Ready for whatever's down the line.



2023
Benefits
Enrollment
Guide

Group Limited Indemnity
Short Term Disability
Term Life and AD&D
Dental and Vision

Open Enrollment Period:
October 31 – November 18, 2022



Program Overview

Elara Caring values the contributions of our employees. In appreciation of your dedicated service, we are pleased to offer a benefits program. Please carefully review this enrollment guide so you understand your benefit options and can choose the benefits that meet your needs.

About The Coverages

Group Limited Indemnity Insurance (available for employee, spouse and children)

Helps cover cost of certain medical expenses (such as inpatient hospitalization, surgery, doctor's office visits, testing, etc.) at a specific benefit amount for a set number of days per year.

Insurance is underwritten by Beazley Insurance Company, Inc., 30 Batterson Park Road, Farmington, Connecticut, 06032. Packaged with non-insurance services (provider network, telehealth services and prescription savings) not offered or underwritten by Beazley.

Short Term Disability Insurance (available for employee only)

Provides salary replacement if you are unable to work, due to a disabling illness/injury that occurs off the job. Includes a weekly benefit amount for a set number of weeks.

Insurance is underwritten by Beazley Insurance Company, Inc., 30 Batterson Park Road, Farmington, Connecticut, 06032.

Term Life and Accidental Death & Dismemberment (available for employee, spouse and children)

Term Life helps replace income and cover expenses in the event of premature death of a family member. AD&D provides 24-hour coverage for a critical or fatal accidental injury that may occur on or off the job. The benefits is payable in a lump sum, based on the loss incurred.

Term Life insurance is underwritten by Amalgamated Life Insurance Company, 333 Westchester Avenue, White Plains, NY 10604. AD&D Insurance is underwritten by Beazley Insurance Company, Inc., 30 Batterson Park Road, Farmington, Connecticut, 06032.

Dental and Vision Insurance (available for employees and family)

Dental insurance provides a benefit amount for routine dental exams, as well as basic and major dental care. Vision insurance provides benefit amounts for eye exams, eye glass frames, and corrective and contact lens.

Dental and Vision insurance is underwritten by Ameritas Life Insurance Corp, 5900 O Street, PO Box 81889, Lincoln, NE 68501

How To Enroll

The Open Enrollment Period is October 31 – November 18, 2022. For your convenience, you can enroll online anytime at EnrollVB.com/Elaracaring. If you have questions:

- Call 770-709-6499, Monday Friday 9:00 am 7:00 pm ET
- Email Support@enrollvb.com

If you do not enroll in coverage now, you will not be able to enroll until the next Open Enrollment period, unless you have a Qualifying Life Event.

New Hires have 30 days from date of hire to enroll.

How To Pay Premium

Premiums for the benefits you choose will be automatically deducted from your paycheck.

MISSED PREMIUM PAYMENTS: You have 30 days from the date of your paycheck without a deduction to make a missed premium payment. If you do not pay for the missed deduction within 30 days, you will not be able to pay for that coverage period at a later date. If you missed a premium deduction and want to find out the balance due or make a payment, visit **EnrollVB.com/Elaracaring** or call **770-709-6499**.

You can pay for missed deductions online, by phone or by mail. Payment options include credit or debit card, personal check, and money order. You can also authorize an automatic payment be processed every time premium is not deducted from your paycheck.

IMPORTANT: If you setup automatic payments, you MUST contact us at 770-709-6499 to cancel the automatic payment when your employment ends. If you do not, your account will be charged for coverage and you will not receive a refund.



Ready for whatever's down the line.

Group Limited Indemnity (GLI)* Insurance Policy

You never know what's coming down the line. It could be an illness or injury that lands you in the hospital or an accident that sends you to the ER or urgent care. Group Limited Indemnity (GLI) insurance from Beazley Benefits can help keep your health expenses in line.

What is Group Limited Indemnity insurance?

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The Group Limited Indemnity insurance policy helps cover the cost of certain medical expenses (incurred due to accident or sickness), at a specific benefit amount for a limited number of days per year, when you receive covered services. You may opt for coverage for your spouse or child(ren), and you do not have to answer any medical questions to qualify for coverage.

Benefit amount/maximum

All amounts are payable per insured per day, up to a

Note: Group Limited Indemnity is NOT major medical insurance, or comprehensive health coverage.

| Group Limited Indemnity | maximum number of days per insured per year | | |
|---|---|------------------|------------------|
| Benefits and Definitions | Part Time | | |
| | Plan 1 | Plan 2 | Plan 3 |
| Inpatient hospi | talization benefi | ts | |
| Hospital Confinement For treatment in a hospital, due to sickness or injury for 23 or more continuous hours (i.e., not less than a day) Note: Maternity benefit is payable as any other illness for both mother and child. | \$300 per day | \$300 per day | \$500 per day |
| | 30 days per year | 30 days per year | 30 days per year |
| Hospital Admission Lump sum benefit for a hospital admission, due to sickness or injury Note: Admission benefit for birth of a healthy child covers mother only. Benefit is payable for newborn if admitted to ICU. | \$300 per day | \$300 per day | \$500 per day |
| | 1 day per year | 1 day per year | 1 day per year |
| Hospital Intensive Care Unit Lump sum benefit for a hospital admission, due to sickness or injury Note: Admission benefit for birth of a healthy child covers mother only. Benefit is payable for newborn if admitted to ICU. | \$600 per day | \$600 per day | \$1,000 per day |
| | 10 days per year | 10 days per year | 10 days per year |
| Surgery benefits | | | |
| Inpatient Surgery For inpatient surgery in a hospital, due to sickness or injury | \$500 per day | \$500 per day | \$1,000 per day |
| | 1 day per year | 1 day per year | 1 day per year |
| Outpatient Major Surgery For outpatient major surgery in hospital or freestanding surgery center, due to sickness or injury | \$300 per day | \$300 per day | \$500 per day |
| | 2 days per year | 2 days per year | 2 days per year |
| Outpatient Minor Surgery For minor outpatient surgery in hospital or freestanding surgery center, due to sickness or injury Note: Must be eligible CPT code | \$50 per day | \$50 per day | \$100 per day |
| | 1 day per year | 1 day per year | 1 day per year |
| Anesthesia | | | |

\$250 per day

2 days per year

Continued on Next Page

\$350 per day

2 days per year

\$250 per day

2 days per year

For general anesthesia administered by an

anesthesiologist or Certified Registered Nurse

Anesthetist Note: Not paid for Outpatient Minor Surgery

Group Limited Indemnity Benefits and Definitions (Continued)

Refer to the Master Policy and Certificate for all terms, conditions, exclusions and limitations

Benefit amount/maximum All amounts are payable per insured per day, up to a maximum number of days per insured per year **Part Time**

Plan 1 Plan 2 Plan 3 Lab, X-ray and major diagnostic testing benefits **Outpatient Diagnostic Lab** \$75 per day \$100 per day \$50 per day For lab test, ordered by a physician 3 days per year 3 days per year 3 days per year **Outpatient Diagnostic X-ray** \$50 per day \$50 per day \$75 per day For X-ray, ordered by a physician 3 days per year 3 days per year 3 days per year

| | | | , . , |
|--|--------------------|-----------------|-----------------|
| Outpatient Major Diagnostic Testing | \$100 per day | \$200 per day | \$300 per day |
| For major diagnostic testing, ordered by a physician | 3 days per year | 3 days per year | 3 days per year |
| Emergency room and physician's office/ui | gent care benefits | | |
| ER for Sickness | \$100 per day | \$100 per day | \$150 per day |
| For treatment in an ER due to sickness | 2 days per year | 2 days per year | 2 days per year |
| Physician's Office/Urgent Care | \$60 per day | \$60 per day | \$75 per day |
| For services rendered by a physician at physician's office or urgent care facility | 6 days per year | 6 days per year | 6 days per year |
| Accident Rider | | | |
| Accident Lump Sum Rider | | | |
| Pays percentage of maximum benefit amount, based on facility where treatment received: | Up to \$1,000 | Up to \$1,000 | Up to \$1,000 |
| 100% for Hospital ICU Confinement, 50% for Hospital Confinement, 15% for Treatment in | per accident | per accident | per accident |
| Emergency Room, 10% for Treatment in Urgent Care/Physician's Office. Only one benefit | 2 accidents | 2 accidents | 2 accidents |
| payable per Accident. If an Insured receives care in more than one facility for the same | per year | per year | per year |
| Accident, we will pay the highest applicable benefit. | | | |

Refer to the Master Policy and Certificate for all terms, conditions, exclusions and limitations

Non-Insurance Services

Not offered or underwritten by Beazley

| First Health Provider Network Offered by First Health Group Corp. Access to 550,000 credentialed in-network providers at 5,000 hospitals and 90,000 ancillary facilities | Included |
|--|--|
| Teladoc telehealth services Offered by Teladoc Health, inc. Access to free and unlimited phone or video consults with U.S. board-certified doctors, available 24/7/365 | Included |
| NBFSA Prescription Benefits Offered by NBFSA, a licensed third party administrator Access to savings on a variety of prescription drugs | Tier 1: \$0 Tier 2: \$10 or less Tier 3: \$25 or less Tier 4: \$50 or less |

How much does it cost?

The grid identifies the rates, based on whether you want to cover family members.

| | Weekly rates | | |
|-----------------------|--------------|---------|---------|
| Coverage type | Part Time | | |
| | Plan 1 | Plan 2 | Plan 3 |
| Employee | \$14.24 | \$15.16 | \$20.93 |
| Employee + Spouse | \$26.67 | \$28.52 | \$40.05 |
| Employee + Child(ren) | \$21.96 | \$23.44 | \$32.67 |
| Family | \$34.26 | \$36.66 | \$51.66 |

Illustrated rated include premium for the GLI insurance policy, as well as fees for member access to Non-Insurance Services (i.e., provider network, telehealth, prescription services) not offered or underwritten by Beazley.

Contact Us

Beazley Benefits

www.beazley.com/beazley-benefits

Insurance is underwritten by Beazley Insurance Company, Inc., 30 Batterson Park Road, Farmington, Connecticut, 06032. Beazley is rated A by A.M. Best. Beazley is licensed in all 50 states and the District of Columbia. CA License # 2868-8. The Group Limited Indemnity policy is offered under Policy Form Series AHGLIMM0001. Coverage is not available in all states. Benefits may vary by state. Premium will vary based on the plan chosen. A waiting period for late entrants may apply. This policy is renewable at the option of Beazley. Refer to the Master Policy and Certificate for all terms, conditions, exclusions and limitations. Beazley uses the services of third party administrators.

Globe Life And Accident Insurance Company manages and reinsures the Beazley Benefits program.





Short Term Disability Insurance Policy

You never know what's coming down the line. It could be a disabling illness or injury that puts you out of work temporarily, and you might need help replacing income to meet your financial obligations. Short Term Disability (STD) insurance from Beazley Benefits can help protect assets and keep expenses in line.

What is Short Term Disability insurance?

The Short Term Disability insurance policy provides salary replacement if you are unable to work, due to a disabling illness or injury that occurs off the job. Coverage is for a set period of time, as defined by your plan.

Plan benefits include:

- Total disability benefit: A weekly benefit amount for which you are eligible and for which premium has been paid.
- Maximum benefit period: Maximum number of weeks during which you are eligible to receive disability benefits if you are Totally Disabled.
- Elimination period: Period of time after your Effective Date of coverage, during which you are Totally Disabled, and no disability benefits are payable.
- Maximum covered percent of compensation: The maximum percent of compensation you are eligible to receive if you are Totally Disabled.

Provides coverage for off job (non-occupational related) disabilities only. Coverage terminates at age 65.

You are eligible for this coverage (regardless of your health status), and you do not have to answer any medical questions to qualify for coverage.

Note: Short Term Disability is NOT health insurance; it does not replace your medical coverage. Benefits will be discontinued when you are able to return to work, as approved by your physician. The disability benefit payable will be reduced by payments you are entitled to receive from other sources, such as the Federal Social Security program, workers compensation plans, and certain pensions. See the Certificate for a complete list.

How much does it cost?

The premium amount for Short Term Disability coverage is \$15.17 per month.

Insurance is underwritten by Beazley Insurance Company, Inc., 30 Batterson Park Road, Farmington, Connecticut, 06032. Beazley is rated A by A.M. Best. Beazley is licensed in all 50 states and the District of Columbia.

The Short Term Disability policy is offered under Policy Form Series AHDIM0001. Salary replacement is based on earned income, as defined in the policy.

Benefits may vary by state. Premium will vary based on the plan chosen. A waiting period for late entrants may apply. This policy is renewable at the option of Beazley.

Refer to the Master Policy and Certificate for all terms, conditions, exclusions and limitations. Beazley uses the services of third party administrators.

Globe Life And Accident Insurance Company manages and reinsures the Beazley Benefits program.

Benefits at a glance

- Maximum disability benefit: \$150 per week
- Maximum benefit period:26 weeks
- Elimination period:7 sickness days/7 accident days
- Maximum covered percent of compensation:
 80%

See Master Policy and Certificate for all terms, conditions, exclusions and limitations.



Group Term Life Insurance and Accidental Death & Dismemberment (AD&D) Insurance

You never know what's coming down the line. Certain insurance policies can help protect your family's income and expenses, in the event of a premature death or accidental injury.

What is Group Term Life Insurance, offered by Amalgamated Life Insurance Company?

This Group Term Life Insurance policy can help replace income and cover expenses in the event of premature death of a family member.

Note: Coverage limitation for employees and spouses (up to age 70) and for children (14 days-26 years).

Amalgamated Life Insurance Company is a leading provider of life and health insurance serving working men and women since 1943. Amalgamated Life has consistently earned the "A"(Excellent) rating from A.M. Best Company since 1975, attesting to our proven policies and procedures, adherence to the industry's highest standards, strong fiscal condition and excellent claims-paying ability. Amalgamated Life is licensed in 50 states and the District of Columbia. The information in this product sheet is in an abbreviated form only. The actual coverage and amounts are subject to all the terms, limitations and exclusions in the group policy. If the information in this product sheet differs from the Group Term Life and Accidental Death & Dismemberment Policy, the terms of the policy govern. Policy Form #ALTLP-05 or state variations. Rider Form #ALTLADDRC-XX-05 or state variations. Amalgamated Life Insurance Company, 333 Westchester Avenue, White Plains, NY 10604, www.amalgamatedlife.com 866-975-4089.

What is Accidental Death & Dismemberment Insurance, offered by Beazley Insurance Company, Inc.?

The Accidental Death & Dismemberment (AD&D) insurance policy provides employees with 24-hour coverage for a critical or fatal accidental injury that may occur on or off the job. The benefit is available to employees and their covered dependents. AD&D benefits are payable in a lump sum, based on the loss incurred (such as loss of life, dismemberment or disabling conditions).

You may opt for these coverages for your spouse or child(ren). You are eligible for this coverage (regardless of your health status), and you do not have to answer any medical questions to qualify for coverage.

Note: AD&D is NOT health insurance; it does not replace your medical coverage.

The Accidental Death & Dismemberment Insurance is underwritten by Beazley Insurance Company, Inc., 30 Batterson Park Road, Farmington, Connecticut, 06032. Beazley is rated A by A.M. Best. Beazley is licensed in all 50 states and the District of Columbia. CA License #2868-8 The Accidental Death & Dismemberment policy is offered under Policy Form Series AHPAC0001. Coverage is not available in all states. Benefits may vary by state. Premium will vary based on the plan chosen. A waiting period for late entrants may apply. This policy is renewable at the option of Beazley. Refer to the Master Policy and Certificate for all terms, conditions, exclusions and limitations. Beazley uses the services of third party administrators.

How much does it cost?

The grid identifies the premium amount for *both policies*, based on whether you want to cover family members.

Coverage typeMonthly premium amountEmployee\$9.00Employee + Spouse\$12.30Employee + Child(ren)\$11.25Family\$13.75

Benefits at a glance: Group Term Life

- Employee coverage: \$20,000 benefit
- Spouse coverage: \$5,000 benefit
- Child(ren) coverage: \$2,000 benefit

Underwritten by Amalgamated Life Insurance Company.

Not offered or underwritten by Beazley

See Master Policy and Certificate for all terms, conditions, exclusions and limitations.

Benefits at a glance: AD&D

- Employee coverage: \$20,000 benefit
- Spouse coverage: \$10,000 benefit
- Child(ren) coverage:\$5,000 benefit

Underwritten by Beazley Insurance Company, Inc.

See Master Policy and Certificate for all terms, conditions, exclusions and limitations.



Dental and Vision Insurance Policies

Dental and Vision insurance can help you stay healthy and keep your health expenses in line. You are eligible for these coverages (regardless of your health status), and you do not have to answer any medical questions to qualify.

What is Dental insurance?

Regular dental care can help you retain a healthy smile, while supporting your overall health. Dental insurance helps cover the cost of preventive, diagnostic and treatment services.

| Covered Services | Covered at |
|--|------------|
| Preventive and diagnostic services: Routine exams, cleaning, x-rays, etc. | 100% |
| Basic treatment: Restorative Amalgams and Composites, Endodontics, Periodontics, Extractions, etc. | 80% |
| Major treatment: Onlays, Crowns, Prosthodontics, etc. | 50% |

- Additional benefit: Includes a \$500 benefit that can be applied toward any covered dental care expense. Can apply \$100 of benefit toward eye care expense, as long as total payout between dental care and eye care does not exceed \$500.
- · Calendar year maximum: Up to \$500 per covered member
- · Deductible: \$20 per visit
- Waiting period: None
- Co-insurance: Covered at 100% of Maximum Allowable Charge (limits charges to what is paid per procedure on non-network claims to the same amount network dentists have agreed to charge)

To locate in-network dental providers

DENTAL

Visit: www.Ameritas.com > Find a provider > Dental > Network > Classic PPO Call: (800) 659-2223, option 3

VISION

Visit: www.Ameritas.com > Find a provider > Vision Call: (800) 877-7195

What is Vision insurance?

Regular vision exams can help you see better and retain healthy eyes. Vision insurance can help cover the cost of eye exams, eyeglass frames, and corrective and contact lenses.

Plan overview: Choose one of the two plans (either VSP Focus or EyeMED ViewPointe).

| Covered Couriese | VSP F | ocus | EyeMED ViewPointe | |
|--|--|--|---|---|
| Covered Services | In-Network | Out-of-Network | In-Network | Out-of-Network |
| Deductible | \$10 exam \$25 lenses or frames | \$10 exam \$25 lenses or frames | \$10 exam \$25 lenses | No deductible |
| Annual eye exam | Covered in full | Up to \$45 | Covered in full | Up to \$35 |
| Lenses (per pair): Single Vision Bifocal Trifocal Lenticular Progressive | Covered in full Covered in full Covered in full Covered in full See lens options | Up to \$30Up to \$55Up to \$60Up to \$100N/A | Covered in full Covered in full Covered in full Overed in full See lens options | Up to \$25Up to \$40Up to \$55No benefitN/A |
| Contacts: Fit & follow-up exam Elective Medically necessary | • 15% discount • Up to \$105 • Covered in full | No benefit Up to \$105 Up to \$210 | • Up to \$40 (10% of retail) • Up to \$130 • Covered in full | No benefit Up to \$104 Up to \$200 |
| Frames | \$130 | Up to \$70 | \$130 | Up to \$65 |

 \cdot Frequency based on date of service: 12 months for exam, 12 months for lenses, 24 months for frames

The grid identifies the premium amount, based on whether you want to cover family members.

See Master Policy and Certificate for all terms, conditions, exclusions and limitations

| Coverage type | Weekly premium amount | | |
|-----------------------|-----------------------|--------|--|
| Coverage type | Dental | Vision | |
| Employee | \$4.75 | \$2.03 | |
| Employee + Spouse | \$11.88 | \$4.00 | |
| Employee + Child(ren) | \$8.55 | \$3.72 | |
| Family | \$12.83 | \$5.70 | |