



**2022**

# EMPLOYEE BENEFITS GUIDE



**Our business begins with you.**



# WELCOME

**to the 2022  
Benefits Open Enrollment**

## **Open enrollment runs November 1 – November 19**

At MGM Healthcare, we offer our employees a competitive and comprehensive benefits program. This is one of many ways we recognize how important you are to the company. This benefits guide briefly summarizes our program in a quick and easy-to-understand way.

## **Enrollment Call Center**

When ready, you will call 314.997.3835 to make your benefit elections. This year, Open Enrollment is Active. This means your current elections from the previous plan year will NOT roll over. You MUST make elections during this Open Enrollment period in order to have benefits effective January 1, 2022. You will need to call the number above by Friday, November 19.

# Who can enroll in benefits

## Employees

You may enroll in the benefits program if you are a regular full time employee who is actively working a minimum of 30 hours per week. You are eligible for benefits as of the first of the month following 60 days of active service.

## Dependents

Eligible dependents generally include your legally married spouse and children up to age 26. Some age limitations may apply to certain insurance programs. Please review your plan documents carefully for more details.

## Eligibility Documentation

Please be prepared to share dependent eligibility information during enrollment, including each enrolled dependent's date of birth and Social Security Number. Other documentation may be required depending on your benefit elections.



## Changing Your Coverage

Once you make your election for enrollment you will not be able to change your elections until the next annual enrollment, unless you experience a qualifying event. A qualifying event is a change in your personal life which may impact your eligibility or dependent's eligibility for benefits. If you experience a qualifying life event, you will have 30 days to notify Human Resources in order to make changes to your benefit elections.

Examples of some qualifying events include the following:

- Change of legal marital status (e.g., marriage, divorce, death of spouse, legal separation)
- Change in number of dependents (e.g., birth, adoption, death of dependent, ineligibility due to age)
- Change in employment or job status

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# MEDICAL INSURANCE

## SELECTING YOUR MEDICAL PLAN

✔ OPTION 1: Platinum Plan PPO

✔ OPTION 2: Silver HDHP

✔ OPTION 3: Gold HDHP

💡 TIP: Get the most out of your insurance by using in-network providers.

## FREQUENTLY ASKED QUESTIONS



### How many hours do I need to work to be eligible for insurance benefits?

You must be an employee working a minimum of 30 hours per week on a regular basis.

### Will I receive a new Medical ID card?

All medical plan participants will receive a new ID card in the mail.

### Who can I enroll?

Eligible dependents include your legal spouse and your children up to age 26. You will be required to provide proof of dependent eligibility such as marriage license, birth/adoption certificate, legal guardianship paperwork, etc. and identity.

### How long can I cover my dependent children?

Dependent children are eligible until the end of the month in which they turn age 26. Some age limitations may apply to certain insurance programs.

### I just got hired. When will my benefits become effective?

Your medical insurance benefit will begin on the first of the month following sixty (60) days of employment.

## Medical Coverage

This year your medical coverage will be offered through UnitedHealthcare. You will be offered the four plan options—Bronze, Silver, Gold, and Platinum. The Platinum plan is a PPO plan that include copays for certain services. The Silver and Gold plans are High Deductible Health Plans (HDHP). This plan does not include any copays for services, but does allow you to make a contribution to a Health Savings Account (HSA).



## Find an In-Network Provider

When you choose to visit in-network providers you'll receive the deepest level of discount on your services. You'll also have the most cost protection from your plan. This is because our in-network providers have agreed to charge negotiated rates. To find an in-network medical provider near you, visit [www.umar.com](http://www.umar.com) and search for providers in the UnitedHealthcare Choice Plus network. To find an in-network pharmacy, visit [www.caremark.com](http://www.caremark.com). If you decide to go to an out-of-network provider, there are benefits available. However, you will pay more out of your pocket.

### How to Find an In-Network Provider

1. Go to [umar.com](http://umar.com) and select "Find a provider"
2. Type "UnitedHealthcare Choice Plus" into the search box
3. For medical providers, choose "Search for a medical provider;" for behavioral health providers select "view directory for behavioral health providers"

### Important Terms

- » **Deductible**—The amount of money you pay before services are covered. Services subject to the deductible will not be covered until it has been fully met.
- » **Copayment**—A fixed amount you pay for a covered health care service. Copays can apply to office visits, urgent care or emergency room services.
- » **Coinsurance**— The plan's share of the cost of covered services which is calculated as a percentage of the allowed amount. This percentage is applied after the deductible has been met. You pay any remaining percentage of the cost until the out-of-pocket maximum is met.
- » **Out-of-pocket limit**— The most you will pay during a set period of time before your health insurance begins to pay 100% of the allowed amount.



### Prescription Drug Coverage

This year your prescription drug coverage will be offered through Optum RX. The Optum RX network is a very extensive network. Consult with your physician regarding any questions you may have about the prescription drug benefit offered.

## Plan Highlights

### Traditional PPO Plan

- ✔ You pay office visit/prescription drug copays and are not responsible for meeting your deductible first

### High Deductible Health Plan

- ✔ The deductible must be satisfied for all medical and prescription benefits, with the exception of preventive care, in order for the plan to start cost sharing
- ✔ There are no copays offered with this plan

### Teladoc

- ✔ Teladoc services will be available for anyone covered under any of the medical plans
- ✔ Teladoc is available 24/7, 365 days a year
- ✔ Use Teladoc through your phone or computer for phone or video consults
- ✔ Use Teladoc for common conditions, such as:
  - Cold and flu symptoms
  - Allergies
  - Bronchitis
  - Sinus problems
- ✔ These are US board-certified doctors who can prescribe medication as needed
- ✔ Teladoc is a much more affordable option than Urgent Care or the ER
- ✔ Call or visit [1.800.Teladoc/Teladoc.com](https://www.1.800.Teladoc.com)



## Health Insurance Rates - Monthly

	Limited Day Plan	Silver HDHP Plan	Gold HDHP Plan	Platinum PPO Plan
Employee Only	\$93	\$100	\$203	\$362
Employee + Spouse	\$248	\$475	\$691	\$877
Employee + Children	\$202	\$457	\$642	\$795
Employee + Family	\$351	\$636	\$965	\$1,261

# Medical Insurance Plans

	Silver HDHP Plan		Gold HDHP Plan		Platinum PPO Plan	
	In Network	Out-of Network	In Network	Out-of Network	In Network	Out-of Network
<b>Calendar Year Deductible</b>						
Individual	\$5,000	\$10,000	\$3,000	\$6,000	\$2,500	\$5,000
Family	\$10,000	\$20,000	\$9,000	\$12,000	\$5,000	\$10,000
Co-Insurance (member pays)	30%	50%	20%	50%	30%	50%
<b>Out-of-Pocket Maximum (includes deductible)</b>						
Individual	\$7,000	\$14,000	\$7,000	\$14,000	\$6,250	\$12,250
Family	\$14,000	\$28,000	\$14,000	\$28,000	\$12,500	\$25,000
<b>Physician Office Visits</b>						
Primary Care	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	\$35 copay	Deductible then 50%
Specialist	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	\$70 copay	Deductible then 50%
Diagnostic Lab/X-Ray	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	Deductible then 30%	Deductible then 50%
<b>Preventative</b>						
	0%	Deductible then 50%	0%	Deductible then 50%	\$0 copay	Deductible then 50%
<b>Urgent Care</b>						
	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	\$100 copay	Deductible then 50%
<b>Hospital Services</b>						
Inpatient (Facility/Physician)	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	Deductible then 30%	Deductible then 50%
Outpatient	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	Deductible then 30%	Deductible then 50%
Major Diagnostic and Imaging	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	Deductible then 30%	Deductible then 50%
Emergency Room	Deductible then 30%		Deductible then 20%		\$300 copay	



# Prescription Drugs

	Silver HDHP Plan		Gold HDHP Plan		Platinum PPO	
	In Network	Out-of-Network	In Network	Out-of-Network	In Network	Out-of-Network
<b>Retail</b>						
Generic	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	\$20 copay	Deductible then 50%
Brand Preferred	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	\$40 copay	Deductible then 50%
Brand Non-Preferred	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	\$70 copay	Deductible then 50%
Specialty	Deductible then 30%	Deductible then 50%	Deductible then 20%	Deductible then 50%	20%	Deductible then 50%
<b>Mail Order—Supply Limit 90-Day Supply</b>						
Generic	20% after deductible	Deductible then 50%	Deductible then 20%	Deductible then 50%	\$50 copay	Deductible then 50%
Brand Preferred	20% after deductible	Deductible then 50%	Deductible then 20%	Deductible then 50%	\$100 copay	Deductible then 50%
Brand Non-Preferred	20% after deductible	Deductible then 50%	Deductible then 20%	Deductible then 50%	\$170 copay	Deductible then 50%

## Bronze Limited Day Plan

As a MGM Healthcare employee, you have four different medical plan options. Three are traditional medical plan options that will allow you to pay for your medical/pharmacy services through discounted rates from UMR. These three plans (Silver HDHP, Gold HDHP, Platinum PPO) will offer you more coverage than the new Bronze Limited Day plan. You will pay the Co-pays listed below based on the services you need.

### Plan Highlights

- ✔ 100% coverage for preventive care
- ✔ Inpatient hospital coverage
- ✔ Outpatient accident coverage
- ✔ Emergency room coverage
- ✔ Accidental death and dismemberment coverage
- ✔ Prescription drug coverage
- ✔ Critical illness coverage
- ✔ Telemedicine coverage

## Limited Day Plan

In Network (Member Pays)

Plan Annual Maximum	\$40,000
<b>Inpatient Hospital/Facility Services</b>	
Inpatient Hospitalization (Includes Room & Board, Drugs, Anesthesia, ICU, Maternity Stay, Inpatient Lab)	\$500 Co-pay per day, 7 day maximum per benefit period
Inpatient Surgery	\$500 Co-pay per day, 7 day maximum per benefit period
<b>Outpatient Services</b>	
Free-Standing Ambulatory Surgery Center	\$400 Co-Pay per surgery, limit 2 per Benefit Period
Outpatient Hospital Surgery	\$400 Co-Pay per surgery, limit 2 per Benefit Period
Anesthesia (per day, max 2 days per year)	\$100
<b>Physician Services</b>	
Office, Home Visits - Primary Care	\$30 Co-Pay, limit 4 per Benefit Period
Office, Home Visits - Specialist	\$60 Co-Pay, limit 4 per Benefit Period
Adult Routine Physical Exam*	Plan Pays 100%
Female Routine Gynecological Exam*	Plan Pays 100%
Well Child Care*	Plan Pays 100%
<b>Diagnostic Services (Lab and Radiology) Emergency Services</b>	
Lab, Pathology, X-ray - Office or Hospital	\$60 Co-Pay limit 4 per Benefit Period
Advanced Imaging MRI, MRA, CT, SPECT, PET Scans Hospital based or Free-Standing Lab or Facility	\$250 Co-Pay limit 2 per Benefit Period
<b>Emergency Services</b>	
Emergency Room Facility Fee	\$500 Co-Pay limit 2 per Benefit Period
Urgent Care	\$60 Co-Pay limit 4 per Benefit Period
<b>Behavioral Health and Substance Abuse Services</b>	
Inpatient/Intensive Services Behavioral Health Treatment	\$60 Co-Pay, maximum 4 days
Office Visit Behavioral Health Treatment	\$60 Co-Pay, maximum 4 days
Outpatient Hospital Behavioral Health Treatment	\$60 Co-Pay, maximum 4 days
Inpatient/Intensive Services Substance Abuse Detoxification and Rehabilitation	\$60 Co-Pay, maximum 4 days
Office Visit Substance Abuse Treatment	\$60 Co-Pay, maximum 4 days
Outpatient Hospital Substance Abuse Treatment	\$60 Co-Pay, maximum 4 days
<b>Prescription Drugs, Preventive Care Medications Only</b>	
Retail (30 day supply): Generic*/Preferred Brand Name/ Non-Preferred Brand Name/Specialty	\$10 Copay/\$20 Copay/\$40 Copay/ Discounted and paid 100% by Member
Mail Order Pharmacy (90 day supply): Generic*/Preferred Brand Name/Non-Preferred Brand Name/Specialty	No Coverage

\*These are preventive services recommend by the United States Preventive Services Task Force with grades of A or B  
Please see original plan document for a list of services not covered by the plan.

# Health Savings Account (HSA)

A health savings account (HSA) is a tax-favored savings account which works in conjunction with your health plan coverage. HSA dollars can be used to pay for qualified medical expenses such as deductibles, copays, dental, and vision care. For a complete list of qualified medical expenses, visit [www.irs.gov](http://www.irs.gov) in IRS Publication 502. Please call the MGM benefit enrollment center at 314.997.3835 to enroll

## HSA Major Benefits

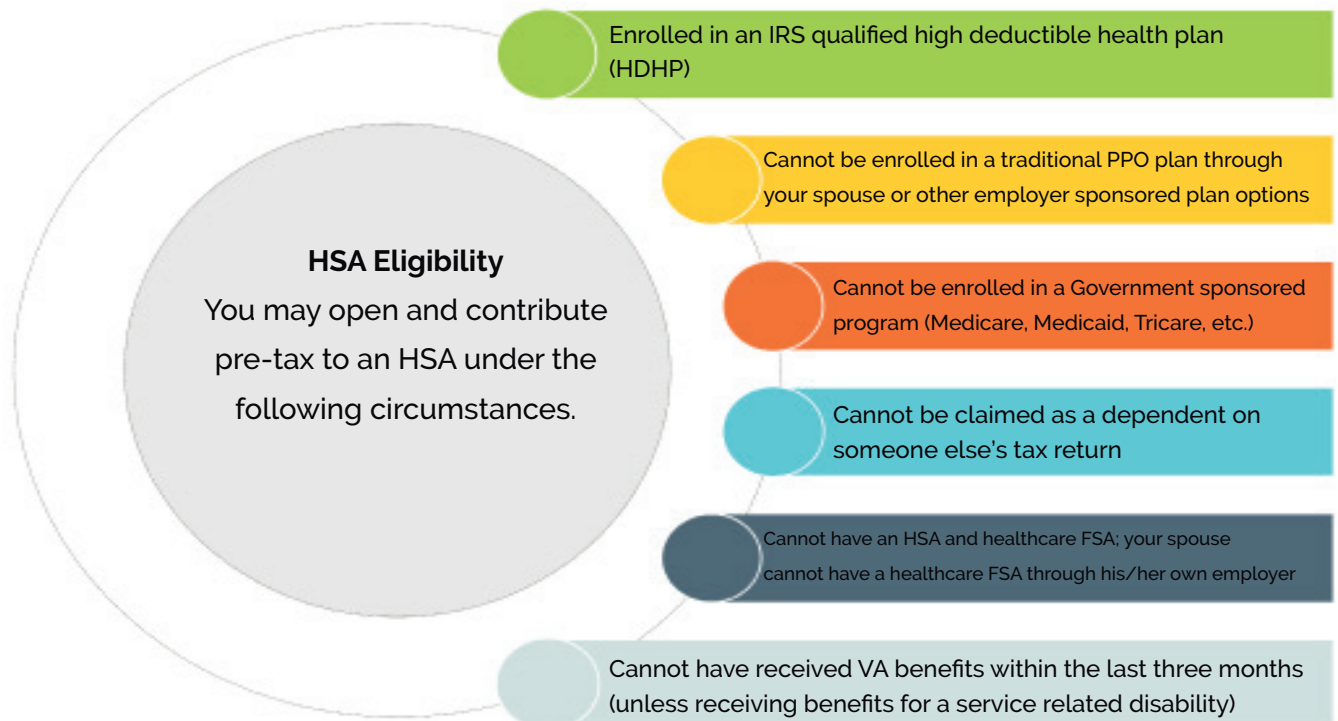
- » Funds always belong to you
- » Funds always roll over from year to year
- » Lowers your taxable income

## HSA Triple Tax Savings

- » Tax deduction when you contribute to your account
- » Tax-free earnings through investment
- » Tax-free withdrawal for qualified medical expenses

## 2022 HSA Funding Limits


Coverage Level	Limit
Individual Coverage	\$3,650
Family Coverage	\$7,300
Age 55 or Older	Contribute an additional \$1,000 on top of these amounts



# DENTAL INSURANCE

We partner with MetLife to offer you and your family members dental insurance. Visit [www.metlife.com](http://www.metlife.com) to find in-network providers and access a variety of online tools and programs.



 **TIP:** Remember to visit in-network dentists to receive the deepest level of discount on your services. To find a participating in-network dentist in your area, go to [Metlife.com](http://Metlife.com) or call 1.800.438.6388 to have a list faxed to you.



**Orthodontia Services Note:** The lifetime maximum illustrated is different from the calendar year maximum. For orthodontia services, this limit does not reset each year. This is the most your plan will cover for your services for the lifetime of your participation in this program. Orthodontia services apply to children up to age 19. All other dental services apply to dependents up to age 26.

**In-Network Providers:** Provider is reimbursed based on contracted fees and cannot balance bill you.

**Out-of-Network Providers:** Provider is reimbursed based on Reasonable and Customary standards and balance billing is possible.

## DENTAL INSURANCE PLAN OPTIONS & COSTS

MetLife	Employee Cost Per Month	
	Silver Plan	Gold Plan
Employee	\$13.91	\$25.94
Employee + Spouse	\$26.21	\$48.88
Employee + Child(ren)	\$37.26	\$69.47
Employee + Family	\$49.56	\$92.42

	Silver Plan		Gold Plan	
	In-Network % of Negotiated Fee	Out-of-Network 90% of R&C Fee	In-Network % of Negotiated Fee	Out-of-Network 90% of R&C Fee
<b>Deductible</b> Individual / Family	\$75/\$225	\$75/\$225	\$50/\$150	\$50/\$150
<b>Calendar Year Maximum</b>	\$1,000	\$1,000	\$1,000	\$1,000

	Carrier Pays			
<b>Preventive Services</b> (cleanings, exams, X-rays)	100%	80%	100%	100%
<b>Basic Services</b> (fillings, extractions)	80%	60%	80%	80%
<b>Major Services</b> (bridges, dentures)	50%	40%	50%	50%
<b>Orthodontia Services</b> (Children under age 19 only)	50% to \$1,000 Lifetime Max		50% to \$1,000 Lifetime Max	

# VISION INSURANCE

## FIND A PROVIDER



To find a provider in your area, visit the website at [metlife.com](https://www.metlife.com).

- ✓ Click on "Find a Vision Provider"
- ✓ Choose the "MetLife Vision PPO" network
- ✓ Enter your zip code and choose "Find A Vision Provider" for a comprehensive directory of vision providers

## REVIEW YOUR VISION PLAN

The vision plan offers coverage both in-network and out-of-network. It is to your advantage to utilize a network provider in order to achieve the greatest cost savings. If you go out-of-network, your benefit is based on a reimbursement schedule. Also, if you are considering Lasik surgery or other non-covered benefits, there are discounts available with some providers. To find a participating provider, go to [metlife.com](https://www.metlife.com).

### MetLife Employee Cost Per Month

Employee	\$6.30
Employee + Spouse	\$11.97
Employee + Child(ren)	\$12.60
Employee + Family	\$18.53

	In-Network	Out-of-Network
<b>Examination Copay</b>	\$10 copay Once every 12 months	<u>Reimbursement</u> Up to \$45
<b>Lenses</b>		<u>Reimbursement</u>
Single	\$25 copay	Up to \$30
Bifocal	\$25 copay	Up to \$50
Trifocal	\$25 copay	Up to \$65
Lenticular	\$25 copay	Up to \$100
<b>Frames</b>	\$140 retail allowance Once every 24 months Costco: \$75 allowance	<u>Reimbursement</u> Up to \$70
<b>Contact Lenses (instead of eyeglasses)</b>		<u>Reimbursement</u>
Contact fitting and evaluation	Maximum copay \$60	Up to \$105 allowance
Elective Lenses	\$140 allowance	Up to \$210 copay
Necessary Lenses	\$25 copay	
<b>Frequency of Service</b>		
Exam		Every 12 months
Lenses		Every 12 months
Frames		Every 24 months

# OPTIONAL EMPLOYEE LIFE AND AD&D INSURANCE



## Basic Life Insurance

When you are a full-time employee, the company provides term life insurance coverage to your dependents at no cost to you. In the event of your death, our policy helps provide a financial safety net to your beneficiaries. Your coverage is equal to 1 x your annual salary up to a maximum of \$50,000.

## Basic Accidental Death and Dismemberment (AD&D) Insurance

If your death is the result of an accident or if an accident leaves you with certain debilitating injuries, you'll be covered under our accidental death and dismemberment insurance for the same amount as the basic life insurance benefit.

### ONE TIME OPPORTUNITY!!!

During this open enrollment period only, you have the ability to purchase voluntary Life/ AD&D coverage for yourself and your dependents with **NO MEDICAL QUESTIONS**, up to the Guarantee Issue Amounts!



### DID YOU KNOW??

The company provides full-time employees Basic Life and AD&D AT NO CHARGE

If you don't enroll in the Voluntary Life plan during your initial enrollment period, you may be required to complete an Evidence of Insurability form and be approved by the carrier before you're able to get coverage in the future.

## Additional Coverage for Term Life and AD&D

For an additional cost, you can increase your benefit amount, and add a spouse or children to your policy.

**Optional Employee Life:** minimum \$10,000 to a maximum of 5 x your annual salary to a maximum of \$500,000. Annual enrollment guarantee issue up to \$100,000, new hire guarantee issue up to \$200,000

**Optional Spouse Life:** minimum \$5,000 up to 50% of the employee amount. Annual enrollment guarantee issue up to \$10,000, new hire guarantee issue up to \$50,000

**Optional Child(ren) Life:** Flat \$10,000 benefit for child(ren) 15 days and older. (Birth to 15 days has a \$500 benefit) Guarantee issue is \$10,000.

You must be enrolled in voluntary life coverage in order for your spouse, and/or eligible dependent children to enroll

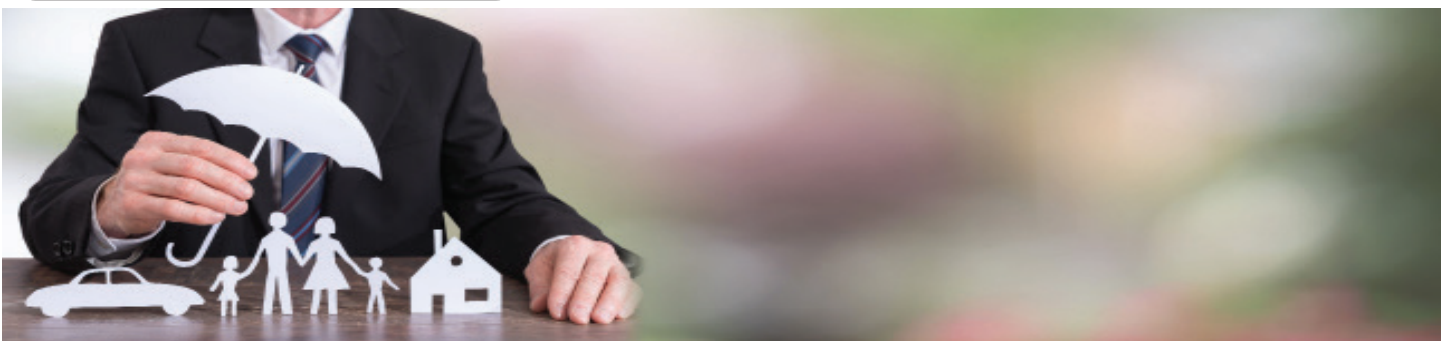
## Extra Features

This insurance offering from MGM Healthcare and MetLife comes with a variety of added features which can provide assistance to you and your family members today and during a difficult time.

- Grief Counseling
- Funeral Planning Services - locating funeral homes, obtaining cost estimates, identifying florists, caterers, hotels, etc.
- TotalControlAccount® - Immediate access to death proceeds
- WillsCenter.com - for assistance in preparing and updating a will

## Designating Your Beneficiary

This benefit is paid to your family at death. Please designate a beneficiary during your enrollment and be sure the beneficiary information is accurate.



# LIFETIME BENEFIT TERM LIFE INSURANCE



## LifeTime Benefit Term

We offer a voluntary whole life insurance option with competitive group rates so you can purchase the additional financial protection you need. LifeTime Benefit Term insurance is offered through Chubb. Coverage is available for you, your spouse, and your dependents. Please call the benefit enrollment center at 314.997.3835 for more information about enrolling.

## Features

- ↪ Protection through age 120
- ↪ Premiums are guaranteed never to increase through age 100
- ↪ No medical exams required
- ↪ Fully portable - you own it and can take it with you if you leave your current employment
- ↪ Optional spouse and child coverage
- ↪ LifeTime Benefit Term life insurance up to \$250,000 for eligible actively at work employees
- ↪ No medical exams required
- ↪ Optional spouse and child coverage

## Optional Benefit Riders

Accelerated Death Benefit: Automatically Included!	This rider allows an accelerated payment of 50% of the death benefit not to exceed \$100,000 if the insured's death is diagnosed to occur within a 12 month period.
Dependent Children Term Rider	One premium covers all eligible children. Coverage lasts to age 26 and may be converted up to 5 times the term amounts. Maximum initial term amount is \$25,000
Waiver of Premium	Waives the base premium and all rider premiums after the 6th month of disability if the insured becomes totally disabled prior to age 60.
Accelerated Death Benefit for Long Term Care (LTC)	If the insured is certified as chronically ill and is confined to a nursing home, assisted living facility, or receiving home health care or adult day care, the accelerated LTC benefit will pay 4% of the current death benefit amount each month for up to 25 months.

# SHORT-TERM DISABILITY INSURANCE



## REVIEW YOUR DISABILITY COVERAGE

Voluntary Short-Term Disability insurance is offered through MetLife. The plan benefit is 60% of basic weekly earnings up to a maximum of \$1,500 per week. Benefits are paid after a waiting period of 14 days for an accident and 14 days for sickness for up to 13 weeks or 26 weeks.

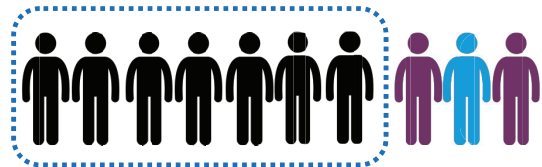
## For those currently enrolled there is no pre-existing condition limitation.

For new enrollees, if you have been treated for a health condition in the 6 months prior to 01/01/2022, benefits for that condition will not be covered until you are on the plan for 12 months.

Per \$10 weekly	13 Week Duration	26 Week Duration
39 & Under	\$0.6555	\$0.9775
40-54	\$0.6900	\$1.0350
55-64	\$0.7015	\$1.0695
65+	\$0.8510	\$1.3225

## Could you pay the bills if you weren't working?

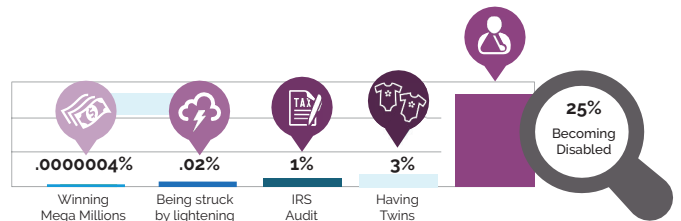
Less than **1/4** of U.S. consumers have enough emergency savings to cover six months or more of their expenses



Nearly **70%** of workers that apply to Social Security Disability Insurance **are denied**.

## What's more likely?

Many workers think these events are more likely than becoming disabled during their careers. But here are the actual odds:



In fact, nearly 40 million American adults live with a disability



# VOLUNTARY CRITICAL ILLNESS



## PROTECT YOUR FINANCES

- ✔ Elect Critical Illness coverage
- ✔ Elect Accident Insurance
- ✔ Elect Disability Insurance

### Critical Illness Insurance

Critical illness insurance, available through MetLife, is designed to help you offset the financial effects of a catastrophic illness with a lump sum benefit if you or a loved one are diagnosed with a covered critical illness. The critical illness benefit is based on the amount of coverage in effect on the date of diagnosis of a critical illness or the date treatment is received according to the terms and provisions of the policy.



### DID YOU KNOW??

This benefit pays \$75 per calendar year per insured individual if a covered health screening test is performed, including blood tests, chest x-rays, stress tests, mammograms, and colonoscopies.

## HOW CRITICAL ILLNESS COVERAGE WORKS

1  
Critical Illness coverage is selected. Coverage is guaranteed provided you are actively at work

2  
You experience chest pains and numbness in your left arm

3  
You visit the emergency room

4  
A physician determines that you have suffered a heart attack

5  
MetLife Critical Illness coverage pays you a First Occurrence Benefit of \$15,000 or \$30,000

## GROUP CRITICAL ILLNESS COVERAGE INCLUDES:

**Critical Illness Benefit** payable for:

- ✔ Cancer
- ✔ Heart attack
- ✔ Stroke
- ✔ Kidney failure
- ✔ Major organ transplant
- ✔ Alzheimer's
- ✔ Occupational HIV
- ✔ Coronary artery bypass graft
- ✔ 22 Additional Listed Conditions paid at 25% of your initial benefit; please see your certificate for a complete list

### FEATURES:

- ✔ **Health Screening Benefit** - \$75 per person per year
- ✔ Benefits are paid directly to you, unless you choose otherwise
- ✔ Coverage is guaranteed provided you are actively at work.
- ✔ Your rates will not increase due to age.
- ✔ You can take your coverage with you if you change jobs or retire (with certain stipulations)

## CRITICAL ILLNESS MONTHLY INSURANCE COSTS:



Tobacco status is based on whether the employee uses tobacco products only. The Critical Illness is issue age and employee deductions are locked in at the employee's age on the initial effective date of coverage.

Critical Illness - \$15,000 Basic Benefit Amount								
Issue Age	Non-Tobacco User				Tobacco User			
	Employee	Employee & Spouse	Employee & Children	Family	Employee	Employee & Spouse	Employee & Children	Family
18-29	\$8.55	\$14.70	\$12.75	\$18.90	\$12.60	\$20.85	\$16.80	\$25.05
30-39	\$13.35	\$23.70	\$17.55	\$27.90	\$20.85	\$36.00	\$25.05	\$40.20
40-49	\$26.70	\$46.65	\$30.90	\$50.85	\$43.35	\$75.15	\$47.55	\$79.35
50-59	\$45.60	\$79.35	\$49.80	\$83.55	\$75.30	\$130.65	\$79.50	\$134.85
60-69	\$67.05	\$113.25	\$71.10	\$117.45	\$111.90	\$190.05	\$116.10	\$194.25
70+	\$88.20	\$148.50	\$92.40	\$152.70	\$150.60	\$254.40	\$154.80	\$258.60

Critical Illness - \$30,000 Basic Benefit Amount								
Issue Age	Non-Tobacco User				Tobacco User			
	Employee	Employee & Spouse	Employee & Children	Family	Employee	Employee & Spouse	Employee & Children	Family
18-29	\$17.10	\$29.40	\$25.50	\$37.80	\$25.20	\$41.70	\$33.60	\$50.10
30-39	\$26.70	\$47.40	\$35.10	\$55.80	\$41.70	\$72.00	\$50.10	\$80.40
40-49	\$53.40	\$93.30	\$61.80	\$101.70	\$86.70	\$150.30	\$95.10	\$158.70
50-59	\$91.20	\$158.70	\$99.60	\$167.10	\$150.60	\$261.30	\$159.00	\$269.70
60-69	\$134.10	\$226.50	\$142.20	\$234.90	\$223.80	\$380.10	\$232.20	\$388.50
70+	\$176.40	\$297.00	\$184.80	\$305.40	\$301.20	\$508.80	\$309.60	\$517.20



# VOLUNTARY ACCIDENT INSURANCE

If you're like most people, you don't budget for life's unexpected moments. One mishap can send you on an unexpected trip to your local emergency room— and leave you with a flurry of unexpected bills. That's where Accident Insurance jumps in. In the event of a covered accident, the plan pays you cash benefits fast to help you pay for the costs associated with out-of-pocket expenses and bills— expenses major medical may not take care of.

## METLIFE ACCIDENT INSURANCE COVERS THINGS LIKE THE FOLLOWING:

- ✔ Ambulance: \$300-\$1,000
- ✔ Non-Emergency Care: \$50
- ✔ Emergency room visits: \$50-\$100
- ✔ Hospital/ICU Admission Per Accident: \$1,000/\$2,000
- ✔ Hospital Confinement: \$200 per day, up to 31 days
- ✔ ICU Confinement: \$400 per day, up to 31 days
- ✔ Transportation and Lodging Benefits: \$200 per night, up to \$6,000 per year
- ✔ Medical Testing: \$200
- ✔ Dislocations/Fractures: \$100-\$6,000
- ✔ Burns—2nd and 3rd Degree: \$100-\$10,000
- ✔ Eye Injuries: \$300
- ✔ Concussion: \$400
- ✔ Inpatient Surgery: \$200-\$2,000
- ✔ Cuts/Lacerations: \$50-\$400
- ✔ Dislocations (separated joint): \$100-\$6,000
- ✔ Fracture (broken bone): \$100-\$6,000
- ✔ Dismemberment, Loss, and Paralysis: \$500-\$50,000

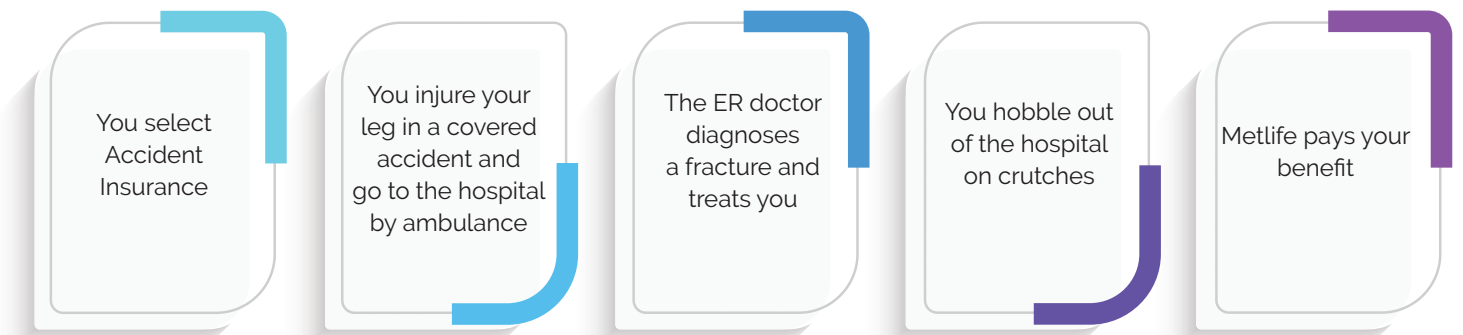
## FEATURES:

- ✔ Coverage is guaranteed-issue (which means you may qualify for coverage without having to answer health questions)
- ✔ Benefits are paid directly to you (unless you choose otherwise)
- ✔ Coverage is available for you, your spouse, and your dependent children
- ✔ Coverage is portable (with certain stipulations). That means you can take it with you if you change jobs or retire
- ✔ Fast claims payment

Accident Monthly Cost	
Employee Only	\$12.74
Employee & Spouse	\$26.72
Employee & Children	\$25.66
Employee & Family	\$31.92



## HOW ACCIDENT COVERAGE WORKS



# VOLUNTARY HOSPITAL INDEMNITY

Even a minor trip to the hospital can present you with unexpected expenses and medical bills. Even with major medical insurance, your plan may only pay a portion of your entire stay. Hospital Indemnity Insurance, offered by MetLife, is designed to provide financial assistance to enhance your current coverage. You can elect coverage for yourself, your spouse, and your children. Employees can use the benefit to meet the out-of-pocket expenses and extra bills which can occur. Benefits are paid directly to you based on the amount of coverage listed, regardless of the actual cost of treatment.



## METLIFE'S HOSPITALIZATION BENEFITS:

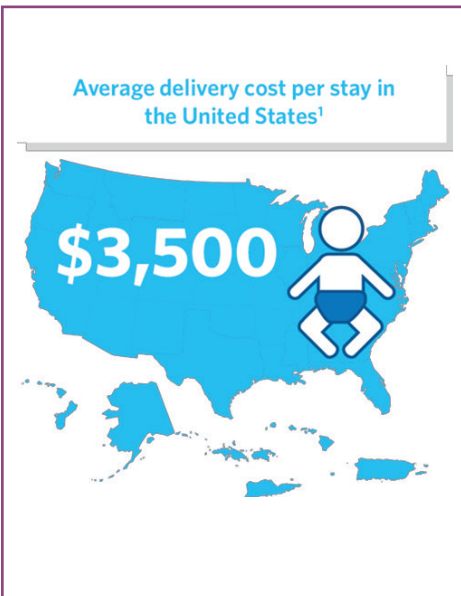
Hospital Admission (per confinement, max 2 times per calendar year)	\$1,000
ICU Hospital Admission (per confinement, max 2 times per calendar year)*	\$1,000
Hospital Confinement (per day, max 15 days per year)	\$200
Hospital ICU Confinement (per day, max 15 days per year)*	\$200

\*Benefit paid concurrently with the Admission/Confinement benefit when a covered person is admitted/staying in the ICU  
Please note, if the Admission benefit is payable for a Confinement, the Confinement benefit will begin to be payable the day after the Admission

## Hospital Indemnity Monthly Cost

Employee Only	\$23.52
Employee & Spouse	\$40.71
Employee & Children	\$37.48
Employee & Family	\$54.66

**EXAMPLE:** Sarah is admitted to the hospital to deliver her baby.



<p><b>Hospital Indemnity Plan Benefits:</b></p> <p>1st Day Hospitalization: \$1,000 Daily Confinement (2): \$400</p>
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\$1,400

Hospital Indemnity Cash Benefit from MetLife

She can use this money for costs associated with her hospital stay, medical bills, or even to help cover daily living expenses from her time off work.

# LIFELock IDENTITY THEFT



## REVIEW THE LIFELock IDENTITY THEFT PROTECTION

LifeLock with Norton Benefit Plans combine leading identity theft protection with device security and protection against online threats to block thieves from stealing personal information from PCs, Macs, and mobile devices

### What are the LifeLock Features?

- ↪ LifeLock Identity Alert System
- ↪ Dark Web Monitoring
- ↪ LifeLock Privacy Monitor
- ↪ Wallet Protection
- ↪ 24/7 Live Member Support
- ↪ Account Activity Alerts
- ↪ Million Dollar Protection Package
- ↪ Credit Monitoring - **Premium Only**
- ↪ Credit Score / Reports - **Premium Only**
- ↪ Monthly Credit Score Tracking - **Premium Only**
- ↪ Account Application Alerts - **Premium Only**
- ↪ Bank Account Takeover Alerts - **Premium Only**

## What are the LifeLock Features?

- ↪ Secures PCs, Macs, smartphones - **Premium covers unlimited devices**
- ↪ Parental Controls
- ↪ Cloud Backup - Premier includes up to 100GB
- ↪ Password Manager
- ↪ Norton Secure VPN - **Premium covers unlimited devices**
- ↪ SafeCam
- ↪ Online Threat Protection
- ↪ Smart Firewall
- ↪ Virus Protection Promise

Monthly Rates			
LifeLock Benefit Essential		LifeLock Benefit Premium	
Employee (18+ Years Old)	\$8.49	Employee (18+ Years Old)	\$13.99
Employee & Family	\$16.98	Employee & Family	\$27.98

# OTHER BENEFITS

## RETIREMENT SAVINGS PLAN 401(K)

Your financial security is important to you, your family, and to us as your employer. We want you to feel secure and prepared for life after your career. In partnership with John Hancock, our 401(k) plan is designed to help you plan ahead and feel prepared.

### IRS 401(k) Maximums

For 2022, you can contribute up to \$20,500 to your 401(k) account. If you are age 50 or will turn age 50 by December 31, you may contribute an additional "catch-up" contribution of \$6,500.

## How the Plan Works:

- Employees are eligible to join the plan upon your date of hire.
- You can contribute before-tax dollars to your 401(k) account through payroll deductions (up to the annual IRS limits)
- You can contribute after-tax dollars to your ROTH 401(k) account through payroll deductions (up to the annual IRS limits); your savings are not taxed when you withdraw them at retirement
- The company may match your contributions up to 2% of your salary once you become eligible for match contributions.
- You choose how to invest your money in a variety of investments options
- You are always 100% vested in your own contributions
- Your company contributions are subject to the vesting schedule below:



Years of Vesting Service	Years of Vesting Percentage
Less than Two Years	0%
Two Years But Less Than Three Years	20%
Three Years But Less Than Four Years	40%
Four Years But Less Than Five Years	60%
Five Years But Less Than Six Years	80%
Six Or More Years	100%

## INSURANCE TERMS



**Coinsurance**—The plan's share of the cost of covered services which is calculated as a percentage of the allowed amount. This percentage is applied after the deductible has been met. You pay any remaining percentage of the cost until the out-of-pocket maximum is met. Coinsurance percentages will be different between in-network and non-network services.



**Copays**—A fixed amount you pay for a covered health care service. Copays can apply to office visits, urgent care or emergency room services. Copays will not satisfy any part of the deductible. Copays should not apply to any preventive services.



**Deductible**—The amount of money you pay before services are covered. Services subject to the deductible will not be covered until it has been fully met. It does not apply to any preventive services, as required under the Affordable Care Act.



**Lifetime Benefit Maximum**—All plans are required to have an unlimited lifetime maximum



**Network Provider**—A provider who has a contract with your health insurer or plan to provide services at set fees. These contracted fees are usually lower than the provider's normal fees for services.



**Out-of-pocket Maximum**—The most you will pay during a set period of time before your health insurance begins to pay 100% of the allowed amount. The deductible, coinsurance and copays are included in the out-of-pocket maximum.



**Preauthorization**—A process by your health insurer or plan to determine if any service, treatment plan, prescription drug or durable medical equipment is medically necessary. This is sometimes called prior authorization, prior approval or precertification.



**UCR (Usual, Customary and Reasonable)**—The amount paid for medical services in a geographic area based on what providers in the area usually charge for the same or similar service.

## MEDICAL TERMS



**Prescription Drugs**—Each plan offers its own unique prescription drug program. Specific copays apply to each tier and a medical plan can have one to five separate tiers. The retail pharmacy benefit offers a 30-day supply. Mail order prescriptions provide up to a 90-day supply. Sometimes the deductible must be satisfied before copays are applied.



**Urgent Care** for an illness, injury or condition serious enough that a reasonable person would seek immediate care, but not so severe to require emergency room care.



**Emergency Room**—Services you receive from a hospital for any serious condition requiring immediate care.



**Preventive Services**—All services coded as Preventive must be covered 100% without a deductible, coinsurance or co-payments.



**Medically Necessary**—Health care services or supplies needed to prevent, diagnose or treat an illness, injury, condition, disease or its symptoms, which meet accepted standards of medicine.

# CONTACT INFORMATION

If you have any questions regarding your benefits, please contact the carrier listed below.

## Medical Insurance

UMR  
www.umar.com  
1.800.826.9781

## Prescription Drugs

Optum RX  
www.OptumRX.com  
See ID card for additional  
information

## Limited Day Plan

Homestead  
Member App: secure.healthx.  
com/INDECS.member  
1.844.446.3327 x5000  
  
Network = Multiplan

## Vision Insurance

MetLife  
www.metlife.com/vision  
MetLife Vision Policies:  
1.855.638.3931

## Dental Insurance

MetLife  
www.metlife.com/mybenefits  
Group Number: 205752  
MetLife Dental Policies:  
1.800.942.0854

## Disability/Accident/ Critical Illness/ Hospital Indemnity/ Basic Life Insurance

MetLife  
www.metlife.com/  
mybenefits  
1.800.438.6388

## Lifetime Benefit Term

Chubb  
To file a claim or for benefit  
questions:  
call 855.241.9891,  
email claims@gotoservice.  
chubb.com or fax claims to  
603.357.1179

## 401(k)

John Hancock  
www.jhgoenroll.com  
To Enroll: 1.855.543.6765  
Plan Questions: 1.800.395.1113  
Contract Number: 109221  
Enrollment Access Number:  
226250

## Identity Theft Protection

LifeLock  
For benefit questions:  
1.800.607.9174



## Notes



A photograph of an older couple embracing on a beach at sunset. The woman has long white hair and is wearing sunglasses and a grey shawl. The man is wearing a dark patterned sweater and light-colored pants. They are standing on the sand, looking out at the ocean under a warm, golden sky.

# MGM HEALTHCARE

*empowering better living.*

This Guide is intended to describe the eligibility requirements, enrollment procedures and coverage effective dates for the benefits offered by MGM Healthcare. It is not a legal plan document and does not imply a guarantee of employment or a continuation of benefits. While this Guide is a tool to answer most of your questions, full details of the plans are contained in the Summary Plan Descriptions (SPDs), which govern each plan's operation. Any discrepancy that may arise between the benefit summary and the full policy certificate, shall be governed and decided by the full policy certificate.