



California Employee

2018 BENEFIT GUIDE

PLAN YEAR: JULY 1, 2018 to JUNE 30, 2019



Discover Your Benefits

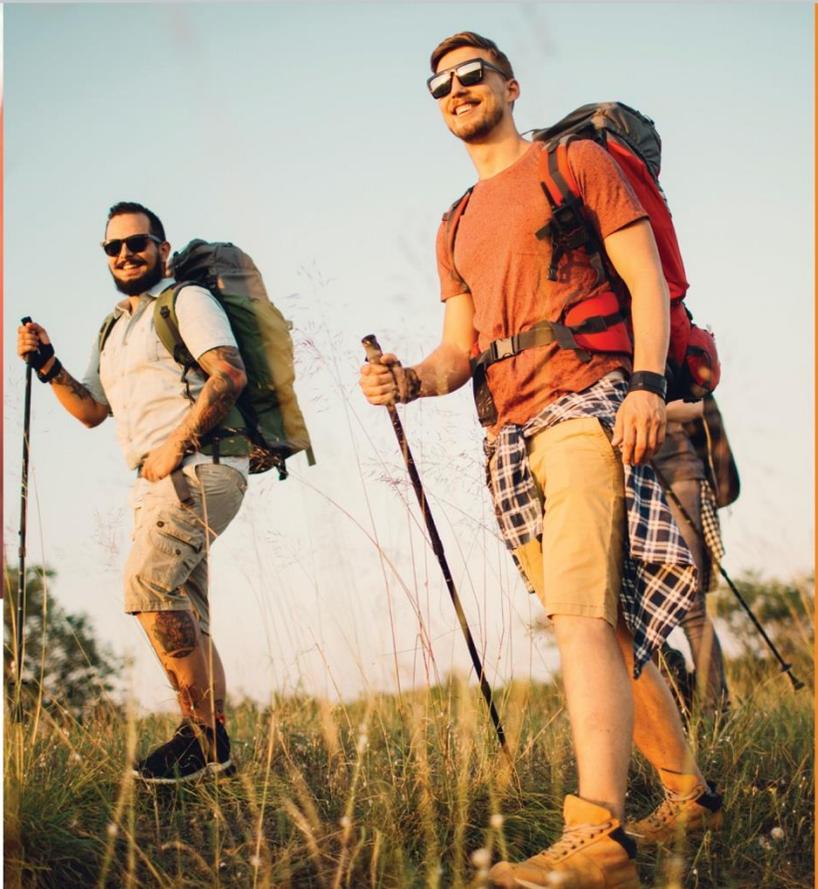




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Important Notice

Athens Administrators has made every attempt to ensure the accuracy of the information described in this enrollment guide. Any discrepancy between this guide and the insurance contracts or other legal documents that govern the plans of benefits described in this enrollment guide will be resolved according to the insurance contracts and legal documents. Athens Administrators reserves the right to amend or discontinue the benefits described in this enrollment guide in the future, as well as change how eligible employees and Athens Administrators share plan costs at any time. This enrollment guide creates neither an employment agreement of any kind nor a guarantee of continued employment with Athens Administrators.



DISCOVER YOUR BENEFITS



A GUIDE TO THE ATHENS ADMINISTRATORS EMPLOYEE BENEFITS PROGRAM JULY 1, 2018 – JUNE 30, 2019

As an Athens employee, you are one of our greatest assets and a most valuable contributor to Company growth. Our benefits program provides an important opportunity to reward and recognize the contributions you make every day on behalf of Athens Administrators. We are proud to offer you and your family a very comprehensive and competitive benefits package designed to help you stay healthy, balance your work and life responsibilities, protect your assets, and plan for a secure financial future.

Athens Administrators remains committed to providing the highest value benefits program at the lowest cost – for you and the Company. Together with your efforts to maintain good health and use your benefits wisely, we strive to keep our mutual benefit costs as low as possible.

This information, along with other materials available from our benefit partners, will help you understand your benefit options. As you consider the options, keep in mind that there are no right or wrong answers, or good or bad plans. The only consideration is what works best for you.

The choices you make will be in place through June 30, 2019. Your next opportunity to change plans will be at the next annual re-enrollment period for July 1, 2019. You can make mid-year changes only in the event of a qualified family status change and only within 30 days of that event. Please read the information carefully and contact Human Resources with any questions.

You can change your coverage during the year if you experience a “Qualified Status Change,” including, but not limited to: marriage/domestic partnership, divorce, birth/adoption of a child and death of a spouse/child.





WELCOME

TAKE A MOMENT... FOR BENEFITS

Because we recognize that lifestyle and personal choice can affect how well your benefit plan works for you, we provide choices in plan coverage levels, dependent enrollment categories and a choice of health plan companies. Our benefits program is designed to protect you and your family physically as well as financially. We offer you the chance to open a health savings account, a retirement savings program and the option to buy additional life insurance or long term care coverage.

Athens Administrators pays the full cost of the Employee Assistance Program, Short Term and Long Term Disability, Business Travel Accident, Basic Life, and Basic Accidental Death and Dismemberment. The company also pays the major share (80%) of the cost for the medical and dental benefits. The company also pays 100% of a Base Long Term Care Plan for managers and above and for employees with over five years of service. Employees pay a share of the cost in the form of employee contributions for medical and dental. Regular employees who work a minimum of 30 hours per week are eligible to participate in the benefit plans upon completion of the eligibility period.

IMPORTANT DETAILS

- We offer a PPO plan with Anthem of California. It is a High Deductible Health Plan with a Health Savings Account (HSA).
- We offer two HMO plans from both Anthem of California and Kaiser Permanente.
- We also offer a Kaiser HMO High Deductible Health Plan with a Health Savings Account (HSA)
- Guardian is our dental insurance company and we have a voluntary vision plan with VSP.
- Unum provides our life insurance, disability and long term care coverage at no cost to employees.

HEALTH SAVINGS ACCOUNTS – With Company funding!

If you enroll in the Anthem or Kaiser high deductible health plan, you must open an HSA account. The company will make quarterly contributions to your HSA account on your behalf. You can also make additional pre-tax deductions into your account up to the IRS HSA annual limits shown below. Use the tax-free distributions to pay for qualified medical expenses, or allow the funds in your HSA account to build with interest year after year, until you need it. HSA contributions are subject to State of California taxation, exempt from federal income tax or employment taxes. HSA funds may be used for a variety of medical services that may not be covered by traditional health insurance plans.

- HealthEquity is Athens Administrators' HSA Administrator: www.myhealthequity.com or (877) 857-6810

2018 Athens Administrators Annual HSA Funding (Funded Quarterly)

	Employee Only	Employee + 1	Employee + 2 or more
Anthem or Kaiser HDHP HSA Annual Funding	\$1,000	\$1,250	\$1,500
IRS HSA Annual Limit	\$3,450	\$6,900	\$6,900
HSA Catch-Up Contributions - age 55 or older	\$1,000	\$1,000	\$1,000

BENEFITS ELIGIBILITY



ELIGIBILITY As a regular full-time employee of Athens Administrators, you and any of your dependents are eligible to participate in the benefits program, which begins on the first day of the month following 30 days of continuous employment:

- Your spouse or registered domestic partner* (*Completed affidavit is required. Potential tax liability may apply, consult your tax accountant)
- Your dependent children under age 26
- Your unmarried dependent children who are age 26 or older and mentally or physically disabled

Unmarried dependent children include your children, your stepchildren, children covered under a child support order, your adopted children, children placed with you for adoption, and your domestic partner's children who are dependent upon you for support. Dependent children must be dependent on you for over one-half of their support during the calendar year.

COVERAGE LEVELS

You may select from the following levels of coverage when you enroll in our health care plans:

- Employee only
- Employee + one dependent
- Employee + two or more dependents

ELIGIBLE IRS STATUS CHANGES

Once your health plan coverage is effective, you may make changes to your elections only when you have one of the following "family status changes":

- Your marriage, legal separation, or divorce
- The birth or adoption of your child or a change in child custody
- The death of your spouse or child
- A change in your spouse's employment status that affects benefits coverage (such as losing a job or becoming employed)
- A change in your child's eligibility status (for example, turning age 26 or becoming physically disabled)
- A change in your work hours

Any changes to your health care plan elections must be made within 30 days of your family status change. Changes must also be related to your family status change. For example, if you have a baby, you may enroll your child in a plan but you may not drop your coverage entirely.





MEDICAL & PRESCRIPTION DRUG BENEFITS

MEDICAL PLANS

Kaiser Health Maintenance Organization (HMO) Plan

In the Kaiser HMO you have the convenience of having all of your healthcare needs under one roof. General providers give routine services and refer you to other providers within the Kaiser network when you need to see a specialist or be hospitalized. You must receive care from providers within Kaiser's network; Kaiser won't pay for non-emergency services you receive from a non-Kaiser provider or without a referral.

Anthem Health Maintenance Organization (HMO) Plan

In the Anthem HMO, benefits are covered only when services are provided or coordinated by the primary care physician and authorized by the participating medical group or independent practice association.

For Both the Kaiser and Anthem HMO Plans-You do not need prior authorization from Anthem and Kaiser or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact Anthem at (800) 424-6521 or Kaiser at (800) 464-4000.

You have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members. If you do not make this designation, Anthem and/or Kaiser designates one for you. For children, you may designate a pediatrician as the primary care provider. For information on how to select a primary care provider, and for a list of the participating primary care providers, contact Anthem at (800) 424-6521 or Kaiser at (800) 464-4000.

Anthem High Deductible Health Plan (HDHP) with Health Savings Account (HSA)

The Anthem High Deductible Health Plan is an innovative type of coverage that allows an insured person to use a Health Savings Account (HSA) to pay for routine medical care.

When you enroll in the Anthem Plan, you may receive care from any provider. However, Anthem pays for eligible expenses at a higher level when you visit a network provider. When you visit a non-network provider, Anthem still pays for eligible expenses, but you may pay more out-of-pocket before expenses are covered. This plan has a \$1,500 individual deductible and a \$3,000 family deductible.

Kaiser Health Maintenance Organization (HMO) Plan High Deductible Health Plan (HDHP) with Health Savings Account (HSA)

In the Kaiser HMO you have the convenience of having all of your healthcare needs under one roof. General providers give routine services and refer you to other providers within the Kaiser network when you need to see a specialist or be hospitalized. You must receive care from providers within Kaiser's network; Kaiser won't pay for non-emergency services you receive from a non-Kaiser provider or without a referral. This plan has a \$1,500 individual deductible and a \$3,000 family deductible. The High Deductible Health Plan is an innovative type of coverage that allows an insured person to use a Health Savings Account (HSA) to pay for routine medical care.

Athena Administrators will fund a portion of your Anthem or Kaiser HDHP deductible in an HSA account in the following amount per year:

Employee Only = \$1,000; Employee + 1 = \$1,250; Employee + Family = \$1,500.

Funds are paid per plan year on a quarterly basis based on your enrollment.

Employer funding is prorated and paid at Employer's discretion. Employees are encouraged to fund their own HSA accounts in addition to Employer funding.



PREVENTIVE CARE

The required preventive services are based on recommendations by the United States Preventive Services Task Force, the Health Resources and Services Administration, and the Centers for Disease Control and Prevention.

Anthem and Kaiser will cover the following preventive services without a copayment, coinsurance, or deductible, when these services are delivered by a network provider.

Preventive services for adults, including, but not limited to:

- Age-appropriate preventive medical examination
- Blood pressure screening for all adults
- Cholesterol screening for adults at higher risk of cardiovascular disease
- Colorectal cancer screening for adults age 50 to 75
- Prostate cancer screening in men age 50 to 75
- Depression screening for adults
- Type 2 diabetes screening for adults with high blood pressure
- Immunizations for adult (doses, recommended ages, and recommended populations vary)

Preventive services for women, including pregnant women, including, but not limited to:

- Age-appropriate preventive medical examination
- Mammography screening for breast cancer for women age 50 to 74
- Cervical cancer screening for women age 21 to 65
- Scheduled prenatal visits and first postpartum visit

Preventive services for children, including, but not limited to:

- Age-appropriate preventive medical examination
- Height, weight, and body mass index measurements for children
- Developmental screening for children under age 3 years and surveillance throughout childhood by primary care physician
- Hearing screening for all newborns
- Vision screening for all children
- Immunizations for children from birth to 18 years (doses, recommended ages, and recommended population vary)

Preventive vs. diagnostic or therapeutic services

There are some additional things to keep in mind about coverage for preventive services vs. coverage for diagnostic or therapeutic services. When a preventive service turns into a diagnostic or therapeutic service in the same visit, the diagnostic or therapeutic cost share will apply.



MEDICAL BENEFITS

Medical Plan Summary

The deductibles, copays and coinsurance percentages below indicate the amounts for which you are responsible.

Features	Kaiser HMO	Anthem HMO
Group Number	NorCal20813-0000 / SoCal 233524-0000	280535
Customer Service	(800) 464-4000	(800) 888-8288
Website	www.kp.org	www.anthem.com
Provider Choice	Kaiser Only	In Network Provider Only
Lifetime Maximum	Unlimited	Unlimited
Annual Out of Pocket Maximum (cal year)	\$3,000/individual / \$6,000/family	\$2,500/individual / \$5,000/family
Annual Deductible (calendar year)	\$1,000/individual / \$2,000/family	None
	YOU PAY	YOU PAY
Routine Medical Care		
• Primary Care Visits	\$20 copay	\$30 copay
• Specialist Visits	\$20 copay	\$40 copay
• Preventive Care	No copay	No copay
• Well Woman Care	No copay	No copay
• Maternity Office Visit	No copay	\$30 copay
• Well Child Care	No copay	No copay
• Non-Hospital X-Ray & Lab	\$10 per encounter (Deductible does not apply)	No copay
• Complex X-Ray & Lab (CT, MRI, and PET)	\$50 per encounter (Deductible does not apply)	\$100 copay per test
Hospital Services		
• Inpatient Room & Board	20% after deductible	\$500/day, up to 3-day copay maximum
• Outpatient	20% after deductible	\$250 / surgery
• Ambulatory Surgical Center	20% after deductible	\$250 / surgery
Emergency Room	20% after deductible	\$150 per visit (waived if admitted)
Ground Ambulance	\$150 copay per trip	\$100 copay per trip
Mental Health & Substance Abuse		
• Inpatient	20% after deductible	\$500/day, up to 3-day co-pay maximum
• Outpatient	\$20 copay (Deductible does not apply)	\$30 copay
Rehabilitation Benefits (Physical, Occupational & Respiratory Therapy)	\$20 copay	\$30 copay – office \$40 copay – outpatient hospital
Chiropractic (Through American Specialty Health)	\$15 per visit 30 visits/year	\$30 copay per visit 30 visits combined with Acupuncture/year
Acupuncture (Through American Specialty Health)	Not covered	\$30 copay per visit 30 visits combined with Chiro/year
Prescription Drug Benefits	Kaiser Facility	Anthem Prescription Services
• Pharmacy Network	Generic \$10 / Brand \$30 copay (Deductible does not apply) Up to 30-day supply	Tier 1a - \$5 copay Tier 1b - \$20 copay Tier 2 - \$30 copay Tier 3 - \$50 copay Tier 4 – 30% up to \$250 30-day supply
• Mail Order	Generic \$20 / Brand \$60 copay (Deductible does not apply) Up to 100-day supply	\$12.50/\$50/\$90/\$150 90-day supply

Every effort has been made to ensure the accuracy of this document. In the event of a discrepancy, coverage is governed by the Summary Plan Descriptions. A copy of the Summary Plan Description can be found in the Employee Benefits Website: www.athensadmin.myjenkinshr.com

MEDICAL BENEFITS

Medical Plan Summary

The deductibles, copays and coinsurance percentages below indicate the amounts for which you are responsible.

Features	Kaiser HMO HDHP NorCal / SoCal	Anthem HDHP with Health Savings Account (HSA)	
		In Network	Out of Network
Group Number	20813-0002 / 233524-0002	280535	
Customer Service	(800) 464-4000	(866) 207-9878	
Website	www.kp.org	www.anthem.com	
Provider Choice	Kaiser Only	Anthem PPO Provider	Non-Anthem PPO Provider
Lifetime Maximum	Unlimited	Unlimited	
Annual Out of Pocket Maximum per calendar year (includes cal year deductible)	\$3,000 / Individual \$6,000 / Family	\$3,000 / Individual \$6,000 / Family	\$9,000 / Individual \$18,000 / Family
Annual Calendar Year Deductible	\$1,500 / Individual \$3,000 / Family	\$1,500 / Individual \$3,000 / Family (max \$2,700 per member in family)	\$3,000 / Individual \$6,000 / Family
	For family coverage, the individual family member deductible max is \$2,700.		
	YOU PAY	YOU PAY	YOU PAY¹
Routine Medical Care			
• Office Visits	10% after deductible	10% after deductible	30% after deductible
• Preventive Care	No charge, deductible waived	No charge, deductible waived	30% after deductible
• Well Woman Care	No charge, deductible waived	No charge, deductible waived	30% after deductible
• Maternity Office Visit	10% after deductible	10% after deductible	30% after deductible
• Well Child Care	No charge, deductible waived	No charge, deductible waived	30% after deductible
• X-Ray & Lab (Non-Hospital)	10% after deductible	10% after deductible	30% after deductible
• Complex X-Ray & Lab (CT, MRI, and PET)	10% after deductible	10% after deductible	30% after deductible (limited to \$800 per test)
Hospital Services			
• Inpatient Room & Board	10% after deductible	10% after deductible	30% after deductible (limited to \$1,000/day)
• Outpatient or Ambulatory Surgical Center	10% after deductible	10% after deductible	30% after deductible (limited to \$350/day)
Emergency Room	10% after deductible	10% after in-network deductible	
Ground Ambulance	10% after deductible	10% after in-network deductible	
Mental Health & Substance Abuse			
• Inpatient	10% after deductible	10% after deductible	30% after deductible (limited to \$1,000/day)
• Outpatient	10% after deductible	10% after deductible	30% after deductible
Rehabilitation Benefits (Physical, Occupational & Speech Therapy)	10% after deductible	10% after deductible	30% after deductible (limited to \$350 per admission for outpatient hospital)
Chiropractic Benefits (limited to 30 visits/calendar year)	Not covered	10% after deductible	30% after deductible
Acupuncture Benefits (limited to 20 visits/calendar year)	Not covered	10% after deductible	30% after deductible
Prescription Drug Benefits			
• Tier 1a	Generic - \$10 after deductible	\$5 copay after deductible	30% after deductible
• Tier 1b	Brand - \$30 after deductible	\$15 copay after deductible	
• Tier 2		\$40 copay after deductible	30% after deductible
• Tier 3		\$60 copay after deductible	30% after deductible
• Specialty Drugs		30% up to \$250 after deductible	30% after deductible
• Mail Order (90-day supply)	\$20/\$60 for 100-day supply	\$12.50/\$37.50/\$120/\$180 after deductible	N/A

1. Based on Anthem's Allowable amount. Charges in excess of the allowable amount do not count toward the calendar-year deductible or out-of-pocket maximum. **Note: Athens funds your Health Savings Account quarterly to help you with the deductible.**





HEALTH SAVINGS ACCOUNT

HEALTH SAVINGS ACCOUNT (HSA) – ONLY AVAILABLE WITH THE ANTHEM OR KAISER HIGH DEDUCTIBLE HEALTH PLANS

HealthEquity

Member Services: (877) 857-6810

Website: www.myhealthequity.com

The Health Savings Account (HSA) is linked with the High Deductible Health Plan (HDHP). Only employees who are currently enrolled in the HDHP are eligible for the HSA. You may defer pre-tax earnings to the HSA and Athens makes quarterly contributions to the account. You may accumulate funds in the HSA that can be used in the future for out-of-pocket medical expenses, particularly until the deductible is met on the HDHP. Money in the HSA rolls over each year and builds in the account until a future date when you ask for reimbursement.

Manage your Health Savings Account online. The websites feature tools and information to help you maximize the benefits of your HSA

- Information about high-deductible health plans including HSA calculators
- Pay bills to physicians, dentists or other health care providers
- Make deposits
- Reimburse yourself for qualified medical expenses paid out-of-pocket
- Check monthly statements
- View and export transactions
- Download account forms and tax information
- Change your address; Update your email address
- Manage investment activity (minimum balance might be required)
- **Tax-related questions should be directed to your tax accountant**

You can log on to your HealthEquity member portal in two ways, either through

- www.myhealthequity.com Type in your username and password.
- If you have any questions regarding how to log on or how to best utilize your accounts, please call (877) 857-6810.

BENEFITS OF AN HSA

- Athens Administrators is providing you money that can be used toward the deductible
- Contributions are deposited before you are taxed federally and the account earnings are not taxed
- Contributions roll over year after year (so you can build a healthcare nest egg)
- Distributions are not taxed if the funds are used for qualified expenses
- **It is always your money even beyond your employment with Athens Administrators**
- Use your HSA money to pay for qualified expenses or long term care premiums, Medicare and COBRA premiums
- HSA requires an account to be established and then you will receive a debit card to use when paying for care at doctors, dentists or the pharmacy

Contributions may be made:

- Pretax via payroll deduction

In case of an IRS audit, you are responsible for keeping relevant documents as it pertains to your HSA account

- Post tax** via personal check or cash (may require a contribution form)

**** Account holder should be able to take a personal deduction off 1040 tax return. Please direct all tax-related questions with your tax accountant ****

DENTAL BENEFITS



DENTAL PLAN SUMMARY

Dental Plan

Guardian

Group Number: 415295

Member Services: (800) 541-7846

Website: www.glic.com

Dental Preferred Provider Organization (PPO)

When you enroll in the Guardian dental plan, you may receive care from any provider. However, when you visit providers who belong to the Guardian PPO network, you will pay less out-of-pocket than if you choose to obtain services from non-network providers.

	In-Network	Out-of-Network ¹
Dentist Choice	Dental Guard Preferred PPO Dentist	Any Other Dentist
Annual Maximum	\$2,000 per member	
Deductible	\$50 per individual / \$150 per family	
Reimbursement Basis	Negotiated Rates	Usual, Customary and Reasonable (UCR) ⁽¹⁾
	YOU PAY	YOU PAY ¹
Diagnostic & Preventive Services	Covered in full	Covered in full
Cleanings, Exams (Deductible waived)		
Basic Services	10%	20% of UCR
Fillings, Extractions, etc.		
Major Services	40%	50% of UCR
Bridges, Dentures, Crowns		
Orthodontics (Adult and Child)	50% to lifetime maximum of \$1,000	

¹ Non-PPO dentists are paid based on Usual, Customary and Reasonable charges. The patient is responsible for any charges over the Usual,

Note: Late Entrant Provisions: If you waived dental coverage during your initial eligibility period and wish to enroll at a later time without a qualifying event, you will be subject to a 12-month waiting period for major services.



VISION BENEFITS

VISION PLAN SUMMARY

Voluntary Vision

Vision Service Plan

Group Number: 12289299

Member Services: (800) 877-7195

Website: www.vsp.com

Athens Administrators offers a voluntary vision plan provided through Vision Service Plan (VSP). If you enroll in the VSP plan, you may receive care from any provider. However, VSP pays for eligible expenses at a higher level when you visit a network provider.

	In-Network	Out-of-Network
Copay	\$10 - Exams / \$25 - Materials	
Exams (every 12 months)	Covered in full	Up to a \$50 Allowance
Lenses (every 12 months)		
▪Single Vision	Covered in full	Up to a \$50 Allowance
▪Bifocal	Covered in full	Up to a \$75 Allowance
▪Trifocal	Covered in full	Up to a \$100 Allowance
Frames (every 24 months)	\$150 Allowance	Up to a \$70 Allowance
Contact Lenses (every 12 months, in lieu of glasses)	\$135 Allowance (elective)	Up to a \$105 Allowance (elective)
Laser Vision Care	Discount for LASIK	Not Covered
Tru Hearing Program	Value Add Program that offers an average of over	
	25% discount on hearing aids	



INCOME PROTECTION BENEFITS



CALIFORNIA STATE DISABILITY INSURANCE (CA SDI)

The disability benefit will be reduced by any disability income payments received through the California State Disability program or any other type of compensation that is received. The California State Disability program provides a benefit of 55% of weekly income up to a maximum amount. For more information about the California State Disability program and how to apply please call 1-800-480-3287 or you can go online to www.edd.ca.gov.

EMPLOYEE SHORT TERM DISABILITY (STD)

Unum

Group # 0591376

Member Services: (800) 421-0344

Website: www.unum.com

This plan provides you 66.67% of your weekly earnings to a maximum of \$3,500 per week if you are unable to work due to illness or injury. Payments begin after 30 days of disability and can continue for up to 22 weeks.

LONG TERM DISABILITY (LTD)

Unum

Group # 0591376

Member Services: (800) 421-0344

Website: www.unum.com

This plan provides you 66.67% of your monthly earnings to a maximum of \$15,000 once you have been disabled for 6 months. If you are totally disabled, benefits will continue up to age 65.

EMPLOYEE LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE

Unum

Group # 0591376

Member Services: (800) 421-0344

Website: www.unum.com

In the event of your death, your beneficiary will receive a benefit equal to a multiple of your basic annual earnings. Guarantee Issue benefit is \$500,000 and the benefit maximum is \$750,000. The plan also includes coverage in the event of dismemberment and payment options in the event of a terminal illness. Athens pays the full cost of this coverage. You may purchase additional life coverage under the voluntary plan also through Unum. See Voluntary Life Insurance below for details.

VOLUNTARY LIFE INSURANCE AND ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE

Unum

Group # 409308

Member Services: (800) 421-0344

Website: www.unum.com

Athens offers employees the option to purchase additional life insurance coverage from Unum for themselves, their spouses or children. These plans can help offset financial hardship in the event a covered family member suffers a loss of life due to illness or accidental death. Please log onto the website at athensadmin.epiceb.com or see Human Resources for details if you are interested. If you do not enroll as a new hire, you will have to furnish proof of good health, evidence of insurability, to gain coverage. The benefit maximum you can purchase is \$500,000 or 5x's your annual earnings (whichever is less) of voluntary coverage. Any amounts over \$110,000 will require proof of good health (evidence of insurability.)

VOLUNTARY LONG TERM CARE COVERAGE FOR EMPLOYEES AND FAMILY (LTC)

UNUM

Group # 138681

Member Services: (800) 227-4165

Website: www.unum.com

This plan provides coverage to eligible participants that require long term care in a facility or home. Athens provides a base LTC coverage for managers and above and employees with five or more years of tenure. All employees have the opportunity to purchase LTC coverage for themselves and their family members. After 90 days, the coverage pays \$2,000 per month for a long term care facility (for up to 2 years) or \$1,500 for home care for up to \$48,000 combined lifetime maximum. Participants may purchase higher amounts of coverage. See Human Resources for the appropriate paperwork.





ADDITIONAL PLANS

FLEXIBLE SPENDING ACCOUNTS

Discovery Benefits

Member Services: (866) 451-3399

Website: www.discoverybenefits.com

Under the Flexible Spending Account, employees may enroll in any of the three options which include Pre-tax Premium Plan, Medical Care Reimbursement and Dependent Care Reimbursement. Tax savings under these plans will vary based on your individual salary and personal income tax level. Tax savings include Federal, State and Social Security taxes. The plan year for employee contributions is 1/1/2018 through 12/31/2018 and expenses are paid on a calendar-year basis. Use it or lose it – carefully estimate the amount you want to contribute. The IRS requires you to forfeit any amounts not spent by the end of the year.

Pre-Tax Premium: A pre-tax premium plan allows you to use pre-tax dollars to pay for monthly medical, dental and vision contributions. You will automatically be enrolled in this option unless you waive this tax savings benefit.

Medical Reimbursement: A medical reimbursement plan enables you to allocate up to \$2,650 on a pre-tax basis for medical, dental and vision expenses not covered under Athens' employee benefit program. Benefits may include, but are not limited to deductibles, copayments, medical, dental, vision and hearing care. If you have \$500 or less remaining in your Health FSA, it will roll over into the next plan year for you to use.

Note: Effective 1/1/2011, most Over-The-Counter (OTC) medications not prescribed by a physician, will no longer be reimbursable with FSA funds. OTC medications purchased in conjunction with a physician's prescription are expected to be reimbursable.

Dependent Care Reimbursement: A dependent care reimbursement plan enables you to make pre-tax contributions of up to \$5,000 annually or \$2,500 if you are married and filing separately. Eligible dependent care includes; day care for a child under age 13, adult care for an incapacitated spouse or parent, or care for a child of any age who is physically or mentally unable to care for him/herself.

FLEXIBLE SPENDING ACCOUNTS – COMMUTER FSA

NBS Commuter - Transit and Parking FSA

Transit: Use pre-tax dollars for work-related commuter expenses such as public transportation (bus, train, ferry, subway) and Commuter Highway Vehicles (vanpools). You may contribute up to \$260 each month on a pre-tax basis.

Parking: Use pre-tax dollars for work-related parking expenses. You may contribute up to \$260 each month on a pre-tax basis. *Bridge tolls do not qualify.*

TRAVEL ASSISTANCE SERVICES (ADMINISTERED BY ASSISTAMERICA)

In USA (800) 872-1414; or Outside the USA (609) 986-1234 Call Collect

www.unum.com/travelassistance

You have access to Assist America, a special travel assistance service. This service offers you and your dependents medical, travel, legal and financial assistance services, 24 hours a day, 365 days a year worldwide. Participants have access to assistance services when faced with an emergency while traveling internationally or domestically when more than 100 miles away from home. With one simple phone call, you and your dependents (whether traveling together or separately) will have access to Assist America assistance services by calling 800-872-1414.

EMPLOYEE ASSISTANCE PROGRAM (EAP)

Claremont EAP

Group # 14311

Member Services: (800) 834-3773

Website: www.claremonteap.com

An EAP is a confidential service designed to assist employees and their dependents with mental health and crisis intervention. Employees and their family members may call and receive assistance with job burnout, substance abuse, depression, marital stress, grief, financial assistance and various other issues. This number is available 24 hours a day on an unlimited basis. The plan provides up to 3 face-to-face or video conferencing sessions per occurrence each calendar year with a therapist and offers discounted rates for additional sessions.

ADDITIONAL PLANS

BUSINESS TRAVEL ACCIDENT

CIGNA

Pol # ABL 657968

In the event of your accidental death or dismemberment while traveling on company business, Athens' policy will pay your beneficiary \$50,000 or a percentage of that amount based on the policy limits.

401(k) SAVINGS PLAN

Prudential

Plan ID: 768006

Member Services: (877) PRU-2100

Website: www.prudential.com

As an Athens employee, you are eligible to join the 401(k) plan once you have completed 30 days of service without an intervening break in service and are 18 years of age or older. Entry dates are the first of the month following eligibility. You can stop contributions and increase or decrease contributions anytime. You may contribute any percentage of your total gross salary not to exceed the IRS maximum (\$18,500 in 2018; additional \$6,000 if over age 50). You decide how to invest your contributions so that you control the amount of risk and potential rate of return that your 401(k) savings plan will provide. The company will contribute \$0.33 for every dollar that you contribute on the first 8% of pay you contribute each pay period. The plan will also match the catch up contributions. You will begin receiving matching contributions as soon as you become a participant of the plan. Employer funding is paid at Employer's discretion.

BIG C ATHLETIC CLUB MEMBERSHIP DISCOUNT OFFERING

You have the opportunity to become a member of this full-service gym and take advantage of our corporate discount on both the enrollment fee and monthly dues. For Big C enrollment, please visit the location or call (925) 671-2110. Monthly dues may be deducted through payroll.



PET INSURANCE - VOLUNTARY PLAN



Nationwide®
is on your side

Pet Insurance



What do the new plans cover?

My Pet Protection and My Pet Protection with Wellness reimburse a straightforward 90% of your vet bill* instead of using a benefit schedule. A \$250 annual deductible and \$7,500 maximum annual benefit apply to both plans.

What's new and exciting about the new My Pet Protection plans?

- The most comprehensive pet insurance coverage available as a voluntary benefit
- Simple 90% reimbursement*
- Simple pricing
- No age restrictions
- No lifetime limits



- Accidents and illnesses
- Hereditary and congenital conditions
- Cancer
- Dental diseases
- Behavioral treatments
- Rx therapeutic diets and supplements
- Wellness exams
- Vaccinations
- Flea prevention
- Spay or neuter
- Teeth cleaning
- And more



- Accidents and illnesses
- Hereditary and congenital conditions
- Cancer
- Dental diseases
- Behavioral treatments
- Rx therapeutic diets and supplements

State	My Pet Protection w/Wellness	My Pet Protection	State	My Pet Protection w/Wellness	My Pet Protection
	CAT	CAT		DOG	DOG
California	\$39.69	\$23.74	California	\$66.15	\$39.57
Florida	\$42.20	\$26.35	Florida	\$70.32	\$43.92
New Jersey	\$49.61	\$29.68	New Jersey	\$82.69	\$49.46
Oregon	\$39.69	\$23.74	Oregon	\$66.15	\$39.57
Pennsylvania	\$41.67	\$24.93	Pennsylvania	\$69.46	\$41.55
Tennessee	\$37.70	\$22.55	Tennessee	\$62.84	\$37.59

Easy enrollment – Work Directly with Nationwide to obtain your Pet Insurance

There are three simple ways for employees to sign up for their new pet insurance voluntary benefit:

1. Go directly to the dedicated URL created for Athens Administrators:
<http://www.petinsurance.com/athensadmin>
2. Visit PetsNationwide.com and enter your company name
3. Call [877-738-7874](tel:877-738-7874) and mention that they're employees of Athens Insurance Service or Athens Administrators to receive preferred pricing
4. Payment will be via payroll deduction





Student Loan Refinancing 101

CommonBond is:

- A **consumer lender** focused on **refinancing** student loans, that saves borrowers over \$24,000¹ on average
- A **student loan solutions provider** that enables employers to help their employees **reduce and manage their student debt**
- A **financial services leader** with a **social mission**

Want freedom from student loans?

We have that in common.

You did every thing right. You went to a good school, worked hard and graduated.

Now comes the hard part: you have to start paying your student loans. Those high balances may make you feel like you'll be in debt forever and you may feel like you're the only one.

You're not alone. Professionals in every field are in the same boat. While paying student loans may be daunting, you can refinance your loans to reduce your debt and save thousands of dollars.

Additional savings and a cash bonus for your employees

\$200

The cash bonus all employees, friends and family will receive when they refinance their student loans with CommonBond

Work Directly with CommonBond

Learn more and access the application using this website:

www.commonbond.co/athens



2018 EMPLOYEE RATES

Athens Administrators pays the major share of the cost for employee healthcare coverage. Employees pay a portion of the cost of coverage and also pay a portion of the cost for covering their dependents. See the charts below.

Athens Administrators offers group health plans and a wellness program. During the re-enrollment period, Athens' group health plan provides an option for employees to certify they have not used tobacco during the preceding 12 months. Employees who do not provide the certification or do not complete the smoking cessation program will not qualify for the non-smoker rates.

If it is unreasonably difficult, due to a medical condition for you to meet the requirements of the smoking cessation program or if it is medically inadvisable for you to attempt to meet the program requirements, Athens Administrators will provide an alternative for you to qualify for the non-smoker rates. Please contact your Human Resource department.

2018 Rates For Non-Smokers and Smokers Who Complete the Smoking Cessation Program Deduction Per Bi-Weekly Pay Period

	Employee Only	Employee + 1	Employee + 2 or more
Anthem HDHP PPO (HSA)	\$57.23	\$140.31	\$198.00
Anthem HMO	\$58.62	\$154.15	\$219.69
Kaiser HMO (Hired before 7/1/2010)	\$62.03	\$154.11	\$218.08
Kaiser HMO (Hired on or after 7/1/2010)*	\$83.26	\$185.95	\$249.92
Kaiser HDHP HMO (HSA)	\$60.58	\$142.96	\$197.24
Guardian PPO Dental	\$9.23	EE + Spouse - \$18.46 EE + Child(ren) - \$22.15	\$32.31
Voluntary VSP Vision	\$5.88	EE + Spouse - \$10.07 EE + Child(ren) - \$10.28	\$16.58

2018 Rates For Smokers* Deduction per Bi-Weekly Pay Period

	Employee Only	Employee + 1	Employee + 2 or more
Anthem HDHP PPO (HSA)	\$103.38	\$186.46	\$244.15
Anthem HMO	\$104.77	\$200.31	\$265.85
Kaiser HMO (Hired before 7/1/2010)	\$108.18	\$200.26	\$264.23
Kaiser HMO (Hired on or after 7/1/2010)	\$129.42	\$232.11	\$296.08
Kaiser HDHP HMO (HSA)	\$106.73	\$189.12	\$243.39
Guardian PPO Dental	\$9.23	EE + Spouse - \$18.46 EE + Child(ren) - \$22.15	\$32.31
Voluntary VSP Vision	\$5.88	EE + Spouse - \$10.07 EE + Child(ren) - \$10.28	\$16.58

* Monthly surcharge added

2018 Athens Administrators Annual HSA Funding (Funded Quarterly)

	Employee Only	Employee + 1	Employee + 2 or more
Anthem & Kaiser HDHP HSA Fund Total Per Year	\$1,000	\$1,250	\$1,500
2018 IRS HSA Annual Limit**	\$3,450	\$6,900	\$6,900

**Catch-up Contribution for those ages 55 and older is an additional \$1,000.

NEW - EMPLOYEE BENEFITS MOBILE APP

Benefits 2Go

ACCESS TO COMPANY BENEFITS INFORMATION WHENEVER AND WHEREVER YOU CARRY YOUR SMARTPHONE AND TABLET DEVICES.

DOWNLOAD THE APP FROM: ITUNES OR GOOGLE APP STORE

ATHENS COMPANY REGISTRATION CODE: ATH0109

Register with the registration code when setting up your account.

1. Go to iTunes app store or Google Play for Android
2. Search for → Benefits2Go
3. Download
4. Open App
5. Click on Register
6. Enter your name, email and password as required by the app
7. Enter the following Registration code → ATH0109
8. Open the app and enjoy!

24/7 ACCESS

Our mobile application is a powerful way to deliver benefits information to employees, when they need it, any time of day or night.

BENEFIT PLAN INFORMATION

- Group benefit plan names and group numbers
- Links to Carrier websites
- Carrier Member Services phone number for assistance (connected by app)
- Member ID – member information from Carrier ID card secured by personal identification numbers (PIN)
- Plan highlights for core benefit plans (medical, dental and vision)

PROVIDER SEARCH FEATURES

Search Carrier information to find doctors, dentists, hospitals, and vision care specialists.

BENEFITS HELP NUMBER

Contact information for HR person or group that can assist with benefit questions.

ADDITIONAL RESOURCES

Customizable feature that can include links to additional plan details, tips for talking with a doctor, Rx price comparisons, information to be more involved in health care and wellness, and more.



EMPLOYEE ACCESS TO BENEFITS INFORMATION

EMPLOYEE BENEFITS WEBSITE (exclusively for Athens Administrators)

To review the benefit plans offered through Athens Administrators, please visit our Employee Benefits Website at <http://athensadmin.epiceb.com>. The login is [athensadmin](#). The password is [benefits](#).

Within our website, you will be able to:

Benefit Programs

- Direct link to the online enrollment system
- Learn about **all your benefit plans**:
 1. Benefits Summaries
 2. Eligibility requirements
 3. Contributions
- Find links to provider directories and other internet resources
- Get contact information for phone numbers, addresses and links
- Compare plans

Human Resources Center

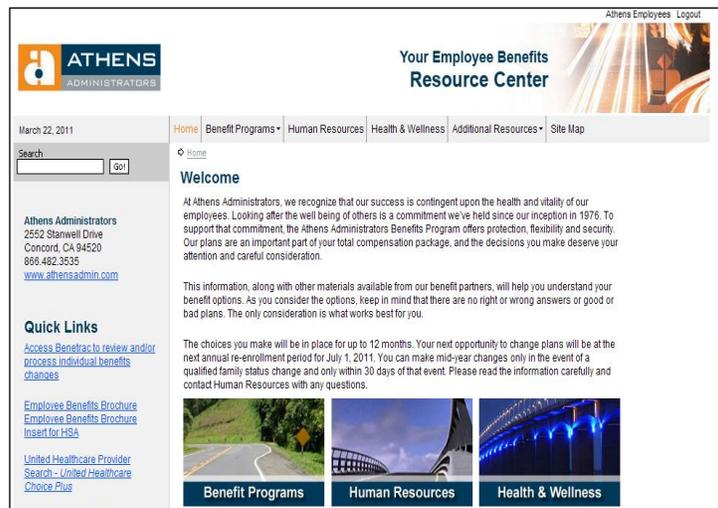
- News

Health & Wellness Center

- Assess your health
- Research a disease, condition, or treatment
- Click to find your symptoms or condition

It's as easy as 1-2-3 to obtain information!

1. Go to the web address <http://athensadmin.epiceb.com>
2. Input your user ID and password:
 - User ID: athensadmin
 - Password: benefits
3. Click "enter"



EMPLOYEE ONLINE ENROLLMENT WEBSITE (EXCLUSIVELY FOR ATHENS ADMINISTRATORS)

Submit your benefits enrollments and changes through the Paycom Employee Self Service (ESS) portal.

- www.paycom.com – login in under "Employee" using Paycom username and password.
- Under the My Benefits section, choose "2018 Benefit Enrollment" to begin the process.

EMPLOYEE BENEFITS HELP DESK

(800) 925-4802

epic-helpdesk@epicbrokers.com

Our Benefit HelpDesk service can assist you with benefit questions and/or claim resolution. Privacy Plan regulations severely restrict an employer's ability to discuss medical issues directly with associates or to represent them in claim resolution, so we utilize a Help Desk service through EPIC Brokers (our benefit consultants). Unlike a "call center", the Benefit Help Desk is staffed by experienced Benefit Specialists dedicated to the Athens account and trained on our benefit programs. The Benefit Help Desk can assist you or your family members with questions, claim resolution, forms, eligibility and open enrollment processes for any of our benefits.

Important reminders when contacting the Benefit Help Desk and/or the carriers:

- ✓ Privacy Act regulations may require a written authorization to be completed to discuss benefit issues
- ✓ If you reach voicemail, leave a detailed message with your call back information. Voicemail and email messages left with the Benefit Help Desk are returned within 24 hours Monday through Friday.
- ✓ Have your supporting bills ready for reference



ABOUT THE HEALTH CARE REIMBURSEMENT ACCOUNT (FLEXIBLE SPENDING & HEALTH SAVINGS ACCOUNT)

This account is to be used for qualifying medical/dental/vision expenses for diagnosis and treatment provided by a practitioner. This includes eligible expenses for you and your family not covered by any other plan.

Estimating Expenses – Estimate conservatively. Amounts set aside and that you do not request prior to the plan year end, will not be returned to you from your FSA plan. The only way to be reimbursed from a medical reimbursement account is with a qualifying receipt. You will lose any unspent money in your FSA. Remember, only expenses incurred during the plan year will qualify for reimbursement.

Examples of Eligible Health Care and Health Savings Account Expenses – The following list identifies some of the common medical and health related expenses that the Internal Revenue Service considers to be deductible expenses. These expenses are eligible for reimbursement through your Reimbursement Account provided that you have not been reimbursed for them through any other insurance or benefit plan. Many other expenses may qualify for reimbursement. This is a sample list only. If you have a specific expense and would like to determine its eligibility, please call Discovery Benefits – (866) 451-3399

<ul style="list-style-type: none"> ▪ Abortion (legal) ▪ Acupuncture ▪ Airfare for transplant donor (or prospective donor) ▪ Alcoholism treatment ▪ Ambulance hire ▪ Artificial limbs and teeth ▪ Autoette (small three wheel vehicle) or wheelchair ▪ Birth control pills ▪ Braces ▪ Braille books and magazines (the extent the prices exceed prices for regular books) ▪ Bus fare to obtain medical care ▪ Car (special medical equipment) ▪ Car expenses to obtain medical care (10 cents per mile) ▪ Contact lenses ▪ Cosmetic surgery (needed to improve congenital abnormality, personal injury, or disfiguring disease) ▪ Crutches ▪ Diathermy ▪ Examination, physical ▪ Eye examination ▪ Eyeglasses ▪ Fees to doctors, hospitals, etc. for anesthesiologist, chiropractor, Christian Science Practitioner Clinic, dentist, dermatologist ▪ Guide dog and its upkeep ▪ Gynecologist 	<ul style="list-style-type: none"> ▪ Health spa in home (to extent value of home not increased) ▪ Hospital services ▪ Insulin ▪ Iron lung ▪ Laboratory fees ▪ Laboratory services ▪ Lasik eye surgery ▪ Lead-based paint removal ▪ Lip-reading lessons ▪ Lodging for medical care ▪ Legal fees to allow treatment for mental illness ▪ Meals and lodging incurred en route between taxpayer's home and place of medical treatment ▪ Medical information plan ▪ Midwife ▪ Neurologist ▪ Nurses' expenses and board ▪ Nursing care ▪ Nursing home (if for medical reasons) ▪ Obstetrician ▪ Operations and related treatments ▪ Ophthalmologist ▪ Optometrist ▪ Osteopath (licensed) ▪ Oxygen equipment 	<ul style="list-style-type: none"> ▪ Podiatrist ▪ Practical nurse Prescribed drugs and medicine ▪ Psychiatrist ▪ Psychoanalyst (medical care only) ▪ Psychologist (medical care only) sex therapist ▪ Radial keratotomy ▪ Rental of medical equipment ▪ Rental car expense if used primarily to obtain medical care ▪ Sanitarium ▪ Special schooling for physically or mentally handicapped family member ▪ Sterilization ▪ Surgeon ▪ Telephone (for the deaf) ▪ Television equipment which displays the audio part of the TV programs for the deaf ▪ Therapy ▪ Transplants ▪ Transportation expenses for essential medical care ▪ Vitamins (prescription) ▪ Wheelchair ▪ Wigs (to cover baldness due to medical reasons) ▪ X-ray <p>Note: Over the counter medications are not eligible for reimbursement without a doctor's prescription.</p>
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EXAMPLES OF EXPENSES THAT DO NOT QUALIFY FOR PRE-TAX REIMBURSEMENT

<ul style="list-style-type: none"> ▪ Any illegal treatment ▪ Cosmetic surgery ▪ Weight reduction programs for general well-being ▪ Non-prescription smoking cessation aides 	<ul style="list-style-type: none"> ▪ Cost of remedial reading classes for non-handicapped child ▪ Any expenses for or by domestic partners ▪ Non-prescription vitamins ▪ Marriage counseling 	<ul style="list-style-type: none"> ▪ Marijuana (even if obtained by lawful prescription in a state that permits medical use of controlled substance) ▪ Over the Counter medications
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2018/2019 BENEFITS “TO DO” LIST

- 1. **Medical, Dental, and Vision Coverage** - All enrollment must be done in PAYCOM ESS. The benefits you elect at this time will be effective first of the month following 30 days of employment. If enrolling in Anthem HMO for the first time you will need to select your Primary Care Physician (PCP) with Anthem, otherwise Anthem will select one for you (and any enrolled dependents).
- 2. **Steps When Selecting the Anthem or Kaiser’s HDHP Plan & HSA**
 - Enroll online in Anthem or Kaiser’s High Deductible Health Plan (HDHP)
 - If new to the plan, your Health Savings Account (HSA) will be created for you. You will receive information on the Health Equity account.
 - Choose whether to contribute into your HSA and how much per paycheck. Contact your HR Business Partner with the amount you like to contribute for 2018
- 3. **Waive Medical and/or Dental/Vision Coverage** – If you are electing not to enroll in any of these coverages, please remember to decline the coverages in PAYCOM ESS
- 4. **401(k) Enrollment** - Enrolling or making changes in 401(k)? Do it now!
- 5. **Voluntary Life Enrollment** – All enrollment must be done in PAYCOM ESS. If you did not enroll as a new hire, please complete the *Evidence of Insurability* (EOI) form. If you elect more than \$110,000 (for employee elections), please complete the *Evidence of Insurability* information.

Remember, if you don’t enroll now, you will be unable to do so until July 1, 2019, unless you have an IRS-approved change in family status, and your change is reported within 30 days of the event. Please carefully consider your benefit choices for the upcoming year.



The benefits described herein are subject to amendment or termination by Athens Administrators at any time.

This guide is for general information purposes only. It provides an overview of the plans available through the benefits program. The plans contain certain limitations and exclusions which may affect your coverage. Please review your Evidence of Coverage or Summary Plan Description for details. It does not replace or supplement the plan documents. If there is any conflict between the information in this guide and the plan documents, the plan documents will govern.



KEY CONTACTS

For Questions About	Contact	Call	Web Address	Plan/Group ID
Medical HMO	Anthem – CA	(800) 888-8288	www.anthem.com	280535 H001
Medical PPO HDHP HSA	Anthem – CA	(866) 207-9878	www.anthem.com	280535 M007/M010
Medical HMO	Kaiser – Northern CA	(800) 464-4000	www.kp.org	28013-0000
Medical HMO	Kaiser – Southern CA	(800) 464-4000	www.kp.org	233524-0000
Medical HMO HDHP	Kaiser – Northern CA	(800) 464-4000	www.kp.org	28013-0002
Medical HMO HDHP	Kaiser – Southern CA	(800) 464-4000	www.kp.org	233524-0002
HSA Plan	Health Equity	(877) 582-4453	www.healthequity.com	
Chiropractic	American Specialty Health	(800) 678-9133	Anthem Members–Use the provider search in the Anthem website Kaiser Members–Search online @ https://ashlink.com/ash/kp	
Dental PPO	Guardian	(800) 541-7846	www.glic.com	415295
Vision	VSP	(800) 877-7195	www.vsp.com	12289299
Short-Term Disability	Unum	(800) 421-0344	www.unum.com	591376
Long-Term Disability	Unum	(800) 421-0344	www.unum.com	591376
Life Insurance	Unum	(800) 421-0344	www.unum.com	591376
AD&D Insurance	Unum	(800) 421-0344	www.unum.com	591376
Travel Assistance Service	Unum	(800) 872-1414 Outside USA (609) 986-1234	medservices@assistamerica.com	Ref # 01-AA-UN-762490
Employee Assistance Plan (EAP)	Claremont	(800) 834-3773	www.claremonteap.com	283848
FSA Plans	Discovery Benefits	(866) 451-3399	www.discoverybenefits.com	27807
401k Retirement Plan	Prudential	(877) PRU-2100	www.prudential.com	768006
Pet Insurance	Nationwide	(877) 738-7874	www.petinsurance.com/athens	
Student Loan Refinance	CommonBond	(800) 975-7812	www.commonbond.co/athens	

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