

# EMPLOYEE BENEFIT GUIDE

2024-2025 PLAN YEAR





# THANK YOU!

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We recognize that as an employee of Child & Family Agency of Southeastern Connecticut, Inc., you are one of our most important assets. Our mission to provide our clients with quality services depends on you. We have made every attempt to make our company a great place to work. As such, we strongly desire to provide you with the needed benefits to keep you and your family healthy and safe. Please take the time to review your employee benefit plan, as it is an important part of your overall compensation package.

The following pages will describe our benefit package in broad terms. Please contact **Karen Butler** at (860) 437-4550, extension 1413 / [butlerk@childandfamilyagency.org](mailto:butlerk@childandfamilyagency.org) or **Danielle Ladia** at (860) 437-4550, extension 1419 / [ladiad@childandfamilyagency.org](mailto:ladiad@childandfamilyagency.org). You may also visit the Employee Navigator portal for more details and information.

Again, thank you for being part of the Child & Family Agency of Southeastern Connecticut, Inc. team.

**Danielle Ladia**

Director of Human Resources

# 2024 OPEN ENROLLMENT

This guide will provide a basic overview of our benefits package effective July 1, 2024 through June 30, 2025. We have reviewed the market place and believe to have chosen the most comprehensive benefit offerings for our employees. Our Medical plans are remaining with UnitedHealthcare for the 2024-2025 plan year. Our Dental plans are moving to UnitedHealthcare. The carrier for our Basic Life/Accidental Death and Dismemberment, Voluntary Life, and Long-Term Disability insurance will moving to UnitedHealthcare. Please take a few moments to review the available benefit offerings and plan costs that best support you and your family. All enrollments will be completed via **Employee Navigator**. For more detailed plan information on the 2024-2025 plan offerings, please visit Employee Navigator.



## ELIGIBILITY

To be eligible to enroll in any of the benefit options within the benefit package, you must be scheduled to work at least 20 hours per week and your coverage will be effective the first of the month following 30 days for Medical, Dental, Telewellness, and the Health Reimbursement Account. The Basic Life and AD&D, Voluntary Life, and Long Term Disability insurance will be effective the first of the month following 90 days of employment and you must be working at least 30 hours per week to be eligible to participate.

## QUALIFYING LIFE EVENTS

Generally, you may enroll in the plan, or make changes to your benefits, when you are first eligible. However, you can make changes/enroll during the plan year if you experience a qualifying event. As with a new enrollee, you must submit your changes within 30 days of the change or you will be considered a late enrollee and have to wait until yearly open enrollment in July. Examples of a qualifying event:

- You get married, divorced or legally separated
- You have a baby or adopt a child
- You or your spouse takes an unpaid leave of absence
- You or your spouse has a change in employment status
- Your spouse dies
- You become eligible for or lose Medicaid coverage

# MEDICAL

Child & Family Agency of Southeastern Connecticut, Inc. will be remaining with our Medical Carrier, UnitedHealthcare for the 2024-2025 plan year. We will be offering two Medical plan options, with eligibility to participate in a Health Reimbursement Account. Each Medical plan includes a routine vision exam at **no cost to you** once per calendar year per enrolled member. Please review the high level overview of the plan details below to assist with making your Medical plan elections for the 2024-2025 plan year.

In-Network Services	UHC Choice Plus \$4,000/\$8,000 HDHP HRA Plan	UHC Choice Plus \$5,000/\$10,000 HDHP HRA Plan
Plan Year Deductible	\$4,000 for Individuals \$8,000 for Families	\$5,000 for Individuals \$10,000 for Families
Embedded or Non-Embedded Deductible	Embedded	Embedded
Out-of-Pocket Maximum	\$6,000 for Individuals \$12,000 for Families	\$7,000 for Individuals \$14,000 for Families
Preventative Services	Covered at 100% Deductible is waived	Covered at 100% Deductible is waived
Office Visits	No Charge After Deductible	20% After Deductible
Specialist Visits	No Charge After Deductible	20% After Deductible
Emergency Room Visits / Urgent Care Visits	No Charge After Deductible	20% After Deductible
Outpatient Hospital Visits	No Charge After Deductible	20% After Deductible
Inpatient Hospital Visits	No Charge After Deductible	20% After Deductible
Prescriptions Retail Pharmacy	\$5 / \$25 / \$40 After Deductible	\$5 / \$25 / \$40 After Deductible
Prescriptions Mail Order Pharmacy	\$10 / \$50 / \$80 After Deductible	\$10 / \$50 / \$80 After Deductible
Out-of-Network Services	UHC Choice Plus \$4,000/\$8,000 HDHP HRA Plan	UHC Choice Plus \$5,000/\$10,000 HDHP HRA Plan
Plan Year Deductible	\$6,000 for Individuals \$12,000 for Families	\$7,000 for Individuals \$14,000 for Families
Coinsurance	70%	70%
Out-of-Pocket Maximum	\$12,000 for Individuals \$24,000 for Families	\$15,000 for Individuals \$30,000 for Families

## TIPS & TOOLS:

Maximize your benefits by considering the following:

- UnitedHealthcare provides a 24-Hour Virtual Visit available to you to speak to a doctor about conditions that can be prescribed medications. Consider virtual visits for common conditions such as allergies, flu, headaches, bronchitis, eye infections, sore throats, rashes, and more.
- Manage your medications with Optum Rx pharmacy services. Optum Rx services can offer savings on medication and keep track of your medications and/or requirements to fill your medication.
- UnitedHealthcare Rewards is an incentive program that's included in your health plan. It rewards you with dollars for reaching program goals and completing activities. For each activity you complete, you earn a reward and can spend your earnings in a variety of different ways. You can redeem rewards via a digital Visa® gift card or by buying a fitness tracker! Employees can start earning rewards by activating UHC Rewards from the UnitedHealthcare® app and/or myuhc.com.

# EMPLOYEE MEDICAL CONTRIBUTIONS

All employees regularly scheduled to work 20 or more hours per week are eligible for Medical coverage and will be deducted each pay period via payroll deduction. Please review the per pay employee contribution amounts for the two different medical plans; the 4000/8000 Plan and the 5000/10000 Plan. **Contributions amounts are based on 24 pay periods.** Child and Family Agency of Southeastern Connecticut, Inc. contributes 80% towards your medical premiums for Employee Only coverage, and 75% towards your medical premiums for Employee + Spouse, Employee + Child(ren) or Family coverage.

## MEDICAL PLANS

Per Pay Period (24 pay periods)	\$4,000 / \$8,000 Plan	\$5,000 / \$10,000 Plan
Employee Only	\$81.70	\$68.60
Employee + Spouse	\$232.84	\$195.52
Employee + Child(ren)	\$183.83	\$154.36
Family	\$319.65	\$268.41

# HEALTH REIMBURSEMENT ACCOUNTS

A Health Reimbursement Account is an employer-funded account that helps employees pay for qualified medical expenses not covered by their health plans. The Health Reimbursement Account is administered by UnitedHealthcare and integrated with the medical plans to help assist with making the claim process automatic and paperless. To assist employees with the cost of medical claims, Child & Family Agency of Southeastern Connecticut, Inc. contributes the first **\$2,000** for Individual coverage and the first **\$4,000** for Family coverage to your HRA to be used toward your Medical plan deductible. **HRA funds are pro-rated for anyone enrolling in the middle of the plan year.**

## HOW THE HRA WORKS AT YOUR DOCTOR

You will provide your provider with your UnitedHealthcare Medical ID card. Your doctor's office will then bill UnitedHealthcare. UnitedHealthcare will process the claim towards your medical deductible. The claim will then automatically feed over to your Health Reimbursement Account (HRA) administered through UnitedHealthcare, until you've reached your plan deductible (\$4,000 for Individual or \$8,000 for Family) for Plan 1 or (\$5,000 for Individual or \$10,000 for Family) for Plan 2. UnitedHealthcare pays the provider directly from your Health Reimbursement Account. Child and Family Agency of Southeastern Connecticut, Inc. contributes the 1st **\$2,000** of the Individual deductible and the 1st **\$4,000** of the Family deductible. Once your HRA funds are exhausted, you are responsible for the remainder of the deductible (\$2,000 for Individual or \$4,000 for Family) for Plan 1 or (\$3,000 for Individual or \$6,000 for Family) for Plan 2. You will receive a bill from your provider for the balance of the deductible. You will be responsible for submitting payment to the provider directly. UnitedHealthcare will send you a monthly health statement that aggregates all medical claims and payments, including payment made from the Health Reimbursement Account.

## HOW THE HRA WORKS AT YOUR PHARMACY

You will provide your pharmacy with your UnitedHealthcare medical ID card. This will ensure that your prescription expenses are applied towards your plan deductible. There is no debit card issued for your HRA. Instead, your UnitedHealthcare medical insurance ID card is connected directly to your Health Reimbursement Account. The pharmacy will run the prescription through the UnitedHealthcare medical plan and if you have any available dollars in your HRA account, the cost of the prescription will be taken directly out of your HRA account. If you have exhausted your HRA funds, you will have to pay for the cost of the prescription until your deductible is met. Once your deductible is met, the pharmacy copayments will then apply.

**\*All reimbursement requests should be submitted to UnitedHealthcare along with a copy of your Explanation of Benefits provided to you.**

# DENTAL

All employees regularly scheduled to work 20 or more hours per week are eligible for Dental coverage. We will be moving our Dental Carrier to UnitedHealthcare. We will still be offering the option of choosing from two different dental plans; the Base Plan (PPO) and the Buy-Up Plan (PPO). **There is no orthodontia coverage for the Base Plan option.** Please review the plan details in high level below to assist with making your 2024-2025 plan year elections in Dental.

## BASE PLAN

United Healthcare	Base Plan - PPO	
PCP Referral Required	No	
Calendar Year Deductible	\$25 Individual	\$75 Family
	In-Network	Out-of-Network
Calendar Year Maximum (per covered person on the plan)	\$1,000	\$1,000
Preventative & Diagnostic (such as cleanings)	100%	100%
Basic Services (extractions, fillings, etc.)	100%	80%
Major Services (crowns, dentures, etc.)	Not Covered	
Orthodontia (Adult & Child)	Not Covered	

## BUY-UP PLAN

United Healthcare	Buy-Up Plan - PPO	
PCP Referral Required	No	
Calendar Year Deductible	\$25 Individual	\$75 Family
	In-Network	Out-of-Network
Calendar Year Maximum (per covered person on the plan)	\$1,500	
Preventative & Diagnostic (such as cleanings)	100%	100%
Basic Services (extractions, fillings, etc.)	100%	80%
Major Services (crowns, dentures, etc.)	60%	50%
Orthodontia (Adult & Child)	50%	50%
Orthodontics Lifetime Maximum	\$1,500	

# EMPLOYEE DENTAL CONTRIBUTIONS

All employees regularly scheduled to work 20 or more hours per week are eligible for Dental coverage and will be deducted each pay period via payroll deduction. Please review the per pay employee contribution amounts for the two different dental plans; the Base Plan (PPO) and the Buy-Up Plan (PPO). **Contributions amounts are based on 24 pay periods.** Child and Family Agency of Southeastern Connecticut, Inc. contributes a percentage toward your Dental premiums to help alleviate the cost to you.

## DENTAL PLANS

Per Pay Period (24 pay periods)	Base Plan	Buy-Up Plan
Employee Only	\$6.98	\$15.26
Employee + Spouse	\$13.56	\$29.26
Employee + Child(ren)	\$13.56	\$29.26
Family	\$24.79	\$50.71



# ADDITIONAL INSURANCE

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Child & Family Agency of Southeastern Connecticut, Inc. provides Life Insurance and Long-Term Disability insurance through UnitedHealthcare. The Basic Life and AD&D and the LTD insurance is available at **no cost** to you. There is also additional Life Insurance available to you via payroll deductions for you, your spouse, and your children.

## BASIC LIFE AND ACCIDENTAL DEATH AND DISMEMBERMENT

Child & Family Agency of Southeastern Connecticut, Inc. will continue to offer Basic Life and Accidental Death and Dismemberment Insurance through UnitedHealthcare. Your Life Insurance coverage is equal to one times your basic annual earnings to a maximum of \$50,000. Your Accidental Death and Dismemberment coverage will mirror the benefit amount of your Group Life Insurance. Benefits reduce by 65% at age 65 and 50% at age 70.

**The Basic Life and AD&D benefit is 100% paid for by Child & Family Agency of Southeastern CT, Inc.**

## LONG-TERM DISABILITY INSURANCE

Child & Family Agency of Southeastern Connecticut, Inc. also provides Long-Term Disability insurance through UnitedHealthcare to offer an income replacement option if you are out of work due to a non-work related illness or injury that extends beyond 6 months. Benefits begin after a 120 day elimination period for both accident and illness. Benefit payments may last as long as you are disabled or until you reach Retirement Age (65), whichever is sooner. Benefits are 60% of your monthly earnings, up to \$6,000 per month. There is a 3 / 12 Pre-Existing Condition limitation for the Long-Term Disability, meaning if you file a claim within the first 12 months of your policy being in effect, UnitedHealthcare will look back 3 months prior to the policy taking effect to see if the condition being claimed already took place. If the condition was pre-existing, it will not be covered.

**The Long-Term Disability benefit is 100% paid for by Child & Family Agency of Southeastern CT, Inc..**

# VOLUNTARY LIFE INSURANCE



Child & Family Agency of Southeastern Connecticut, Inc. also provides additional Voluntary Life and AD&D insurance through UnitedHealthcare to all eligible employees. You have the option of purchasing additional life insurance for yourself, your spouse, and your dependent children. The Employee benefit is available for the lesser of up to 5 times your annual salary or a maximum of \$500,000, in increments of \$10,000. The Guaranteed Issue Amount, or guaranteed benefit amount you can elect without additional health questions, is \$150,000.

You can elect to cover your dependents as well. The Spouse benefit is available for up to \$250,000, but can not exceed 50% of the elected Employee benefit amount. The Spouse benefit will be available in \$5,000 increments. The Guaranteed Issue Amount for Spouse is \$25,000. The Child(ren) benefit for children who are 14 days old to age 26 is available for a maximum benefit amount of \$10,000, but can not exceed 50% of the Employee benefit amount. Children can not be covered from birth to 14 days of age. The Guaranteed Issue Amount for Children is \$10,000. For more information on the Voluntary Life benefit and true cost estimates, please refer to the enrollment website, Employee Navigator.

Benefits will reduce 35% at age 65 and 50% at age 70.

**The Voluntary Life and AD&D insurance 100% paid for by you via payroll deduction.**

**\*Please note:** If you are enrolling for the first time (and you are not a newly hired employee) or if you are increasing your current voluntary election amount for yourself and/or your spouse, you will be required to complete an Evidence of Insurability (EOI) Form. For any amount over the Guaranteed Issue Amounts of the above stated Life Insurance benefits, an Evidence of Insurability Form will need to be submitted to UnitedHealthcare. Newly hired employees can elect up to the Guaranteed Issue Amounts of coverage without needing to submit an EOI. The Evidence of Insurability (EOI) will assist the insurance carrier in making the final decision to approve or deny the requested benefit amount selected during enrollment.

# TELEWELLNESS BENEFIT



Telemedicine provides 24/7 access to doctors via phone, mobile application, or video, giving employees on-demand diagnosis, treatment options, and prescriptions (if medically necessary) for non-emergency situations. The program is available to you, your spouse or domestic partner, and your children up to age 26 for \$0 per consultation! You can sign up for the New Benefits Telemedicine benefit for **\$6.21** per pay period.



**Health Advocacy Solutions** provides you access to a personal health advocate that can assist you with reviewing medical bills and insurance claims, clarify benefits and help answer questions about tests, treatments and medications, as well as provide information about generic drug options.

**Nutrition Solutions** provides you with registered dietitians that can help you develop a personal eating plan or manage health conditions like diabetes or high blood pressure. Consultations are available for \$59 per consultation.

**Dermatology Solutions** provides you with a quick and convenient way to upload images and create a treatment plan within 2 business days for skin conditions such as rashes, acne, psoriasis, suspicious moles and freckles, and more. Consultations are available for \$75 per consultation, and one follow up question per consultation.

**New Benefits Rx** can assist you with savings on prescriptions for the whole family, including your pets. Receive discounts on thousands of medications from a range of retail pharmacies nationwide including Walgreens, CVS, Target, and others. My Medicine Cabinet allows you to save your prescription search so you can easily refresh pricing and savings for your next refill.

**Vision Discount Program** provides you and your family with valuable savings on vision exams and eyewear that your Vision insurance plan may not offer. There is no limit on the number of times you can use the discounts available to you. The Vision Discount Program with New Benefits can offer up to 60% off prescription eyewear included most frames, lenses, and specialty items such as tints, coatings and UV protection. The Vision Discount Program can also offer additional savings off mail order contacts, laser surgery, and eye exams.

**For more information, download the My Benefits Work Mobile App or visit [MyBenefitsWork.com](https://www.MyBenefitsWork.com).**

# FLEXIBLE SPENDING ACCOUNTS

As an employee of Child and Family Agency of Southeastern Connecticut, Inc., you have the opportunity to participate in a Healthcare Flexible Spending Account (FSA), a Dependent Care Flexible Spending Account (DFSA), or a Limited Purpose Flexible Spending Account (LPFSA) through Flores. A reimbursement account (also called a "Flexible Spending Account") is a way for you to put money aside **before taxes** to be reimbursed for eligible medical or daycare expenses for yourself and any of your dependent(s) claimed on your tax return. There are three separate reimbursement account options; a Healthcare Flexible Spending Account (which reimburses eligible medical, dental and vision out-of-pocket expenses), a Limited Purpose Flexible Spending Account (which reimburses eligible dental and vision out-of-pocket expenses only), and a Dependent Care Flexible Spending Account (which reimburses eligible daycare expenses). You may enroll in the Limited Purpose Flexible Spending Account if you are already enrolled in an HSA through a separate entity or if you are ineligible to participate in the traditional Healthcare Flexible Spending Account.

The IRS Minimum Annual Contribution amount to your Healthcare Flexible Spending Account or your Dependent Care Flexible Spending Account is \$100.

The IRS Maximum Annual Contribution amount to your Healthcare Flexible Spending Account and your Limited Purpose Flexible Spending Account is \$3,200. For Dependent Care Flexible Spending Accounts, the IRS Maximum Annual Contribution is \$5,000 per household or \$2,500 if you are married or filing separately.

Funds in a Flexible Spending Account **do not** rollover each year. You must use the funds in your FSA before the end of each plan year, or they will be forfeited.

If you are interested in participating in a Limited Purpose Flexible Spending Account, please contact **Karen Butler** at (860) 437-4550, extension 1413.

For additional information, visit [www.flores247.com](http://www.flores247.com) or call **(800) 532-3327**.

## SECTION 125

You have the ability to make contributions towards your medical and dental insurance plan premiums on a pre tax basis, rather an after tax basis. This means your premium contributions are deducted from your gross pay before income tax and social security is calculated, thereby reducing your taxable income. Participation in this plan is automatic, however you may opt out if you wish.

Please contact your Human Resources department for additional details.

# CONTACT US



## Contact Information

<b>Medical</b>	United Healthcare	(866) 801-4409	myuhc.com
<b>Dental</b>	United Healthcare	(866) 801-4409	myuhc.com
<b>Basic Life/ AD&amp;D, Voluntary Life, and Long-Term Disability</b>	United Healthcare	(866) 801-4409	myuhc.com
<b>TeleWellness</b>	New Benefits	(800) 800-7616	MyBenefitsWork.com
<b>Flexible Spending Accounts</b>	Flores	(800) 532-3327	flores247.com

Our insurance broker, NFP, is available for questions on the plan offerings:

**John Cichy, Account Executive**

Phone: (860) 507-8894

Email: john.cichy@nfp.com

**Karli Fiala, Account Manager**

Phone: (860) 351-8405

Email: karli.fiala@nfp.com

Disclaimer: Every effort has been made to ensure the accuracy of the information in the Benefit Overview. Plan provisions summarized in the overview contain only highlights. If there is a discrepancy between this overview and the plan documents, the plan documents will govern.

Although Child & Family Agency of Southeastern Connecticut, Inc. intends to continue all benefits in their present form, they reserve the right to amend, suspend or terminate, in whole or in part, any or all of the plans at any time. If any changes are made you will be notified promptly.