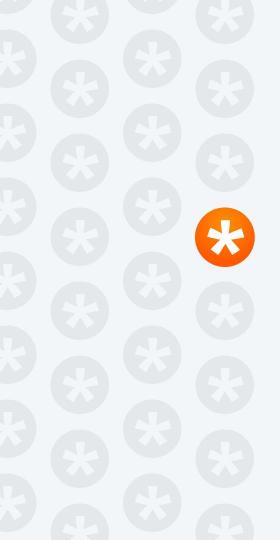
# \* teamsnap Total Rewards

# 🕴 Agenda

- 1. Medical
- 2. HSA
- 3. FSA
- 4. Dental
- 5. Vision
- 6. Metlife Benefits
- 7. Parental Leave
- 8. Retirement
- 9. Time Off
- 10. Perks
- 11. Next Steps



# **Medical Benefits**



#### **CO-PAY**

fixed amount you pay for covered health services (office visits or prescriptions)

#### **DEDUCTIBLE**

the amount you pay for covered health services before your insurance plan starts to pay. Deductibles run Jan-Dec.

#### **CO-INSURANCE**

the % of costs for covered health services that you pay after you've paid and met the deductible.

#### **OUT OF POCKET MAXIMUM**

the most you have to pay for covered services in annual plan year accumulating all of your expenses (copay, deductibles, & coinsurance)

### Insurance Basics

#### • HDHP- High Deductible Health Plan

A plan with a higher deductible than a traditional insurance plan. You pay more health care costs yourself before the
insurance company starts to pay its share (your deductible). An HDHP can be combined with a health savings account (HSA),
which will allow you to cover health, dental, and vision expenses with funds that roll over from year to year.A

#### • EPO- Exclusive Provider Organization

- A managed care plan where services are covered only if you go to doctors, specialists, or hospitals in the plan's network (except in an emergency)
- Our EPO plan has no coverage in AK, AL, AR, AZ, CT, HI, MN, MS, NC, NM, OK & requires selection of Primary Care Physician (PCP)

#### • PPO- Preferred Provider Organization

A type of health plan that contracts with medical providers, such as hospitals and doctors, to create a network of participating providers. You pay less if you use providers that belong to the plan's network. You can use doctors, hospitals, and providers outside of the network for an additional cost.

#### • All plans are part of the UHC Network

• Search the <u>UHC healthcare provider website</u> in-network doctors, hospitals, medical facilities

#### Preventative Care

• Preventative care will always be \$0 out of pocket (in-network). Annual check-ups, immunizations, and flu shots, as well as certain tests and screenings, are a few examples of preventive care.



## **Medical Plans**











	HDHP 3000	<b>EPO 1500</b>	PPO 2500	PPO 1500	PPO 1000
	UHC-CPHSA-CYA2 -3000Cpy-CO-FL	UHCNAVEPO-CYB2 -1500-90-CO-FL	UHC-CP-BTUE -2500-80-CO-FL	UHC-CP-BTUU -1500-80-CO-FL	UHC-CP-BTUT -1000-80-CO-FL
In Network Coverage	<b>6</b>		•	<b>(</b>	
Out of Network Coverage	0	•			
Deductible In Network (Indiv./Family) Out of Network (Indiv./Family)	\$3,000/\$5,600 \$5,000/\$10,000	\$1,500/\$3,000 N/A	\$2,500/\$5,000 \$5,000/\$10,000	\$1,500/\$4,500 \$3,000/\$9,000	\$1,000/\$3,000 \$2,000/\$6,000
Coinsurance (Carrier Coverage) In Network/Out of Network	100% / 50%	80% / N/A	80% / 60%	80% / 60%	80% / 60%
Out of Pocket Max In Network Out of Network	\$6,000/\$12,000 \$10,000 / \$20,000	\$3,500/\$7,000 N/A	\$6,250/\$12,500 \$6,250/\$12,500	\$4,500/\$9,000 \$6,250/\$12,500	\$3,500/\$7,000 \$6,250 / \$12,500
In-Network Visits Primary/Specialist	Ded then \$30/\$60 Copay	\$25/\$50 Copay	\$25/\$50 Copay	\$25/\$50 Copay	\$25/\$50 Copay
Virtual Visit	Ded then \$10	No Charge	No Charge	No Charge	No Charge
Urgent Care	\$75 Copay	\$75 Copay	\$75 Copay	\$75 Copay	\$75 Copay
ER Visit Hospitalization Copay	Ded then \$350 Copay Ded then \$500 Copay	\$350 Copay Deductible/Coinsurance	\$250 Copay Deductible/Coinsurance	\$250 Copay Deductible/Coinsurance	\$250 Copay Deductible/Coinsurance
Prescription Drugs (Mail Order Available)	\$10 \$35/Spec \$150 \$60/Spec \$500	\$15 \$45/Spec \$150 \$65/Spec \$500	\$15 \$45/Spec \$150 \$65/Spec \$500	\$15 \$45/Spec \$150 \$65/Spec \$500	\$10 \$35/Spec \$150 \$60/Spec \$500



## **Medical Rates- Monthly Cost**











	HDHP 3000	EPO 1500	PPO 2500	PPO 1500	PPO 1000
	UHC-CPHSA-CYA2- 3000Cpy-CO-FL	UHCNAVEPO-CYB2- 1500-90-CO-FL	UHC-CP-BTUE- 2500-80-CO-FL	UHC-CP-BTUU- 1500-80-CO-FL	UHC-CP-BTUT- 1000-80-CO-FL
Employee	\$0.00	\$0.00	\$0.00	\$57.98	\$133.40
Employee + Spouse	\$0.00	\$0.00	\$0.00	\$124.09	\$283.20
Employee + Child/ren	\$0.00	\$0.00	\$0.00	\$115.68	\$264.01
Employee + Family	\$0.00	\$0.00	\$0.00	\$179.75	\$410.24



### **Health Savings Account (HSA)**

- An HSA gives you the choice to use tax-free money for eligible medical expenses OR save your triple-tax-advantaged funds for later.
- Maximum HSA contributions for 2023:
  - \$3,850 individual
  - \$7,750 family
- Additional \$1,000 "catch up" contribution each year for employees 55 years and older
- You'll pay a maintenance fee of \$1 per month (your worksite employer has elected to pay the fee on your behalf).
- You must have a High Deductible Health Plan (HDHP) to be eligible.
  - UHC-CPHSA-CYA2-3000Cpy
- You must enroll in an HSA separately. You will forfeit any contribution your employer made prior to you opening your HSA.
  - Your employer is contributing: Annually \$999.96/\$1,500.00 monthly \$83.33/ \$125.00
- If enrolled in Medicare benefits, you are not eligible to contribute to an HSA or receive an employer contribution. Tax penalties may apply.



### **Health Care Flexible Spending Account (HCFSA)**

- The current annual contribution limit is \$3,050.
- Health care FSA funds can be used for eligible medical, dental and vision expenses.
- Up to \$610 of your remaining health care or limited health care FSA balance may be carried over into the coming Plan Year if you remain eligible to participate in the FSA.
  - Carryover does not apply to the Dependent Care FSA.
- If you participate in an HDHP, you will only be able to elect a Limited Plan FSA.
  - The Limited Plan FSA will only cover basic dental and vision expenses, so consider contributing less
  - The HDHP is meant to be paired with an HSA. The HSA will cover all qualified medical expenses, and the surplus of dental and vision expenses —so consider contributing more.
- More Info <u>here!</u>



### Dependent Care Flexible Spending Account (DCFSA) (Link to Full Summary)

#### Use for <u>non-medical</u> dependent expenses

- Examples: after-school programs, preschools, elderly home care
- Eligible dependents are children under 13 or elderly family members who live at home.

#### Plan contributions (\$50 -\$5,000)

- \$50 to \$2,500 if married and filing separately
- \$50 to \$1,500 if a Highly Compensated Employee

#### Important deadlines

- May 31, 2023 for incurring claims
- July 30, 2023 for requesting reimbursement



DCFSA does not include carry over allowance and does not cover medical expenses for dependents.



# **Dental Benefits**

# 🕴 Dental Plan

TeamSnap offers one dental insurance plan options through Aetna Dental. The plans offers in and out of network benefits providing you the freedom to choose any provider. Locate an Aetna Dental provider <u>HERE</u>.

TeamSnap covers **100% of the cost for all tiers** of employee enrollment for the Dental Plan!



<u>Dental PPO Plan</u>	<u>AET-APPO DEN</u> <u>5,000-Area 3A/8A</u>
Deductible (Individual/Family)	\$50/\$150
Benefit max	\$5,000.00
Preventive services	100% ded waived
Basic services	90%, after ded
Major services	60%, after ded
Orthodontic services	Adult & Child 50% \$2,000 lifetime max

\*Physical Dental cards will not be provided by Aetna Dental.

Instead once you're enrolled please register <u>HERE</u> to grab digital copies of your cards.



# **Vision Benefits**



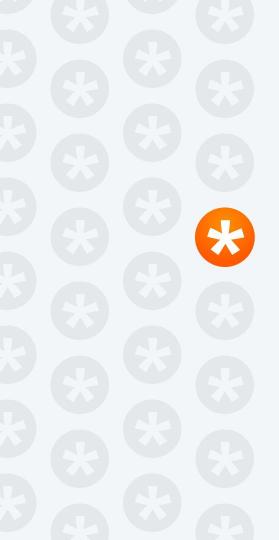
TeamSnap offers a <u>vision insurance plan</u> through ADP Totalsource utilizing the VSP network. You have the freedom to choose any vision provider. Locate a VSP network provider <u>HERE</u>.

TeamSnap covers **100% of the cost for all tiers** of employee enrollment for the Vision Plan!



<u>Benefit</u>	Copay	Frequency
Well vision examination	\$10	Once every 12 months within a Plan Year
Prescription glasses	\$15	Once every 12 months within a Plan Year
Single vision, lined bifocal and lined trifocal	None	Once every 12 months within a Plan Year
Retail allowance for frames	N/A	\$200 allowance per Plan Year-20% off amount over your allowance
Contact lenses (instead of	N/A	2200 allowance per Fran Tear-2070 off affloatie over your allowance
glasses)		\$150 allowance per Plan Year-15% off exams
Laser VisionCare	N/A	\$150 allowance both eyes for Custom LASIK, Custom PRK, Bladeless LASIK, LASIK, or PRK Average 15% off the regular price or 5% off the promotional price;
(instead of glasses or contacts)		discounts only available from contracted facilities

\*VSP does not provide any benefits cards. You only need to state you are under VSP Choice for benefits once enrolled.



# **Metlife Benefits**

# Disability Benefits

#### **Short Term Disability**

- TeamSnap pays 100% of the premium
- 60% of your salary \*
- Max \$2500 per week
- 14 days elimination period
- Max. benefit period: up to 13 weeks
- \*If you are enrolled in the <u>Voluntary STD</u>
   <u>Insurance</u> you are eligible for an additional 20% of your weekly salary, bringing your total benefit amount to 80% of your weekly salary.

#### **Long Term Disability**

- TeamSnap pays 100% of the premium
- 60% of your salary
- Max \$10,000 per month
- 90 day elimination period
- Use after exhausting STD





### Life, Accidental Death & Personal Loss, and Disability

<u>Life & Disability insurance</u> is an important element of your income protection planning, especially for those who depend on you for financial security. For your peace of mind TeamSnap provides the following through ADP Totalsource for all benefit-eligible employees at no cost.











### **Voluntary Benefit Options**



#### Accident insurance

If you're in an accident, medical insurance may not cover all necessary tests and services. Fortunately, the MetLife Group Accident Plan picks up where medical insurance leaves off.



#### Critical illness insurance

Health insurance can leave you with out-of-pocket expenses. A payment from the MetLife Critical Illness Plan can help cover many of those costs.



#### Accidental Death & Dismemberment (AD&D)

Pays benefits to you and your family if you die or become dismembered or blinded due to a covered accident.



#### Term life insurance

Life insurance provides death benefits as well as additional support, planning and protection services.



#### Hospital indemnity insurance

Charges mount up when you're in the hospital. The Hospital Indemnity Plan pays you a lump sum every day you are confined. You can use the money for any reason.



#### Short-Term Disability

Provides you with continuing weekly income during the initial weeks while you are out of work due to an illness or accident

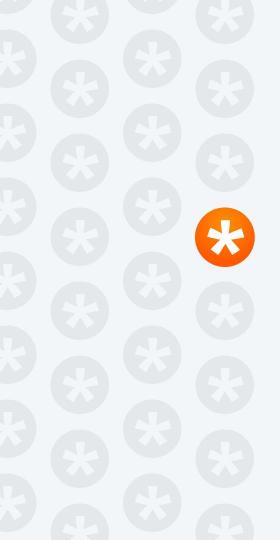


#### Legal services

Engage professional, state bar-certified attorneys for a wide range of legal matters.



- \* Part-time employees working at least 15 hours per week are eligible for voluntary benefits.
- \* Review policy details for pre-existing terms and conditions.



# **Additional Benefits**



### **UHC Member Perks**

#### Apple Fitness +

1 year subscription. Apple Fitness+ gives you and 5 eligible family members access to an on-demand library of fitness classes. Must have an apple device.



More info <u>here!</u>

#### Peloton

1 year for new users/ 3 months for existing users. Choose from thousands of live and on-demand classes, including cardio, strength, meditation, yoga, running and more. No equipment needed.



More info <u>here!</u>

#### Rally Rewards

- Website and mobile app that helps you learn simple ways to take care of yourself from being more active to eating better.
- You'll earn Rally coins when you complete your missions, complete a challenge or even just for logging in once a day. You can use the coins to enter to earn rewards for all that good work! It's a great way to experience the rewards of healthy living every day.

More info here!



#### • Virtual Primary Care

Visit with a Primary Care Provider (PCP) and get care from the comfort and privacy of home.

#### • 24/7 Virtual Visits

• Virtual visits allow you to talk with a provider 24/7 for common urgent care needs or when your Primary Care Provider is not available.

#### Virtual Behavioral Health Care

• For when you're dealing with life challenges, feeling stressed, or need to speak with a psychiatrist or therapist.

#### Virtual Dermatology

 Get care from a clinician specially trained in acute and chronic dermatology who can treat most of your skin-related conditions from the convenience and privacy of home.

#### Virtual Migraine Care

• Connect with a provider focused on migraine to develop a personalized care plan and help manage your pain.

#### Virtual Gastroenterology

• Get personalized care from a gastroenterology team to diagnose and treat the main causes of many types of digestive conditions.

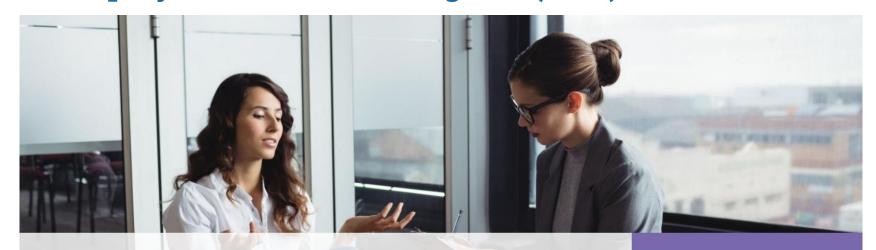
#### Virtual Speech Therapy

• Partner with a licensed therapist for 1-on-1 care and professional support to help you achieve your communication goals.

#### More Info <u>here!</u>



## **Employee Assistance Program (EAP)**



The Employee Assistance Program (EAP) is a confidential service designed to help employees with a variety of personal concerns, including:

- Mental and emotional health
- · Parenting, childcare and education
- Senior caregiving services
- Physical wellness and nutrition
- Legal and financial issues

Learn more about the EAP on MyLife.adp.com. Log in to My TotalSource® and click on Myself > Benefits Program > Life Management > EAP Portal.

1-866-574-7256



LifeCare.



# Pre Member Support Line with UHC



### **Questions about our health** plans? We have answers.

The Pre-Member Assist Line through ADP TotalSource is available year-round to help answer your questions about UnitedHealthcare products and services.

#### The Pre-Member Assist Line can help you:

- . Get answers about medical benefits and coverage policies.
- . Find out about prescription drug coverage.1
- . Locate participating network providers.2

#### When you call:

- Please let us know you're a "pre-member" seeking benefits through ADP TotalSource.
- A Have the plan code available (UnitedHealthcare example: UHC-CP-BTUD-3000-KY-FL; Neighborhood Health Partnership example: UHCNHP-HSA-BTWT-4000-Copay-SFL\*). You can get this information directly from ADP TotalSource.

\*Note: In the examples above, the plan code is underlined.





1-866-480-2957, Monday through Friday, 7 a.m. to 8 p.m. CT. TTY users can dial 711.



If you're enrolled in an ADP TotalSource medical benefits plan, you and your family (including parent in-laws) are automatically eligible for Health Advocate.

#### Health Advocate can help you:

- · Find the right doctors and hospitals.
- · Schedule tests and appointments.
- Resolve billing and claims issues and more.

#### Lower your bills with Medical Bill Saver.

- Health Advocate will contact your provider and negotiate a discount on medical and dental bills of \$400 or more.
- If they succeed, they share in 25% of the savings. You pay nothing to Health Advocate for their negotiation assistance if they don't.
- Once an agreement is made, they obtain provider sign-off on payment terms and conditions. You'll get an easy-to-read savings statement of the outcome.

Please note: Some states may have restrictions in place that impact Health Advocate's ability to negotiate medical bills. Rules are subject to change by state. Negotiation of fees related to Medicaid or Medicare are prohibited by federal law.



(866) 695-8622

HealthAdvocate.com/ADPTotalSource

Download the app today!







# **Parental Leave**

# Parental Leave

#### **Birth Parents**

- 8 weeks paid leave
- 6-8 weeks disability

#### **Non-Birth Parents**

8 weeks paid leave

#### **All New Parents (Birth & Non-Birth Parents)**

- Flexibility for appointments & pre-birth adoption activities
- Ease back plan of
  - 20 hrs at full pay for 2 weeks
  - 30 hrs at full pay for 2 weeks

View our full Parental Leave Guide HERE.

<sup>\*</sup>Family Medical Leave (FMLA) requirements apply & must be an employee for 6 months with the company



# Retirement



### 401k Plan with Slavic401k

A 401(k) retirement plan is available after a 3-month waiting period. TeamSnap pays all plan management fees!

You'll receive an email from Slavic401k on the 1st of your month following your 90 day mark at TeamSnap and enroll <u>here</u>. You can view the 401k Compliance Information packet <u>here</u>.

Please keep in mind that however you setup your 401k account the deduction % or deduction amount will come out of EVERY paycheck including paychecks with bonus payments in them (like commissions & quarterly bonuses.)





# Time Off at TeamSnap



# Time Off at TeamSnap

#### We want every employee to take the time they need now and again!

- Unlimited Personal Time Off (PTO)
- 11 Paid Holidays Business Closed: New Years, Memorial Day, Martin Luther King Day, Juneteenth, Independence Day, Labor Day, Thanksgiving, the day after Thanksgiving, Christmas Eve, Christmas Day and New Years Eve and New Years Day.
- 10 days Paid Sick Leave
- 8 Weeks Paid Parental Leave + Re-entry Program
  - Available for employees after 6 months of service to TeamSnap



# The Extra Perks

# The Extra Perks

- Flexible work hours and location
- Comfortable office environment leave your suit at home!
- TeamSnap App Discounts! (slack or email Laura Greene laura.greene@teamsnap.com)
  - 100% off any individual team you or your family participates in.
  - 50% off any clubs/leagues/tournament organizers that you or your family participates in when they become a new customer to TeamSnap.
  - 20% on any clubs/leagues/tournament organizers that you or your family participates in if they are a current TeamSnap customer. The discount will show up on the next renewal.
  - Want the deepest discount of them all? You can self-provision and operate any club/league/tournaments account for personal use, as long as you are the commissioner and there are no sales/support requirements (you get to be sales & CX on this one!).
- \$1,500/year education and training allowance
- New Apple Macbook and generous Home Office Stipend
  - Use this to set your home office up for success.



# What's Next?

# **Waiving Medical Health Benefits**

If you decide to waive medical benefits TeamSnap will offer a \$400/month allowance. This will be paid out \$200 a paycheck and will ONLY apply if you have waived all medical benefits. Once you waive your benefits please complete <a href="this form">this form</a> to request to receive paperwork that you must complete & return to receive the paycheck allowance.

- You can still enroll in dental and vision and receive the \$400/month allowance. This only is applied if you waive medical health benefits.
- If you do not complete <u>this form</u> you will not receive the allowance. We do not offer any retroactive pay for the medical waiver.



# Thanks!