A Guide to Your Insurance Benefits



2022 / 2023





Service Provider Information

Health

United Healthcare (UHC) 1.877.844.4999 www.myuhc.com

Dental

United Healthcare (UHC) 1.877.844.4999 www.myuhcdental.com

Vision

United Healthcare (UHC) 1.877.844.4999 www.myuhcvision.com

Basic Life

Anthem

www.anthem.com

Short Term & Long Term Disability

United Healthcare (UHC) 1.877.844.4999 www.myuhc.com

Assistance with Insurance

AssuredPartners – Ken Gelley 502.259.9332 ken.gelley@assuredpartners.com fit Eliaibilit

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The information in this Benefit Guide is presented for illustrative purposes. The text contained herein was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the Guide and the actual plan documents, the actual plan documents will prevail. All information is confidential pursuant to the Health Insurance Portability and Accountability Act of 1996.

For additional questions or comments about our programs, please contact your Human Resources Department.

OUR COMMITMENT TO YOU | a plan designed for your needs

The benefit plans provided by Clawson Communications, Inc., are designed to recognize the diverse needs of our workforce. As we strive to provide superb benefit coverage and enhance our benefit options, we have to constantly look at new ways to make this possible. Our plan continues to:

- Provide competitive and comprehensive benefit options that allow you to design your plan based on your individual needs.
- Offer plans to provide long-term financial security for you and your family.

Only you can determine which benefits are the best for you and your family. We want you to understand all your options and make informed decisions.

Eligibility and Enrollment

Benefit Plan Eligibility

You are eligible to participate in the health and welfare employee benefit plans if you are a full-time employee.

The plans also permit you to cover your eligible dependents, which include your:

- Legal spouse
- Your child including:
 - -Biological child
 - -Stepchild
 - -Legally adopted child
 - -Child who has been placed with you in anticipation of adoption.

Children listed above must be under 26 years of age, regardless of whether that child qualifies as your dependent for federal income tax purposes. In addition, you can also cover a child for whom you are the legal guardian/legal custodian if they are claimed as your dependent for federal income tax purposes.

Your dependent children who are age 26 or over and physically or mentally incapable of self-support may continue coverage under certain plans beyond age 26 if they remain totally incapacitated and dependent on you for support.

When Coverage Begins

Full-time employees are eligible for benefits which will be effective at the first of the month after 60 days of employment.

Your elections for the plan year will remain in effect for the full year unless you experience a Qualifying Life Event. If you experience a Qualifying Life Event as listed below, you may change or cancel your coverage during the plan year to meet your needs. You must notify Human Resources within 30 days of the event to ensure there is no disruption of your coverage.

Qualifying Events include

- A change in legal marital status
- A change in number of dependents
- A change in employment status
- Your dependent satisfies or ceases to satisfy the requirements for dependents.
- A change in residence or worksite by your or your dependent that causes a loss or gain of coverage.



HEALTH BENEFITS

The medical plan offered by Clawson Communications is designed to help protect you and your covered dependents against financial loss by paying for a substantial portion of eligible expenses incurred for medically necessary care and treatment. The medical plan is insured by *United Healthcare*. *Visit www.myuhc.com* to find in network care.

Amounts shown are the employee costs for services	Core Plan HSA 6550 CF1E
	In Network
Deductible (single/family)	\$6,550 / \$13,100
Out-of-Pocket Max (single/family)	\$6,850 / \$13,700
Coinsurance (In Network/Out-of-Network)	0% / NA
Preventive Care Services	No Cost
Primary Care Office Visit / Specialist Office Visit	0% After Deductible
Outpatient Surgery and Facility Charge	0% After Deductible
Outpatient Diagnostic	0% After Deductible
Inpatient Hospitalization	0% After Deductible
Emergency Room*	0% After Deductible
Urgent Care	0% After Deductible
Lifetime Plan Maximum	Unlimited
PHARMACY BENEFIT	
Retail Rx (30 Day supply) – Tiers 1/2/3/4	\$5 / \$50 / \$150 / \$300 After Deductible
Mail Order Rx (90 day supply) – Tiers 1/2/3/4	\$12.50/\$125/\$375/\$750 After Deductible

^{*} If true emergency, Out of Network ER and ambulance paid as In Network.

In Network and Out of Network deductibles and maximum out-of-pocket amounts do not combine.

WEEKLY RATES	HDHP 6550 CF1E
Employee	\$23.00
Employee + Spouse	\$51.00
Employee + Child(ren)	\$40.00
Family	\$68.00

PREVENTIVE CARE



Good news! Your health benefits cover the services listed here with no cost to you¹ as part of your preventive care.

This includes routine screenings and checkups. It also includes counseling to prevent illness, disease or other health problems.

Covered preventive services for adults generally include the following:

Screenings

- Abdominal aortic aneurysm (one-time screening for men of specified ages who have ever smoked)
- Alcohol misuse
- High blood pressure screening
- Cholesterol (for adults of certain ages or at high risk)
- Colorectal cancer (for adults over 50)
- Depression
- Type 2 diabetes (for adults with high blood pressure)
- Human immunodeficiency virus (HIV)
- Hepatitis B surface antigen (effective 1/1/2019)
- Lung cancer (for adults age 55 and over with history of smoking)
- Prostate cancer (for men ages 40 and older)
- Body Mass Index (BMI) screening for obesity
- Syphilis (for all adults at higher risk)
- Tobacco use

Immunizations

Doses, recommended ages, and recommended populations vary.

- Diphtheria, Pertussis, Tetanus (DPT)
- Hepatitis A and B
- Herpes zoster
- Human Papillomavirus (HPV)
- Influenza
- Measles, Mumps, Rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Varicella (chicken pox)

The above list is just a sampling of covered items under the Preventive Care of your medical plan. To see a full list, visit the following:

www.healthcare.gov/preventive-care-adults/

www.healthcare.gov/preventive-care-children

Scroll to the bottom of one of those pages and click on "Learn more about preventive care from the CDC" to see a recommended list of screenings and vaccines based on your age and gender.

TELEMEDICINE



Visit with a doctor 24/7 — whenever, wherever

With 24/7 Virtual Visits, you can connect to a doctor by phone or video¹ through **myuhc.com** or the UnitedHealthcare app.



A convenient and faster way to get care

Doctors can treat a wide range of health conditions—including many of the same conditions as an emergency room (ER) or urgent care—and may even prescribe medications,² if needed. With a UnitedHealthcare plan, your cost for a 24/7 Virtual Visit is usually \$49 or less.³

Consider 24/7 Virtual Visits for these common conditions:

- AllergiesBronchitis
- Flu
- · Headaches/migraines
- · Eye infections
- Rashes
- Sore throats
- Stomachaches
- · and more

\$49_{cost}

An estimated 25% of ER visits could be treated with a 24/7 Virtual Visit — bringing a potential \$2,0004 cost down to \$49.

Get started

Sign in at myuhc.com/virtualvisits | Call 1-855-615-8335 Download the UnitedHealthcare app United Healthcare

- Data rates may apply
- ² Certain prescriptions may not be available, and other restrictions may apply.
- ³ The Designated Virtual Visit Provider's reduced rate for a 24/7 Virtual Visit is subject to change at any time.
- ⁴ Average allowed amounts charged by UnitedHealthcare Network Providers are not tied to a specific condition or treatment. Actual payments may vary depending upon benefit coverage. Estimated Urgent Care savings are based on \$131 difference between average Urgent Care visit cost of \$180 and Virtual Visit cost of \$49, \$2,000.00 difference between the average Emergency Room visit and the average urgent care viet. The information and estimates provided are for general informational and illustrative purposes only in a list not intended to be nor should be construed as medical advice or a substitute for your doctor's care. You should consult with an appropriate health care professional to determine what may be right for you. In an emergency, call 911 or go to the nearest emergency room.

The UnitedHealthcare® app is available for download for iPhone® or Android®, iPhone is a registered trademark of Apple, Inc. Android is a registered trademark of Google LLC.

24/7 Virtual Visits phone and video chat with a doctor are not an insurance product, health care provider or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times, or in all locations, or for all members. Check your benefit plan to determine if these services are valiable.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.

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Dental Coverage	In Network	Out-of-Network*
Annual Maximum – Per Covered Person Per Year	\$1,500	
Deductible – single	\$25	
Deductible – family	\$75	
Diagnostic & Preventive Routine Exam (2 per consecutive 12 months) Radiographs/X-Rays Lab and Other Diagnostic Tests Cleaning Fluoride Treatments (children under 16) Sealants (children under 16)	100% No Deductible	100%* No Deductible
Basic Services Restorations (fillings - composite available) General Services, including Emergency Treatment Simple Extractions Oral Surgery Periodontics (gum issues) Endodontics (root canal)	80% After Deductible	80%* After Deductible
Major Services Inlays Onlays Crowns Dentures and other Removable Prosthetics Bridges (fixed partial dentures)	50% After Deductible	50%* After Deductible
Orthodontia (braces – Children under 19)	50% No Deductible 15000 Lifetime Max	50%* No Deductible \$1,500 Lifetime Max

^{*}Out of Network providers can balance bill you over and above the allowance provided by Delta Dental

Visit <u>www.myuhcdental.com</u> to find an In Network provider

WEEKLY RATES	DENTAL
Employee	\$2.00
Employee + Spouse	\$3.00
Employee + Child(ren)	\$4.00
Family	\$5.00





Vision Coverage	In Network	Out-of-Network
Exam (every 12 months) For Diabetics, Twice every 12 months	\$10 Copay	Reimbursed up to \$40
Lenses (every 12 months) Single Vision Bifocal Trifocal	\$25 \$25 \$25 \$25 Significant discounting on lens enhancements	Reimbursed up to \$40 Reimbursed up to \$60 Reimbursed up to \$80
Frames (every 24 months)	\$150 Allowance then up to 30% discount	Reimbursed up to \$45
Contact Lenses in lieu of Glasses (every 12 months)	\$150 Allowance Up to 6 boxes when Formulary contact lenses are elected	Reimbursed up to \$150
Medically Necessary Contact Lenses (every 12 months, if applicable)	Covered in Full	Reimbursed up to \$210
Children's and Maternity Eye Care Benefit Members 0-12 and Members pregnant or breastfeeding	Eligible for 2 nd Exam Eligible for replacement frame and lenses if they have a prescription change of 0.5 diopter or more	N/A

Visit <u>www.myuhcvision.com</u> to find an In Network provider

WEEKLY RATES	VISION
Employee	\$1.00
Employee + Spouse	\$1.00
Employee + Child(ren)	\$1.00
Family	\$1.00

BASIC LIFE AND AD&D INSURANCE



Full Time eligible employees receive \$100,000 of Basic Life and Accidental Death & Dismemberment (AD&D) coverage at NO COST to the employee. Coverage reduces when you reach 65 years old and again at age 70.

AD&D coverage pays in \$100,000 if you pass due to an accident. You may also submit a claim if you have some type of dismemberment from an accident. Based on the severity, the plan will pay a reduced amount of the face value for dismemberment claims

SHORT-TERM DISABILITY INSURANCE (company paid)



Short-Term Disability (STD) is like paycheck insurance. This plan will pay you directly if you are unable to work due to a non-work-related injury or illness. It pays 66.7% of your pay up to a maximum amount of \$1,000 per week. United Healthcare will begin to cover the disability on the first day when it is an accident-related claim and on the 8th calendar day when an illness is the cause of the disability. The plan will continue to pay for 13 weeks from your last work day.

This is offered at NO COST to eligible employees.

LONG-TERM DISABILITY INSURANCE (company paid)

Long-Term Disability (LTD) picks up where STD leaves off. That is, after being unable to work for 180 days due to an injury or illness, LTD will pay you directly. It pays 60% of your monthly earnings up to \$6,500 per month.

The plan will continue to pay you until you are able to return to work, reach Social Security Normal Retirement Age, or go on Social Security Disability Coverage.

Disability is defined as being unable to perform your specific occupation for the first 24 months of LTD payments. Thereafter, the definition will change to the inability to perform any occupation.

This plan offers assistance in returning to work so you can earn a portion of your income through your employer while still receiving at least a partial LTD payment from United Healthcare.

This is offered at NO COST to eligible employees.





Customer Resource Center

ASSIST

The AP Assist team is comprised of experienced and helpful benefits counselors that will:

- Assist with understanding plan benefits and eligibility rules
- Assist with billing and enrollment issues
- Help with understanding EOB's and other plan materials
- Provide information about benefits options after a life event like marriage, birth, death, divorce, job change
- Work with the insurance companies to resolve claims
- · Assist member in obtaining ID Cards, and much more

8:30am – 5:00pm Monday - Friday



PHONE: 1-833-664-7195



EMAIL: apassist@assuredpartners.com

