

Applied Underwriters

Benefits Summary

Health Insurance

- **Carrier:** Anthem Blue Cross
- **Eligibility:** First day of the month following 30 calendar days of employment
- **Monthly Premium Paid by Employee:**
 - Employee Only: \$0
 - Employee + Spouse: \$215.07
 - Employee + Child(ren): \$164.41
 - Family: \$379.48
- **In-Network Provider Costs:**
 - Copay is \$20 for primary care and specialist visits
 - Coinsurance is 10% for most medical services
 - Prescription drug copay/coinsurance varies depending on the tier: \$10/\$20/\$40 or 20%
 - Use of on-site pharmacy, Promesa, eliminates copay for many prescriptions
 - Deductible (plan year): \$250 single / \$750 family
 - Out-of-pocket limit (plan year): \$2,500 single / \$5,000 family
- **Non-Network Provider Costs:**
 - Coinsurance is 30% for most medical services
 - Deductible (plan year): \$750 single / \$2,250 family
 - Out-of-pocket limit (plan year): \$7,500 single / \$15,000 family

Dental Insurance

- **Carrier:** Delta Dental
- **Eligibility:** First day of the month following 30 calendar days of employment
- **Deductible:** \$50 per person / \$150 per family each calendar year
- **Maximum:** \$1,500 per person each calendar year (\$1,500 lifetime for orthodontia)
- **Monthly Premium Paid by Employee:**
 - Employee Only: \$11.70
 - Employee + Spouse: \$22.91
 - Employee + Child(ren): \$21.19
 - Family: \$32.26
- **Dental Coverage:**
 - Diagnostic & Preventive Services (every six months): 100%
 - Basic Services: 90% (80% non-network)
 - Major Services: 60% (50% non-network)
 - Orthodontia: 60% (50% non-network) for dependent children under age 26

Vision Insurance

- **Carrier:** VSP
- **Eligibility:** First day of the month following 30 calendar days of employment
- **Monthly Premium paid by Employee:**
 - Employee Only: \$4.68
 - Each additional dependent: \$3.12
- **Coverage:**
 - Annual Exam (every 12 months): \$20 copay
 - Lenses & Frames or Contacts (every 24 months): \$120 allowance
- **Laser Vision Correction** discount up to 15%

Section 125 – Flexible Spending Account

- Option to withhold pre-tax money from your paycheck for health and dependent care expenses
 - Flexible Spending Account
 - Dependent Care Spending Account

Life & Disability Insurance

- **Eligibility:** First day of the month following 30 calendar days of employment
- **Life Insurance** (no cost to employee)
 - \$10,000 basic life and \$10,000 AD&D
- **Supplemental Term Life** (cost is based on coverage amount and risk factors)
 - Coverage up to five times annual salary
 - Spousal coverage maximum is the amount selected for self
 - Dependent children coverage maximum is \$10,000
- **Short Term Disability** (cost is based on salary and weekly benefit elected)
 - Weekly Benefit Options: \$100 / \$200 / \$300
 - Payable for as long as medically necessary up to 13 weeks
- **Long Term Disability** (cost is based on salary and risk factors)
 - Benefit is 60% of monthly salary and starts 90 days after becoming disabled
 - Payable until age 65, at which point the benefits will be paid at a reduced rate

Retirement / 401(k)

- **Eligibility:** First day of the month following 180 calendar days of employment
- **Administrator:** American Funds
- **Employer Match:** Dollar for dollar up to 4% of pay
- **Vesting:** Immediately 100% vested in all contributions and employer match
- **Options:** Traditional 401(k) and Roth 401(k)

Paid Time Off (PTO)

- Paid time off is used to address the myriad of reasons that arise throughout the year such as vacation, illness, and other personal obligations that might arise (accrual rate is based on tenure at Applied Underwriters; outlined below)

<u>Length of Service</u>	<u>Monthly Accrual</u>	<u>Annual Accrual</u>
0-23 months	6.66 hours	10 days
24-59 months	10.00 hours	15 days
60+ months	13.33 hours	20 days

- Bereavement Leave: refer to employee handbook for details

Paid Holidays

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day
- Floating Holiday

Tuition Reimbursement

- Reimbursement up to \$2,500 per calendar year for education related expenses

Fitness Club Membership

- Reimbursement up to \$20 per month for fitness club dues

Cell Phone Discount

- Corporate discount for Sprint mobile phone plans