VNA Health Care

2016-17 Benefit Overview

Benefit Offered/Effective Date/Carrier	Basic Details	Employee Cost 2016-17	Full Time Benefited*	Part Time Benefited*	Part Time Non-Benefited*	PRN Non-Benefited*
Health Insurance Effective the 1st of the Month Following Hire Date through BCBS - www.bcbsil.com BlueCross BlueShield of Illinois	To review the BCBS network of providers and hospitals, go to www.bcbsil.com and click "Find a Doctor". Be sure to search in the appropriate network when searching - BlueAdvantage HMO, or PPO.	Semi-Monthly (2 times/month) Payroll Deductions **Value BA HMO** Employee Only $40.00 EE+Spouse* $220.00 EE+Child(ren) $167.00 Family* $400.00 PTE $86.00 **BA HMO** Employee Only $65.00 EE+Spouse* $270.00 EE+Child(ren) $214.00 Family* $479.00 **Value PPO** Employee Only $124.00 EE+Spouse* $389.00 EE+Child(ren) $327.00 Family* $670.00 **HSA PPO** Employee Only $202.00 EE+Spouse* $543.00 EE+Child(ren) $480.00 Family* $879.00 *Spouses eligible for coverageat their employer will pay an extra $62.50 per paycheck.	✓	NA	NA	NA

		BlueAdvantage Value HMO		BlueAdvantage HMO		Value PPO		HSA PPO	
		In	Out	In	Out	In	Out	In	Out
Deductible	Individual	None	None	None	None	$2,500	$5,000	$1,500	$4,500
	Family	None	None	None	None	$5,000	$10,000	$3,000	$9,000
"Net"	Individual	None	None	None	None	$2,500	$5,000	$750	$4,500
Deductible	Family	None	None	None	None	$5,000	$5,000	$1,500	$4,500
Coinsurance		100%	0%	100%	0%	80%	60%	100%	70%
Coinsurance	Individual	$0	None	$0	None	$3,850	$7,700	$0	$15,500
	Family	$0	None	$0	None	$7,700	$15,400	$0	$31,000
Preventive Care		No Copay!	None	No Copay!	None	Free!	60% after Ded.	Free!	70% after Ded.
Office Visit		$50 copay	None	$25 copay	None	80% after Ded.	60% after Ded.	100% after Ded.	70% after Ded.
Specialist Visit		$70 copay	None	$55 copay	None	80% after Ded.	60% after Ded.	100% after Ded.	70% after Ded.
Emergency Room		$300 copay	None	$150 copay	None	90% after Ded.		100% after Ded.	
Outpatient Surgery		$300 copay	None	$245 Copay	None	80% after Ded.	60% after Ded.	100% after Ded.	70% after Ded.
Inpatient Hospital		$750 copay (max 3 days)	None	$500 copay (max 3 days)	None	80% after Ded.	60% after Ded.	100% after Ded.	70% after Ded.
Prescription Drugs	Generic	$8 copay		$10 copay		Plan Pays 80% after Ded.		Ded. & Coinsurance	
	Formulary Brand	$35 copay		$60 copay					
	Non-Form Brand	$75 copay		$80 copay					
	Specialty	$150 copay		n/a					
VNA HSA Contribution	Employee Only	n/a		n/a		n/a		Annual $750	Monthly $62.50
	Family							$1,500	$125.00

As a BCBS member, you also have a vision care discount program available through Davis Vision.
Vision provider network can be viewed at www.bcbsil.com.
Click "Find a Doctor" and then "Find a Vision Provider" at the bottom.

Dental Insurance Effective the 1st of the Month Following Hire Date through Guardian - www.guardianlife.com GUARDIAN	Dental PPO or Dental HMO Plan Options.	Payroll Deductions (2 times/month) **Dental PPO** Employee Only $22.09 EE+1 $39.80 Family $64.45 **Dental HMO** Employee Only $8.07 EE+1 $15.33 Family $23.63	✓	✓	NA	NA

	Dental PPO		DHMO
	In	Out	In Only
Deductible (Max 3 per family)	$50	$75	$5 Copay
Annual Maximum	$1,000		No Maximum
Preventive Services	100%		See Copay Schedule
Basic Services	80%		See Copay Schedule
Major Services	50%		See Copay Schedule

College Tuition Benefit is available for Dental enrollees. Learn more and sign up at www.collegetuitionbenefit.com

Vision Insurance Effective the 1st of the Month Following Hire Date through Guardian - www.guardianlife.com GUARDIAN	Payroll Deductions (2 times/month) Employee $4.34 EE+1 $6.59 Family $11.58	✓	✓	NA	NA

	In-Network (VSP)	Out-of-Network
Copays	$10 Exam, $25 Materials	$10 Exam, $25 Materials
Exams	100% after Copay	$46 Maximum
Lenses	100% after Copay	From $47-125 Max
Contacts	$120 Maximum	$210 Maximum
Frames	$120 Allowance	$47 Maximum

Life Insurance Effective the 1st of the Month Following 90 days of Employment through Sun Life - www.sunlife.com unum	Equal to 1x Annual Salary, Rounded to Next Higher $1k to $200k; 100% at age 65, 50% at age 70.	VNA Paid	✓	NA	NA	NA
Supplemental Life Insurance Effective the 1st of the Month Following 90 days of Employment through Unum - www.unum.com unum	Coverage up to $150,000 for employee based on age and election amount. Evidence of insurability may be required. Self: Purchase amount of $25,000, $50,000, $100,000, or $150,000. Spouse: Purchase 50% of the Employee amount to a maximum of $75,000. Children: Purchase $5,000 or $10,000 policy. Your premium covers all children.	Pre-tax payroll deductions (2 times/month) based on election amount	✓	✓	NA	NA
Long Term Disability Effective the 1st of the Month Following 90 days of Employment through Unum - www.unum.com unum	Available after 6 months of continuous disability. 60% up to $7,500.	VNA Paid	✓	NA	NA	NA

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Short Term Disability Effective the 1st of the Month Following 90 days of Employment through Unum - www.unum.com	May begin the 1st of the month following 90 days from the date of hire and is available to employees working at least 30 hours per week on a regular basis. Benefits for continuous disability for sickness, pregnancy or accidental injuries unrelated to employment may begin on 15th or 31st day, based on which option you select. Benefits are based on 60% of employee's pre-disability earnings up to a maximum of $1,750 per week. Coverage continues until employee is no longer disabled up to 22 or 24 weeks, when long-term disability insurance coverage begins. Your costs are based on your plan choice, age and salary.	Pre-tax payroll deductions (2 times/month) based on age & salary.	✓	Eligible only if 30 or More Hours per Week	NA	NA
Flexible Spending Account (FSA) Effective Day One Of Employment TASC - www.tasconline.com	Pre-tax savings for health ($2,550 plan year maximum) and/or child care ($5,000 plan year maximum) expenses. You will be reimbursed by TASC. The amount you choose is "use it or lose it" for the plan year to the end of 1/31.	Pre-tax payroll deductions (2 times/month) based on election amount.	✓	✓	NA	NA
Retirement Effective after 1 Year of Employment and 1,000 or more work hours in the calendar year through Principal - www.principal.com	Based on Length of Service: 1-5 yrs. =3%, 6 yrs = 4%, 7 yrs = 5%, 8 yrs = 6%, 9 yrs = 7%, 10 yrs = 8%, 11 yrs = 9%, 12 yrs = 10%. Vesting Schedule (Number of years employed): 2 yrs = 20%, 3 yrs. = 40%, 4 yrs. = 60%, 5 yrs = 80%, 6 yrs = 100%.	VNA Paid	✓	Eligible only if 1,000 or More Hours per Year	NA	NA
403(b) Effective 1st of the Month Following Hire Date through Principal - www.principal.com	Tax-Deferred Annuity account - Employee may invest a portion of current pre-tax income for retirement with the advantage of deferring related federal and state income taxes.	Employee Contribution	✓	✓	✓	NA
Tuition Reimbursement Effective Following 3 Months of Employment through VNA - www.vnahealth.com	100% paid for pre-approved courses (relating to position held at VNA) up to $1900/yr (based on current budget).	VNA Paid	✓	Pro-rated	NA	NA
Paid Time Off (PTO) Effective Accrual after 30 Days of Employment and Can be Approved for Use After 90 Day Evaluation Period through VNA - www.vnahealth.com	PTO is a lump sum number that benefited employees manage for themselves, allowing for greater flexibility. May be used for a variety of reasons including, but not limited to: holidays, vacation, illness, and personal business. Thirty (30) days-1 year=168.75 Hours, 2-3 years=225 Hours, 4-5 years=262.5 Hours, and 5+ years=300 Hours. Presidents and Vice Presidents accrue total hours one year sooner and in the 1st year receive 196.875 Hours.	VNA Paid	✓	Pro-rated	NA	NA
Transportation Effective Day One of Employment for approved Business Mileage through VNA - www.vnahealth.com	Reimbursement for business mileage available to designated field staff, with manager's approval, at current federal rate.	Reimbursed (2 times/month) based on mileage.	✓	✓	✓	✓
Employee Assistance Program (EAP) Effective Day One Of Employment through ComPsych via Sun Life	Employee benefit program that help employees and their families and provides up to 5 telephone counseling sessions with a licensed professional at no charge.	VNA Paid	✓	✓	NA	NA

Disclaimer: Information presented here is for illustrative purposes only. This summary document is based upon the official plan documents. It is written to be understandable and attempts to be as accurate, and up-to-date a description as possible of your plan benefits. However, it does not include every detail of the official plan documents. In the event that there is any discrepancy between this summary versus the plan document, the actual plan document always governs. All offers of employment are contingent upon passing all VNA hiring requirements: post-offer/pre-employment physical(s) and drug/alcohol screening; obtaining all required employee documents and required professional references; and passing required tests. Effective 2-1-16 through 1-31-17.

***Note, Classes for Benefit purposes are defined as:**

Full Time Benefited: Minimum of 37.5 Hours per Week

Part Time Benefited: Greater than 18.75 Hours per Week - Pro-rated Benefits Based on Hours Worked

Part Time Non-Benefited: Typically Less than 18.75 Hours per Week

PRN Non-Benefited: Typically Less than 18.75 Hours per Week - Number of Hours Worked Based on Staffing Needs; No Set Schedule