

Eligibility & Enrollment

- Full time working at least 30 hours a week Full benefit offerings
- Part time working 20-29 hours a week Dental, Vision and EAP
- Part time working 19 hours or less a week EAP only

You may enroll your legal spouse/domestic partner and children. Your enrollment choices remain in effect through the end of the benefits plan year, January 1, 2024 – December 31, 2024. New hires are eligible on the first of the month following 30 days of continuous employment.

HDHP HSA

PPO \$1,000

Medical

All eligible employees are offered medical coverage insured by Cigna.

Plan Highlights	PPO \$3,000	Qualified Plan \$3,200	(Narrow or Broad)
	In-network Only	In-network	In-network
Savings Account El	igibility		
	FSA	HSA	FSA
Annual Calendar Ye	ear Deductible		
Individual	\$3,000	\$3,200	\$1,000
Family	\$6,000	\$6,400	\$3,000
Maximum Calenda	r Year Out-of-pocket		
Individual	\$5,500	\$6,400	\$4,000
Family	\$11,000	\$12,800	\$8,000
Professional Service	es		
Primary Care Physician	\$25 copay	0% after deductible	\$25 copay
Specialist	\$60 copay	0% after deductible	\$50 copay
Retail Prescription	Drugs (30-day supply)		
Tier 1/2/3	\$20/\$30/\$60	\$15/\$50/\$75*	\$15/\$50/\$75
Specialty	\$80	\$80*	\$80

^{*}after deductible

Telehealth Services

With MDLive for Cigna, you can connect with leading board-certified physicians for many non-emergency illnesses through the phone or video chat. You can avoid emergency rooms and urgent care centers and quickly refill your prescriptions so you can get back on your feet in no time.

Health Savings Account (HSA)

A Health Savings Account (HSA) with Lively accumulates funds that can be used to pay current and future health care costs. You may be eligible to open an HSA if you enroll in the OAP \$3,200 plan. For additional information, visit www.irs.gov.

2024 Contribution Limits:

- Individual: \$4,150
- Family: \$8,300

DAP Health will match HSA contributions up to \$700 annually.

Flexible Spending Accounts (FSA)

A flexible spending account with Lively lets you use pre-tax dollars to cover eligible health care expenses.

FSA Types	Detail
Health Care FSA Limited Purpose FSA	 Can reimburse for eligible health care expenses not covered by your medical, dental and vision insurance. Projected Maximum contribution for 2024 is \$3,050. Limited Purpose FSA can be used in conjunction with an HSA for qualified dental and vision expenses only.

Dental

Dental coverage is offered by Cigna as a Dental Health Maintenance Organization (DHMO) or a Dental Preferred Provider Organization (PPO) plan.

Plan Highlights	DHMO	Base DPP0	Buy-Up DPP0
	In-network Only	In-network	In-network
Calendar Year Deduc	ctible		
Individual / Family	None	\$50/\$150	\$50 / \$150
Calendar Year Maximum	None	\$1,250	\$5,000
Preventive	Scheduled Benefit	0% no deductible	0% no deductible
Basic Services	Scheduled Benefit	20% after ded.	20% after ded.
Major Services	Scheduled Benefit	50% after ded.	50% after ded.
Orthodontia Services	Scheduled Benefit	Covered at 50% up to \$1,500	Covered at 50% up to \$1,500

Vision

Vision is offered by Cigna as a Preferred Provider Organization (PPO) plan.

Plan Highlights

Cigna Vision PPO

	In-Network (Insight)	
Exam - Every 12 months	\$10 copay	
Lenses - Every 12 months		
Single	\$25 Copay	
Bifocal	\$25 Copay	
Trifocal	\$25 Copay	
Frames - Every 12 months	\$130 allowance	
Contacts - Every 12 months, in lieu of lens	ses	
Medically Necessary	Covered in full	
Elective	\$130 allowance	

Critical Illness Coverage

Critical Illness coverage offered on a voluntary basis through Cigna pays you a lump sum benefit if you are diagnosed with a covered illness or condition. All benefits are paid directly to you and you may use the funds as you see fit.

What are examples of covered illnesses or conditions?

Cancer / Heart Attack / Stroke / Kidney Failure / Major Organ Failure

Hospital Protection

Hospital Insurance offered on a voluntary basis through Cigna pays out cash to offset both medical and non-medical bills resulting from a hospital stay.

Here are a few examples:

Copayments / Deductibles / Transportation / Lodging / Lost income

Accident Insurance Plan

Accident Insurance offered on a voluntary basis through Cigna provides coverage for specific injuries and treatments resulting from a covered accident. The amount of the benefit paid depends on the type of injury and care received.

What are some common covered benefits?

Doctor visits / Surgery / Outpatient therapy / Diagnostic imaging

Basic Life and AD&D

Paid for in full by DAP, Basic Life and AD&D Insurance of \$25,000 is provided through Mutual of Omaha.

Voluntary Life and AD&D

Supplemental Life insurance is available for purchase on a payroll deduction basis through Mutual of Omaha.

- For employees: Increments of \$10,000 up to the lesser of 5x annual salary or \$500,000 with a guarantee issue benefit of \$150,000.
- For your spouse (up to age 70): Increments of \$5,000 up to \$250,000 maximum with a guarantee issue benefit of \$30,000.
- For your child(ren): 6 months old up to age 26 \$2,000 increments up to \$10,000

Short Term Disability (STD)

Administered by Mutual of Omaha, STD coverage provides a benefit equal to 66.67% of your earnings, up to \$1,850 per week for a period up to 17 weeks. The plan begins paying these benefits after you have been absent from work for 60 consecutive days.

Long Term Disability (LTD)

If your disability extends beyond 180 days, the LTD coverage through Mutual of Omaha can replace 66.67% of your earnings, up to maximum of \$8,000 per month. Your benefits may continue to be paid until you reach social security normal retirement age as long as you meet the definition of disability.

Employee Assistance Program (EAP)

Through the EAP, you have access to resources, information, and counseling for matters like legal, financial and mental health counseling, that are fully confidential and no cost to you. Contact People Operations for more information regarding our EAP Programs.

Cost Summary

	Employee Per Pay Period	
PPO \$3,000	Zimptoyee i ei i ay i ei ioa	
Employee Only	\$14.13	
Employee and Spouse/DP	\$155.37	
Employee and Child(ren)	\$42.38	
Employee and Family/DP	\$218.93	
HDHP \$3,200		
Employee Only	\$0.00	
Employee and Spouse/DP	\$97.55	
Employee and Child(ren)	\$39.91	
Employee and Family/DP	\$206.20	
PPO \$1,000 Narrow		
Employee Only	\$17.16	
Employee and Spouse/DP	\$140.65	
Employee and Child(ren)	\$31.75	
Employee and Family/DP	\$239.19	
PPO \$1,000 Broad		
Employee Only	\$24.14	
Employee and Spouse/DP	\$159.29	
Employee and Child(ren)	\$43.44	
Employee and Family/DP	\$261.86	
DHMO		
Employee Only	\$5.35	
Employee and Spouse/DP	\$9.47	
Employee and Child(ren)	\$12.36	
Employee and Family/DP	\$18.00	
Base DPPO		
Employee Only	\$19.12	
Employee and Spouse/DP	\$37.96	
Employee and Child(ren)	\$45.50	
Employee and Family/DP	\$69.22	
Buy-Up DPPO		
Employee Only	\$22.21	
Employee and Spouse/DP	\$44.14	
Employee and Child(ren)	\$50.67	
Employee and Family/DP	\$77.87	
Vision PPO		
Employee Only	\$3.19	
Employee and Spouse/DP	\$6.36	
Employee and Child(ren)	\$6.43	
Employee and Family/DP	\$10.25	