2024 BENEFITS















UNDERSTANDING YOUR BENEFITS

We understand the important role benefits play in the lives of you and your family. **Most benefits renew on January 1** (unless otherwise noted) and continue through December 31.

As a new hire and then annually during open enrollment October/November, you have an opportunity to make changes to your benefits package to ensure you and your family have the right coverage.

This benefits guide is an important tool to familiarize you with your benefit options. As you prepare to enroll:

- Consider your benefit coverage needs for the upcoming year.
- Consider other available coverage.
- Gather information you'll need. If you are covering a spouse or dependents, you will need their dates of birth and Social Security numbers.

Getting the most value from your benefits depends on how well you understand your plans and how you choose to make them work for your personal situation.

Be sure to read this entire guide for important information about your benefit options.

TABLE OF CONTENTS

3 Enrollment Path

4 Benefit Basics

6 Medical Plan

12 Medical Plan Resources

15 Dental Plan

16 Vision Plan

17 Retirement Plan

19 Life Insurance and Disability

20 Flexible Spending Account

21 Health Savings Account

22 PET Insurance

23 Supplemental Plans

24 Paid Time Off & Holidays

25 Employee Assistance Program

26 Wellness Program

27 Additional Benefits

28 Contact Information

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UNDERSTANDING YOUR BENEFITS

During your first week of employment, a member of the Compass Health benefits team will reach out to you to provide information regarding our benefit plans, videos to watch, eligibility and access to EverythingBenefits, our enrollment system. This is important as it outlines your path to enrollment.

As a new employee, you will receive an email from EverythingBenefits (EB) with your login information and a direct link during your second week of employment. If you have any trouble receiving information from EB, please contact a member of the benefits team.



Take the time to review the plan information available and ask questions.

Login to EB and select the benefits you want. Reference the New Employee Guide that was sent to you during your first week of employment. Be prepared to provide dependents' and beneficiaries':

- Full name(s)
- Date(s) of birth
- Social Security numbers

NOTE: Your plan may require you to complete an Evidence of Insurability (EOI) during the enrollment process. If this is the case, a member of the benefits team will reach out to you.

Save and/or submit your elections once the enrollment is complete. "Saving" will only save your elections for later. "Submitting" the enrollment by signing the forms will send the information to the benefits team. You will be given an option to print the final confirmation summary for your records.

ompass Health

401k Enrollment

Employees will make adjustments to their contribution level and investment options online via their personal account with The Standard. You cannot create an account until <u>AFTER</u> you have been paid the first time.

Once you have received your first check, we recommend waiting two days before attempting to create your account to make your selections. 401k specific information can be found on pages 17 & 18 of this guide.

BENEFIT BASICS

Your 2024 benefits are effective between January 1 through December 31.

(As a new employee, your eligibility date is based on your hire date.)



Making Changes During the Plan Year

Generally, you may only make or change your existing benefit elections as a new hire or during the annual open enrollment period.

However, you may change your benefit elections during the year if you experience a *qualifying life event* such as:

- Marriage, divorce, or legal separation
- Birth or adoption of a child
- Loss or gain of other coverage by the employee or dependent

Covering Yourself and Your Family

You are eligible for benefits if you work at least 30 hours per week. Most benefits are effective the first day of the month following 30 days of full-time employment. If your employment ends or you reduce your hours to part-time, your benefits will terminate at the end of the month following your last day of employment/change in status.

The following dependents are also eligible for our plans:

- Your legal spouse
- Your children up to age 26 (children with disabilities may be covered past the age of 26)

Updates To Coverages

If you do not make the changes within 31 days of the qualifying event, you will have to wait until the next open enrollment period to make changes (unless you experience another qualifying life event).

NOTE: Our benefits are treated separately as far as individuals covered. You do not have to cover someone on all plans in order to cover them on a specific plan. An example of this is if you want to add your spouse to the dental and vision, you are not required to also add your spouse to the medical.



BENEFIT COSTS

Compass Health Network pays the full cost of some of your benefits. For others you share the cost, or you pay the full cost if you elect voluntary benefit options. Pre-tax means the cost comes out of your pay before taxes are deducted. After-tax means the cost is deducted

BENEFIT	FUNDED BY	TAX TREATMENT
Medical and Pharmacy	Compass & Employee	Pre-tax
Dental	Employee	Pre-tax
Vision	Employee	Pre-tax
Basic Life/Accidental Death & Dismemberment Insurance *	Compass	N/A
Voluntary Life/Accidental Death & Dismemberment Insurance	Employee	After-tax
Short-term Disability *	Compass	N/A
Voluntary Short-term Disability	Employee	After-tax
Long-term Disability *	Compass	N/A
Flexible Spending Account	Employee	Pre-tax
Health Savings Account	Employee	Pre-tax
401(k)	Compass & Employee	Both

^{*}Note: The employer-provided basic life coverage, short-term and long-term disability benefits are effective after the wait period has been satisfied.



MEDICAL PLAN OVERVIEW

Blue Cross Blue Shield—Blue KC

We offer the choice of three (3) medical plans through BCBS Blue KC. All medical plan options include coverage for prescription drugs. To select the plan that best suits your family, you should consider the key differences between the plans, the cost of coverage (including payroll deductions), and how the plan covers services throughout the year.

Understanding How Your Plan Works

COVERAGE BASICS

Under our health plans, once your deductible is met, you will cost-share with the plan (coinsurance) until you reach the out-of-pocket maximum. Once you reach your out-of-pocket maximum, you will be covered in full for the remainder of the plan year with the exception of providers and facilities that are out-of-network. Copays do not count toward your deductible but do count toward your out-of-pocket maximum.

MAKING THE MOST OF YOUR PLAN

Getting the most out of your plan also depends on how well you understand it. Keep these important tips in mind when you use your plan:

- In-network providers and pharmacies: You will always pay less if you see a provider within the medical and pharmacy network.
- Preventive care: In-network preventive care is covered at 100%. Preventive care is often received during an annual physical exam and includes immunizations, lab tests, screenings, and other services intended to prevent illness or detect problems before you notice any symptoms.

PHARMACY COVERAGE

Medications are placed in categories based on drug cost, safety, and effectiveness. These tiers also affect your coverage.

- Generic A drug that offers equivalent uses, doses, strength, quality and performance as a brand-name drug but is not trademarked.
- Brand preferred A drug with a patent and trademark name that is considered "preferred" because it is appropriate to use for medical purposes and is usually less expensive than other brand-name options.
- Brand non-preferred A drug with a patent and trademark name. This type of drug is "not preferred" and is usually more expensive than alternative

- generic and preferred-brand drugs.
- Specialty A drug that requires special handling, administration, or monitoring. Most can only be filled by a specialty pharmacy and have additional required approvals.
- Mail order pharmacy If you take a maintenance medication on an ongoing basis for a condition like high cholesterol or high blood pressure, you can use the mail order pharmacy to receive it at your home



MEDICAL PREMIUM PLAN

	Premium Plan- \$1,000	Premium Plan- \$1,000
PLAN PROVISIONS	IN-NETWORK	OUT-OF-NETWORK
Deductible - Individual	\$1,000	\$3,000
Deductible - Family	\$3,000	\$9,000
Out-of-Pocket Maximum – Individual	\$9,450	\$28,350
Out-of-Pocket Maximum – Family	\$18,900	\$56,700
Amount you pay (you must meet your deductib	le before coinsurance applie	s)
Primary Care Physician Office Visit	\$25 Copay	40% Coinsurance
Specialist Care Physician Office Visit	\$50 Copay	40% Coinsurance
Preventive Care	No Charge	40% Coinsurance
Urgent Care	\$50 Copay	40% Coinsurance
Emergency Room	\$100 Copay /visit then 20% Coinsurance	\$100 Copay /visit then 20% Coinsurance
Diagnostic Tests & Imaging	20% Coinsurance	40% Coinsurance
Chiropractic (limit of 26 services per plan year)	\$50 Copay	40% Coinsurance
Outpatient Therapy	20% Coinsurance	40% Coinsurance
Durable Medical Equipment	20% Coinsurance	40% Coinsurance
Hospice Services (14 day lifetime max)	20% Coinsurance	40% Coinsurance
Inpatient Stay	20% Coinsurance	40% Coinsurance
Outpatient Surgery	20% Coinsurance	40% Coinsurance
Mental Health & Substance Use Outpatient Services	\$25 Copay/visit	40% Coinsurance
Mental Health & Substance Use Inpatient Services	20% Coinsurance	40% Coinsurance



MEDICAL BUY-UP PLAN

	Buy-Up Plan- \$2,500	Buy-Up Plan- \$2,500
PLAN PROVISIONS	IN-NETWORK	OUT-OF-NETWORK
Deductible - Individual	\$2,500	\$7,500
Deductible - Family	\$7,500	\$15,000
Out-of-Pocket Maximum – Individual	\$7,000	\$21,000
Out-of-Pocket Maximum – Family	\$14,000	\$42,000
Amount you pay (you must meet your deductible l	pefore coinsurance applies)
Primary Care Physician Office Visit	\$25 Copay	30% Coinsurance
Specialist Care Physician Office Visit	\$50 Copay	30% Coinsurance
Preventive Care	No Charge	30% Coinsurance
Urgent Care	\$50 Copay	30% Coinsurance
Emergency Room	\$100 Copay /visit then 10% Coinsurance	\$100 Copay /visit then 10% Coinsurance
Diagnostic Tests & Imaging	10% Coinsurance	30% Coinsurance
Chiropractic (limit of 26 services per plan year)	\$50 Copay	30% Coinsurance
Outpatient Therapy	10% Coinsurance	30% Coinsurance
Durable Medical Equipment	10% Coinsurance	30% Coinsurance
Hospice Services (14 day lifetime max)	10% Coinsurance	30% Coinsurance
Inpatient Stay	10% Coinsurance	30% Coinsurance
Outpatient Surgery	10% Coinsurance	30% Coinsurance
Mental Health & Substance Use Outpatient Services	\$25 Copay/visit	30% Coinsurance
Mental Health & Substance Use Inpatient Services	10% Coinsurance	30% Coinsurance



PHARMACY BENEFIT

with Optum—Premium & Buy-Up plans

Pharmacy	In Network	Out of Network
Deductible		
Individual	\$300	\$300
Family	\$600	\$600
Retail (Pharmacy deductible must be me	et prior to copay being	g available)
Tier 1 - Generic Drugs	\$25	\$25 copay + 50% Coinsurance
Tier 2 - Brand Preferred Drugs	\$50	\$50 copay + 50% Coinsurance
Tier 3 - Brand Non-Preferred Drugs	\$75	\$75 copay + 50% Coinsurance
Tier 4– Specialty Drugs	\$150	\$150 copay + 50% Coinsurance
Mail Order - 102-Day Supply		
Tier 1 - Generic Drugs	\$75	\$75 copay + 50% Coinsurance
Tier 2 - Brand Preferred Drugs	\$150	\$150 copay + 50% Coinsurance
Tier 3 - Brand Non-Preferred Drugs	\$225	\$225 copay + 50% Coinsurance



MEDICAL HDHP

(HIGH DEDUCTIBLE HEALTH PLAN)

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	HDHP Plan - \$4,000	HDHP Plan - \$4,000	
PLAN PROVISIONS	IN-NETWORK	OUT-OF-NETWORK	
Deductible - Individual	\$4,000	\$8,000	
Deductible - Family	\$8,000	\$16,000	
Out-of-Pocket Maximum – Individual	\$7,000	\$21,000	
Out-of-Pocket Maximum – Family	\$14,000	\$42,000	
Amount you pay (deductible must be met before	e the coinsurance appli	es)	
Primary Care Physician Office Visit	20% Coinsurance	40% Coinsurance	
Specialist Care Physician Office Visit	20% Coinsurance	40% Coinsurance	
Preventive Care	100% coverage	40% Coinsurance	
Urgent Care	20% Coinsurance	40% Coinsurance	
Emergency Room	20% Coinsurance	40% Coinsurance	
Diagnostic Tests & Imaging	20% Coinsurance	40% Coinsurance	
Chiropractic (limit of 26 services per plan year)	20% Coinsurance	40% Coinsurance	
Outpatient Therapy	20% Coinsurance	40% Coinsurance	
Durable Medical Equipment	20% Coinsurance	40% Coinsurance	
Hospice Services (14-day lifetime max)	20% Coinsurance	40% Coinsurance	
Inpatient Stay	20% Coinsurance	40% Coinsurance	
Outpatient Surgery	20% Coinsurance	40% Coinsurance	
Mental Health & Substance Use Outpatient Services	20% Coinsurance	40% Coinsurance	
Mental Health & Substance Use Inpatient Services	20% Coinsurance	40% Coinsurance	



PHARMACY BENEFIT

with Optum—High Deductible Health Plan

Pharmacy	In Network	Out of Network
Deductible		
Individual	Combined with medical deductible	Combined with medical deductible
Family	Combined with medical deductible	Combined with medical deductible
Retail (the main plan HDHP deductible m	oust be met prior to co	ppay being available)
Tier 1 - Generic Drugs	\$25	\$25 copay + 50% Coinsurance
Tier 2 - Brand Preferred Drugs	\$50	\$50 copay + 50% Coinsurance
Tier 3 - Brand Non-Preferred Drugs	\$75	\$75 copay + 50% Coinsurance
Tier 4– Specialty Drugs	\$150	\$150 copay + 50% Coinsurance
Mail Order - 102-Day Supply		
Tier 1 - Generic Drugs	\$75	\$75 copay + 50% Coinsurance
Tier 2 - Brand Preferred Drugs	\$150	\$150 copay + 50% Coinsurance
Tier 3 - Brand Non-Preferred Drugs	\$225	\$225 copay + 50% Coinsurance



MEDICAL PLAN RESOURCES

Find a Blue Cross In-Network Provider at www.bcbs.com. Find a doctor in the United States, enter your location, choose the Blue Card PPO/EPO plan, and then search for a provider by name, location, or specialty.

Blue KC is available to help you manage your health care with a team of professionals that can partner with you to be your advocate and help you make the best use of your medical plan.

24/7 NurseLine

Get instant access to registered nurses who can answer questions, provide guidance, and help you access the health resources available to you. Need health care right away? A nurse can help you decide where to go if your doctor isn't available. Going to the right place can save you time and money.

Healthy Companion Program

Offers support for chronic health conditions such as Asthma, COPD, Depression, Diabetes, Heart Disease, Heart Failure, High Blood Pressure, Metabolic Syndrome, Stress and Anxiety. Call 1-816-395-2076 or email HealthyCompanion@BlueKC.com to get started.

Livongo/Solera

Diabetes management and prevention programs.

A HEALTHIER YOU

Personalized online and mobile wellness program through Blue KC for Blue KC members only.

Blue KC Virtual Care

Doctors available 24/7 *free of charge* via telehealth for common medical issues.

Mindful by Blue KC

Wellbeing resources to include counseling sessions, work-life services and family referral and caregiving services.

Prescription Home Delivery-Optum

Maintenance prescriptions drugs can be sent directly to your home in 102-day supplies.

MORE INFORMATION ONLINE AT BLUEKC.COM

24/7 Nurse Line: 1-877-852-5422

Blue KC Customer Service: 1-816-395-3558 or www.bluekc.com

Blue KC Virtual Care: Go to Amwell.com or download the Blue KC Virtual Care mobile app

Prescription Drug List: Login to your account at MyBlueKC.com.



TOBACCO-FREE INCENTIVE

Compass Health Network encourages an environment free of tobacco on our campuses. Employees who are tobacco-free and enrolled in a medical insurance plan will receive a tobacco-free incentive. This incentive will be a reduction in your health insurance premium.

If you are using tobacco, we want to help you become tobacco-free by offering tools to aid you in the process of kicking the habit. Employees who complete our new tobacco cessation program will be eligible for the incentive as long as the program is completed within the required timeframe.

Incentive Program

Complete the Better and Better with Balance Tobacco Cessation e-Learning series. This is an interactive online tool available through our wellness program.



Other resources available to you

Compass will reimburse you for tobacco cessation products twice in your employment up to \$100 each occurrence.

Blue KC will provide members behavioral interventions and approved pharmacotherapy products. This will include two tobacco cessation attempts per year for a 90-day treatment regimen when prescribed by an in-network health care provider. Does not require prior authorization.



MEDICAL PLAN BI-WEEKLY RATES

Standard

PLAN LEVEL	Premium Plan	Buy-Up Plan	HDHP
Employee Only	\$185.62	\$116.17	\$11.54
Employee + Spouse	\$604.49	\$438.03	\$151.24
Employee + Children	\$400.27	\$288.97	\$53.85
Family	\$843.11	\$619.94	\$205.08

Tobacco-Free

Plan Level	Premium Plan	Buy-Up Plan	HDHP
Employee Only	\$175.23	\$105.78	FREE
Employee + Spouse	\$592.95	\$426.49	\$139.70
Employee + Children	\$388.73	\$277.44	\$42.31
Family	\$831.57	\$608.40	\$193.54



DENTAL PLAN

Standard Insurance Company/Ameritas Network

Search for a provider at http://www.standard.com/dental, click on Find a Dentist, choose Classic (PPO) and Plus.

Low Plan	High Plan
\$50	\$50
\$1,750- \$2,950	\$1,750- \$2,950
N/A	\$1,000
100%	100%
80%	80%
N/A	50%
N/A	50%/\$1,000 maximum
	\$50 \$1,750- \$2,950 N/A 100% 80% N/A

Max-Builder Option

This option allows you and your dependents to build annual benefit maximums from year to year. To do so, you must file at least one dental claim per plan year and not exceed the annual threshold. The annual benefit threshold is \$750 for our plans. With this feature, you can potentially build your annual maximum from \$1,750 to \$2,950.

Bi-Weekly Rates		
	Low Plan	High Plan
Employee	\$9.47	\$13.24
Employee + 1 Child	\$16.79	\$23.48
Employee + Spouse	\$16.79	\$23.48
Employee + Children	\$29.30	\$37.89
Family	\$29.30	\$37.89



VISION PLAN

Standard Insurance Company VSP Network

Getting your eyes checked every year can help maintain your vision and identify the early signs of certain health conditions, including diabetes. Providers can be located at www.vsp.com.

PLAN PROVISIONS	VISION SERVICE PLAN (VSP)
Exam	\$20 copay
Frequency Exam	Every 12 months
Lenses	Every 12 months
Contacts	Every 12 months
Frames	Every 24 months
Frames Coverage	Plan covers up to \$130
Lenses Coverage	Plan covers up to \$130

Bi-Weekly Rates		
Employee	\$3.25	
Employee + Spouse	\$5.75	
Employee + Children	\$6.12	
Employee + Family	\$9.00	



401K RETIREMENT PLAN

The Standard Retirement Services

Eligibility is the first of the month following one (1) month of service

- » Pre-tax and Roth options
- » 2-year vesting schedule on the employer match
- » Maximum contributions for 2024 are \$23,000 for employees under 50 and \$30,500 for employees 50 and older.
- » Compass Health matches dollar-fordollar up to <u>6%</u> of your bi-weekly gross income, and your employee contributions/rollover contributions are immediately 100% vested.

ACCESSING YOUR RETIREMENT ACCOUNT IS EASY!

Create an online account at www.standard.com/retirement

Here you can view resources, print important information, modify your investments, and work with professionals to help meet your goals. Employees must make their savings and investment elections online. Beneficiary forms are completed in Kronos.



401K RETIREMENT PLAN

Need help on how much to invest and how much to contribute?

Mainspring Managed is here to help! Investment advisors at The Standard can work with you to create a personalized, goal-based savings and investment plan.

Contact an investment advisor representative at:

1-800-858-5420

- Employees are auto-enrolled with a 3% contribution unless you opt out of the plan.
- Auto-escalation of 1% occurs every year thereafter until 6% is reached.
- Note: If you are a rehire, you will need to go out to your account

"If I want to contribute a different amount than the auto enrollment of 3% or want to waive the 401k, what do I need to do?"

To do this, you will have to create your personal account on www.standard.com/retirement. After this is complete, you can change your contribution amount or waive the opportunity to participate.



LIFE INSURANCE AND DISABILITY

New York Life

Life insurance is an important part of your financial wellbeing, especially if others depend on you for support. We provide basic life and AD&D insurance, short-term disability and long-term disability for employees at no charge after the wait period is satisfied. Voluntary coverages are available for purchase; this includes life insurance options for employees, spouses, and dependent children and a short-term disability plan.

VOLUNTARY LIFE and AD&D INSURANCE

You may choose to purchase additional life and AD&D coverage at affordable group rates. Rates are based on age and the coverage level chosen. For amounts over the guaranteed-issue amount, you will need to complete the Evidence of Insurability form if you have not previously done so.

	Guaranteed Issue	Maximum
Employee	\$230,000	\$500,000
Spouse	\$50,000	\$100,000

Coverage for children can be purchased at \$1,000/\$5,000/\$10,000/\$20,000 levels.

VOLUNTARY SHORT-TERM DISABILITY INSURANCE

Disability insurance provides income replacement should you become disabled and unable to work due to a non-work-related illness or injury.

You have the ability to purchase disability coverage when you first become eligible for benefits. This bridges the gap between initial eligibility and employer-provided coverage after one year of employment. Rates are based on your average weekly earnings and age. The benefit is 70% of average weekly earnings.

BASIC LIFE and AD&D INSURANCE

Compass provides basic life and accidental death and dismemberment insurance to eligible employees **at no cost**. The benefit is equal to <u>one times your base annual earnings</u> (rounded to the next thousand), <u>up to a maximum of \$450,000</u>. Coverage is automatic; you do not need to enroll, but each employee should name at least one beneficiary.

STD & LTD INSURANCE FOR YOU

Compass provides team members a STD and LTD policy, **free of charge**, after the required wait period (365 days of full-time employment) is satisfied. Coverage begins the first of the following month.



FLEXIBLE SPENDING ACCOUNTS

Further

A flexible spending account (FSA) enables you to take home a larger paycheck by reducing your taxable income. If you take advantage of this benefit, you will contribute tax-free dollars into an account you can use throughout the year for qualified expenses. This benefit is available to employees working 20 hours or more per week.

We offer two (2) different types of plans through FURTHER: dependent daycare and unreimbursed medical expenses. Visit hellofurther.com for more info.

<u>Unreimbursed Medical</u> administered by Further.

Covers general purpose health expenses for medical, dental and vision care.

Maximum contribution is \$3,200



Dependent Care Expenses administered by Further.

Account is used for daycare expenses for children up to age 13 or a disabled spouse or dependent of any age. Maximum contribution is \$5,000 or \$2,500 depending on your tax filing status.

Plan Year: January 1, 2024 through December 31, 2024.

If you are eligible for benefits after January 1, 2024, your plan year is your eligibility date through December 31, 2024. Your expenses must fall within the dates you are eligible for the plan.

FURTHER will provide a debit card that allows you to pay at the time of service when you are at your providers or pharmacy. These expenses are deducted automatically from your available account balance and then paid directly to the provider. Dependent daycare participants will not receive a debit card but can use the app or website to submit for reimbursement.



HEALTH SAVINGS ACCOUNT

Further

A health savings account (HSA) is a tax-advantaged savings account that you can use for medical expenses. It is paired with a qualifying high deductible health plan (HDHP). A high deductible health plan offers lower monthly premiums in exchange for a higher deductible. Compass Health employees who are interested in the HSA account must also enroll in the Blue Cross High Deductible Health Plan. Visit hellofurther.com for more info.

IMPORTANT: You cannot participate in the Compass HSA plan if you are not enrolled in the Compass HDHP plan.

An HSA works like an individual retirement account (IRA) that you own. The HSA belongs to you and the money is yours to keep, even if you change jobs or retire. You don't pay any taxes on the money you put in or take out, as long as you use it for medical expenses as defined by the IRS.

It is your responsibility to ensure you are using the monies in your HSA for eligible expenses. Further has a wealth of information for you to review at www.hellofurther.com/learn.

You can enroll in an HSA if you are:

- ⇒ Enrolled in the Compass Health High-Deductible Health Plan (HDHP)
- ⇒ Cannot be claimed as a dependent on someone else's taxes
- ⇒ Are not enrolled in a external health plan other than a HDHP
- Are not enrolled in Medicare

HSA Contrik	HSA Contribution Limits 2024 Limits		
Single	\$4,150		
Family	\$8,300		
Catch Up	\$1,000		
(age 55+)	71,000		

Did you know?

If you enroll in the HSA, you cannot also enroll in a full FSA. You can enroll in a limited FSA that can only be used for dental and vision expenses that you are not claiming under your HSA expenses.



PET INSURANCE

Nationwide

Protecting your four-legged family members in an uncertain world isn't always easy.

Nationwide® pet insurance helps you provide for your pets—and protect your pocketbook—by reimbursing you for eligible veterinary bills related to accidents, illnesses, preventive care and more. Available to employees working 20 hours or more per week.

- Effective date of coverage depends on when the employee enrolls a new pet.
- Pre-existing conditions are excluded and will not be covered on any plans.
- Multiple pet discount
- Policy changes or cancellations must be made by the employee directly

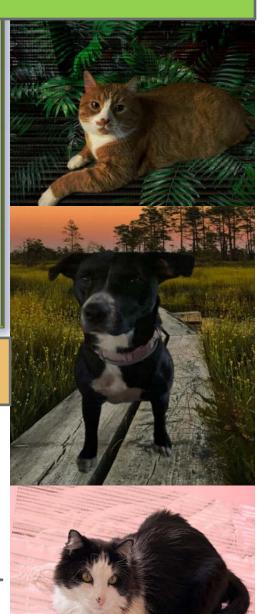
Benefit Details Overview:

https://www.petinsurance.com/resourcecenter/

Quote/enroll for cats and/or dogs: Visit https://

benefits.petinsurance.com/
compasshealthnetwork or
PetsNationwide.com and enter
company name (Compass Health
Inc), or by calling 877-738-7874.

Quote/enroll for birds or exotic pets, call 877-738-7874.





Supplemental Plans

Sun Life

Supplemental coverages can be purchased for yourself, your spouse, and your children. The plans have been upgraded and offer enriched benefits.

This is a voluntary plan; benefits are payable directly to you.

Accident Helps to protect your finances after an accident. The plan pays cash for covered accidents and treatments. Plan offers a wellness screening benefit after having an eligible health screening.

<u>Cancer</u> Insurance pays cash benefits if you were to receive a cancer diagnosis. Benefits are payable directly to you. Plan offers a wellness screening benefit after having an eligible health screening.

<u>Critical Illness</u> Coverage provides a cash benefit when you or a dependent is diagnosed with a covered condition, like a heart attack or stroke. Plan offers a wellness screening benefit after having an eligible health screening.

Note: Your annual Compass health fair results may be submitted for the wellness screening benefit under each supplemental plan.



PAID TIME OFF AND PAID HOLIDAYS

Position Levels 1-7	Hrs/Hire	Earned Monthly	Earned Annually	Maximum Accrual
0-1 years	12	.875 day	12 days	192 hours
1-2 years		1.25 days	15 days	228 hours
2-5 years		1.50 days	18 days	264 hours
5-10 years		1.75 days	21 days	300 hours
Over 10 years		2.25 days	27 days	372hours

Position Levels 8 & Up	Hrs/Hire	Earned Monthly	Earned Annually	Maximum Accrual
0-1 years	48	1.0 days	18 days	264 hours
1-2		1.50 days	18 days	264 hours
2-5		1.75 days	21 days	300 hours
5-10		2.00 days	24 days	330 hours
10+		2.25 days	27 days	372 hours

EMPLOYEE PAID HOLIDAYS		
New Year's Day	Thanksgiving Day	
Martin Luther King Jr. Day	Friday after Thanksgiving*	
Memorial Day	*ROH has additional Personal Holiday instead	
Independence Day	Christmas Eve	
Labor Day Christmas Day		
	Personal Holiday	



EMPLOYEE ASSISTANCE PROGRAM

Alternatives EAP

Life can present complex challenges. As a Compass employee, you have access to resources to support you at no cost. Contacting Alternatives is easy, call them at 1-800-466-8282 and provide the access code of 8282. You can also visit them at www.MyLlfeExpert.com, enter our company name (COMPASS HEALTH) and access code of CompassHea to view online resources available. Up to 6 visits per event per year is available for employees and family members.

Employee Assistance Program (EAP)

24/7 unlimited confidential assistance for personal matters you are experiencing. Resources are available for counseling via phone, video messaging, text, or in person. Under this program, you and your dependents have up to six visits with a counselor per event, per year.

Confidential Personal Counseling

Short-term counseling is available to you and your eligible dependents through licensed counselors in your area. This covers a wide scope of issues, including: Family, parenting and relationship concerns, improving communication and self esteem, stress, anxiety, depression, alcohol, substance abuse,



Legal Advice and Discounts

Confidential legal consults are available at no charge. If you are in of need legal representation, a 25% customer fee reduction is available.

- Divorce and Family Law
- Consumer and Bankruptcy Issues
- Landlord and Tenant Disputes
- Wills and Estate Planning

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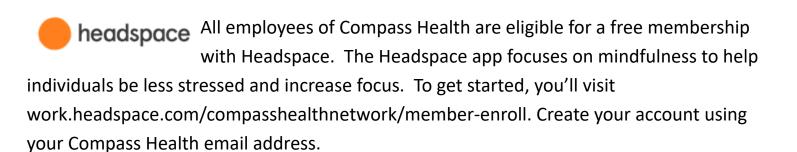
BETTER & BETTER WITH BALANCE

YOUR WELLNESS PLAN

The Better and Better with Balance program is a comprehensive wellness program designed to help you optimize your wellness goals. The program offers many tools to help you track your eating habits, fitness, sleep, and more! As a participant, you earn incentives by completing a health risk assessment, challenges, and e-learning series over many health topics, like heart health, smoking cessation, and mental well-being.



Compass Health Network also provides an annual health fair to all employees. During the health fair, you receive a finger stick cholesterol screening, which provides a reading for total cholesterol, HDL, LDL, Triglycerides, and glucose levels. You will also be screened for blood pressure, BMI, and body fat. You are eligible to receive a free flu shot at your health fair screening appointment or during walk-in hours.





These resources are available at no cost through an online portal and mobile application. The program is not tied to health insurance premiums. Successful participants may be eligible for prizes and an annual wellness incentive of up to \$200!

Contact <u>Amber Setzer</u> for more information.



ADDITIONAL BENEFITS OFFERED

<u>Family Medical Leave Act (FMLA)</u>- If you have been employed with Compass for 12 months, you may be eligible for up to 12 work weeks of unpaid leave per year under the Family and Medical Leave Act (FMLA). FMLA can be used for an illness of your own, care needed for a member, care for a newborn, and other medical needs. If you do not qualify for FMLA, you may qualify for an LOA. Contact <u>leave@compasshn.org</u> for more information.

<u>VESSA</u>- Employees who are Victims of Domestic or Sexual Violence or have a family or household member who is a victim of domestic or sexual violence, may take unpaid leave from work to address such violence. Employees are entitled to take up to two work weeks of unpaid leave in a 12 month period. The leave may be taken intermittently or on a reduced work schedule.

<u>Bereavement Leave</u>- Full-time employees are given up to three (3) days paid leave for immediate family members. Please see the bereavement policy in PowerDMS to view eligible immediate family members.

<u>Tuition Reimbursement</u>- Provides reimbursement to you as you pursue qualifying higher learning. Repayment up to a maximum of \$2,000 per year for selected staff after 6 months of employment. Additional tuition scholarship opportunities up to \$5,000 per year available after 3 months of employment for select graduate level programs. Contact <u>Amber Setzer</u> for more information.

<u>Mileage Reimbursement</u>- Reimbursement rates are evaluated each quarter based on the average gas price in your region.

<u>Licensure Assistance</u>- Compass provides funding for supervision hours and examination/ licensure fees in exchange for a signed licensure agreement, agreeing to two (2) years of post-licensure employment. This is for full-time employees newly applying for professional licensure. The licensure supervisor must be an employee of Compass Health Network. *Contact HR to start the process.* Compass also pays for any licensure renewal fees applicable to your position.

CONTACT INFORMATION

Additional benefits information can be found on SharePoint. <u>Click Here</u> to view the SharePoint page

PLAN	PROVIDER	PHONE NUMBER	WEBSITE
Medical and Pharmacy	Blue Cross Blue Shield Blue KC	1-844-343-1505	www.bluekc.com
Dental	Standard Insurance Company	1-800-547-9515	www.standard.com/ dental
Vision	Standard Insurance Company	1-800-877-7195	www.vsp.com
FSA- Medical Expenses & Dependent Daycare	Further	1-800-859-2144	www.hellofurther.com
Health Savings Account	Further	1-800-859-2144	www.hellofurther.com
Life insurance	fe insurance New York Life		Claims.Pghlif2 @newyorklife.com
Disability New York Life		1-888-842-4462	myNYLGBS.com
401K	The Standard Retirement Services	1-800-858-5420	www.standard.com/ retirement
Supplemental Plans	Sun Life	1-877-820-5306	N/A



WHAT NOW?

In addition to this guide, we have placed information in our benefits enrollment system, EverythingBenefits and in the Benefits section on SharePoint. You can access numerous flyers, plan guides, highlights, rate sheets and benefits videos. This information is available to you to review so you can make the best selections for you and any family members you will be covering. The benefits videos are meant to provide you detailed information on each benefit that we offer. After reviewing this information, don't hesitate to reach out with any questions.



Questions? Contact your Benefits Team @employeebenefits@compasshn.org

Debby drodriguez@compasshn.org Rodriguez		660-351-3868
Kelsy Warlen	kwarlen@compasshn.org	636-775-3458
Mattie Wickham	mwickham@compasshn.org	660-864-9623

If you have any feedback about our benefits or ideas for benefits not currently provided, please share those with our team. We are always happy to hear your thoughts!

