

# Gerber Collision & Glass Benefit Package



## 2015 - 2016 Gerber Collision & Glass Benefits

The benefits offered by Gerber Collision & Glass are designed to provide a comprehensive benefits package for you and your eligible dependents.

For the 2015/2016 benefit plan year we are pleased to offer new plan designs for our employees. We have partnered up with our benefit broker to offer our employees more choices when it comes to your health care coverage. The plans are designed in a metallic theme from bronze to platinum. Giving you, the employee, the flexibility to choose the coverage that makes sense for you and your family.

#### **Eligibility**

All full-time employees working 30+ hours per week are eligible to participate in our health and welfare plans on the **first of the month following thirty (30) days** of employment.

#### **Eligible Dependents**

For most benefits, eligible employees may elect to cover their legal spouse, if not legally separated, and dependent children (unmarried or married) up to age 26.

### **Making Changes To Your Benefit Elections**

Due to IRS regulations, once you make your elections for 2015, you <u>cannot</u> change your elections until we hold our next annual enrollment period or you have a qualifying event or change in family status. The following are examples of qualifying events.

- Birth or adoption of a child
- Marriage, legal separation or divorce
- Employment status change for you or your spouse
- Change in a dependent's benefits eligibility status
- Change of residence location causing a loss of eligibility
- Loss of a dependent



## **MEDICAL PLANS**

Good health starts with making smart choices like staying active and eating right. You also need medical coverage that meets your needs. That's why, this year, we are giving you flexibility to choose the medical coverage that makes sense for you.

## Things to Consider when selecting a medical plan.

- Don't choose a medical plan based on premiums alone. Take into account out-of-pocket costs (such as deductibles, coinsurance, and copays) for medical care and prescription drugs.
- Medical plans with lower premiums (the amount deducted from your paycheck for medical coverage)
  usually have higher out-of-pocket costs. Medical plans with higher premiums usually have lower
  out-of-pocket costs.
- Are you aware of, or anticipating any specific medical needs or expenses in the coming year?

UMR will continue to be our medical provider. We will also continue to use the <u>UnitedHealthCare PPO</u> network of doctors. To find an in-network doctor, go to <u>www.myuhc.com</u>.



## **MEDICAL PLAN DESIGNS**

	Bronze Alt	Bronze+	Silver Alt 1	Gold	Platinum
Deductible (single/family) medical	#4 F00 / #0 000	<b>#0.000./#4.000</b>	\$750 / \$1,500	\$600 / \$1,200	none
Deductible (single/family) Rx	\$4,500 / \$9,000	\$2,000 / \$4,000	none	none	none
Coinsurance	20%	20%	30% 10%		0%
Copayments					
Primary Care / Specialist	20%	20%	\$30 / \$50, no ded	\$20 / \$35, no ded	\$20 / \$35
Emergency Room	20%	20%	\$150 + ded/coins	0 + ded/coins 10%	
Hospital per Admission	20%	20%	\$250 + ded/coins	10%	\$250
Rx Generic (retail / mail)	20%	20%	\$10 / \$25	\$5 / \$12	\$4 / \$10
Rx Formulary Brand (retail / mail)	20%	20%	\$40 / \$100	20% (\$50 / \$125 max)	\$20 / \$50
Rx Non-Formulary Brand (retail / mail)	20%	20%	\$60 / \$150	40% (\$100 / \$250 max)	\$40 / \$100
Out-of-Pocket Max (all services & Rx)	\$5,950 / \$11,900	\$5,000 / \$10,000	\$5,000 / \$10,000	\$3,000 / \$6,000	\$1,500 / \$3,000
Other notes	HSA-eligible; true family ded	HSA-eligible; true family ded	Traditional P P O; embedded ded	Traditional P P O; embedded ded	PPO / HMO



# **Supplemental Insurance Plans**

### **Critical Illness**

Critical illness insurance provides a lump sum payment if you're diagnosed with a covered medical condition. Covered medical conditions include heart attack, stroke, cancer, paralysis, etc.

## **Things To Consider**

1. If you are likely to develop a medical condition based on your family's medical history, critical illness may be a good option.

## **Hospital Indemnity Plan**

Hospital indemnity insurance is a type of insurance that pays a fixed amount for each day that you are in the hospital.

\*\*See the rate sheet for rate information



# **Supplemental Insurance Plans (continued)**

### **Accident Insurance**

You never know when an accident will occur. Accident Insurance includes coverage for both on- and off-the-job accidents, which allows for 24 hour protection. Even if you have medical coverage, your plan may not sufficiently cover accidents, in which case an accident health insurance policy may be necessary. Accident insurance helps pay for emergency treatment, hospital stay expenses, medical exams, and other accident related expenses.

#### **Things To Consider**

1. If you are enrolled in a medical plan with a high deductible, accident insurance can significantly lower your out-of-pocket expenses when you haven't met the annual deductible.



# **Health Savings Account (HSA)**

An HSA is like a personal savings account you use to pay for eligible health care expenses. You MUST have the Bronze or Bronze Plus medical plan to use an HSA.

### **Things To Consider:**

- You can put money in your HSA on a before-tax basis through convenient payroll deductions
- Unlike a health care flexible spending account, the money you put into a HSA rolls over from year to year. You will not lose money you do not spend during the plan year.
- If you are close to retiring, you can use your HSA to supplement your retirement income.

### **Limits**

The IRS puts caps on how much employees can contribute to their HSA account each year. For 2015 the max amount if you have Employee Only coverage is **\$3,350**. If you have Family coverage the max amount is **\$6.650**.



## **HEALTH CARE FLEXIBLE SPENDING ACCOUNTS**

Health Care FSA is like a savings account you use to pay for eligible health care expenses not covered by insurance. You contribute to your Health Care FSA with money from your paycheck on a before tax basis.

## **Things To Consider:**

- 1. Carefully estimate your health care expenses. You will <u>lose</u> any unused money in your account at the end of the plan year. Plan year runs April 1st through March 31st. Your FSA balance or your FSA elections <u>DO NOT</u> roll over from year to year. You must use your balance by the end of the plan year or you will lose it. If you wish to continue your FSA elections each year, you must enroll during open enrollment each year.
- 2. The amount you choose to contribute is available for you to spend starting April 1, 2015. This means if you elect to contribute \$1,000 to your Health Care FSA, you can get reimbursed for \$1,000 even though you have only contributed a portion of that amount.
- 3. If you have a Health Care FSA and a health savings account, your FSA can only be used to cover eligible dental and vision expenses.
- 4. You'll be required to submit your receipts for eligible expenses in order to be reimbursed.
- 5. You may elect to have a debit card to pay for eligible medical expenses. Be sure to complete the required FSA Debit Card Enrollment Form.

### **Limits**

You may contribute up to \$2,550 per plan year into a Health Care FSA.



# **Dependent Care Flexible Spending Account**

A Dependent Care FSA is an account you use for eligible daycare expenses. You contribute to your Dependent Care FSA with payroll deductions that are taken out before taxes.

### **Things To Consider:**

- 1. What you contribute to your Dependent Care FSA does not rollover each year. You must spend all the money in your account by the end of the plan year or you will lose it.
- 2. You can only use as much as you have contributed. So if you have only had \$100 withheld from your checks, you can only be reimbursed for \$100.
- 3. Eligible expenses include licensed daycare providers, before and after school care or summer day camp programs.

### **Limits**

The maximum amount you can contribute to your Dependent Care FSA is \$5,000 per plan year if you are married and you file a joint income tax return. *Or* up to \$2,500 if you are married and file a separate income tax return.



## **DENTAL PLANS**

Regular dental visits do more than brighten your smile, they're important to your overall health. Dental coverage makes getting dental care easy and affordable. Whether you need major dental work or just routine check-ups--we have an option that's right for you.

## Things to consider when selecting a dental plan:

- If you and your family only see a dentist for preventive cleanings, a dental plan with low premiums may be all you need. You don't want to pay for coverage you don't need.
- Do you or any of your dependents need orthodontia care?
- Do any of your dependents have special dental needs?

Delta Dental of Minnesota is our Dental Carrier. To locate an in-network dentist, please visit <a href="https://www.deltadentalmn.org">www.deltadentalmn.org</a> or call 800-448-3815.



# **Dental Plan Designs**

	Bronze	Silver	Gold	
Deductible (Single / Family)	\$100 / \$300	\$100 / \$300	\$50 / \$150	
Annual Maximum	\$1,000	\$1,500	\$2,000	
Diagnostic/Preventive	100%	100%	100%	
Basic Services	80%	80%	80%	
Major Services	No coverage	60%	80%	
Orthodontia	No coverage	50%	50%	
Ortho Lifetime Maximum	NA	\$1,500	\$2,000	

<sup>\*\*</sup>See the rate sheet for rate information



# **Vision Insurance Plan Designs**

Starting April 1, 2015, Vision care benefits will be provided through **EyeMed**. EyeMed provides a large network of in-network providers nationwide.

	Bronze	Silver	Gold
Exam	No coverage	\$20 copay \$10 cop	
Frames	35% off retail	\$100 allowance	\$200 allowance
Lenses	\$50 / \$70 copay	\$20 copay \$10 copa	
Contact Lenses	15% off retail	\$100 allowance \$200 allowa	
Frequency	12 months	12 months	12 months

To locate an in-network provider, please visit <u>www.eyemed.com</u>. Click on "Find a Provider" in the upper right side of the screen. Enter your Zip Code. Under Select Network, select <u>Insight Network</u>.

\*\*See the rate sheet for rate information



## **Short Term Disability**

What would happen if you became disabled and couldn't work? Without a paycheck, paying for everyday expenses like rent and groceries eat away at your savings. Short-term disability (STD) insurance provides you a source of income when you can not work due to a temporary disability. Our Short-term disability insurance plan pays 60% of an employee's weekly earnings while you are unable to work.

### **Things To Consider**

- Short-term disability provides income if you become unable to work due to an illness or injury. It also covers if an immediate family member (spouse, child, or parent) becomes sick and you need to care for them.
- Short-term disability pay for up to 26 weeks off the job
- There is a 7 day elimination period before the plan pays for time

## **Long Term Disability**

Long-term disability (LTD) insurance provides a source of income should you remain disabled for more than 180 days due to accidental injury or illness. This benefit pays you 60% of your pre-disability earnings up to \$10,000 per month.

\*\*See rate sheet for rate information



## Life Insurance

### **Company-Paid Life Insurance**

All full-time employees are provided a \$25,000 Basic Life & Accidental Death and Dismemberment (AD&D) plan at no cost to you.

### **Supplemental Term Life Insurance**

Employees and their dependents may also elect additional life insurance coverage on a guaranteed issue basis (no medical questions required). When you are initially eligible, you can elect up to the following amounts of coverage:

- Up to the lesser 7 times your salary or \$200,000 on yourself (The Employee)
- Up to \$30,000 for your spouse
- Up to \$10,000 for your dependent children.

Additional amounts are available and are subject to medical underwriting. Medical underwriting also applies for any coverage applied for after your initial eligibility period.

Supplemental Life Insurance can only be purchased in increments of \$10,000 of coverage.

Both Life Insurance policies are portable and can be converted into individual policies.

\*\*See rate sheet for rate information



# Life Insurance (continued)

## **Maximum Coverage Amounts**

- \$500,000 for employee coverage
- Spouse life is available up to half of what you elect for yourself. \*\*You must elect Supplemental Life Insurance for yourself to select Spouse Life
- Child Life is available up to \$10,000

Supplemental Life Insurance can only be purchased in increments of \$10,000 of coverage.

Both Life Insurance policies are portable and can be converted into individual policies.



# **How To Enroll**

When you are ready to make your benefit elections, please make sure you have all your dependent information including dates of births and full social security numbers.

Website to enroll: http://boydgroup.tbs.aon.com

**Username:** The employee's full social security number (with no dashes)

Password: TheBest2015

\*\*After you login for the first time you will be prompted to change this default password.

If you are having technical issues, please call: **1-877-343-2424**. They will be able to assist with any login or website issues. They will NOT be able to provide answers to plan or carrier information.



# 401(k)

Gerber offers a 401(k) plan to help you save for retirement. Employees can contribute to their 401(k) on both a before and/or after tax basis.

#### **Eligibility**

- Employees are eligible to participate in the 401(k) plan after they have been employed for **90 days**.
- Employees must be age 20 to participate

#### **Enrollment**

Employees can enroll in the 401(k) at anytime after they are eligible. There is <u>no open enrollment period for the 401k</u>, this gives the employees the flexibility to start and stop contributions at anytime. To enroll in the 401k, visit <u>www.benefits.ml.com</u> and create a login using your social security number. Or call Merrill Lynch directly at 800-229-9040.

#### **Company Match**

Gerber may make a matching contribution equal to 25% of the first 6% of compensation that you contribute up to a maximum annual benefit of \$1,350.00.

#### **Vesting Schedule**

Employees are always 100% vested in the contributions that you contribute and any rollover contributions. Employers contributions are vested at the following schedule:

Years of Se	rvice:	1 year		2 years	3 years	4 years	5 years	6 years
		0%	20%		40%		60%	
	80%		100%					



## **Carrier Contact Information**

<u>Plan Provider</u> <u>Phone Number</u>

Medical - UMR (800) 826-9781

www.umr.com

Website

Dental - Delta Dental of (800) 448-3815

www.deltadentalmn.org

Minnesota

Vision - EyeMed (866) 800-5457

www.eyemed.com

Flexible Spending Accounts (800) 826-9781 ext. 2189

www.umr.com

STD, LTD and Supplemental Claim inquiries (800) 858-6843

www.unum.com/employees

Life - Unum STD claim intake (866)224-9402

Supplement Insurance Plans -

**TransAmerica** 



# Still have questions regarding the benefit plans?

There is a dedicated Gerber Collision & Glass HR Associate just a phone call away that can assist you. You can contact The Boyd Care Line at **855-471-4372**.