

JANUARY 22, 2024 - FEBRUARY 9, 2024

WELCOME TO ODYSSEY OPEN ENROLLMENT!

KEEP YOUR BENEFITS UP TO DATE AND PROTECT YOUR FAMILY. WHO KNOWS WHAT THEY'RE JUMPING OVER, CLIMBING ON, FLYING NEAR, OR LEAPING OUT OF?

HAVE YOU REVIEWED YOUR CURRENT BENEFITS AT UKG PRO?

WE OFFER

ICE, TOO!

Open Enrollment is Passive in 2024 If you don't want to make changes to your benefit plans, you do not need to do anything with the exception that you <u>MUST</u> still actively re-enroll in FSA, and Dependent Care accounts.





Who is eligible for benefits?

Employees working 30+ hours per week



If you work 30 hours or more per week, you're eligible for all Odyssey benefits.

Eligible Dependents



An employee that adds a dependent to their benefit elections *may* be required to provide documentation which demonstrates that the Dependent meets the eligibility criteria.

Eligible Dependents include:

- Your legal spouse
- Your biological children, adopted children, step-children, and children under your legal guardianship

Note: Dependent Children can maintain coverage under your benefits until the end of the month that they turn 26 years of age.

Note: For the TRICARE Supplement benefit, children must be enrolled in TRICARE's Young Adult Program in order to have coverage extended to age 26.



Dependent vs Beneficiary

A Dependent is a legal spouse or eligible dependent that you would like to enroll for benefit coverage in one of Odyssey's plans.

A Beneficiary is someone you designate as the recipient of your Group Term Life and AD&D, Voluntary Life and AD&D, and 401K benefits in the event of your death.

As the employee, you'll be the Beneficiary of spousal and child Voluntary Life and AD&D.

Open enrollment is a great time to review your current dependents and beneficiaries and make the necessary changes.



How to enroll in Employee Benefits:



First, visit <u>odysseyconsult.com/benefits</u> and find out which benefits elections will work best for you and your family.

Next, after you've decided on which benefits to sign up for and / or modify, you'll make your benefits elections in <u>UKG Pro</u>.

UKG Pro is the Odyssey portal for managing employee benefits, personnel records, employee pay, employee contact information, etc.





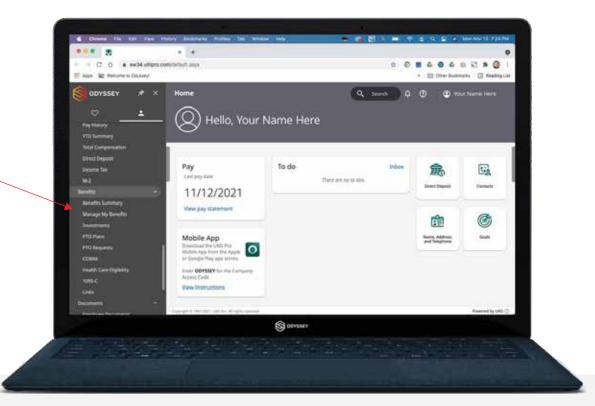
Enrolling through UKG Pro

Step 1: Once you're logged into <u>UKG Pro</u>, scroll down to the **Benefits** section in the **Myself Menu** on the left side of the page

Step 2: Click on Manage My Benefits

Step 3: You can now follow prompts to:

- Modify existing benefits
- Select new benefits
- Discontinue benefits you no longer wish to access



Visit Google Play or the App Store to download the UKG Pro app for your Android or Apple Phone







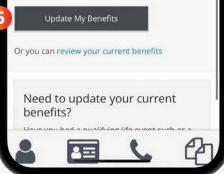
Using the UKG Pro App on Your Smartphone

- 1. Download the UKG Pro App 🧿
- 2. Sign in using your **Odyssey SSO Credentials**
- 3. Select **Benefits** from the grid menu
- Review your current benefits listed on the screen—if you'd like to make updates, click UPDATE MY BENEFITS
- 5. After logging in again, **follow the prompts** at **UKG Pro** to proceed!

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Tick below if you've had a qualifying life event, such is getting married or an addition to the family.



Visit Google Play or the App Store to download the UKG Pro app for your Android or Apple Phone









2024 Benefits Changes

Odyssey has worked hard to keep costs as low as possible for the new plan year. Since 2021 Odyssey has taken on a 17.2% increase, while employees have seen only a 1.7% increase!

Below are some highlights of this year's Open Enrollment & Plan Year.

- Odyssey will be picking up the entire renewal increase for the medical coverage. The PPO Plan and the Saver Plan rates will remain the same. We encourage employees enrolled in the Saver Plan to add their bi-weekly savings to their HSA accounts.
- Dental, Vision, Voluntary Life and AD&D, Hospital Indemnity, Accident, and Critical Illness rates are all staying the same.
- FSA and the HSA maximum contribution amounts have increased for 2024.
- **New for 2024**, Odyssey will be offering legal coverage through ARAG and Home Warranty Protection is now on the InsurChoice platform.
- Open Enrollment is passive; however, employees are encouraged to review all elections and beneficiary information. All benefits will rollover, except for FSA elections. **FSA elections must be made each year.**



Presentation Agenda

Voluntary Benefits: Voya

Dental: Delta Dental of Massachusetts

Vision: EyeMed

Life & Disability: Lincoln Financial Group

Voluntary Life and AD&D: Lincoln Financial Group

TRICARE Supplement: Selman & Company **Medical:** Blue Cross Blue Shield of Massachusetts

HSA: Fidelity

HRA: Sentinel Benefits

FSA: Sentinel Benefits

New!

Legal Coverage Home Warranty Protection









Sentinel Benefits & FINANCIAL GROUP











Voluntary Benefits

ReliaStar Life Insurance Company (a member of the Voya family of companies) is Odyssey's administrator for:

- Critical Illness
- Hospital Indemnity
- Accident

The following pages provide information on **Voluntary Benefits** coverage and selection options.







Critical Illness Benefits

How it Works

- Pays a lump sum cash benefit to the employee upon diagnosis of a covered illness
- Payments are *in addition* to "regular" medical insurance; the benefit payment can be used for any purpose (does not need to be applied directly to medical bills)
- Employees can elect \$15,000 or \$30,000 policy amounts
- Spouses are eligible for 50% of employee amount and children are eligible for \$5K or \$10K

Reminder!

The Critical Illness coverage includes a **Wellness Benefit**. The benefit provides an annual payment if you complete a covered health screening test on or after your coverage effective date. Employee's and Spouses are eligible for **\$100 each**, and each covered child is eligible for **\$50***

- There is no Pre-Existing Condition
 Limitation or Benefit Reduction
- Plan will pay for a new condition with no time separation
- Plan will pay for a recurrence of a previously diagnosed condition if separated by 12 months
- The program is portable if you ever leave Odyssey

Covered Illness	Benefit
Invasive Cancer	100%
Non Invasive Cancer/ Carcinoma In Situ	25%
Skin Cancer	10%
Heart Attack	100%
Stroke	100%
Coronary Artery Bypass	25%
Major Organ Failure/Transplant	100%
Benign Brain Tumor	100%
Coma	100%
Permanent Paralysis	100%
Loss Sight/Speech/Hearing	100%
Bone Marrow Transplant	25%
Stem Cell Transplant	25%
Advanced Alzheimer's	25%
Advanced Parkinson's	25%
ALS-Lou Gehrig's Disease	25%
Multiple Sclerosis	25%
Huntington's Disease	25%
Muscular Dystrophy	25%
Infectious Disease	25%





Accident Insurance Benefits

How it Works

- Pays a lump sum cash benefit to the employee upon diagnosis of specific injuries or medical treatments
- Payments are *in addition* to "regular" medical insurance; the benefit payment can be used for any purpose (*does not need to be applied directly to medical bills*)
- The program is portable if you ever leave Odyssey



Benefits
On and Off Job
\$150
\$60 / \$150
\$240 / \$1,000
\$1,000
\$225 / 365 days
\$60 / 6 visits
\$60
\$25 / 6 visits
25%
None
\$900 / \$1,800 \$1,200 / \$2,400 \$1,050 / \$2,100
Benefits
On and Off Job
\$150
\$60 / \$150
\$240 / \$1,000
\$1,000
\$225 / 365 days
\$60 / 6 visits

Email: hr@odysseyconsult.com



Hospital Indemnity Benefits

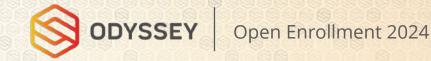
How it Works

- Provides a cash benefit when an employee or covered dependent is admitted to the hospital due to sickness or injury
- Payments are *in addition* to "regular" medical insurance and/or Worker's Compensation programs
- The benefit payment can be used for any purpose (does not need to be applied directly to medical bills)
- The program is portable if you ever leave Odyssey



Plan Design	Benefits
Hospital Admission	\$1,000 (Once per year)
Hospital Daily Confinement	\$100 / 30 days
ICU Daily Confinement	\$200 / 15 days
Rehabilitation Facility	\$50 / 30 days
Pregnancy	Covered
Substance Use	Not Covered (May be covered if drug use is under the direction of a doctor Hospital only ; no coverage for standalone facilities)
Mental Disorders	Covered Hospital only; no coverage for standalone facilities
Waiting Period	None
Benefit Reduction	None
Pre-existing condition	Waived
Portable	Included





Dental Benefits

Odyssey's Dental Benefits Provider, Delta Dental Massachusetts, is the nation's leading dental insurance company.

This section provides information on:

- Benefit Coverage
- Your Selection Options



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Total Rollover Maximum

\$1,500

Dental Benefits

Delta Dental PPO Plus Premier Plan Program

The Delta Dental PPO Plus Premier program combines two of the Delta Dental national dental networks, Delta Dental PPO and Delta Dental **Premier**, giving you access to dentists that participate in both.

Most dentists in the country participate in one or both networks and both national networks provide in-network discounts, although the discount is typically greater with a PPO provider.

Rollover Max Program

This allows you to use part of your unused benefit dollars from one year to use for the following year*. In order to qualify:

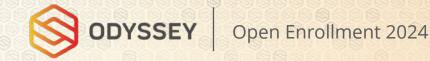
- You must receive at least one cleaning or • evaluation in the plan year
- You must be enrolled for dental coverage before • the 4th guarter of the plan year prior (December 1 – February 29)
- Your paid claims must not exceed the maximum • threshold amount for your plan

Benefit	High I	Plan	Low Pl	an	Base	e Plan
Deductible	\$25 Individual	/ \$75 Family	\$50 Individual / \$1	150 Family	\$50 Individual	/ \$150 Family
	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network	Out-of- Network
Waived for Preventive	Yes	Yes	Yes	Yes	Yes	Yes
Preventive	0%	0%	0%	0%	0%	0%
Basic Restorative	10%	10%	20%	20%	20%	20%
Major Restorative	40%	40%	50%	50%	Not Covered	Not Covered
Plan Year Max	\$2,000	\$2,000	\$1,000	\$1,000	\$750	\$750
UCR	n/a	90%	n/a	90%	n/a	90%
Orthodontia —(Children ag	ge 18 & under)					
Deductible	none	none	Not Covered		Not Cov	vered
Coinsurance	50%	50%				
Lifetime Maximum	\$1,500	\$1,500				
Rollover Max						
Threshold Amount	\$800		\$500		Not Eli	gible
Annual Max Rollover	\$600		\$350			

\$1,000

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*Please note you may also lose / gain rollover dollars when switching between plans.



Vision Benefits

EyeMed, Odyssey's vision benefits provider, allows employees to select from thousands of network specialists.

This section provides information on:

- Benefits Coverage
- Your Selection Options







Vision Benefits

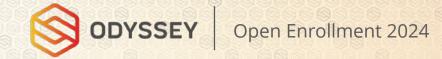
Odyssey's Vision Plan allows employees to select from thousands of network specialists.

Vision Highlights

- Provides Coverage for eyewear, such as glasses or contact lenses
- Discounts for some laser eye surgeries, such as LASIK or PRK
- Allowances to lower the out-of-pocket costs for vision care services
- Preventative care, such as eye exams and screenings
- Reduced costs for other eye-care needs, such as treatments
- Promotes wellness and eye health for individuals and their families

Benefit	In-Network	Out-of-Network
Examination	\$10 Copay	Up to \$50
Single Vision Lenses	\$10 Copay	Up to \$42
Bifocal Lenses	\$10 Copay	Up to \$78
Trifocal Lenses	\$10 Copay	Up to \$130
Frame Retail Allowance	Up to \$130 after Copay (20% off balance)	Up to \$104
Contact Lenses Elective in lieu of glasses	Up to \$130 <i>(15% off balance)</i>	Up to \$104
Medically Necessary	No cost	Up to \$210
Frequency		
Examination	12 Months	
Lenses	12 Months	
Frames	24 Months	





Flexible Spending Accounts

Sentinel Benefits is Odyssey's vendor. This section provides information on:

Available / Offered Coverage







Healthcare Flexible Spending Account (FSA) & Dependent Care Account (DCA)

Health Care Flexible Spending Account (FSA)

A Health Care Flexible Spending Account allows you to set aside **pre-tax** dollars deducted from your paycheck. For 2024, you can elect up to **\$3,200**. This money can be used for eligible expenses such as medical deductibles and copays, dental orthodontia and x-rays, vision copays, prescription copays and over-the-counter supplies such as first aid, sunscreen, etc. To see eligible items and to shop online visit <u>www.fsastore.com</u>.

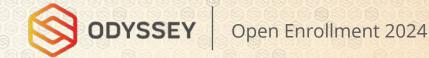
Sentinel Benefits

"Use It or Lose It" rule applies. Unused monies will be forfeited at the end of the plan year. Any expenses incurred during the plan year must be submitted within 90 days of the plan year end (5.31) to be eligible for reimbursement.

Dependent Care Flexible Spending Account (DCA)

A Dependent Care FSA allows you to set a side a specific dollar amount, which gets deducted from your pay, to be used for qualified expenses incurred for the care of dependents such as children under the age of 13 or a spouse or dependent who lives with you that you care for while you are actively at work.

Your contributions to the DCA are made with pre-tax payroll deductions. The dependent care FSA maximum is \$5,000 a year for individuals or married couples filing jointly, or \$2,500 for a married person filing separately. Married couples have a combined \$5,000 limit, even if each has access to a separate dependent care FSA through his or her employer.



Basic Life and AD&D, Short-Term Disability, Long-Term Disability, Employee Assistance Program



This section will review coverage options available to you in the case of an accident or death.





Basic Life and AD&D, Short-Term Disability, Long-Term Disability, Employee Assistance Program



Basic Life and AD&D

Life Flat **\$50,000** AD&D Flat **\$50,000**

Benefit Reduced to: 65% at age 70

50% at age 75

100% Odyssey Paid

Short-Term Disability

60% of weekly earnings to max benefit of \$2,000 per week

- Payable on the 1st day for accident up to 13 weeks
- Payable on the 8th day for sickness up to 12 weeks

Two Options:

- 100% Odyssey Paid Option
- Tax Choice Option



Long-Term Disability

60% of monthly earnings *to max benefit of \$10,000 per month*

• Payable on the 91st day

Two Options:

- 100% Odyssey Paid Option
- Tax Choice Option



EmployeeConnect Employee Assistance Program (EAP)



Life has its share of ups and downs—and sometimes you may need a little guidance through the "downs." **EmployeeConnect** offers an array of *confidential* services to help you and your loved ones meet the challenges that life, work, and relationships can bring.

EmployeeConnect is:

- Company sponsored—provided 24/7 at no charge to you
- Strictly **confidential**

EmployeeConnect provides:

- Unlimited phone access to legal, financial, and work-life services
- In-person help with short term issues
- Up to five* sessions per person, per issue, per year *In California, up to three sessions in six months, starting with initial contact by employee.

Confidential help 24 hours a day, 7 days a week for employees and family members:

Visit: www.GuidanceResources.com

User Name: LFGsupport Password: LFGsupport1

GuidanceResources.com offers a wide range of information and resources that you can research and access on your own

- Articles and tutorials
- Streaming videos
- Interactive tools—including financial calculators, budgeting spreadsheets, and a language translator

You can speak with an EmployeeConnect specialist: 888.628.4824

• *EmployeeConnect counselors* are experienced and credentialed. When you call their toll-free line, you'll talk to an experienced professional who will provide counseling, worklife advice, and referrals. *All counselors hold master's degrees, with broad-based clinical skills and at least three years of experience in counseling. Please note, counseling is not available 24/7; however, a member of the EAP team is always available.*





LifeKeys & WellnessPath

LifeKeys

When unforeseen life challenges arise, it's reassuring to know that help and support are close at hand thanks to **LifeKeys** services. If you're enrolled in life and / or AD&D insurance, this program provides access to a wide array of services to help you and your loved ones through life's ups and downs — and prepare you for whatever lies ahead.

LifeKeys Services Include:

Online will preparation: EstateGuidance will preparation is a quick and easy way to create and execute a will.

Access to GuidanceResources Online: you'll find articles, tutorials, videos, and "*Ask the Expert*" advice on a wide range of topics.

Protection against identity theft: LifeKeys includes online resources for the information you need to **recognize and prevent identity theft**—and to restore your good name.

Guidance and support for your beneficiaries: services include grief counseling and resources for financial and legal advice

To access LifeKeys® services call 1.855.891.3684, or visit www.GuidanceResources.com

(First-time user: Enter Web ID LifeKeys)

WellnessPath

Meeting your everyday financial goals is hard, especially when you're struggling with credit card debt, paying off student loans, trying to save more for retirement, or building a vacation fund.

Lincoln Financial Group®

Now's the time to get your financial life in order — and Lincoln Financial can help.

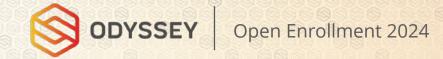
Get Started:

Lincoln WellnessPATH® is an online tool that offers personalized action steps to help you manage your financial life.

Complete a quick quiz to receive a wellness score and some simple steps you can take to improve your score. Whether you want to create a budget, determine if you have enough life insurance, or figure out a way to save for your dream vacation, you can do it using Lincoln WellnessPATH.

Ready to get on the path to financial wellness?

Register or log in to <u>www.MyLincolnPortal.com</u> to start using WellnessPATH today!



Voluntary Life and AD&D

These are voluntary benefits available through Odyssey. Our vendor is **Lincoln Financial Group**.

This section provides information about options you have to purchase *additional* life insurance for **yourself**, **your spouse**, and your **eligible dependents**.







Voluntary Life and AD&D

Life Insurance—provides benefit in the event of death

AD&D—provides benefit in the event of a death from an accident; or a dismemberment

Employee Benefit

Life: Available in Increments of \$10K

AD&D: Available in Increments of \$10K

Overall Maximum: Lesser of 5x your earnings or \$500K

Guaranteed Amount:

\$150,000

- Rates are based on age and spouse rates are similarly based off your age. Your rate will change as you move into a new age band, on the policy anniversary following your birth date
- Contributions are paid on a post-tax basis
- Life and AD&D are not tied together, you can increase or decrease your Voluntary AD&D coverage without changing your Life election.
- You must be actively at work to elect or increase Life and / or AD&D
- If you enroll after your new hire eligibility, or wish to increase your coverage amount, you
 may be subject to Evidence of Insurability (EOI) approval

Spouse Benefit

Life: Available in Increments of \$5K

AD&D: Available in Increments of \$5K

Overall Maximum: \$250K (cannot exceed 50% of employee amount)

Guaranteed Amount:

\$30,000



Child Benefit

Life:

Flat \$1K up to a max of \$10K, in \$1k increments.

AD&D:

Same as Life, Maximum \$10K

Limit: \$1K benefit for children from birth to 6 mo.





Legal Insurance

This **new** voluntary benefit is available through Odyssey. Our vendor is **ARAG**.

This section will review legal coverage available to you to assist with a variety of legal issues.







New! Legal Coverage

Why should you get legal coverage?

- Work with a network attorney and attorney fees are 100% paid in full for most covered matters.
- Save thousands of dollars on average, for legal matters by avoiding costly legal fees.
- Easily find local attorneys in ARAG's
- Network—many who average 20+ years of experience.
- Address your covered legal situations with a network attorney for legal help and representation.

Legal needs are in your future.

You can't predict the future, but you can plan for it. Whether you're planning ahead, like creating a will or buying a new home, or facing something unexpected, like fighting a traffic ticket or getting your deposit back from a difficult landlord, ARAG is there for you.

Legal insurance makes it affordable to get the legal help you need: network attorney fees are 100% paid-in-full for most covered matters.

Benefit from a wide range of coverage and services to protect your family and better navigate life's legal challenges. Enroll today.



Coverage Cost \$10.11 per pay period



New! Legal Coverage



Legal Coverage—A legal insurance plan from ARAG covers a wide range of legal needs like the examples shown below – and many more – to help you address life's legal situations.

Home Ownership or Renter Matters:

- Buying and selling a home
- Contracts/lease agreements
- Contractor issues
- Deeds
- Foreclosures or evictions
- Disputes with a landlord
- Neighbor disputes
- Real estate disputes

Family Law Events:

- Adoption
- Domestic partnership
- Guardianship/conservatorship
- Name change
- Pet-related matters and damages
- Pre-marital agreements

Consumer Protection Matters:

- Auto repair
- Buying or selling a car
- Consumer fraud
- Consumer protection for goods or services
- Home improvement
- Personal property disputes
- Small claims court

Criminal Situations:

- Juvenile
- Parental responsibility

General Needs:

- Document review
- Credit records correction
- Document preparation

Finance, Tax & Debt-Related Matters:

- Debt collection
- Garnishments
- IRS tax audit
- Personal bankruptcy
- Student loan debt

Traffic Troubles:

- License suspension/revocation
- Traffic tickets

Wills & Estate Planning Needs:

- Funeral directives
- Powers of attorney
- Wills





Home Warranty Protection

This **new** voluntary benefit is available on the InsurChoice platform, providing coverage through **ARMADILLO**.

Coverage elected through InsurChoice is not payroll deducted and is billed directly to the member. InsurCheice







New! Home Warranty Protection

Home appliances and systems are supposed to make life easier, not harder. But life happens and things break. On average, consumers with a home warranty plan make almost three claims per year. So, when the unexpected happens, get back to bliss with coverage for quick repairs and replacements of household appliances. Spend more time relaxing in your home and less time fixing it.

COVERAGE THROUGH ARMADILLO:

- Coverage available for both Homeowners and Landlords
- Coverage available in all 50 states
- 24/7 Support: Request service in less than 2 minutes at any time
- Quick reimbursement if you choose to use your own technician
- Replacements when appliances or systems cannot be repaired

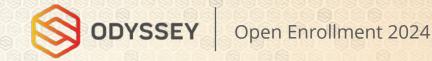


ALSO AVAILABLE ON INSURCHOICE:

- Auto Insurance
- Homeowner's Insurance
- Renter's Insurance

Coverage obtained on the InsurChoice platform can be elected at anytime during the year. Benefits elected are paid for directly by the member, and not deducted through payroll.





TRICARE Supplement Insurance

Selman & Company is Odyssey's TRICARE Supplement Insurance Provider.

This section provides information on:

- Eligibility
- Benefit coverage



SelmanCo



TRICARE Supplement Insurance



Odyssey's TRICARE Supplement Insurance plan helps TRICARE members pay out-of-pocket medical costs (deductibles, copays, etc.). This is a voluntary benefit designed to wrap around and supplement TRICARE coverage.

The TRICARE Reserve Select Benefit:

- Covers cost shares and co-pays (including prescription drugs)
- Covers a portion of your TRICARE deductible; in some cases, up to 100%
- Covers excess charges up to the legal limit
- Has no pre-existing condition clause
- Features guaranteed acceptance
- Requires no medical examination to apply

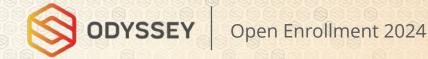
Who is Eligible for TRICARE Supplement Insurance?

Retired uniformed service members and reservists who are eligible for TRICARE, not eligible for Medicare, and under age 65, including but not limited to:

- Military retirees who are entitled to retiree, retainer or equivalent pay
- Retired Reservists enrolled in TRICARE Retired Reserves (gray area retirees)
- Retired Reservists between ages 60 and 65 and entitled to retiree pay
- Spouses and surviving spouses of retired uniformed services members
- Qualified members of the National Guard and Reserve







Blue Cross Blue Shield PPO Medical Insurance Plan

Blue Cross Blue Shield of Massachusetts

is Odyssey's Medical Insurance Provider.

- This section provides information on:
- Benefit coverage
- Your selection options for our Medical plan that pairs with the Health Reimbursement Account (HRA)







Blue Cross Blue Shield Blue Care Elect PPO with HRA

MASSACHUSETTS

Type of

Routine Eye Exams

Preventive Care

PCP / Specialist

Emergency Room

Urgent Care

In-Network

Out-of-Network

Members pay 100% of cost until the deductible is met—after that they pay 20% coinsurance. Seeking services from an out-ofnetwork provider may also result in balance billing charges as well.

Urgent Care and Emergency Room services will always be treated as in-network.

Deductible: This is the amount you're responsible for before benefits are paid by the carrier for certain expenses.

\$5,000 individual / \$10,000 family

Coinsurance: This is the percentage of charges for covered services that you are required to pay to a provider, after any deductible is met.

Health Reimbursement Account (HRA):

Employer sponsored plan used to reimburse a portion of your in & out-of-network deductible (Medical Only).

- Up to \$3,250 per Individual
- Max of \$6,500 / Employee+1 and Family

HRA Highlights

- Sentinel has a direct feed with BCBS of MA
- Claims are received on a weekly basis
- Reimbursements are paid each Friday via direct deposit or check

Servi	ice	

Covered 100% Covered 100% \$25 / \$40 Copay

\$40 Copay

\$300 Copay

Diagnostic, Lab / X-ray and Advanced Radiology Hospitalization (Inpatient & Outpatient)

After deductible is met, covered 100% After deductible is met, covered 100%





Blue Cross Blue Shield Rx Blue Care Elect PPO



Benefit	Covered In-Network Only
Generic Retail	\$15 Copay
Preferred Brand Retail	\$30 Copay
Non-Preferred Brand Retail	\$50 Copay
Mail Order Copay	\$30 / \$60 / \$100 Copay
Generic Specialty*	\$15 Copay
Preferred Specialty*	\$75 Copay
Non-Preferred Specialty*	\$100 Copay
*Mail order not available for specialty drugs.	
If the drug is eligible for Pillar Rx, cost may vary	

What is a Copay?

This is a flat fee you are required to pay direct to all in and out-of-network providers at time of service.

What is Maximum Out-of-Pocket?

The amount paid by you **before** insurance covers at 100%. This includes deductible, HRA funded deductible, coinsurance, and medical & Rx copays.

Rx Out-of-Pocket Maximum:

- Single \$1,000
- Employee +1 \$2,000
- Family \$2,000







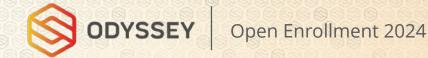
PillarRx & Sempre Health Blue Care Elect PPO

PillarRx

PillarRx is a cost-share assistance program available on the Blue Care Elect PPO plan. The Program helps reduce out of pocket for certain high-cost specialty medications. Members that qualify will be contacted by PillarRx to apply for the program. For those who qualify, medications will little to no cost. Members that do not qualify will continue to pay the same copay as they are today. Eligible members that do not participate in the plan will be subject to 30% coinsurance for the medication.

Sempre Health

Sempre Health identifies members taking certain medications to treat chronic conditions, such as diabetes and cardiovascular disease, and invites them to enroll in the program. Once enrolled, members will have the opportunity to purchase their medications at a reduced cost. If they fill their medications consistently, they'll be able to save even more. Sempre Health will contact members each month to let them know when to fill their medications and what they'll be saving.



Blue Cross Blue Shield PPO Saver Plan

Blue Cross Blue Shield of Massachusetts

is Odyssey's Medical Insurance Provider.

This section provides information on:

- Benefit coverage
- Your selection options for our Medical plan that pairs with the Health Savings Account (HSA).







Blue Cross Blue Shield PPO Saver— High Deductible Health Plan



Type of Service	In-Network	Out-of-Network
Preventive Care	Covered 100%	Members pay 100% of cost until
Routine Eye Exams (Every 24 Months)	Covered 100%	deductible is met—after that they pay 20% coinsurance.
PCP / Specialist	Deductible, then no cost	Seeking services from an out-of- network provider may also result in balance billing charges as well.
Urgent Care	Deductible, then no cost	
Emergency Room	Deductible, then \$150 Copay	Urgent Care and Emergency Room services will always be treated as in-network.
Diagnostic, Lab / X-ray and Advanced Radiology	Deductible, then no cost	
Hospitalization (Inpatient & Outpatient)	Deductible, then no cost	

Deductible: This is the amount you're responsible for before benefits are paid by the carrier for certain expenses.

\$5,000 individual / \$10,000 family

Co-insurance: This is the percentage of charges for covered services that you are required to pay to a provider, after any deductible is met.

Health Savings Account (HSA):

Pre-tax benefit that assists you in paying medical, dental, and vision expenses.

- Up to \$4,150 per Individual
- Max of \$8,3000 / Employee+1 and Family (with an available \$1000 catch-up contribution for employees 55+)

If you enroll in this plan, you may be eligible to enroll in the Health Savings Account!





Blue Cross Blue Shield Rx PPO Saver Plan



Benefit

In-Network Coverage

Deductible, then \$10 Copay Deductible, then \$25 Copay Deductible, then \$45 Copay Deductible, then \$20 / \$50 / \$135 Copay

Specialty Rx* *Mail order not available for specialty drugs Deductible, then applicable cost share based on tier

What is a Copay?

This is a flat fee you are required to pay direct to all in and out-of-network providers at time of service.

What is Maximum Out-of-Pocket?

The amount paid by you **before** insurance covers at 100%. This includes deductible, coinsurance, and medical & Rx copays.

Rx Out-of-Pocket Maximum (combined with medical):

- Single: \$6,900
- Employee +1: \$13,800
- Family: \$13,800

Go to <u>www.cvscaremark.com</u> to find out the cost for your prescription drug and lower cost options.





Health Savings Account (HSA)

Fidelity provides Odyssey with a Health Savings Account (HSA) through NetBenefits.

Employees are able to fund their HSA accordingly through Fidelity.

The HSA pairs with the PPO Saver Plan.







Health Savings Account (HSA) with High Deductible Health Plan



A Health Savings Account (HSA) is a personal savings account that can be paired with a highdeductible health plan (HDHP) to pay for current and future healthcare expenses with pre-tax money. You can <u>manage your Fidelity account online</u> and take it with you if you leave Odyssey.

HSA Funds may be used to pay for:

- Eligible healthcare expenses
- Vision and dental expenses
- Eligible over-the-counter purchases
- COBRA Premiums
- Medicare Premiums (for those 65 and older)
- Health Insurance if receiving unemployment
- Long-term care insurance

While employees can determine contribution amounts (which can be changed at any time), **HSA Annual Contribution Limits are set by the government:**

2024 Maximum Contributions

\$4,150 Employee only coverage\$8,300 Family coverage\$1,000 55+ catch up contributions





Health Savings Account (HSA) with High Deductible Health Plan



You are eligible to open an HSA bank account if:

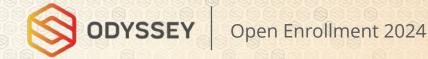
- You are not covered by any other non-high deductible health plan, such as a spouse's plan, that provides any benefits covered by your high-deductible health plan
- You are not enrolled in Medicare
- You do not receive health benefits under TRICARE
- You have not been covered under Veterans Administration (VA) benefits
- You can't be claimed as a dependent on another person's tax return
- You are not covered by a general-purpose healthcare flexible spending account (FSA) or health reimbursement account (HRA). Alternative plan designs, such as a limited-purpose FSA or HRA, may be permitted



Plan ahead! Enrolling in Medicare after age 65 may have an impact on HSA contributions

- When signing up for Medicare, you may be enrolled retroactively for up to 6 months of benefits, or back to your 65th birthday if that has taken place within the last 6 months
- To avoid a tax penalty and income taxes, stop contributing to your HSA at least 6 months before you apply for Medicare
- You do have the option to decline the 6-month retroactive enrollment but must be very specific with Social Security when enrolling

Questions? For more information, visit <u>www.medicare.gov</u> or contact your personal tax consultant



Blue Cross Blue Shield Resources

Blue Cross Blue Shield of Massachusetts is Odyssey's Medical Insurance Provider.

This section provides information on:

 Programs and resources available to you as a BCBS of MA member









Blue Cross Blue Shield— Mental Health Resources

Learn to Live

Learn how to cope with stress and anxiety. Learn to Live can help you and / or your family members aged 13 and older get back on track *at no cost to you*.

From the comfort of your own home, get 24/7 online support at the pace you and / or your family are comfortable with.

Five Areas of Focus

- Stress Anxiety and Worry
- Depression
- Social Anxiety
- Substance Use

Resources include

- Personal Assessment
- On-Demand Webinars
- Wellness Articles
- Unlimited Coaching
- Mindfulness Moments

Get Started

Visit <u>learntolive.com/partners</u> and enter code **WELLNESS** to start your assessment

Well Connection

BCBSMA Well Connection offers a convenient way for members to seek needed care through telehealth. In addition to general healthcare needs, Well Connection offers Behavioral Health Services.

Types of services covered by Telehealth

- Depression & anxiety
- Sleep Disorders
- Substance use disorder
- Trauma

- Child behavior
- Bereavement
- Couples therapy
- Divorce counseling

To save time when you need immediate telehealth care go to your MyBlue app and find the Well Connection Video Visits under My Care after signing in.





Blue Cross Blue Shield— Health & Wellness Resources

ahealthyme Rewards

A wellness program that rewards you for making smart, healthy choices, every day. Get rewarded for making healthier choices every day. The more you do, the more points you'll earn—and the more rewards you'll get. Join in challenges, pick up healthy tips, and get on track to earn up to \$400 in rewards annually.

When you sign up, you'll receive:

- A free Max Buzz[™] health tracker
- Up to \$400 annually in rewards
- Personalized guidance on how to set and meet your health goals
- Motivation through team and individual challenges

Visit ahealthymerewards.com to get started.

Blue365

Blue365 offers premier health and wellness discounts and is free to join.

As a partner in your health, Blue365 is committed to providing you with easy access to discounts on premier products and services. We help you achieve the lifestyle you desire through our extensive array of exclusive discounts, healthy tips, and inspirational stories from fellow Blue365 members on how this program has changed their lives.

Discounts available on:

- Apparel & Footwear
- Fitness
 - Hearing & Vision
- Home & Family

- Home & Family
- Nutrition
- Travel
- Personal Care

Visit blue365deals.com/BCBSMA to find deals and discounts in your area





Blue Cross Blue Shield— Fitness & Weight-Loss Reimbursement

Your reward for healthy behavior! Receive up to \$150 annually when purchase qualified fitness expenses and \$150 annually when you participate in a qualified weight-loss program.

Qualified for Fitness Reimbursement:

- A full-service health club with cardiovascular and strength-training equipment like treadmills, bikes, weight machines, and free weights
- A fitness studio with instructor-led group classes such as yoga, Pilates, Zumba, kickboxing, indoor cycling/spinning, and other exercise programs
- Online fitness memberships, subscriptions, programs, or classes
- Cardiovascular and strength-training equipment for fitness that is purchased for use in the home

Get Started

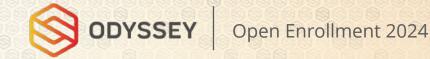
To submit your reimbursement, sign in to MyBlue at bluecrossma.org



Qualified for Weight-Loss Reimbursement:

Participation fees for:

- Hospital-based programs
- Weight Watchers' in-person and Weight Watchers online
- Other non-hospital programs (in-person or online) that combine healthy eating, exercise, and coaching sessions with certified health professionals such as nutritionists, registered dietitians, or exercise physiologists



Travel Assistance Program and Global Coverage

Travel Assistance Programs can help when traveling in and out of the country.

Our providers **Lincoln Financial** and **Blue Cross Blue Shield** give you great options to protect you and your family.









TravelConnect Travel Assistance Program

TravelConnect is a comprehensive program that can bring help, comfort, and reassurance if you face a **medical emergency while traveling** 100 or more miles from home. Whether traveling for business or leisure, if you are enrolled in life and / or AD&D insurance, you and your loved ones can count on TravelConnect 24/7.

TravelConnect Services Include:

- **Coordinate and provide transportation** from an initial medical facility that cannot adequately treat a patient due to their condition
- Coordinate travel and airfare for your dependent children.* This includes the services, transportation expenses and accommodations of a qualified escort
- Coordinate and pay for a safe evacuation due to natural disaster, or when a political or security threat occurs
- Coordinate Medical care, and travel services recovery

*TravelConnect services are provided by **On Call International**, Salem, NH. On Call International must coordinate and provide all arrangements for eligible services to be covered. Coverage is subject to contract language that contains specific terms, conditions and limitations.





also assists with:

- Medical record requests, medical and dental referrals, medication and vaccine delivery, corrective lenses / medical device replacement
- Intermediary services
- Recovering lost or stolen documents or luggage
- Language translation
- Arrangements for a deceased traveler
- Emergency pet boarding and / or return
- Return of traveling companion
- Vehicle return
- Emergency travel arrangements
- ID recovery assistance / lost or stolen travel documents
- Destination information

For a complete list of TravelConnect services, visit: <u>mysearchlightportal.com</u> Group ID: LFGTravel123



Blue Cross Blue Shield Global

Blue Cross Blue Shield Global offers medical coverage outside the U.S.

BCBS Global Core has coverage for in-network emergencies and urgent care. Other office visits are also covered BUT are considered an out-of-network benefit.

BEFORE YOU TRAVEL If you will be traveling outside the U.S. contact BCBS of MA at 800.358.2227

Obtain a letter to take with you abroad, that will explain everything you'll need to know and *may potentially serve as your proof of insurance*.

To learn more about Blue Cross Blue Shield Global Core visit <u>www.bcbsglobalcore.com</u> or *Download the Blue Cross Blue Shield Global Core mobile app* at our benefits website.

You can submit claims online or through the BCBS Global Core mobile app.



Email: hr@odysseyconsult.com

BlueCross BlueShield Global



Healthcare coverage when you are traveling or living abroad

As a Blue Cross and Blue Shield member, you take your healthcare benefits with you when you are abroad. Through the Blue Cross Blue Shield Global Core program, you have access to doctors and hospitals around the world.

To take advantage of the program:

- Always carry your current member ID card.
 Before you travel, contact your Blue Cross and Blue Shield (BCBS) company for coverage details. Coverage outside the United States may be different.
- If you need to locate a doctor or hospital, call the Service Center for Blue Cross Blue Shield Global Core (see number below). An assistance coordinator, in conjunction with a medical professional, will arrange a physician appointment or hospitalization if necessary.
- If you need inpatient care, call the Service Center (see number below) to arrange direct billing. In most cases, you should not need to pay upfront for inpatient care except for the out-of-pocket expenses (noncovered services, deducttible, copayment and coinsurance) you normally pay. The hospital should submit the claim on your behalf.
- In addition to contacting the Service Center, call your BCBS company for precertification or preauthorization.
 Refer to the phone number on the back of your member ID card. Note: This number is different from the phone number listed below.
- For outpatient and doctor care or inpatient care not arranged through the Service Center, you may need to pay upfront. Complete a Blue Cross Blue Shield Global Core International claim form and send it with the bill(s) to the Service Center (the address is on the form). You can also submit your claim online or through the Blue Cross Blue Shield Global Core mobile app. The claim form is available from your BCBS company or online at www.bcbsglobalcore.com.

In an emergency, go directly to the nearest hospital.

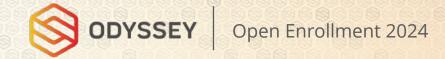
To learn more about Blue Cross Blue Shield Global Core

Visit www.bcbsglobalcore.com.

- Now, Home is Where The Card is*
- Use the Blue Cross Blue Shield Global Core app for Android*, iPhone, and iPod touch.** (Rates from your wireless provider may apply).
- Call your BCBS company.
- Call the Service Center at 1.800.810.2583 or collect at 1.804.673.1177, 24 hours a day, seven days a week.
- The Blue Cross Blue Shield Global Core program was formerly known as BlueCard Worldwide*

Blue Cross, Blue Shield, the Blue Cross and Blue Shield symbols, BlueCard, BlueCard Worldwide, and Blue Cross Blue Shield Global are trademarks of the Blue Cross Blue Shield Association, an association of independent Blue Cross and Blue Shield companies.

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What Now?

Now that you have all of the information, what do you do with it?

This section contains resources and tools to help you get started and complete enrollment.





What You Need to Review...

Note: If you do not make any changes to your existing benefits selections, they will STAY THE SAME *but you <u>MUST</u> still actively re-enroll in the FSA and Dependent Care accounts or <u>elect legal coverage for the first time.</u>*

- Assess your needs and your family's needs



Review your current benefit elections & other insurance options (i.e. spouse's plan, etc.)



- Enroll, add, or remove dependents, update beneficiary information, or waive options
- Plans you enroll in during open enrollment will start on March 1, 2024, and will remain in effect until the end of the plan year (February 28, 2025) unless you experience a Qualified Life Event including, but not limited to:
 - Marriage, divorce, legal separation, childbirth or adoption, death of a spouse or dependent, change in employment status (you or spouse), involuntary loss of coverage, etc.





Reminders:

After you review your benefit summary in UKGPro, to finalize your selections or changes, you need to *CLICK the checkout button!*

ID cards will be sent out ONLY if you are newly enrolling in that plan. Your current cards will remain effective for the new plan year.

The FSA and DCA are use it or lose it, so remember to use those funds before 2/29/2024 – you can submit claims that were incurred prior to 3/1/2024 up to 90 days after the plan year ends. You can email or download a copy of your open enrollment elections once you complete and checkout. You can change your elections at any time during the open enrollment window.

Enrollment Complete! You have completed the open enrollment process and confirmed your benefits. Need a copy of your benefits confirmation statement? Send by Email (Send by Email





Email: <u>benefits@odysseyconsult.com</u>