



# BENEFITS SUMMARY

## Plan Year July 1, 2023 – June 30, 2024 Premiums Per Pay Period

<b>Empire Blue Cross PPO Plan Medical Insurance</b>	<i>Per Pay Period Employee Pays (Employer Pays):</i> ✓ Employee: \$146.00 (\$ 453.66) ✓ Two-person: \$342.00 (\$ 857.33) ✓ Family: \$471.00 (\$1,183.44)	Individual/Family <i>In-Network</i> : \$0/\$0 Deductible \$2,000/\$6,000 Out of pocket Max Rx copays: \$5/\$35/\$70 Inpatient Stay: \$250; Urgent Care \$40
<b>Empire Blue Cross Low, High Deductible Plan with HRA Funding Medical Insurance</b>	<i>Per Pay Period Employee Pays (Employer Pays): (HRA)</i> ✓ Employee: \$ 74.00 (\$ 382.14) (\$1,250) ✓ Two-person: \$186.00 (\$ 726.27) (\$2,500) ✓ Family: \$256.00 (\$1,002.39) (\$2,500)	Individual/Family <i>In-Network</i> : \$2,500/\$5,000 Deductible \$5,000/\$10,000 Out of pocket Max Rx copays: \$5/\$35/\$70 after deductible Inpatient Stay/Urgent Care = Deductible & Coinsurance
<b>Empire Blue Cross High, High Deductible Plan with HRA Funding Medical Insurance</b>	<i>Per Pay Period Employee Pays (Employer Pays): (HRA)</i> ✓ Employee: \$ 66.00 (\$339.68) (\$3,175) ✓ Two-person: \$165.00 (\$646.33) (\$6,350) ✓ Family: \$228.00 (\$891.22) (\$6,350)	Individual/Family <i>In-Network</i> : \$6,350/\$12,700 Deductible \$6,350/\$12,700 Out of pocket Max Rx copays: \$0 after deductible Inpatient Stay/Urgent Care = Deductible
<b>LBS FSA – Flexible Spending Account</b>	Allows employees to make pre-tax salary deductions for un-reimbursed qualified expenses. Both options are available to you: ✓ Medical Flex Spending – up to \$3,050 for 2023 (up to \$610 rollover) ✓ Dependent/Child Care Spending Account – up to \$5,000	
<b>Guardian Dental PPO High Plan (Buy-Up)</b>	<i>Per Pay Period Employee Pays (Employer Pays):</i> ✓ Employee: \$ 7.15 (\$11.03) ✓ Two-person: \$14.23 (\$21.74) ✓ Family: \$25.48 (\$39.51)	\$50 Deductible \$2,000 Max
<b>Guardian Dental PPO Low Plan (Basic)</b>	<i>Per Pay Period Employee Pays (Employer Pays):</i> ✓ Employee: \$ 4.31 (\$10.76) ✓ Two-person: \$ 8.48 (\$21.17) ✓ Family: \$15.43 (\$38.51)	\$50 Deductible \$1,000 Max
<b>Guardian Vision</b>	<i>Per Pay Period Employee Pays:</i> ✓ Employee: \$ 2.38 ✓ Two-person: \$ 3.60 ✓ Family: \$ 6.33	<i>In and out-of-Network available</i> \$10.00 Co-pay Exams \$25.00 Co-pay Lenses \$130.00 Max Contact Lenses/Frames

<b>Guardian Group Basic Life Insurance</b>	Equal to 1 year of base salary up to a maximum of \$150,000, with a minimum of \$50,000 coverage. Company paid.
<b>Guardian Term Life &amp; AD&amp;D Voluntary Plan</b>	Rates are based on age and can be purchased in \$25,000 increments up to \$150,000. Employees less than 65 are eligible for \$100,000 without a Statement of Health; \$50,000 if between 65-69 and for 70 and older \$10,000 if the employee enrolls in the benefit at their initial new hire offering. If declined coverage at initial new hire offering or increasing coverage, coverage is dependent upon a Statement of Health. Voluntary AD&D only available if employee elects voluntary term life for self. Spouse and Child voluntary term life and AD&D benefits are available only if employee elects same benefits for self. The amount of voluntary AD&D must be the same as voluntary life.
<b>Guardian Group Long-Term Disability</b>	Group Long-Term Disability (60% of base earnings), max at \$6,000 per month (exclusive of NYS Disability) All Company Paid
<b>Guardian Voluntary Short-Term Disability</b>	Weekly benefit up to 60% of salary up to \$1,000.
<b>Guardian Voluntary Plans</b>	Allows employees to make biweekly salary deductions to the plan(s) of their choice including Accident, Critical Illness/Specified Disease, and/or Hospital plans:
<b>Accident</b>	<p><b>Accident</b> Protection insurance allows you to protect yourself financially by ensuring you are covered for specific services and care associated with an off-the-job-accident/injury.</p> <p>Employees can purchase coverage for Employee, Spouse and Dependents up to age 26. Coverage is portable and has a death benefit component. Payable benefit amount varies based on services and care received related to an accident. Please reference the Guardian booklet for a complete listing of covered services and eligible benefit amounts.</p>
<b>Critical Illness (Specified Disease)</b>	<p><b>Critical Illness</b> insurance will pay a lump sum benefit to cover what medical and disability insurance doesn't pay for – uncovered medical and non-medical expenses associated with critical illness.</p> <p>Invasive Cancer, Stroke, Health Attack, Heart Failure, Kidney and Organ Failure are the critical illnesses. Coverage can be purchased in benefit increment amounts of \$10,000, \$20,000 and \$30,000. Spouse can elect up to 100% of employee amount; child can elect up to 50% of employee amount. No pre-existing condition clause. Wellness benefit of \$50 per insured per calendar year for those that meet criteria of having eligible wellness screening from approved Guardian listing.</p> <p>Rates are age banded and vary based on the increment of coverage amount. Policy is portable.</p>
<b>Hospital Indemnity</b>	<p><b>Hospital Indemnity</b> insurance allows you to protect yourself financially by ensuring you are covered for specific services and care related to an in-patient hospitalization.</p> <p>Hospital Admission benefit of \$500 per admission, limit of two admissions per insured, per benefit year. ICU Admission benefit of \$1,000 per admission. Limit of two admissions per insured, per benefit year. Treats sickness and injury. No pre-existing condition clause. Policy is portable. Dependents eligible up to age 26.</p> <p>Treatments covered are both sickness and injury.</p>

<p><b>BPAS 401 (k) Retirement Savings Plan</b></p>	<p><b><u>For Employees to defer their own money</u></b>  There is no age requirement.  Enrollment the 1st day of the month after completing one month of service or quarterly.</p> <p><b><u>For Employees to receive Safe Harbor Match</u></b>  21&gt; years of age.  Eligible the 1st day of the quarter after completing one year of service = 12 months in which worked at least 1,000 hours.  100% on the 1<sup>st</sup> 3% of elective employee deferrals  50% on the next 2% of elective employee deferrals</p> <p>Pre-tax contribution limits: 2023 - \$22,500 annually.  2023 - Catch-up contributions \$7,500 annually.</p>
<p><b>Paid Time Off (PTO) and NY State Sick Leave</b></p>	<p><b><u>PTO:</u></b> Accruals begin the first day of employment and are accrued per pay period for employees who have a 20 hour or more normally scheduled workweek. LIFEPlan's PTO includes vacation, personal and holiday time off for maximum flexibility for employees. Employees who are scheduled for 35 hours or more per week will accrue PTO hours based on their normally scheduled workweek. Employees who are scheduled for 20 – 34 hours per week will receive pro-rated PTO.</p> <p><b><u>NYS Sick Leave:</u></b> ALL employees will accrue 1 hour of sick time for every 30 hours worked up to 56 hours annually.</p>
<p><b>NYS Paid Family Leave</b></p>	<p>NYS Paid Family Leave (Up to 12 weeks and 67% of earnings.).  <i>Employee Funded</i></p>

\* All Benefits are subject to change by LIFEPlan CCO at any time. For current and more detailed information, please read the original Summary Plan Documents accessible in Paycom.

Effective 7-1-23