# **Employee Benefits**



July 1, 2023 – June 30, 2024

# AES offers a rich and comprehensive employee benefits package

New employees are eligible for coverage on the 1st of the month following 60 days of employment.

Existing employees will be glad to know that we are NOT increasing the payroll deductions for your health insurance coverage. However, we are changing our health insurance to Blue Cross effective July 1, 2023, as staying with United Healthcare would have resulted in a large increase to your payroll deductions.

- Blue Cross will offer 4 plans that are comparable to our 4 plans with United Healthcare, with all plans being PPO No Referral plans with a large network of participating healthcare providers throughout the United States and Puerto Rico
- We will automatically move your coverage with United Healthcare into the comparable health plan with Blue Cross effective July 1, but you can view and change your coverage in our employee benefit portal if you want to. Again, by making this change to Blue Cross your biweekly payroll deductions for your health insurance coverage will remain the exact same as it is today, no increase!
- We will continue to offer all of our existing other insurance options. There is a small 3% increase to the United dental insurance options, the first increase since July 1, 2018!

We will be holding a 'passive' open enrollment for ALL of our benefits which means if you do nothing, then your current benefits will continue 'as is' on July 1 2023, including your FSA and Dependent Care elections.

If you wish to make a plan change or add or delete a dependent, then you must make that change in the benefit portal. As a reminder, all enrollment transactions must be made in our benefit portal.

Benefit portal access: You can log in to your benefit portal via our Paylocity payroll portal or via below link.

## https://www.employeenavigator.com/benefits/account/login

(You can reset your password if needed. If you need to recover your Benefit Portal User ID, then use this Company Identifier: PAT001-AES001)

The following information will provide a highlight of your benefit options and your biweekly payroll deductions. You can view details in the separate benefit packet and in your benefit portal.

# Benefit Options – effective 7/1/2023:

- Health insurance from Independence Blue Cross: 4 options with prescription coverage
  - Members must use the Independence Blue Cross Personal Choice network in Southeastern Pennsylvania and the Blue Cross Blue Shield National Blue Card PPO network throughout the United States and Puerto Rico to get in-network coverage
  - On or after July 1, please create a member account at <a href="https://www.ibx.com/login">https://www.ibx.com/login</a> for benefit details, participating provider search, mail order prescriptions and much more
  - Blue Cross offers great member value added programs. For example, you can earn a \$300 e-gift card by completing simple healthy life style tasks. See detailed benefit packet.

- Dental and Vision insurance from United Healthcare: 2 dental options and 1 vision option
  - o Please create a member account at www.myuhc.com on or after July 1 if you have not already done so.

## • Employer Paid Life Insurance, AD&D, Short Term Disability (STD) and Long-Term Disability (LTD):

- 100% paid by AES
- Life insurance 1 X your annual income up to a max of \$250,000
- o STD 60% up to \$2,000 per week
- o LTD 60% up to \$5,000 per month
- Note: Our disability package includes an Employee Assistance program for difficult times. Call 1-877-660-3806 or visit <u>www.liveandworkwell.com</u> and enter anonymously using access code FP3EAP

#### Additional Voluntary Life Insurance from United for you, your spouse and child(ren)

o There is no rate increase unless you move into the next 5 year age band as of 7/1/2023

#### Accident and Critical Illness insurance from Allstate:

- Think Aflac but better coverage at lower rates)
- Reimbursement for an accident or an unexpected critical illness is something to consider. Accident
  insurance is guaranteed issue. Critical illness application might require a questionnaire and is subject to
  denial due to pre-existing conditions.
- o Accident video link: <a href="https://allstatevoluntary.com/videos/mayhem.htm">https://allstatevoluntary.com/videos/mayhem.htm</a>
- o Critical Illness video link: <a href="https://www.allstatevoluntary.com/videos/criticalillness.htm">https://www.allstatevoluntary.com/videos/criticalillness.htm</a>

## • Prepaid Legal and ID theft protection from LegalShield:

- o Need legal help? Have you ever had your identity stolen? Consider this valuable protection
- o Once enrolled, activate your account at <a href="https://accounts.legalshield.com/">https://accounts.legalshield.com/</a>
- Main websites for informational purpose www.legalshield.com & www.IDShield.com
- LegalShield Member Services at 1-800-654-7757 / IDShield Member Services at 1-888-494-8519

## • Pet Insurance from Nationwide:

- Veterinarian bills can be expensive consider coverage for your pets. New enrollment must be done via below special AES enrollment link and please note the links might take some time to load.
- o Enrollment link: <a href="https://poi8.petinsurance.com/benefits/aes-clean-technology-inc">https://poi8.petinsurance.com/benefits/aes-clean-technology-inc</a>
  - Note: Rates vary by State and new enrollment must be done via above enrollment link
- Enrollment video: https://www.petinsurance.com/grpwebinarpr975
- Why pet insurance video: https://www.petinsurance.com/petinsurancevideo
- How does pet insurance work: 2023 PUG How Does My Plan Work Video

## Flexible Spending Account (FSA) and Dependent Care Account (DCA) from Isolved:

- Put money aside tax free via payroll to pay for Medical, Dental, Vision and Dependent care expenses, using tax free money. FSA & DCA plan year runs from July 1 to June 30 to coincide with our medical plan year
- 2023 FSA max election is \$3,050 and DCA max election is \$5,000
- Maximum rollover of existing FSA balance is \$610. Any amount above \$610 on 7/1/2023 will be forfeited per IRS rules. Members can spend available FSA money at the <a href="www.fsastore.com">www.fsastore.com</a> as one option to reduce the FSA balance. There is no rollover of DCA balances so please seek appropriate reimbursement prior to 7/1/23
- o FSA and DCA benefits are freestanding and do not require you to be enrolled with health insurance

Medical - Independence Blue Cross	Option 1 - Blue Cross PPO 4000 90%	Option 2 - Blue Cross PPO 20 40	Option 3 - Blue Cross PPO 1500	Option 4 - Blue Cross PPO 2500	
Office Copay - PCP / Specialist - (no referral needed)	\$30 / \$60	\$20 / \$40	\$20 / \$40	\$30 / \$60	
Urgent Care / Emergency Room	\$100 / \$400	\$85 / \$250	\$85 / \$400	\$100 / \$400	
Routine Preventive care - per health care reform law	\$0	\$0	\$0	\$0	
Deductible - for Surgery, Hospitalization, Ambulance, Chemo, DME, Dialysis, Hospice - (per member/per family)	\$4,000 / \$8,000	\$0 - no deductible	\$1,500 / \$3,000	\$2,500 / \$5,000	
Hospital coverage	90%, after deductible	\$250/Day; max of 5 copays per admission - No deductible	100%, after deductible	100%, after deductible	
Outpatient Surgery	\$300 + 10% co-insurance for physician services, after deductible	\$250 - No deductible	\$250, after deductible	\$300, after deductible	
Lab Testing	\$60 if free standing facility / \$120 if hospital based	\$0 if free standing facility / \$80 if hospital based	\$40 if free standing facility / \$80 if hospital based	\$60 if free standing facility / \$120 if hospital based	
X-ray/EKG	\$60	\$40	\$40	\$60	
Major Diagnostic and Imaging (MRI, CT, Pet Scan)	\$200	\$80	\$80	\$200	
Physical/Occupational Therapy	\$60, 30 visits per year	\$40, 30 visits per year	\$40, 30 visits per year	\$60, 30 visits per year	
Pharmacy Prescription	\$3/20/40/60, 2x for 90 day mail order supply	\$3/20/40/60, 2x for 90 day mail order supply	\$3/20/40/60, 2x for 90 day mail order supply	\$3/20/40/60, 2x for 90 day mail order supply	
Self-Administered Specialty Drugs	50 % up to \$500	50 % up to \$500	50 % up to \$500	50 % up to \$500	
Biotech/Specialty Injectables (covered under Medical, not Rx plan)	Home/Office \$150, Outpatient \$300	Home/Office \$100, Outpatient \$200	Home/Office \$100, Outpatient \$200	Home/Office \$150, Outpatient \$300	
In Network Out-of-Pocket Maximum (per member/per family)	\$7,900 / \$15,800	\$7,900 / \$15,800	\$7,900 / \$15,800	\$7,900 / \$15,800	
Out of Network coverage and deductible (per member/per family)	\$6,000 / \$12,000 deductible then 50% coverage to \$12,000 / \$24,000 out of pocket maximum	\$2,500 / \$5,000 deductible then 50% coverage to \$10,000 / \$20,000 out of pocket maximum	\$5,000 / \$10,000 deductible then 50% coverage to \$10,000 / \$20,000 out of pocket maximum	\$5,000 / \$10,000 deductible then 50% coverage to \$10,000 / \$20,000 out of pocket maximum	
Payroll deductions - 7/1/2023 - No Changes!	Biweekly payroll deduction	Biweekly payroll deduction	Biweekly payroll deduction	Biweekly payroll deduction	
Employee	\$9.49	\$105.87	\$94.21	\$63.68	
Employee + Spouse	\$142.21	\$344.61	\$320.14	\$256.02	
Employee + Child(ren) to age 26	\$133.02	\$316.14	\$294.00	\$235.99	
Employee + Family	\$216.21	\$505.35	\$470.39	\$378.80	

Blue Cross Provider Network - (www.ibx.com)

Members must use the Independence Blue Cross Personal Choice network in South Eastern Pennsylvania area and the Blue Cross Blue Shield National Blue Card PPO network throughout the United States and Puerto Rico to get in-network coverage. Out of network providers may balance bill above and beyond insurance carrier allowance for any given service. Please create a member account at www.ibx.com on or after July 1, 2023

Medical benefits run contract year, 7/1/2023 to 6/30/2024.



Dental - United Healthcare	- I	Option 01 - Low Option, PPO \$1,000 - No Ortho		Option 02 - High Option, PPO \$5,000 - with Ortho		
Benefits - with participating providers	In N	In Network		In Network		
Preventive/Diagnostic Services	1	100%		100%		
Basic Services	5	60%	80%			
Major Services	5	60%	50	50%		
Deductible - Per Member / Family	\$50/\$150 (waived f	or preventive services)	\$50/\$150 (waived for preventive services)			
Annual maximum per member	\$1,000 per	\$1,000 per calendar year		\$5,000 per calendar year		
Ortho - Children and Adults	Not 0	Not Covered		Covered at 50% to \$1,000 max lifetime		
	Out of Netw	Out of Network Allowance		Out of Network		
Benefits - with non-participating providers	United internal Maxi	United internal Maximum Allowable Charge		90th percentile of Usual and Customary Charges		
Payroll deductions - 3% increase (1st increase since	Biweekly pa	Biweekly payroll deduction		Biweekly payroll deduction		
7/1/2018)*	Current	7/1/2023	Current	7/1/2023		
Employee	\$10.53	\$10.85	\$17.79	\$18.33		
Employee + Spouse	\$21.03	\$21.67	\$35.57	\$36.64		
Employee + Child(ren) to age 26	\$23.32	\$24.02	\$39.42	\$40.61		
Employee + Family	\$31.66	\$32.62	\$53.55	\$55.16		

#### Notes:

United no longer issues dental ID cards. If you want a new dental ID card please download and print a dental ID card from www.myuhc.com

You can see any dentist of your choice but out of network providers can balance bill above and beyond the carrier allowance

Dental rates renew on 7/1/2023 but actual Dental plan benefits are calendar year based - This is the norm with dental plans

Vision - United Healthcare	Option 1	Option 1 - V1028		
Benefit Frequency in network	Once Every	12 months		
In-Network / Out of Network	In-network	Out-of-Network		
Eye exam	\$0	\$40 allowance		
Frames	\$130 allowance	\$45 allowance		
Lenses	\$0 for most types	\$80 allowance		
Disposable Contacts	Up to 4 boxes free	\$105 allowance		
Other contacts	\$105 allowance	\$105 allowance		
Payroll Deductions - No Changes!	Biweekly pay	roll deduction		
Employee	\$3.	90		
Employee + Spouse	\$7.	38		
Employee + Child(ren) to age 26	\$7.	74		
Employee + Family	\$11	\$11.34		

#### Notes:

United does not use Vision ID cards. Members use their name and date of birth to obtain vision services at the provider's office

Vision plans are plan year based - 7/1/23 to 6/30/2024



Life/AD&D/STD/LTD - United	Employer Paid		
Life insurance	1 X Salary (\$250,000 max)		
Accidental Death & Dismemberment	Matches life insurance amount		
Short Term Disability - (STD)	60% of income up to \$2,000 max per week		
STD Elimination period	14 days		
STD Benefit duration max	166 days		
Long Term Disability - (LTD)	60% up to \$5,000 max per month		
LTD Elimination period	180 days		
LTD Benefit duration max	To normal social security retirement age		
	Biweekly Payroll Deduction		
	\$0 - AES pays 100% of the Life/AD&D/STD/LTD premium		

Notes:
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AES pays for life and disability insurance to help pay monthly expenses in case you pass away or become disabled

Voluntary Life insurance - United	Option 1	
Employee	Up to 5 X Salary (\$1,000,000 max) - Increments of \$10,000	
Spouse	\$50,000 maximum benefits - Increments of \$5,000	
Child	\$10,000 per child	
Guaranteed Issue	EE/\$100k - SP/\$25k -Additional amount subject to Health Questionnaire	
	Biweekly Payroll Deduction	

Additional life insurance - Your family can pay off debt and have money for future expenses

Your AES employee benefit portal will auto calculate payroll deductions for supplemental voluntary life insurance coverage but you can manually calculate payroll deductions as follows:

Select desired life insurance amount, i.e. \$100,000

Divide that amount by 1000 and multiply that amount by your age-band rate, then multiply by 12 months and divide by 26 to calculate biweekly payroll deduction

Example: \$100,000/1000 = 100 \* .16 = \$16 \* 12 = \$192 / 26 = \$7.38 per biweekly pay

Voluntary supplemental life insurance rates by age band - Rate Per \$1,000 life insurance			
0 – 24	\$0.09	50 – 54	\$0.40
25 – 29	\$0.09	55 – 59	\$0.68
30 – 34	\$0.09	60 – 64	\$0.92
35 – 39	\$0.11	65 – 69	\$1.70
40 – 44	\$0.16	70 – 74	\$3.80
45 – 49	\$0.23	75 and over	\$17.00

No Rate change unless you are now in a higher 5-year age band

Refer to United rate charts and age bands for payroll calculation

Monthly premium is therefore \$2 whether you cover 1 child or 2 or more children



A current member may increase coverage level by one increment without providing evidence of good health.

Any existing employee who previously did not select supplemental life insurance when first eligible must provide evidence of good health.

<sup>\*</sup>Rate per child unit, regardless how many children are covered: \$.02 per \$1,000.

Accident Insurance - Allstate	
Inpatient Hospital Confinement	\$1,000
Daily Hospital Confinement	\$200
Emergency Room	\$200
Dislocation	\$120 to \$4,000
Fracture	\$280 to \$4,000
Payroll Deductions	Biweekly Payroll Deduction - No Changes!
Employee	\$4.20
Employee + Spouse	\$7.26
Employee + Child(ren) to age 26	\$11.36
Employee + Family	\$14.32

#### Notes:

Accident insurance will help you pay for medical bills

		Biv	veekly Pa	ayroll Dedu	ıction - No	Changes!	
Allstate Critical Illness Insurance		ISSUE AGE PREMIUMS					
				EE/EE+CH		_	
Heart Attack	\$20,000	PLAN 1	AGE	Non-T	obacco	Tob	acco
Heart Attack	₹20,000	BI-WEEKLY	18-29	\$3.28	\$5.20	\$4.14	\$6.50
Stroke	\$20,000		30-39	\$7.12	\$10.96	\$9.96	\$15.22
	4		40-49	\$14.38	\$21.84	\$22.16	\$33.52
Invasive Cancer	\$20,000		50-59	\$25.54	\$38.58	\$40.00	\$60.30
Carcinoma	\$5,000		60-64	\$34.72	\$52.38	\$54.98	\$82.74
Carcillottia	75,000		65+	\$54.96	\$82.72	\$85.26	\$128.16
Coronary Artery Bypass Surgery	\$5,000			EE + CH = Emp	oloyee + Child	ren); and F = F	amily

Critical insurance will help you pay for medical bills

Refer to Allstate benefit documents for Accident and Critical Illness Insurance coverage

Prepaid Legal & ID Theft	Biweekly Payroll Deduction - No Changes!		
Not available to Puerto Rico Residents	Refer to Legal Shield rate charts		
Nationwide Pet Insurance	Payroll Deductions		
Not available to Puerto Rico Residents	Refer to Nationwide Pet Website link. Rates vary by State.		

Reduced cost when in need of a lawyer and full restoration of stolen identity

Veterinarian bills quickly add up



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