



Welcome to Your Carolina Therapy Services Open Enrollment Benefit Overview!



WELCOME TO OPEN ENROLLMENT

- Carolina Therapy Services offers you a competitive and rewarding benefits package. We are proud to offer you benefits designed to protect the health and financial security of you and your family.
 - Open Enrollment starts at 4PM on May 11, 2020 and ends on May 18, 2020 at 10AM.
 - Elections made during open enrollment will become effective June 1, 2020.
- Medical & Rx
 - Dental
 - Vision
 - Teladoc
 - Flexible Spending Account



BENEFITS ELIGIBILITY

If you are a full-time employee – working 30 or more hours per week – you are eligible to enroll in the benefits described in this presentation.

New hires become eligible for benefits on the 1st of the month following 30 days of employment

The following family members are eligible for Medical, Dental, Vision and Voluntary Life plans.

- Legal Spouse and dependent children under 26



MAKING BENEFIT CHANGES

Unless you have a qualified change in status, you cannot make changes to the benefits you elect until the next open enrollment period.

Qualified changes in status include:

- Marriage
- Divorce
- Birth or adoption of a child
- Change in child's dependent status
- Death of a spouse, child or other qualifying dependent
- Change in residence due to an employment transfer for you or your spouse
- Commencement or termination of adoption proceedings
- Change in spouse's benefits or employment status

HIGHLIGHTS FOR 2020

Carolina Therapy Services carefully evaluates our employee benefit program every year to ensure we are providing a competitive program.

This year we are pleased to share:

- Medcost will remain as the plan administrator and network. Payroll deductions will also remain the same for 2020. Benefit plan enhancements include all outpatient behavior health and substance abuse visits will be subject to a \$30 copay and all physical, occupational & speech therapy will be subject to a \$30 copay. Both are subject to deductible and coinsurance currently.
- Southern Scripts will be replacing Optum as your prescription drug manager . You will be receiving a new medical/Rx ID card with the new pharmacy information listed. You can expect your new card by the last week of May. See Human Resources if you have not received a new card by June 1st.
- Dental and Vision will remain with Ameritas with no benefit or premium changes. There will be a true open enrollment for the dental and vision plan this year. If you had previously waived dental or vision you can now enroll with no waiting periods.
- Life, AD&D, Long and Short Term Disability and Critical Illness will all have no carrier, benefit or rate changes this year.

MEDICAL PLAN BENEFITS



| PPO Plan | |
|--|---|
| Services | You Pay: |
| Deductible - Individual - Family | \$2,000 \$4,000 Embedded |
| Out of Pocket Maximum - Individual - Family | \$6,000 \$12,000 Embedded |
| Preventive Care | Plan pays 100% |
| Primary Care | \$30 copay |
| Specialist Visit | \$70 copay |
| Inpatient Hospital | \$250 copay then 80% |
| Physical, Speech & Occupational Therapy | \$30 copay |
| Urgent Care | \$75 copay |
| Emergency Room | Deductible then 30% |
| Prescription Drugs* - Tier 1 - Tier 2 - Tier 3 | \$10 copay \$85 copay \$100 copay |

** Mail Order Program Available through SouthernScripts.com*

PRESRIPTION DRUG COVERAGE

- Southern Scripts will be your new Pharmacy Benefits Manager. You will have member access through their member site at www.southernscripts.net.
- Payer Matrix is a payment assistant program that partners with Southern Scripts to help with the cost of single source specialty drugs. If you are taking one of the qualifying medications you can expect outreach contact from a Care Coordinator with Payer Matrix.
- Payer Matrix advocates on your behalf with drug manufacturers, and our Care Coordinators facilitate with multiple entities to lower the cost of your prescription drugs. Often, members end up paying nothing out of their own pockets once they are admitted into our programs.



MEDCOST WEB PORTAL AND MOBILE APP

- Log in at MedCost.com/MyMedCost to access EOBs, check deductible/out of pocket amounts, review benefits, and view or print your ID card. Also access Live Chat and get real-time answers and support from MedCost Customer Service during our regular business hours of Monday – Friday, 8:30 a.m. – 5:00 p.m. ET.
- Use the My MedCost mobile app to access some of your favorite web features on your mobile device, including the digital version of your ID card. Go to MedCost.com/MyMedCost or download the My MedCost mobile app from your preferred app provider. Just search for My MedCost.
- Creating an account is as easy as 1-2-3
 - Go to MedCost.com/MyMedCost or download the My MedCost mobile app from your preferred app provider. Just search for My MedCost.
 - Follow the on-screen prompts and enter your information — you'll need information from your health plan ID card to complete registration.
 - Confirm that the information you entered is correct to create your account and sign in.



TELADOC

Teladoc services available to you at no charge.

Take advantage of **24/7 access** to doctors over the phone or video chat.

Doctors can help with many conditions including:

- Sore throat
- Headache
- Fever
- Stomachache
- Cold and flu
- Allergies

Visits are **FREE**

Register online, through the mobile app or over The phone to be ready when you need them.

[Teladoc.com](https://teladoc.com)

[Teladoc.com/mobile](https://teladoc.com/mobile)

1-800-TELADOC (835-2362)



EMPLOYEE CONTRIBUTIONS

- CTS pays 85% of employee only premiums. Employee Medical premiums will be deducted from your paycheck pre-tax.

| Employee Semi-Monthly Premium | | | | |
|-------------------------------|---------------|-------------------|---------------------|-------------------|
| | Employee Only | Employee & Spouse | Employee & Children | Employee & Family |
| PPO | \$41.25 | \$238.75 | \$211.25 | \$461.25 |

FLEXIBLE SPENDING ACCOUNT (FSA)

Health Care FSA

- Pay for out-of-pocket medical, dental, and vision expenses pre-tax
- Entire elected balance is available at the beginning of plan year
- Maximum allowable contribution: \$1,200
- 75 day grace period for 2020 plan year claims to be filed.

Dependent Care FSA

- Pay for dependent care expense on a pre-tax basis
- Childcare for children up to 13 & day care of senior dependents living with you
- Other eligible dependents (see HR for qualifications)
- Maximum allowable contribution: \$5,000

- New hires have a six month waiting period for these benefits
- Contributions are deducted from your paycheck pre-tax
- You must enroll/re-enroll each year to participate
- Choose your elections carefully, any funds not used by the end of the plan year will be forfeited (per the IRS regulation)

FLEXIBLE SPENDING ACCOUNT (FSA)

How to Submit a Claim

- Upload your claim electronically through our website, www.flores247.com
 - You will receive a PID Notification email (letter if no email is on file) with instructions on how to register your account. Otherwise, you can call our office at 800.840.7684 and we'll be happy to help you log in.
- Mobile Flores e-Receipt App
 - Simply snap a picture using your mobile device.
 - The Flores e-Receipt App can be downloaded from the App Store or Google Play Store.
- Claims can also be submitted fax or mail
- Be sure to submit all claims for services incurred during your active enrollment period by the 2021 claims filing deadline.

DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT (DCFSA)

How to Submit a Claim

- **No-Wait Dependent Care Claim Form**
 - Submit one claim form for your entire plan year's worth of eligible expenses.
 - To complete the form, you'll need your provider's nine-digit Tax ID (SSN if it is an individual) and their signature.
 - If you are unable to obtain the provider's signature, simply submit receipts showing the date, cost, and a description of the service along with your completed claim form.
- As you contribute to the account through your payroll deductions, Flores will automatically reimburse this amount to you the *same day* we receive the contribution.
- All claims must be submitted by the 2020 claims filing deadline.

DENTAL BENEFITS

Dental insurance is provided through Ameritas. Our plan helps you pay for preventive, basic, major, and orthodontic services. CTS pays 63% of the employee premium.

| Services | Benefit | | | | | | | | |
|--|---|---------------|--------|-------------------|---------|---------------------|---------|-------------------|---------|
| Annual Deductible (Plan Year) Applies to basic and major services only | \$50 Individual / \$150 Family | | | | | | | | |
| Annual Out-of-Pocket (Plan Year) | \$1,500 | | | | | | | | |
| Preventive Services Exams, cleanings, x-rays | Covered at 100% | | | | | | | | |
| Basic Services Fillings, simple extractions | Covered at 80% | | | | | | | | |
| Major Services Oral surgery, root canal, crowns | Covered at 50% | | | | | | | | |
| Orthodontics Services (Children under age 19 only) | Covered at 50% with a \$1,000 lifetime maximum benefit | | | | | | | | |
| Semi-Monthly Premium | <table> <tr> <td>Employee Only</td> <td>\$5.47</td> </tr> <tr> <td>Employee & Spouse</td> <td>\$19.65</td> </tr> <tr> <td>Employee & Children</td> <td>\$25.97</td> </tr> <tr> <td>Employee & Family</td> <td>\$40.15</td> </tr> </table> | Employee Only | \$5.47 | Employee & Spouse | \$19.65 | Employee & Children | \$25.97 | Employee & Family | \$40.15 |
| Employee Only | \$5.47 | | | | | | | | |
| Employee & Spouse | \$19.65 | | | | | | | | |
| Employee & Children | \$25.97 | | | | | | | | |
| Employee & Family | \$40.15 | | | | | | | | |



VISION BENEFITS

Vision insurance is provided through Ameritas and helps you pay for eye exams and corrective eyewear

| Plan Highlights | Benefit | Frequency |
|-----------------------------|---|-----------|
| Vision Exam | \$10 copay | 12 Months |
| Lenses | | |
| Single | \$25 copay | 12 Months |
| Bifocal | \$25 copay | 12 Months |
| Trifocal | \$25 copay | 12 Months |
| Frames | \$130 Allowance | 24 Months |
| Contacts | \$130 Allowance + 15% off remaining balance | 12 Months |
| Semi-Monthly Premium | Employee Only \$4.24 Employee & Spouse \$9.08 Employee & Children \$7.34 Employee & Family \$12.18 | |



BASIC LIFE INSURANCE

Carolina Therapy Services provides full-time employees with group life and accidental death and dismemberment (AD&D) insurance at no cost to you!

- Employees are covered according to class status.
- You can update your beneficiary information in Employee Navigator once Open Enrollment is closed.



VOLUNTARY LIFE INSURANCE

| Voluntary Life | |
|-------------------------------------|---|
| Guaranteed Issue | Employee: \$180,000 Spouse: \$20,000 Child: \$10,000 |
| Maximum Amount You Can Elect | You may elect coverage in \$10,000 increments up to a maximum of 5x your annual earnings or \$500,000. (Not exceed 7x your annual earnings when combined with basic life amount.) |
| Spouse Amount | Spouse can elect \$10,000 increments up to 2.5 x the employee annual salary, not to exceed 50% of employee's amount to a maximum of \$250,000 |
| Child Amount | \$10,000 (\$250 14 days to 6 months) |

This benefit is not up for open enrollment at this time. All current elections will continue on in the 2020 plan year.

DISABILITY INCOME BENEFITS

Carolina Therapy Services provides full-time employees with the opportunity to purchase short- and long-term disability income benefits through the convenience of payroll deduction.

In the event that you become disabled from a non-work-related injury or sickness, disability income benefits are provided as a source of income.

| | Short-Term Disability (STD) | Long-Term Disability (LTD) |
|--------------------------------------|---|----------------------------|
| Benefits Begin | 15 th day accident / illness | After 90 days |
| Benefits Payable | 11 weeks | SSNRA |
| Percentage of Income Replaced | 60% of weekly income | 60% of monthly income |
| Maximum Benefit | \$1,000 weekly | \$5,000 monthly |

This benefit is not up for open enrollment at this time. All current elections will continue on in the 2020 plan year.

CRITICAL ILLNESS INSURANCE

Protect yourself from financial hardship if you or a dependent is diagnosed with a covered condition

- Receive a **lump sum benefit** at first diagnosis
- Choose your benefit amount:



- You decide how to spend your benefit
 - **Medical expenses:** treatment, rehab, follow-up care
 - **Household expenses:** mortgage, childcare, groceries

Includes a \$50 wellness benefit



COVERED CONDITIONS:

- Heart attack
- Stroke
- Paralysis
- Blindness
- Major organ failure
- Benign brain tumor
- Occupational HIV

Premium varies by age, and benefit amount, see rates in plan summary

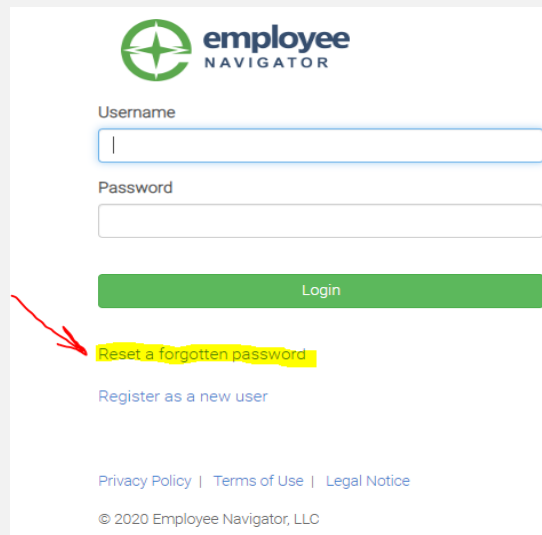
This benefit is not up for open enrollment at this time. All current elections will continue on in the 2020 plan year.

EMPLOYEE NAVIGATOR

EVERYONE MUST LOGIN TO EMPLOYEE NAVIGATOR TO ENROLL FOR BENEFITS

<https://www.employeenavigator.com/Benefits/Login.aspx>

If you do not remember your login credentials, select “reset a forgotten password” and follow the instructions in the email you receive.



employee
NAVIGATOR

Username

Password

Login

Reset a forgotten password

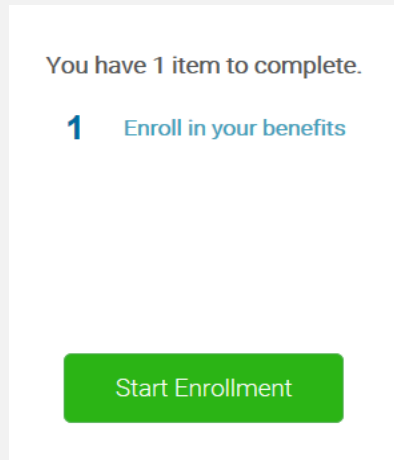
[Register as a new user](#)

[Privacy Policy](#) | [Terms of Use](#) | [Legal Notice](#)

© 2020 Employee Navigator, LLC

EMPLOYEE NAVIGATOR

- Once you have successfully logged in, you will be taken through a wizard that will help navigate you through the enrollment process.
- You will notice a welcome greeting and a “Start Enrollment” icon as pictured below:



Complete any missing data on the first page where you will see your employee information.

EMPLOYEE NAVIGATOR

Medical

You have the option of enrolling in one of two medical plans offered through Cigna. Grainer Bio-One covers the majority of the cost for you and your dependents. Dependent children are eligible for medical coverage up to age 26, regardless of student status. If your spouse is eligible for medical coverage with their current employer, they are not eligible to elect medical coverage provided by Grainer Bio-One.

1. Select the plan of your choice if you want to elect coverage.
2. A question will display asking if your spouse is eligible for other coverage.
3. If you answer "Yes", you will not be able to select coverage for your spouse under the medical plan.
4. If you answer "No", you will be able to enroll your spouse in the medical plan option.
5. If you need to change your answers, select "View my answers" on the right above "My Selections".
6. If you do not want to enroll, select "Don't want this benefit" and the reason to transition to the next plan enrollment.

Progress: 0 of 14

View steps >

My Selections

Current
No election yet


Helpful Resources


2018 Benefit Summary
Option A HSA Summary of Benefits Coverage
Option B PPO Summary of Benefits Coverage

Who am I enrolling?

Myself

Which plan do I want?

| | |
|---|--|
|  | 2018 Medical Plan Option A - HDHP |
| \$14.00 | Effective on 12/01/19 |
| Cost per pay period | Employee |
| Compare | Details |
| Select | |

| | |
|---|---|
|  | 2018 Medical Plan Option B - PPO |
| \$31.00 | Effective on 12/01/19 |
| Cost per pay period | Employee |
| Compare | Details |
| Select | |

[Save & Continue](#)

[Don't want this benefit?](#)

After adding any dependents, you will now go through the enrollment process. Simply make your plan selection for each benefit:

Who am I enrolling? *You will need to select your dependents on each line of coverage you are enrolling them.*

Which plan do I want (if you have more than one to chose from).

You can also click on the "compare" icon to show the plan(s) and cost for all tier levels... And the "details" icon to provide a brief benefit overview.

Click on the "Select" button which will elect your option". Then "Save & Continue" to go to the next benefit available.

If you are not taking benefits, click "Don't want this benefit". It will ask you to provide a reason why you are not electing coverage.

You will do this the same for each line of coverage available to you during this enrollment process.

EMPLOYEE NAVIGATOR

The screenshot displays the 'Enrollment Summary' page. At the top left, there is a section titled 'Enrollment Summary' with a printer icon. Below it, a message states: 'Below is a summary of your elections and cost for the upcoming plan year. If you have any questions about your enrollment or would like to make changes, please contact HR.' A prominent yellow banner with a warning icon reads 'Enrollment Not Complete!' and instructs the user to 'Please complete the required highlighted steps from your enrollment progress menu.' Below this, the 'Enrolled Plans' section shows 'Not Enrolled In Any Plans'. At the bottom, a blue box displays 'Total Cost Per Pay Period' as '\$0'. On the right side, a 'Progress: 0 of 14' bar is shown above a list of 14 steps. Steps 1 through 13 are marked with a minus sign and are highlighted in yellow, while step 14, 'Enrollment Summary', is marked with a plus sign and is not highlighted. A 'View steps' dropdown menu is located above the list.

Enrollment Summary

Below is a summary of your elections and cost for the upcoming plan year. If you have any questions about your enrollment or would like to make changes, please contact HR.

Enrollment Not Complete!
Please complete the required highlighted steps from your enrollment progress menu.

Enrolled Plans
Not Enrolled In Any Plans

Total Cost Per Pay Period
\$0

Progress: 0 of 14

View steps ▾

1. Personal Information
2. Dependent Information
3. Medical
4. Consumer Directed Health
5. Dental
6. Vision
7. Life
8. Short-Term Disability
9. Voluntary Long-Term Disability
10. Voluntary Life
11. Voluntary AD&D
12. Flexible Spending Account
13. Dependent Care Spending Account
- 14. Enrollment Summary

You can follow the progress bar located on the right if you need to go back to any benefit.

If you miss any elections or do not complete a section, when you get to the end, it will reflect “Enrollment Not Complete!” banner and highlight the benefit line you missed.

Please click on the benefit, make your election, and then click “Enrollment Summary” to complete your enrollment process.

If you do not click “Agree” at the end of the process, your benefits will not update.

To modify or go back, simply click on the benefit you want to modify/change. **Be sure to always select “SAVE & CONTINUE” for any modifications that you make.**

You can enroll from a computer, laptop, or tablet!!

IMPORTANT DATES & RESOURCES

Open Enrollment starts at 4PM on May 11, 2020 to May 18, 2020 at 10AM

Elections become effective June 1, 2020

You are required to complete your benefit elections for Medical, Dental and Vision only in Employee Navigator .

If you need to make changes to your existing Voluntary Life, AD&D, Disability or Critical Illness coverage please see Human Resources.

Questions?

Chastity Strickland

(910) 892-0027

Refer to your benefit guide for additional details



Thank You for Being a Part of the Carolina Therapy Services Team

Our employees are our greatest asset
and we are proud to offer benefits to support and protect
the health and wellbeing of you and your family