy Network	PHCS Practitioner Only	ELAP Reference Based Pricing	
Quest Diagnostic Lab Card	Covered in full	Covered in full	Covered in full	
Lab Services	10%	10%	20%	
Outpatient Radiology Services	Mercy Network	PHCS Practitioner Only	ELAP Reference Based Pricing	
US Imaging Network	Covered in full	Covered in full	Covered in full	
Outpatient Minor Diagnostic	10%	10%	20%	
Outpatient Major Diagnostic	10%	10%	20%	
Hospital / Facility Services	Mercy Network	ELAP Reference Based Pricing		
Emergency Room	\$100 copay	\$100 copay		
Inpatient Hospital Stay	\$200 per confinement then 10%	\$250 copay then 10%		
		\$75 copay		
Outpatient Surgery	\$50 copay then 10%	\$	75 copay	

Percentages listed in the table represent the amount paid by the member.



## PRESRIPTION DRUG BENEFITS

## **OPTUMRX**

MERS Missouri Goodwill will continue to partner with OptumRx for prescription drug coverage.

Your prescription drug benefit is part of your Medical Insurance. The prescription drug formulary generally lists many drugs and ranks them in groups described as tiers. Copayments and/or coinsurance is determined by the tier in which the health plan will pay for, and prefer you use. You can see the current PDL (prescription drug list) by logging into **optumrx.com** and searching under Member Tools.

## MEDICARE PART D

The prescription drug benefit is creditable coverage. Medicare-eligible participants need not enroll in a separate Medicare D drug plan.

PRESCRIPTION DRUGS—OPTUM RX 1					
Retail Mail Order (30-day supply) (90-day supply)					
Tier 1—Generic Drugs	\$10 copay	\$20 copay			
Tier 2—Preferred Brand Name Drugs	\$20 copay	\$40 copay			
Tier 3—Non-Preferred Brand Name Drugs	\$40 copay	\$80 copay			

<sup>&</sup>lt;sup>1</sup> Prescription drug copays apply to the All Other Providers Out-of-Pocket Maximum amounts listed under the Base and Choice Medical plans, not the Out-of-Pocket Maximums listed under the Mercy Network



## RX MAIL ORDER PROGRAM

The Mail Order Program
benefits members who are on
long-term medications for
chronic conditions such as
diabetes, high cholesterol,
high blood pressure,
depression or asthma. By
utilizing the Mail Order
Program, you can receive a 90day supply of medication for
the equivalent of two retail
copayments. That's a savings
of one copayment for every
90-day supply.

### MORE ABOUT YOUR PRESCRIPTION DRUG BENEFIT

If a Generic Drug is available and you choose to purchase the Brand Name Drug, you will be responsible for the copay plus the difference in cost between the Brand Name and Generic Drug. The cost difference between the Brand Name and Generic prescription will not apply towards the Deductible or Out-Of-Pocket Maximums. The cost difference does *not* apply if your Physician indicates "Dispense As Written" (DAW). You will only be responsible for the applicable copay.

**SPECIALTY DRUGS**: members may fill one prescription at a Retail Pharmacy; subsequent refills must be filled at the Specialty Pharmacy. For more information visit, **specialty.optumrx.com** 

**ACUTE MEDICATIONS:** drugs used primarily for short term use such as antibiotics, pain relievers, etc. Maximum 30-day supply.

MAINTENANCE MEDICATIONS: drugs used primarily to treat chronic conditions such as heart medications, high blood pressure medications, etc. Maximum 90-day supply with three refills.

EXPENSES RELATED TO CHARGES IN EXCESS OF BENEFIT MAXIMUMS, CHARGES IN EXCESS OF REASONABLE AND CUSTOMARY FEES AND NON-COMPLIANCE PENALTIES DO NOT ACCUMULATE TOWARD THE OUT-OF-POCKET MAXIMUM.

ANY MAXIMUMS WHICH ARE STATED IN DOLLAR AMOUNTS, NUMBER OF DAYS, OR NUMBER OF TREATMENTS AND WHICH LIMIT EITHER THE MAXIMUM BENEFITS PAYABLE OR THE MAXIMUM ALLOWABLE COVERED EXPENSE ARE THE COMBINED MAXIMUMS UNDER THE NETWORK AND NON-NETWORK LEVEL OF BENEFITS.

## COMMON HEALTH INSURANCE TERMS



**PREMIUM** 

The amount of money that is required to pay when participating in the medical plan. This premium is deducted from your paycheck 24 times a year. When we have a three payroll month, there will be no medical insurance deducted on the third payroll check.

**NETWORK** 

In the medical plans, we have three network options: Mercy, PHCS Practitioner Only, and ELAP Referenced Based Pricing as our "All Other Physicians" option. For hospitals or other medical facilities, we have 2 network options: Mercy and ELAP Referenced Based Pricing.

EXPLANATION OF BENEFITS (EOB)

A statement mailed to employees from HealthComp detailing medical services performed. The statement will provide dollar amounts the medical plan paid to the doctor or facility and if there is any amount due from the insured employee.

BALANCE BILLING

When a provider bills you for the balance remaining on the bill that your plan doesn't cover. This amount is the difference between the actual billed amount and the maximum payment the plan will pay for a covered health care service. For example, if the provider's charge is \$200 and the allowed amount is \$110, the provider may bill you for the remaining \$90. This can happen when you see a provider not in the Mercy or PHCS Practitioner Only networks or have a service at a hospital or facility.

M EDICAL
INSURANCE
CARRIER/ TPA

MERS Missouri Goodwill operates a "self-insured" medical program and has contracted HealthComp (formerly BAS) a third party administrator (TPA) to administer the plan, including paying all the claims.

**DEDUCTIBLE** 

The fixed amount during the plan year the employee pays before the medical provider begins paying claims. For example, if your deductible is \$2,500, your plan won't pay anything until you've met your deductible.

COINSURANCE

This is the percentage that the employee pays once all deductibles and copays are paid.

**COPAY** 

This is the fixed amount the medical plan requires when medical services are received (i.e. pharmacy and doctor visits)

OUT-OF-POCKET
MAXIMUM (OOPM)

The maximum amount an insured employee will be required to pay based on the medical plan and its plan year.

## MAXIMIZNG YOUR MEDICAL/RX INSURANCE



#### **GENERIC DRUG PROGRAMS**

#### Walgreens Prescription Savings Club

For complete details visit **walgreens.com** and search Prescription Savings Club. There you will find over 8,000 discounted prescription drugs, medications offered in all drug classes covering most common and chronic health conditions, pet prescriptions, and more. This program includes savings on diabetic supplies and insulin. Annual membership fees apply.

#### Walmart

Hundreds of generic prescription drugs are available priced at \$4.00 for a 30-day supply and \$10.00 for a 90-day supply at Walmart and Neighborhood Market Pharmacies nationwide. There are numerous over-the-counter medications included in the \$4.00 program. For complete details visit the Pharmacy section at walmart.com.

## Costco Member Prescription Program (CMPP)

Use your Costco Card to save on prescriptions. If you are a Costco member simply show your Costco Card at Costco or network pharmacy for instant savings on prescriptions. Visit **costco.com/cmpp** for more information.

#### Sam's Club

Join Sam's Club for exclusive access to their prescription savings program. Visit **samsclub.com/pharmacy/rxsavings** for complete details.

#### GoodRx.com

Compare prices, print free coupons, and save up to 80% on your prescriptions. For complete details visit **goodrx.com**.

#### SingleCare.com

Find the lowest prices at participating pharmacies nationwide and save up to 80% on your prescriptions. Visit **singlecare.com** for more information.

## BENEFITS OF A PRIMARY CARE PHYSICIAN

Coverage, choice, and convenience are factors each of us consider important when selecting a Medical plan. Choosing a Medical plan is the first step to being prepared when you need care.

An essential component of good medical care is the relationship you develop with your primary care physician. With a primary care physician, your health history is understood and your provider is better able to gauge changes in your health and detect potential medical concerns, which can lead to a better outcome.

## **PREVENTIVE CARE**

One of the best decisions you can make for your health, and the health of your family, is to make sure to visit your doctor annually for routine physical exams, immunizations, and recommended screenings. Preventive care can help ensure that you and your family stay well and identify potential health issues early. With 100% coverage for in-network well-child, well-woman, and well-man care, MERS Missouri Goodwill's Medical plan makes it easy and affordable for you and your family to get the preventive care you need.



## NEW NO COST TELEMEDICINE OPTION THROUGH MEDICAL PLANS

MERS Missouri Goodwill continues to enhance our medical program to give our employees access to all available options for seeking medical care.

TelaDoc is a telemedicine service provider allowing employees enrolled in the Base or Choice Medical Plans 24/7/365 access to a physician from the comfort of their own home at no cost. With an average of over 20 years of clinic experience, Teladoc's national network of US board-certified physicians can diagnose, treat, and prescribe medication for your non-emergency conditions. This includes for the flu, allergies, sinus infections, rash, sore throat, eye infections, bronchitis, and much more.

Whenever you need care, Teladoc physicians are available within minutes, by phone or video.

## **REGISTER YOUR ACCOUNT**

To get started with Teladoc, simply register your account by following these instructions:

- 1. Confirm benefits—provide some information about yourself to confirm your eligibility
- 2. Benefit confirmation—Teladoc will confirm when your benefits have been verified so you can finish creating your account
- 3. Create account—Provide your contact information and preferred language
- 4. Complete account—create a username, password, and pick security questions to ensure your account is secure

Visit **teladoc.com** or download the Teladoc app on your smart phone to create your account. Once your account is created you can talk to a doctor online, through the app, or by calling **1-800-TELADOC** (**1-800-835-2362**)

## FLEXIBLE SPENDING ACCOUNT

## **OLB Systems**



Flexible Spending Accounts (FSAs) provide you with an important tax advantage that can help you pay health care and dependent care expenses on a pre-tax basis. By anticipating your family's health care and dependent care costs for the next year, you can lower your taxable income.

Any unused FSA dollars at the end of the calendar year are subject to the "use it or lose it" rule. Once enrolled, send your claims to OLB Systems for reimbursement.

Contributions to you Health Care FSA and Dependent Care FSA are taken out of your paycheck semi-monthly for a total of 24 deductions per year.

### HEALTH CARE FSA

The Health Care FSA allows you to pay for IRS-approved health care expenses not covered by your insurance plan, with pre-tax dollars.

#### DEPENDENT CARE FSA

The Dependent Care FSA allows you to use pre-tax dollars towards qualified dependent care for children and/or disabled dependents.

	2023 ANNUAL CONTRIBUTION LIMIT	REIM BURSED EXPENSES
Health Care FSA	\$3,050 maximum	Medical / Dental / Vision
Dependent Care FSA	\$5,000 maximum \$2,500 if married, filing separately	Dependent Care

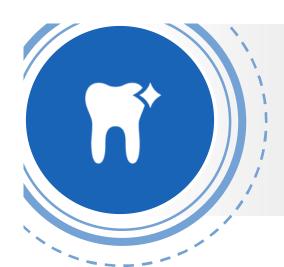
## **MORE ABOUT YOUR FSA**

You can only make changes to your contribution amounts if you experience a qualifying life event. The change being made must be consistent with the qualifying life event that occurred. Qualifying life events include:

- Marriage
- Birth, adoption, or placement of a child for adoption
- Divorce or legal separation
- Death of spouse or dependent

Please contact Human Resources if you have a specific question regarding the FSA.

**OLB SYSTEMS** 



## VOLUNTARY DENTAL INSURANCE

RELIANCE STANDARD

In addition to protecting your smile, Dental insurance helps pay for dental care and usually includes regular checkups, cleanings and x-rays. MERS Missouri Goodwill offers you a comprehensive Dental plan through Reliance Standard that covers:

- Preventive Dental services such as routine exams and cleanings, fluoride treatments, and diagnostic x-rays
- Basic services such as simple fillings and extractions, periodontics, endodontics, and oral surgery
- Major services such as crowns, inlays, onlays, and implants
- Orthodontia coverage available for children and adults

## **IN-NETWORK DENTISTS CAN SAVE YOU MONEY**

When using an in-network dentist, your out-of-pocket costs are lower. Reliance Standard contracts with **Ameritas** to provide plan members access to a nationwide dental network as part of your dental plan. This is because the network of dentists has agreed to charge lower fees and your plan's network services cover a large share of the charges.

If you choose to use a dentist who does not participate in the Ameritas Classic (PPO) network, your out-of-pocket expenses will be higher and you are subject to any charges above reasonable and customary and you may be balance billed.

Please refer to the summary plan description for detailed information on covered benefits.

#### RELIANCE STANDARD PROVIDER SEARCH

Visit **reliancestandard.com** to register and log in to search for in-network Dental providers. Or go to **dentalnetworkpartners.ameritas.com** to search for in-network Dental providers without logging into your Reliance Standard account.

MERS Missouri Goodwill utilizes the Ameritas "Classis (PPO)" Dental Network.

ALL MEMBERS WILL RECEIVE A DENTAL ID CARD IN THE MAIL FOLLOWING INITIAL ENROLLMENT. PLEASE NOTE, DENTAL AND VISION ID CARDS ARE SEPARATE.



## VOLUNTARY DENTAL PLAN RATES & SUMMARY

DENTAL RATES—Per Pay Period (Semi-Monthly—24 Deductions)		
Employee Cost		
Employee Only	\$15.33	
Employee + Spouse \$28.89		
Employee + Child(ren) \$37.44		
Family \$51.00		

Note: dental premium payroll deductions are taken on a post-tax basis.

AM ERITAS CLASSIC (PPO) NETW ORK	IN-NETW ORK	OUT-OF-NETW ORK
Calendar Year Deductible + Maximum		
Employee Only	\$	50
Employee + Dependent(s)	\$1	150
Annual Maximum	\$2,	,000
Dental Benefits		
Preventive Care—     Routine Exam (2 in 12 months)     Bitewing X-rays (1 in 12 months)     Full Mouth/Panoramic X-rays (1 in 3 years)     Periapical X-rays Cleaning (2 in 12 months)     Fluoride for Children 15 and under (2 in 12 months)     Sealants (age 15 and under)	Covered in full	
Basic Care—  Space Maintainers Restorative Amalgams Restorative Composites Endodontics (nonsurgical / surgical) Periodontics (nonsurgical / surgical)	Deductible then 20%	
Major Care—  Onlay Crowns (1 in 7 years per tooth)  Crown Repair  Denture Repair  Implants  Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 7 years)	Deductible then 50%	
Orthodontia Benefits		
Orthodontia— Adult	Orthodontia— <i>Adult</i> 50% up to lifetime maximum	
Orthodontia— <i>Child up to age 26</i>	50% up to lifetime maximum	
Orthodontia Lifetime Maximum	\$2,000	

Percentages listed in the chart represent the amount paid by the member.

## VOLUNTARY VISION INSURANCE

RELIANCE STANDARD



Having an annual eye exam is one of the best ways to make sure you are keeping your eyes healthy. Eye exams can help prevent and treat easily correctable vision problems which can cause permanent vision impairment. You have the option to enroll in the Vision plan through Reliance Standard to save money on eligible vision care expenses, such as eye exam, glasses, and contact lenses.

## THE IMPORTANCE OF SEEING IN-NETWORK PROVIDERS

Reliance Standard uses EyeMed's large Vision plan provider network offers you access to private practice optometrists and ophthalmologists, conveniently located retail chain providers, and discounted laser eye surgery from pre-screened providers. When you visit in-network providers the plan covers your vision care services at higher rates, and participating providers will submit your claim to Reliance Standard.

## RELIANCE STANDARD PROVIDER SEARCH

Visit **reliancestandard.com** to register and log in to search for in-network Vision providers. Or go to **eyemed.com/en-us** to search for in-network Vision providers without logging into your Reliance Standard account.

MERS Missouri Goodwill utilizes the EyeMed "Insight" Vision Network.

ALL MEMBERS WILL RECEIVE A VISION ID CARD IN THE MAIL FOLLOWING INITIAL ENROLLMENT. PLEASE NOTE, VISION AND DENTAL ID CARDS ARE SEPARATE.



## VOLUNTARY VISION PLAN RATES & SUMMARY

VISION RATES—Per Pay Period (Semi-Monthly—24 Deductions)		
Employee Cost		
Employee Only	\$4.00	
Employee + Spouse \$7.60		
Employee + Child(ren) \$8.01		
Family \$11.96		

Note: Vision premium payroll deductions are taken on a post-tax basis.

EYEM ED INSIGHT NETWORK		IN-NETW ORK	OUT-OF-NETW ORK ALLOW ANCE
Basic Exam		\$10 copay	Up to \$35
Frames		\$150 allowance + 20% off amount over allowance	Up to \$75
	Single Vision	\$10 copay	Up to \$25
Lancas	Bifocal	\$10 copay	Up to \$40
Lenses	Trifocal	\$10 copay	Up to \$55
	Lenticular	20% discount	Not covered
	Fit and Follow-Up	Up to \$60 copay	Not covered
Contact Lenses (in lieu of glasses)	Elective	\$150 allowance	Up to \$120
(	Medically Necessary	Covered in full	Up to \$210
Benefit Frequency			
Exam		12 mont	hs
Frames 24 months		hs	
Lenses	s 12 months		hs
Contact Lenses (in lieu d	of glasses)	12 months	



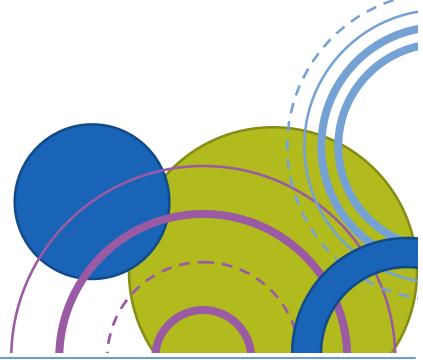


## BASIC LIFE AND AD&D INSURANCE

RELIANCE STANDARD

QUALIFYING JOB TITLES

MERS Missouri Goodwill provides employees working 37.5 hours per week with qualifying job titles Basic Life and AD&D coverage at no cost through Reliance Standard in the amount of two times your annual earning, rounded to the next higher \$1,000 to a maximum of \$400,000. You must name a beneficiary—the person or persons who will receive your life insurance benefit upon your death. The benefit reduces to 50% at age 70. AD&D insurance provides specified benefits for a covered accidental bodily injury which directly causes death or dismemberment.







## VOLUNTARY LIFE AND AD&D INSURANCE

RELIANCE STANDARD

#### Voluntary Life and AD&D

EM PLOYEE & SPOUSE RATES (Semi-Monthly—24 Deductions)		
Cost Per \$10,000 of Coverage		
0-24	\$0.48	
25-29	\$0.53	
30-34	\$0.61	
35-39	\$0.81	
40-44	\$1.09	
45-49	\$1.65	
50-54	\$2.53	
55-59	\$3.80	
60-64	\$5.85	
65-69	10.04	
70+	17.75	

CHILD RATES (Semi-Monthly—24 Deductions)		
Cost Per Benefit Option		
\$2,500	\$0.21	
\$5,000 \$0.61		
\$7,500 \$0.81		
\$10,000	\$1.01	

You may purchase voluntary Life and AD&D insurance through Reliance Standard if you work 20 or more hours per week. You are responsible for paying the full cost of this coverage. If you choose to elect Voluntary Life and AD&D coverage for yourself, you may also purchase coverage on your dependents. See the table below for benefit amounts.

VOLUNTARY LIFE AND AD&D			
	Employee	Spouse <sup>1</sup>	Child(ren) <sup>2</sup>
Increments	\$10,000	\$10,000	\$2,500
Maximum	\$500,000	\$250,000	\$10,000
Guarantee Issue <sup>3</sup>	\$150,000	\$25,000	\$10,000
Annual Open Enrollment Guarantee Issue Amount <sup>4</sup>	\$50,000	\$10,000	\$10,000

Spouse coverage is based on employee age

Evidence of Insurability (EOI) is required under the following circumstances and approval is not guaranteed:

- **NEW HIRE:** you are requesting an amount over the Guarantee Issue when first eligible.
- LATE ENTRANT: you have previously waived the opportunity to elect this coverage when first eligible and are now enrolling for the first time.
- ANNUAL OPEN ENROLLMENT: you are a current benefit eligible employee requesting to add or increase your coverage amount over the Annual Open Enrollment Guarantee Issue Amount.

## ANNUAL OPEN ENROLLMENT

You, your spouse, and your children may add or increase you Voluntary Life and AD&D coverage at annual open enrollment, not to exceed the guarantee issue amount, without submitting EOI, provided you have not previously been declined.

## **VOLUNTARY LIFE & AD&D** BENEFIT REDUCTION SCHEDULE

60% at age 75 35% at age 80 27.5% at age 85 7.5% at age 95 5% at age 100

<sup>&</sup>lt;sup>2</sup> Age 6 months - 20 year or 26 years if full-time student

<sup>&</sup>lt;sup>3</sup> Applies to new hires only

<sup>&</sup>lt;sup>4</sup> Applies to current benefit eligible employees only

## VOLUNTARY SHORT TERM DISABILITY INSURANCE

RELIANCE STANDARD



MERS Missouri Goodwill offers employees working 20 or more hours per week the opportunity to purchase Voluntary Short Term Disability (VSTD) coverage through Reliance Standard as we recognize the financial hardship that lost time from work, due to an injury or illness, can have on you and your family. In the event that you become disabled from a non-work related injury or illness, disability insurance will provide partial replacement of lost income. You are responsible for paying the full cost of this coverage. If you would like to apply for Voluntary Short Term Disability coverage, please contact the payroll department to obtain and enrollment form.

VOLUNTARY SHORT TERM DISABILITY		
Benefit	60% of pre-disability earnings up to \$1,000 per week	
Benefits Begin	8th day for both injury or illness	
Maximum Benefit	25 weeks or no longer disabled	
Pre-Existing Condition Limitation	3/6 An injury or illness that has been treated within the 3 months prior to the benefit effective date will not be covered until 6 months after the benefit has been in effect.	

VOLUNTARY SHORT TERM DISABILITY RATES		
Age	M onthly Rate per \$10 Benefit	
18-24	\$1.079	
25-29	\$1.156	
30-34	\$1.010	
35-39	\$0.779	
40-44	\$0.756	
45-49	\$0.771	
50-54	\$0.887	
55-59	\$1.217	
60-64	\$1.626	
65+	\$1.758	

VOLUNTARY SHORT TERM DISABILITY COST CALCULATION EXAM PLES				
	\$25,000 Annual Salary Age 35	\$50,000 Annual Salary Age 35	\$100,000 Annual Salary Age 35	
% of Weekly Salary	60%	60%	60%	
Weekly Salary (\$1,000 max.) (annual salary ÷ 52)	\$480.77	\$961.54	\$1,000	
Covered Weekly Benefit/ Volume (weekly salary x .60)	\$288.46	\$576.92	\$600	
Monthly Rate per \$10 Weekly Benefit from Table \$.779 \$.779 \$.779				
Semi-Monthly Premium Amount (covered weekly benefit x .779 ÷ 10 X 12 ÷24)	\$18.73	\$22.47	\$23.37	





## EMPLOYEE ASSISTANCE PROGRAM (EAP)

HEALTHCOMP BEHAVIOR HEALTH

If you are enrolled in the medical plan, the Employee Assistance Program (EAP) through HealthComp Behavioral Health is for you and your immediate family members. Each of us experiences a problem or situation that is difficult to resolve at some point in our lives. When these events happen, HealthComp Behavioral Health is here to help.



### In-the-Moment Support

Reach a licensed clinician by phone 24/7/365 for immediate assistance



#### **Financial Expertise**

Consultation and planning with a financial counselor



## **Legal Consultation**

By phone or in-person with a local attorney



### **Short-Term Counseling**

Access up to five (5) no-cost counseling sessions, inperson or via video, to resolve stress, depression, anxiety, work-related pressures, relationship issues or substance abuse



#### **Convenience Resources**

Referrals for child and elder care, home repair, housing needs, education, pet care and so much more



## Confidentiality

Strict confidentiality standards ensure no one will know you have accessed the program without your written permission except as required by law





Download the mobile app today!



1-888-227-5900



hconline.healthcomp.com

## PAID TIME OFF



## **HOLIDAYS**

Here at MERS Missouri Goodwill, we know that time off benefits are important to each of our employees and we encourage you to take time off for quality work-life balance. If you are an employee represented by a collective bargaining agreement, we ask that you refer to your contract. For all remaining employees your holiday schedule is as follows:

		RETAIL	FULL-TIME ALL OTHER DIVISIONS
NEW YEAR'S DAY OBSERVED	1/2/2023	✓	✓
M ARTIN LUTHER KING JR DAY	1/16/2023	1.5 times pay	✓
M EM ORIAL DAY	5/ 29/ 2023	1.5 times pay	✓
JUNETEENTH	6/ 19/ 2023	1.5 times pay	✓
INDEPENDENCE DAY	7/4/2023	✓	✓
LABOR DAY	9/4/2023	1.5 times pay	✓
THANKSGIVING DAY	11/23/2023	✓	✓
DAY AFTER THANKSGIVING	11/24/2023	1.5 times pay	✓
CHRISTM AS EVE OBSERVED	12/22/2023	✓	✓
CHRISTM AS DAY	12/ 25/ 2023	✓	✓

## **SICK LEAVE**

There could be times where you or your immediate family members, including parents, children, spouse, or grandparents may become ill. We encourage you to use paid sick time and get well. Sick leave is computed based on actual hours worked. The maximum days allowable to bank is as follows:

	PART-TIME ALL NON CONTRACT DIVISIONS	FULL-TIM E ALL NON EXCEL CENTERS	FULL-TIM E EXCEL CENTERS
SICK LEAVE	Up to 10 days	Up to 10 days	Up to 5 days
SICK LEAVE - MAXIMUM AMOUNT HELD	45 days	45 days	45 days

## PAID TIME OFF



### **VACATION**

MERS Missouri Goodwill expects and encourages all employees to take paid vacation for continual quality work/life balance. Vacation is computed based on actual hours worked. The maximum days allowable to bank is as follows:

	RETAIL <sup>1</sup>	RETAIL M ANAGEM ENT	FULL-TIM E EXCEL CENTERS	FULL-TIME ALL NON EXCEL CENTERS	
VACATION					
YEARS 1-4	Up to 5 days	Up to 10 days	Up to 7 days	Up to 10 days	
YEARS 5-9	Up to 10 days	Up to 15 days	Up to 7 days	Up to 15 days	
YEARS 10+	Up to 15 days	Up to 20 days	Up to 7 days	Up to 20 days	
VACATION LIFETIME M AXIMUM					
YEARS 1-4	10 days	10 days	14 days	20 days	
YEARS 5-9	20 days	20 days	14 days	30 days	
YEARS 10+	30 days	30 days	14 days	40 days	

<sup>&</sup>lt;sup>1</sup> Associates, Senior Associates, Lead, Assistant Manager, Leads, Assistant Managers, Managers, & CDL Drivers

## **VACATION BUY-BACK PROGRAM**

MERS Missouri Goodwill offers a Vacation Buy-Back Program that allows you to sell back half of your vacation time, twice a year. The Vacation Buy-Back Form can be found in your documents in Paycom. You may also call the Human Resources Administration department for assistance.



### VACATION PROGRAM HIGHLIGHTS

- Bank up to two years' of vacation
- Participation in Vacation Buy-Back Program

## **FUNERAL LEAVE**

In the event of the death of an immediate family member, leave of absence with pay is available to full time employees up to a maximum of 5 days in any calendar year after 90 days of employment. The following are considered members of the immediate family: grandparents, grandparents-in-law, grandchildren, parents, parents-in-law, siblings, sibling-in-laws, spouse, and child(ren).

## **JURY DUTY**

MERS Missouri Goodwill recognizes serving on jury duty as an important civic responsibility. All employees are eligible for up to 5 days of leave with pay if called to service jury duty after 90 days of employment. Employees must promptly notify their supervisor and provide copies of all summons and court documentation, including a juror service certificate upon completion of service to Human Resources.

## RETIREMENT PROGRAM

ONE AMERICA



Investing as little as one percent of each pay period into a 403(b) plan may put you on a path to retirement. By utilizing payroll deductions, your contribution is automatically deducted from your paycheck before taxes.

## **403(B) RETIREMENT PLAN**

MERS Missouri Goodwill employees, over the age of 21, are eligible to save for retirement through One America. You can choose your investments and investment strategy. Invest up to \$22,500 each year, plus an additional \$7,500 the year you turn age 50.

## **ENROLLING IN ONE AMERICA**

Your investment contributions can be changed as often as you like. You can set up your account through One America over the phone or online. MERS Missouri Goodwill point of contact David Hankins can assist you: **314-982-8877** 

MERS Missouri Goodwill plan number: G62431



#### ONLINE ENROLLMENT

oneamerica.com

Olick "Register for new account"

Select "Account Services"

Follow the prompts to complete your registration.



#### PHONE ENROLLMENT

1-800-249-6269

Follow the prompts to complete your enrollment.

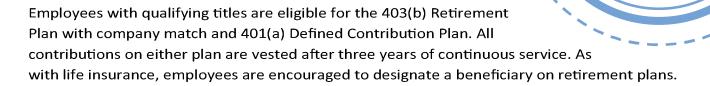
To speak with a representative, press "0" at any point during the call



## RETIREMENT PROGRAM

ONE AMERICA

QUALIFYING JOB TITLES



## **403(B) RETIREMENT PLAN + EMPLOYER MATCH**

MERS Missouri Goodwill employees, over the age of 21, are eligible to save for retirement through One America. You can choose your investments and investment strategy. Invest up to \$22,500 each year, plus an additional \$7,500 the year you turn age 50. After one year of employment, MERS Missouri Goodwill will match 50% your contribution up to 6%.

## **401(A) DEFINED CONTRIBUTION PLAN**

Employees with qualifying titles are eligible to enroll in this plan if they work more than 1,000 hours in the eligible year. This plan is an annual discretionary employer contribution that is determined at year-end. You must be an active employee on December 31 to receive the contribution. The contribution is generally between 3%-5% - in 2022, the contributions was 5%.

## **ENROLLING IN ONE AMERICA**

Your investment contributions can be changed as often as you like. You can set up your account through One America over the phone or online. MERS Missouri Goodwill point of contact David Hankins can assist you: **314-982-8877** 

MERS Missouri Goodwill plan number: G62431



#### ONLINE ENROLLMENT

oneamerica.com

Click "Register for new account"

Select "Account Services"

Follow the prompts to complete your registration.



## PHONE ENROLLMENT

1-800-249-6269

Follow the prompts to complete your enrollment.

To speak with a representative, press "0" at any point during the call



## CONTACT INFORMATION



CARRIER	COVERAGE	WEBSITE / EM AIL	PHONE
<b>♦</b> HealthComp	<b>M edical</b> POLICY NO. 117027	hconline.healthcomp.com	800-843-3831
Optum Rx®	Prescription Drug RX BIN: 610011 RX PCN: IRX RX GRP: MOGOOD21	optumrx.com	844-265-1719
elap	ELAP Employee Success Advocate HEATHER KUNZ	hkunz@imagine360.com	801-566-6060
Quest Diagnostics™	Quest Diagnostic Lab Card LAB CARD PROGRAM	labcard.com	800-646-7788
US Imaging Network	US Imaging Network MRI, CT, PET SCAN NETWORK	usimagingnetwork.com	877-874-6385
OLB SYSTEMS	Flexible Spending Account HEALTH & DEPENDENT CARE FSA	olbsys@sbcglobal.net	314-664-2103
<b>♦</b> HealthComp	Employee Assistance Program (EAP)	hconline.healthcomp.com	888-227-5900
IRELIANCE ISTANDARD LIFE INSURANCE COMPANY	Voluntary Dental / Voluntary Vision POLICY NO. 136-414053  Basic Life & AD&D POLICY NO. 163295  Voluntary Life & AD&D POLICY NO. VG188476  Voluntary Short Term Disability POLICY NO. VP328759	reliancestandard.com	800-351-7500
IRELIANCE ISTANDARD LIFE INSURANCE COMPANY	Bereavement Support Services FOR EM PLOYEES WITH EM PLOYER- PAID BASIC LIFE AND AD& D COVERAGE	rsli@acieap.com	855-775-4357
ONEAMERICA®	Retirement Plans 401(A) DEFINED CONTRIBUTION PLAN POLICY NO. G62431 403(B) RETIREM ENT PLAN POLICY NO. G62431	oneamerica.com	800-249-6269 DAVID HANKINS— 314-982-8877
MERS Missouri Goodwill	M ERS M issouri Goodwill  Donalle Martin, VP/HR Administration	dmartin@mersgoodwill.com	314-982-8895

