

Vision Plan Option

		Delta Vision	
		In Network	Out of Network
FREQUENCY			
Exam		Covered once every 12 months	
Lenses		Covered once every 12 months	
Contact Lenses		Covered once every 12 months in lieu of traditional lenses	
Frames		Covered once every 12 months	
Lasik/PRK		Benefit in lieu of prescription eyewear	
EXAMINATION			
Exam		\$10 Copay	Up to \$35 allowance
LENSES			
Single Vision		\$10 Copay	Up to \$25 allowance
Bifocal		\$10 Copay	Up to \$40 allowance
Trifocal		\$10 Copay	Up to \$55 allowance
Standard Polycarbonate		\$40 Copay	--
Standard Progressive		\$75 Copay	--
CONTACT LENSES			
Contact Lens Fit & Follow-Up		Standard: Covered 100% Premium: \$55 allowance and 10% discount off retail	Up to \$40 allowance
Conventional		Up to \$150 allowance, then 15% off balance	Up to \$120 allowance
Disposable		Up to \$150 allowance	Up to \$120 allowance
Medically Necessary		Covered 100%	Up to \$200 allowance
FRAMES			
		Up to \$150 allowance, then 20% off balance	Up to \$75 allowance
LASIK			
		15% off retail price or 5% off promotional price	--

Benefits plan runs on a rolling calendar year. Benefits cannot be used until the date of purchase the following year.

Life and Disability Insurance Plans

Sun Life

Basic Life & AD&D

Your employer pays this benefit for you

- \$25,000 Life Insurance Policy

Sun Life

Supplemental Life & AD&D

Flexible plan allows you to choose the amount of life insurance appropriate for you and your family

- Coverage up to \$180,000 Guarantee Issue available to the Team Member
 - Maximum of \$500,000
- Coverage up to \$50,000 Guarantee Issue available for Spouse
 - Maximum of \$100,000
- Coverage up to \$10,000 Guarantee Issue available to Children

Sun Life

Short Term Disability

Covers disabilities caused by non-occupational injuries/illnesses and maternity

Your employer pays this benefit for you

- Your benefit plan is 60% to a weekly maximum of \$550
- Injury benefits begin on the 8th consecutive day
- Sickness benefits begin on the 8th consecutive day of disability
- Benefits may continue for up to 12 weeks

Sun Life

Long Term Disability

Coordinates with Short Term Disability plan to ensure no gap in coverage

Your employer pays this benefit for you

- Your benefit plan is 60% to a monthly maximum of \$5,000 after 90 days of disability
- Duration up to 3 Years

Voluntary Accident Insurance Plan

The accident plan pays you cash to help with out of pocket medical and non-medical expenses if you or a family member seeks medical attention for a covered accident.

See Human Resources for plan brochure and premium information.

Voluntary Critical Illness Plan

The critical illness plan pays a lump sum benefit to you if you or a family member is diagnosed with a covered condition.

See Human Resources for plan brochure and premium information.

Voluntary Hospital Benefits

The hospital plan pays a lump sum cash benefit to you, if you or a family member is hospitalized as an inpatient due to accident, sickness, or pregnancy.

See Human Resources for plan brochure and premium information.

Employee Assistance Program

The Employee Assistance Program (EAP) is offered to all team members and immediate family members or anyone living in their home. It is a completely confidential counseling program that supports you through short-term counseling issues such as marital and family concerns, depression, substance abuse, grief and loss, financial entanglements, work-related problems, and other personal stressors in your daily life. This benefit offers up to 6 in person sessions per issue with a master’s level counselor; please utilize by calling the number on the back of your ID card.

EMOTIONAL / MENTAL HEALTH	FAMILY / MARITAL
<ul style="list-style-type: none">• Emotional/Mental Health• Lifestyle Transitions• Stress• Communication• Grief and Loss• Anger Management	<ul style="list-style-type: none">• Relationship• Divorce• Child/Parent Conflict• Childcare• Eldercare• Domestic Abuse
WORK-RELATED ISSUES	SUBSTANCE ABUSE / ADDICTIVE BEHAVIOR
<ul style="list-style-type: none">• Jobsite Conflicts• Sexual Harassment• Pre-Retirement Concerns	<ul style="list-style-type: none">• Problem Drinking• Illegal Drug Use• Gambling

Benevolent Cedar Community				
2021 Bi-Weekly Payroll Contribution				
Plan Type	UMR			
	UMR Medical PPO Plan	Medical CDHP HSA Plan	Delta Dental	Delta Voluntary Vision
Team Member	\$93.31	\$38.33	\$8.28	\$3.47
Team Member +Child(ren)	\$153.14	\$73.69	\$18.63	\$7.08
Team Member + Spouse	\$203.38	\$100.01	\$16.55	\$6.93
Team Member + Family	\$279.37	\$127.76	\$29.06	\$10.54
Monthly Rates for Voluntary Worksite Benefits				
Plan Type	Sun Life Voluntary Life and AD&D, Dependent Voluntary Life and AD&D			
Age Band	Team Member	Spouse	Child	
Under age 20	\$0.06	\$0.06	\$0.08	
20-24	\$0.06	\$0.06		
25-29	\$0.06	\$0.06		
30-34	\$0.07	\$0.07		
35-39	\$0.08	\$0.08		
40-44	\$0.10	\$0.10		
45-49	\$0.17	\$0.17		
50-54	\$0.25	\$0.25		
55-59	\$0.43	\$0.43		
60-64	\$0.54	\$0.54		
65-69	\$0.98	\$0.98		
70-74	\$2.45	\$2.45		
75-79	\$2.81	\$2.81		
80-84	\$2.81	\$2.81		
85 and over	\$2.81	\$2.81		
AD & D	Team Member	Spouse	Child	
	\$0.02	\$0.02	\$0.02	
Rate basis: Per \$1,000 of volume				
Plan Type	Sun Life Voluntary Hospital Indemnity			
	Low Plan	High Plan		
Team Member	\$23.22	\$42.57		
Team Member + Child(ren)	\$40.27	\$73.44		
Team Member + Spouse	\$48.41	\$89.06		
Team Member + Family	\$65.46	\$119.93		
Plan Type	Sun Life Voluntary Accident Insurance			
	High / Off Job			
Team Member	\$10.07			
Team Member + Child(ren)	\$19.73			
Team Member + Spouse	\$17.38			
Team Member + Family	\$27.04			
Plan Type	Sun Life Voluntary Critical Illness			
Age Band	Tobacco	Non-Tobacco		
Under age 25	\$0.39	\$0.37		
25-29	\$0.49	\$0.44		
30-34	\$0.73	\$0.61		
35-39	\$1.16	\$0.87		
40-44	\$2.02	\$1.35		
45-49	\$3.33	\$2.01		
50-54	\$5.14	\$2.88		
55-59	\$7.62	\$4.01		
60-64	\$10.82	\$5.46		
65-69	\$14.34	\$7.07		
70-74	\$19.87	\$10.25		
75 and over	\$25.17	\$14.42		
Rate Basis: Per \$1,000 of coverage				
Issue age rating applies - premiums will not increase due to age increase				