

BENEFITS OUTLINE 2024 / 2025

New hire benefits are effective date of hire.

All Benefits in this section are available for enrollment through your employee portal.

MEDICAL INSURANCE	PRIORITY HEALT	FH – Ph etwork Be		Tra	ditional HMO		
EMPLOYEE COST / MONTH	<u>CO-PAYS</u>		RX CO-PAYS				
SINGLE: \$ 0.00	OFFICE VISIT (PCP):	\$30	GENERIC/GENERIC VALUE:	\$	10		
DOUBLE: \$ 258.22	SPECIALIST VISIT:	\$45	PREFERRED BRAND:	\$	30		
FAMILY: \$ 372.79	URGENT CARE:	\$75	NON-PREFERRED BRAND:	\$	60		
	ER VISIT:	\$25	PREFERRED SPECIALTY:		20%, MAX \$100		
EMPLOYER COST / MONTH	AMBULANCE:	\$15	NON-PREFERRED SPECIALTY:		20%, max \$200		
SINGLE: \$ 500.00	HIGH TECH IMAGING:	\$15	50				
DOUBLE: \$ 600.00							
FAMILY: \$ 700.00	COINSURANCE MAX (p	lan year)	TOTAL OUT-OF-POCKET MAXI	MUM	MUM (plan year)		
	INDIVIDUAL:	\$ 4,0	00 INDIVIDUAL:	\$	9,100		
<u>DEDUCTIBLE</u> (plan year)	FAMILY:	\$ 8,0	00 FAMILY:	\$	18,200		
INDIVIDUAL: \$ 2,000 FAMILY: \$ 4,000	HOSPITAL COINSURANCE	80%					
 SPECIAL FEATURES: WELLNESS VISITS/CHECKUPS: Covered 100% w/no co-pay based on gender/age guidelines VIRTUAL VISITS: 24/7 phone/video physician access, including dermatology & behavioral health ACCOUNT INFORMATION ON THE GO: You can access your membership card, personal health plan information, use the cost estimator, order prescriptions and more using the MyHealth app. 							



MEDICAL INSURANCE		PRIORITY HEALTH - PH-HMO-HSA-PREM In-Network Benefits					
EMPLOYEE COST / MONTH	CO-PAYS (*AFTER DEDUCTIBL	.E)	RX CO-PAYS (*AFTER DEDUCTIBLE)				
SINGLE: \$ 0.00	OFFICE VISIT (PCP):	80%*	GENERIC/GENERIC VALUE:	\$	10*		
DOUBLE: \$ 250.63	SPECIALIST VISIT:	80%*	PREFERRED BRAND:	\$	40*		
FAMILY: \$ 363.30	URGENT CARE:	80%*	NON-PREFERRED BRAND:	\$	80*		
	ER VISIT:	80%*	PREFERRED SPECIALTY:	\$	20%, MAX \$100*		
EMPLOYER COST / MONTH	AMBULANCE:	80%*	NON-PREFERRED SPECIALTY:	\$	20%, MAX \$200*		
SINGLE: \$ 500.00	HIGH TECH IMAGING:	80%*					
DOUBLE: \$ 600.00							
FAMILY: \$ 700.00	COINSURANCE MAX (p	lan year <u>)</u>	TOTAL OUT-OF-POCKET MAXIMUM (plan year)				
	INDIVIDUAL:	\$ 400	INDIVIDUAL:	\$	2,000		
DEDUCTIBLE (plan year)	FAMILY:	\$ 800	FAMILY:	\$	4,000		
INDIVIDUAL: \$ 1,600							
FAMILY: \$ 3,200	HOSPITAL COINSURANCE	80%					
 SPECIAL FEATURES: HSA CONTRIBUTION: \$1,318.80 annually (\$54.95/ pay period) at the single level, \$1,360.32 annually (\$56.68/ pay period) at the double level, and \$2,360.16 annually (\$98.34/ pay period) at the family level. WELLNESS VISITS/CHECKUPS: Covered 100% w/no co-pay based on gender/age guidelines VIRTUAL VISITS: 24/7 phone/video physician access, including dermatology & behavioral health ACCOUNT INFORMATION ON THE GO: You can access your membership card, personal health plan information, use the cost estimator, order prescriptions and more using the MyHealth app. 							

MEDICAL INSURANCE	PRIORITY HEALTH	I – PH-HN work Benefits			HSA HMO	
EMPLOYEE COST / MONTH	CO-PAYS (*AFTER DEDUCTIBLE)		RX CO-PAYS (*AFTER DEDUCTIBLE)			
SINGLE: \$ 0.00	OFFICE VISIT (PCP):	80%*	GENERIC/GENERIC VALUE:	\$	10*	
DOUBLE: \$ 67.31	SPECIALIST VISIT:	80%*	PREFERRED BRAND:	\$	40*	
FAMILY: \$ 134.12	URGENT CARE:	80%*	NON-PREFERRED BRAND:	\$	80*	
	ER VISIT:	80%*	PREFERRED SPECIALTY:	\$	20%, MAX \$100*	
EMPLOYER COST / MONTH	AMBULANCE:	80%*	NON-PREFERRED SPECIALTY:	\$	20%, max \$200*	
SINGLE: \$ 500.00	HIGH TECH IMAGING:	80%*				
DOUBLE: \$ 600.00						
FAMILY: \$ 700.00	COINSURANCE MAX (plan	COINSURANCE MAX (plan year)		TOTAL OUT-OF-POCKET MAXIMUM (plan year)		
	INDIVIDUAL: \$	1,800	INDIVIDUAL:	\$	5,000	
<u>DEDUCTIBLE</u> (plan year)	FAMILY: \$	3,600	FAMILY:	\$	10,000	
INDIVIDUAL: \$ 3,200	LIGORITAL COUNCILD ANDS	.00/				
FAMILY: \$ 6,400	HOSPITAL COINSURANCE 8	30%				
 SPECIAL FEATURES: HSA CONTRIBUTION: \$1,318.80 annually (\$54.95/ pay period) at the single level, \$1,360.32 annually (\$56.68/ pay period) at the double level, and \$2,360.16 annually (\$98.34/ pay period) at the family level. WELLNESS VISITS/CHECKUPS: Covered 100% w/no co-pay based on gender/age guidelines VIRTUAL VISITS: 24/7 phone/video physician access, including dermatology & behavioral health ACCOUNT INFORMATION ON THE GO: You can access your membership card, personal health plan information, use the cost estimator, order prescriptions and more using the MyHealth app. AINDIVIDUAL DEDUCTIBLE: Embedded Individual Deductible can be met before the family deductible 						





HSA (Health Savings Account) MEDICAL BENEFIT

EMPLOYEE RESPONSIBILITY

- You must enroll in an HSA Medical plan in order to have HSA contributions deducted from your paycheck and be able to utilize HSA funds.
- Axios HR partners with LMCU so that you can enroll in an HSA account directly from the OE enrollment tool if you do not currently have an HSA account.

SPECIAL FEATURES:

- You are able to utilize any bank you would like, as long as the bank offers an HSA account *this is not a regular checking account*
- Even if you select an HSA medical plan in the enrollment tool, this does not mean that you have an HSA you must set up an account for us to be able to distribute your contributed funds.
- An HSA account is solely yours, Axios HR has no ownership over this account.
- If you would like to utilize an HSA account outside of the LMCU offering, you will need to submit an HSA change form to us. Contact service@axioshr.com or call 616-949-2525 if this applies to you.

WAIVE MEDICAL BENEFIT

\$1,080 Annually

EMPLOYER PAID

SPECIAL FEATURES:

Staff that are eligible for but waive medical coverage will receive \$1,080 annually (\$45.00/pay) in lieu of that coverage. Waive Medical is considered taxable income.

DENTAL INS	UR	ANCE			DELTA	DENTAL BASE	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST	/ M	<u>IONTH</u>	<u>FEATURES</u>			DESCRIPTION (assumes in-netwo	<u>vork)</u>
SINGLE:	\$	34.00	BENEFIT MAX:		1,000	PREVENTATIVE SERVICES:	NO DEDUCTIBLE APPLIES – COVERED 100%
DOUBLE:	\$	65.00	DEDUCTIBLE:	\$	50	BASIC SERVICES:	COVERED 80% AFTER DEDUCTIBLE
FAMILY:	\$	134.00	ORTHO MAX:	\$	1,000	MAJOR SERVICES:	COVERED 50% AFTER DEDUCTIBLE
			 Lifetime 			ORTHODONTIC:	COVERED 50% AFTER DEDUCTIBLE
						DEPENDENTS:	COVERED TO AGE 26
EMPLOYER COST	/ M	<u>IONTH</u>	SPE	CIA	L FEATURES:	 NO ID CARD REQUIRED 	– simply let your provider know you
SINGLE:	\$	0.00				have Delta Dental and t your SSN	they will be able to look you up by
DOUBLE:	\$	0.00				 Delta Dental PPO Netw 	ork
FAMILY:	\$	0.00				major restorative and p	ting period for new enrollees for any prosthodontic service eductible are calendar year (Jan-Dec)

VISION INSURANCE		EY	EMED	VO	LUNTARY EMPLOYEE PAID
EMPLOYEE COST / MONTH	<u>FEATURES</u>			DESCRIPTION	
SINGLE: \$ 8.95	EXAMS:	ONCE EVERY 12 MO	NTHS	EXAM CO-PAY:	\$ 10
DOUBLE: \$ 17.50	CONTACTS:	ONCE EVERY 12 MO	NTHS	CONTACT LENSES:	\$130 Allowance
FAMILY: \$ 24.87	FRAMES:	ONCE EVERY 24 MO	NTHS	DEPENDENTS:	COVERED TO AGE 26
EMPLOYER COST / MONTH	SPEC	CIAL FEATURES: •		RD REQUIRED — simply and they will look you u	let your provider know you have p by your SSN
SINGLE: \$ 0.00			Donafit fr	raguanay basad an data	of loct visit
DOUBLE: \$ 0.00		•	Benefit ir	equency based on date	OI IAST VISIT
FAMILY: \$ 0.00					





LIFE INSURA	N	E	METLIFE	EMPLOYER PAID
COVERAGE			SPECIAL FEATURES:	
EMPLOYEE:	\$	50,000	 <u>PlanSmart:</u> PlanSmart is a multifaceted program, offered at no additional coprovide your employees with access to a range of financial and retirement expressions. 	
SPOUSE:	\$	2,000	on-site workshops, with optional personal consultations and decision-support	_
			 <u>Retirewise</u>: Retirewise is an in-depth program consisting of a four-part serie 	·
DEPENDENT:	\$	1,000	objective information covering a broad spectrum of retirement issues from	Estate Planning to Tax
			Planning. Each workshop is delivered by a locally based financial professional	al.

SHORT TERM DISABILI	TY METLIFE - CHARTER	EMPLOYER PAID
EMPLOYEE COST / MONTH	COVERAGE	
EMPLOYEE: \$ 0.00	• 60% of weekly salary up to \$1,000 per week	
	Benefits begin on (Accident) 1st day	
	 Benefits begin on (Illness) 8th day 	
	Max Duration of Benefits: 26 weeks	

LONG TERM DISABILIT	Y METLIFE - CHARTER	R EMPLOYER PAID
EMPLOYEE COST / MONTH EMPLOYEE: \$ 0.00	 COVERAGE 60% of weekly salary up to \$7,500 /month Elimination Period: 180 days Max Duration of Benefits: till age 65 	Pre-Existing Condition: You may not be eligible for benefits if you have received treatment for a condition within 3 months prior to your effective date under the policy until you have been covered under the policy for 12 months. Benefit Limitations: Neuromuscular: 24 months Musculoskeletal: 24 months Soft Tissue Disorder: 24 months Alcohol, Drug or Substance Abuse: No limit

LIFE INSURANCE		METLIFE - CHARTER	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST / MONTH ■ Rates are based on	COVERAGE	\$10k to \$200k guarantee, Max.	SPECIAL NOTES: • You must elect coverage for yourself in order to
employee's age and	EMPLOYEE:	5X Salary or \$500k	elect coverage for your spouse and / or child(ren)
amount of coverage	SPOUSE:	\$5k to \$25k guaranteed, Max. \$250k or 50% of Emp.	 Any amount elected over the guarantee issue amount will be subject to medical underwriting
	DEPENDENT:	\$10k guaranteed	



FLEX BENEFIT - MEDICAL & DEPENDENT CARE **AXIOS HR VOLUNTARY EMPLOYEE PAID EMPLOYEE COST / MONTH** SPECIAL FEATURES You elect how much to Health Care Spending Account Maximum Limit: \$3,200/\$6,400 Annually contribute annually Dependent Care Spending Account Maximum Limit: \$2,500/\$5,000 Annually (Dependent Care expenses must be from a licensed care provider or program) FSA's give you a way to pay for your health care and / or dependent care expenses with pre-tax dollars. FSA's are voluntary – YOU decide how much to have taken out of your paycheck and put into your Health care and / or Dependent Care Spending Account(s). **FLEX BENEFIT RULES** Termination of Plan/Employment – You have 30 days from the date of termination to submit any receipts for the period of time you were covered under the plan to utilize any remaining funds. Life Events – FLEX funds are prepaid, so you cannot change the amount you want to contribute in the middle of a plan year. Type of Plan – Please verify that you are electing the correct type of FLEX plan, we offer more than one.

OFF THE JOI	3 A	CCIDEN	METLIFE	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST	/ M	<u>ONTH</u>	SPECIAL FEATURES	
EMPLOYEE:	\$	8.16	This coverage pays you cash benefits that corres dismemberment: dislocation or fracture; hospital	oond with a variety of covered occurrences, such as I confinement; ambulance services; physical therapy and
EE + SPOUSE:	\$	15.44	more. The cash benefits can be used to help pay	, , , , , , , , , , , , , , , , , , , ,
EE + CHILD:	\$	16.84	 Benefits are paid once per accident unless other Guaranteed issue coverage and coverage availab 	
EE + FAMILY:	\$	21.13	See plan document for more details.	

CRITICAL ILLNESS	METLIFE	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST / MONTH	SPECIAL FEATURES	
	Benefit Coverage options are \$10,000 or \$20,000 This is a second of the second o	Land to the second of
Rates will vary based on your issue age, who you wish to cover, the amount of coverage and	 This coverage helps offer financial support if you are did expense of treatment often so high, seeking the treatm But when a diagnosis occurs (such as cancer, major org getting better. With METLIFE Benefits, you gain the pov covered event. 	ent you need seems like a heavy financial burden. an failure, etc.), what you should be focusing on is
whether or not you use tobacco products	 How It Works: You select the benefit coverage amount budget. If you have covered family members, this cover diagnosed with a covered critical illness, you will receive for the condition. 	age also provides cash benefits for them. Then, if

HOSPITAL IN	DE	MNITY	METLIFE	VOLUNTARY EMPLOYEE PAID
EMPLOYEE COST	/ M	<u>ONTH</u>	SPECIAL FEATURES	
EMPLOYEE:	\$	7.67	9 1 7	inement. This benefit is payable directly to you and can sonal bank account or your Health Savings Account (HSA)
EE + SPOUSE:	\$	20.15	for hospital-related expenses.	, , , , , , , , , , , , , , , , , , , ,
EE + CHILD:	\$	13.26	Guaranteed issue coverage and coverage available	e for spouse and child(ren).
			 Coverage can be continued as long as premiums a 	re paid to MetLife Benefits.
EE + FAMILY:	\$	21.84	 See plan document for more details. 	





Legal / ID Protection

ID Shield/Legal Shield

VOLUNTARY EMPLOYEE PAID

SPECIAL FEATURES

- Plan
 Family (per month)
 Individual (per month)

 LegalShield
 23.95
 23.95

 IDShield
 18.95
 8.95

 Combined
 38.90
 32.90
- ID Shield membership includes security and privacy monitoring social media monitoring, identity restoration and consolation services.
 - If your identity is stolen, ID Shield will fully restore to pre-theft status.
- LEGAL Shield offers advice, consultation and representation including legal guidance for common issues.
 - Membership includes a dedicated law firm, contracts and document review as well as preparation of your end of life documents,

401(k)	EMPOWER RETIREMENT		RETIREMENT PLAN
ELIGIBILITY REQUIREMENTS:	SERVICE LENGTH	AGE	ENTRY DATE
	• Immediate	• 21 year old	• Immediate
<u>SPECIAL FEATURES:</u>	 100% of the first 5%. Enrollment in the 401k, or any contribution or beneficiary changes to your existing 401k, can be done on Empower's website, www.empowermyretirement.com. Enrollment in the 401(k) is not done through the benefit enrollment tool and is not tied to the Open Enrollment period; you can enroll or make changes to contributions at any time after you are eligible. 		

RETIREMENT CAPTRUST FINANCIAL WELLNESS

- Through CAPTRUST, you have access to personalized financial advice. Consults can be requested by calling 800-967-9948 or by visiting www.captrustadvice.com/scheduler/
- Ways to engage with CAPTRUST: Quarterly Webinars, 1:1 advice session, monthly newsletters, Retirement Blueprint, and our website www.captrustadvice.com.



Learn More about the benefit:



Schedule a Meeting:





MOBILE VETERINARY CARE

VETR HEALTH

VOLUNTARY EMPLOYEE PAID

Convenient, affordable veterinary care from the comfort of your own home.

- In Home Vet Visits vets travel to you and your pets! All the care is provided in the comfort of your own home.
- Core Vaccines and Testing your membership includes all of the core vaccines and testing your pet needs to stay healthy.
- Unlimited Telehealth advice from veterinarians anytime, anywhere with Vetr telehealth.
- Online Pharmacy receive access to their online pharmacy for any prescriptions including preventatives.

The Veterinary Care benefit through Vetr Health is not run through payroll. If interested, employees can obtain plan information and enroll in the plan at www.vetrhealth.com. Employees will pay premiums directly to Vetr Health.

PET INSURANCE PET'S BEST VOLUNTARY EMPLOYEE PAID

Pet insurance reimburses you for vet bills when your pet is sick or injured, to help take the financial worry out of vet visits.

- Fast claims processing and payment receive reimbursement via direct deposit or direct vet pay options available
- Use any veterinarian in the U.S. including specialty and emergency clinics
- Access to a 24/7 pet helpline powered by WhiskerDocs
- Exclusive Axios HR employee discount on a BestBenefit Plan

The Pet Insurance benefit through Pet's Best is not run through payroll. If interested, employees can obtain plan information and enroll in the plan at www.petsbest.com/axios. Employees will pay premiums directly to Pet's Best.





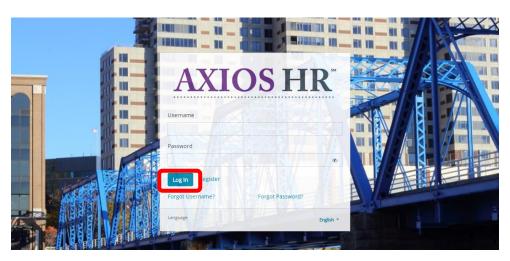
HOW TO COMPLETE ENROLLMENT - NAVIGATION INSTRUCTIONS

To elect your benefits for the 2023-2024 plan year, please follow these simple instructions. Please note that it is highly recommended that you use **Google Chrome** to complete your enrollment.

Go to https://axioshr.com/, and click on the "Employee Login" link at the top right of the screen:



Enter your employee credentials and click the blue "Log In" button:



If you have forgotten your username or password, you may use the "Forgot Username?" or "Forgot Password?" links on the login screen for assistance retrieving or resetting your credentials. You may also contact Axios HR for assistance at 616-949-2525 or by emailing service@axioshr.com. The Axios HR Employee Care Team is available to assist you Monday-Friday from 8am-5pm.





Once you are logged into the Employee Portal, navigate to the Benefits Enrollment tool by locating the side menu, clicking on "Benefits" and then "Benefits Enrollment". AXIOS HR Dashboard Pay Paid Time Off **New Messages** Personal Paid Time Off 04/18/2019 Most Recent Pay Statements Benefits Last Chance to Complete Your 04/10/2019 Planned Taken Available Benefits Enrollment 03/27/2019 Summarv 0 Hours 72 Hours 2.46 Hours 04/14/2019 03/13/2019 Annual Enrollment Ends in 5 Days Flexible Spending 04/11/2019 ▶ PTO Summary ▶ View More We Have Received Your Benefit Retirement Summary Selections ▶ View More **Benefits** Benefits Enrollment Aetna HSA Value 100% 6350 EMPLOYEE + 1 Flex Spending - Omega Benefit Strate Effective 07/01/2018 AXERLIFE-LGH-25k 25000.00 Paid Time Off Effective 07/01/2018 AXERSTD-1-8-26-500-LGH Time Entry 450.00 Effective 01/01/2019 Documents ▶ View Benefits Summary m Events Taxes ≪ Minimize Navigation

The Axios HR Employee Care Team is here to assist you if you have any questions or have any trouble making and submitting your benefit elections for the 2023-2024 benefit plan year. You can reach the Axios HR Employee Care Team by phone at 616-949-2525 or by emailing service@axioshr.com.



Access Your HR and Payroll Information on the Go with the Mobile App

Your HR and payroll information is always at your fingertips with the PrismHR Employee Portal App. It's free and easy to set up on your smartphone or tablet.

Anything you can do in Employee Portal you can do in the mobile app:

- Pay stubs and history
- Benefits summary
- Personal contact information
- Document management
- HR support contacts
- Enroll in benefits
- W-2 forms
- Change tax withholdings

The app is available now for Apple and Android devices.





In the App Store/Google Play, search for PrismHR Employee Portal:



Once the app is installed, the first time you launch it will require you to complete a one-time setup to access your account. Please select 'Access Code' and enter the access code of 285.

Once this is complete, it will bring you to the login screen (blue bridge in the background) and you'll be able to log in as normal.







Have questions? We're here to help!

Asistencia en Español

The Axios HR Employee Care Team is available Monday-Friday from 8am-5pm to answer any questions and resolve any issues as quickly as possible. Our Employee Care Team is made up of three HR professionals – Kayla (Care Team Lead), Edgar (HR Coordinator), Alexis (HR Coordinator) and Courtney (HR Intern).

Our Employee Care Team can assist with many items including (but not limited to):

- New hire onboarding
- Username/password assistance
- Contact information changes
- Tax withholding/W2 questions
- Retrieving pay stubs
- Benefits enrollment assistance

- Benefits questions
- FMLA/Disability paperwork
- Timeclock assistance
- Payroll questions
- · Verification of Employment documents
- HR/employment concerns

No matter what your need is, the Employee Care Team is your primary point of contact with Axios HR. If your inquiry requires the attention of an HR Specialist, the Care Team will put you in direct contact with one of our team's HR Specialists for resolution.

In addition to our Employee Care Team, the Axios HR Employee Portal is very robust and gives you 24/7 access to your personal information. On the Employee Portal, you can view/download/print your paystubs or W-2, view or make changes to your contact information like address, phone number or e-mail, as well as view or make changes to your direct deposit account information. To visit the employee portal, go to **AxiosHR.com** and click on "**EMPLOYEE LOGIN**" in the upper right-hand corner.

To contact our Employee Care Team, please call us at 616-949-2525 or email service@axioshr.com.









