

2019-2020 Employee Benefits



All employees must actively enroll in or waive benefits for the 2019/2020 plan year by completing the benefit elections through the 4myBenefits website.

Please Note: You will not be able to make changes to your benefit elections until the next open enrollment period UNLESS you experience a qualifying event (birth, marriage, divorce, etc.)

4MYBENEFITS ENROLLMENT INSTRUCTIONS:

1. Log in at <http://tp.4mybenefits.net>
2. Click on "Enroll"
3. Login with your user name and password.
 - a. Your user name consists of:
 - "TP"
 - Your Employee ID (can be found on your check stub)
 - The year you were born
 - b. Your password is your birthdate in this format: YYYYMMDD
4. Click "Login". You will then be taken to the Welcome Screen to begin your enrollment, make changes to your benefits, see your benefit summaries & review benefit plan information, among other resources.
5. Click "Get Started" to begin enrolling
6. Once you are enrolled, you will be given a *Confirmation Statement* to download, email or print for your own records.
7. Review your enrollment elections for accuracy.

EXAMPLE:

John Smith, whose Employee ID is SMITJ and was born in 1975, would have a login of "TPSMITJ1975"

EXAMPLE:

A birthdate of February 7, 1975 would look like this: 19750207



Weekly Employee Cost

Tier	PPO	HRA
Employee	\$7.20	\$11.90
Employee + Spouse	\$73.30	\$79.30
Employee + Child(ren)	\$59.10	\$63.80
Family	\$100.20	\$108.00

Rx benefits are with



Medical Coverage

Benefits	PPO	HRA
Network Deductible (Embedded)	\$3,000 Single \$6,000 Family	\$5,000 Single \$10,000 Family
Out of Pocket (Includes Ded. & Copays)	\$6,500 Single; \$13,000 Family	\$6,350 Single; \$12,700 Family
Coinsurance	UMR Pays 80% You pay 20%	UMR Pays 80% You pay 20%
Primary Care Office Visit Specialist Office Visit	No cost to you \$100 copay	Deductible then 20%
Inpatient/Outpatient Hospital	Deductible then 20%	Deductible then 20%
Emergency Room	\$250 + Deductible, then 20%	Deductible then 20%
Urgent Care	\$50	Deductible then 20%
Rx Deductible (Tier 3 and Specialty Only)	\$250 single/\$500 family	None
30 Day Supply Rx Tier 1/Tier 2/ Tier 3 Specialty	\$5/\$50/\$100 \$250	\$10/\$35/\$70 Same as above
90 Day Supply Rx	\$12.50/\$125/\$250	\$25/\$87.50/\$175

Health Reimbursement Account

A Health Reimbursement Account (HRA) is an arrangement that allows TP Mechanical to pay for a portion of your deductible. The HRA is only for individuals enrolled in the HRA plan. The HRA will pay 50% of deductible expenses up to the maximum amounts to the right.

Max HRA Contribution	
Single	\$1,000
Family	\$2,000

Surcharge & Incentive Information

Spousal Surcharge

\$30 per week will be added to your premium if you enroll a spouse who is eligible for coverage through his/her employer. Employees enrolling a spouse on the medical plan must complete a Spousal Affidavit on the enrollment site.

Tobacco Surcharge

\$10 per week will be added to your premium if you are a tobacco user. An additional \$10 per week increase will be applied if an enrolled spouse is a tobacco user.



Flexible Spending Accounts

Healthcare FSA: Save money for certain qualified medical, dental and vision expenses for you and your qualified tax dependents. Maximum contribution is **\$2,700** annually.

Dependent Care FSA: Save money on day care or elder care for your qualified tax dependents. Maximum contribution is \$5,000 (\$2,500 if married filing separately).

CAUTION: FSA funds are use it or lose it! Money not used during the plan year, 11/1-10/31, does not roll over and you do not get it back.



Employer-Paid Coverage

Basic Life and AD&D

A Basic Life and AD&D benefit is provided to all full-time employees at no cost.

Long-Term Disability

If you become disabled for more than 90 days, you have access to a Long-Term Disability plan. The plan is offered to all full-time employees at no cost. The long-term disability plan will pay 50% of your monthly income up to a maximum of \$5,000, after you have had a qualifying disability for 90 days.



Dental Coverage



Benefits	Core Plan	Buy-Up Plan
Deductible	\$50/\$150	\$25/\$75
Annual Maximum	\$1,000	\$1,500
Preventive Services	Covered in full	Covered in full
Basic Services	Ded, then 20%	Ded, then 20%
Major Services	Ded, then 50%	Ded, then 50%
Orthodontia (Children Under 19)	Not covered	50% - Lifetime max to \$1,250

Weekly Employee Cost	Core	Buy-Up
Employee	\$3.91	\$6.57
Employee + Spouse	\$7.79	\$13.08
Employee + Child(ren)	\$8.18	\$13.73
Family	\$12.84	\$21.56

Vision Coverage



Benefits	In Network
Exam (1 every 12 months)	\$10 copay
Lenses – Single, Bifocal, Trifocal (1 every 12 months)	\$20 copay
Frames (1 every 24 months)	\$130 allowance, 30% off balance over \$130
Contact Lenses (1 every 12 months)	\$125 allowance

Weekly Employee Cost	
Employee	\$1.23
Employee + Spouse	\$2.15
Employee + Child (ren)	\$2.33
Family	\$3.56

Voluntary Coverage

Voluntary Life and AD&D Coverage: Additional life insurance coverage can be purchased for yourself, your spouse, and your children. You are able to purchase coverage up to the Guarantee Issue (GI) amounts and you will not have to answer medical questions. Any amounts exceeding the GI will require medical questions and you could be declined coverage. The maximum benefit that you can receive is five times your salary or \$500,000, whichever is less. The spouse and child benefits have separate maximums. The spouse amount cannot exceed 50% of the employee amount or \$250,000, whichever is less. Each child amount cannot exceed 50% of the employee amount or \$10,000, whichever is less. Your cost depends on your age and amount of coverage. Rate information can be found on 4myBenefits website.

Voluntary Life and AD&D Guarantee Issue Amounts	
Employee	\$150,000
Spouse	\$50,000



Voluntary Short-Term Disability: A brief summary of the short-term disability plan is shown to the right. If you choose to purchase this coverage, you will be subject to a pre-existing condition limitation. This condition states that the plan will not pay a benefit during the first 12 months for any condition present during the 3 months prior to your effective date. Rate Information can be found on the 4myBenefits website.

Voluntary Short-Term Disability	
Elimination Period	7 days
Weekly Benefit	50% up to \$750
Maximum Benefit Duration	12 weeks
Pre-Existing Condition*	3/12

Voluntary Critical Illness & Accident: Both plans pay a lump sum benefit if you have a covered illness or accident. Money can be used to pay for any expense, not just medical. Plans also pay \$50 if you get a qualified wellness screening.

Critical Illness: Get up to \$50,000 of coverage for yourself and up to 50% of your amount for your spouse. Medical underwriting is required. The plan will not pay a benefit for 12 months for conditions that you saw a doctor or took medication for in the 12 months prior to your effective date. Pricing is based on your age and amount of coverage selected.

Accident: Coverage for the accident plan is guaranteed. More information on covered accidents and the cost of the coverage can be found on the 4myBenefits website.



Important Contact Information



Jen Madden, Human Resources
E-mail: jen.madden@tpmechanical.com
Phone Number: 513-851-8881



Enrollment Management Services (EMS) is a healthcare consulting firm with the primary goal of helping families understand their healthcare options and supporting the choice they feel best meets their needs.

- Are you or someone in your home pregnant?
- Do you meet the expanded Medicaid for adults guideline?
- Are you or someone in your home over the age of 65 OR
- Are you or someone in your home under 65 and collecting a social security/disability check?

If you answered yes to any of these questions, you may be eligible for low-cost or free healthcare through SCHIP, Medicare or government programs. Contact EMS for more information.

kelly@enrollmentmanagementservices.com

Phone: 513-561-0000 Option 9

Medical Coverage

www.umar.com

Phone: 1-800-826-9781



Prescription Coverage

www.optumrx.com

Phone: 1-877-559-2955



Vision Coverage

www.myuhcvision.com

Phone: 1-800-638-3120



Life and AD&D Coverage

Long-Term Disability Coverage

Vol. Life and AD&D Coverage

Vol. Short-Term Disability Coverage

www.thehartford.com/employeebenefits

Phone: 1-800-523-2233



Dental Coverage

www.dentalcareplus.com

Phone: 1-800-367-9466



Flexible Spending Account

www.customdesignbenefits.com

Phone: 1-800-598-2929



Employee Assistance Program

www.magellanhealth.com/member

Phone: 1-800-523-5668



Voluntary Critical Illness Coverage

Voluntary Accident Coverage

www.sunlife.com/us

Phone: 1-800-247-6875



In the event you have a question or concern that has not been handled correctly or to your satisfaction by the insurance carrier, please call or e-mail our benefits consultant, HORAN.



HORAN Engagement Team

engagement@horanassoc.com

Phone: 844-694-6726