

# Coast Property Management 2024 Open Enrollment



Learn more information at www.coastmgtbenefits.com



# Open Enrollment 2024 Meeting Agenda

- About Liberty Benefits Group Advisors (Matt Christensen and Jason Jakobsen Lead Consultants)
- Open Enrollment and Required Steps by Sunday 12/10/23 11:59PM
- Overview of Plan Components and All Carriers
- Comparison of Medical Plan Options (Base PPO, Buy-Up PPO and HDHP with H.S.A.)
- H.S.A. Overview and Tax Benefits
- New Dental & Vision Plans
- Voluntary Life Insurance (Lincoln)
- CoastMgtBenefits.com Website
- Contact Information <u>Matt@LBGAdvisors.com</u> / <u>Jason@LBGAdvisors.com</u> / Kris@LBGAdvisors.com
- Next Steps / Important Deadlines

## **About Liberty Benefit Group Advisors**

#### **Brokerage Role**

- Design, negotiate & implement all programs
- We are an extension of your HR Department
- We are not the insurance company

#### **Key Facts**

- Member Firm of Benefits Partners (large national brokerage)
- Located in the Pacific Northwest
- Key support staff:
  - Kristen Smith Member Education
  - Kris Kirkpatrick Claims Support
- Call 425-778-2800
- Contact Information <u>Matt@LBGAdvisors.com</u> / <u>Jason@LBGAdvisors.com</u> / <u>Kris@LBGAdvisors.com</u>

# Open Enrollment 2024

- Open Enrollment is the annual opportunity to change any of your benefit plans without a qualifying event
- Throughout the year, if you do have qualifying event, must make changes within 31 days
- Example Qualifying Events:
  - Marriage
  - Divorce, annulment, or legal separation
  - Birth of your child
  - Death of your spouse or dependent child
  - Adoption of/placement for adoption of your child
  - Termination or commencement of your spouse's employment
  - Change of employment status by you or your spouse, or another dependent
  - A significant change in your or your spouse's health coverage due to your spouse's employment
  - Child Dependent Turns 26 (they will automatically drop off your plan end of month after turning 26)
  - Full list available from TPA Loomis
- Anyone making changes must complete in SYNC HR by 12/10/23
- If not making changes, no action needed



## **Medical Benefits**

Administered by The Loomis Company

Group #: LBICPM 800-346-1223



No Changes!



## Your medical plan options

BENEFIT	1. Base Plan	2. Buy Up Plan	3. HDHP (H.S.A)
PLAN-YEAR DEDUCTIBLE Individual / Family	\$1,000 individual / \$3,000 Family	\$500 individual / \$1,500 Family	\$1,600 individual / \$3,200 Family
PLAN-YEAR OUT-OF POCKET limit for the plan	\$5,000 Individual / \$12,700 Family	\$2,500 Individual / \$7,500 Family	\$5,000 Individual / \$12,700 Family
Coinsurance	20% coinsurance	20% coinsurance	20% coinsurance
OUTPATIENT CARE			
Primary care visit to treat an injury or illness	\$30 copay/visit	\$25 copay/visit	20% coinsurance
Specialist visit	\$30 copay/visit	\$25 copay/visit	20% coinsurance
Generic Drugs	\$5 copay/retail option; \$10 copay/mail order option	\$5 copay/retail option; \$10 copay/mail order option	After the deductible has been met: \$5 copay/retail option; \$10 copay/mail order option
Preferred brand drugs	\$25 copay/retail option; \$50 copay/mail order option	\$25 copay/retail option; \$50 copay/mail order option	After the deductible has been met: \$25 copay/retail option; \$50 copay/mail order option
Non-formulary brand drugs	\$50 copay/retail option; \$100 copay/mail order option	\$50 copay/retail option; \$100 copay/mail order option	After the deductible has been met: \$50 copay/retail option; \$100 copay/mail order option
Diagnostic Lab & X-ray	20% coinsurance	20% coinsurance	20% coinsurance

<sup>\*\*</sup>Please refer to summary plan documents (SPD) for full description of medical benefits. This is not a legal document.

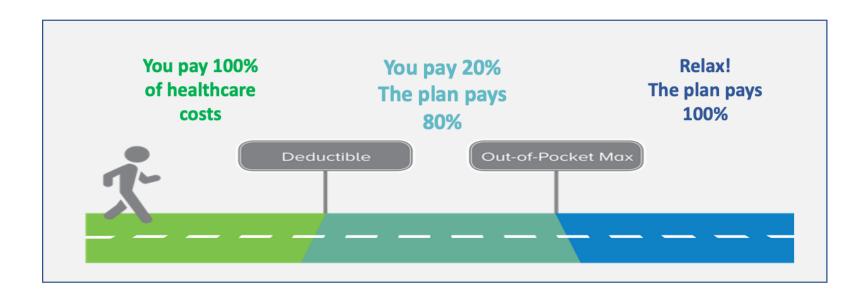


## Your medical plan options

BENEFIT	1. Base Plan	2. Buy Up Plan	3. HDHP (H.S.A)
INPATIENT CARE			
Physician & Surgeon Fees	20% coinsurance	20% coinsurance	20% coinsurance
Emergency Medical transportation	20% coinsurance	20% coinsurance	20% coinsurance
Emergency Room Care	\$250 copay/visit	\$200 copay/visit	20% coinsurance
Urgent Care	\$60 copay/visit	\$55 copay/visit	\$60 copay/visit
MATERNITY CARE			
Office visits	\$30 copay/visit	\$25 copay/visit	20% coinsurance
Childbirth/ delivery professional services /delivery facility services	20% coinsurance	20% coinsurance	20% coinsurance
REHAB HEALTH			
Home health	\$30 copay/visit	20% coinsurance	20% coinsurance
Skilled nursing care	20% coinsurance	20% coinsurance	20% coinsurance

<sup>\*\*</sup>Please refer to summary plan documents (SPD) for full description of medical benefits. This is not a legal document.

## How High Deductible Plan & HSA Plans Work





Prescription Drugs	30-day supply retail (PPO 500/1000 Plans)	30-day supply retail (HSA Plan)
Tier 1 Generic	\$5 co-pay (x 2 for 90-day mail)	After deductible is satisfied \$5 co-pay (x 2 for 90-day mail)
Tier 2 Preferred	\$25 co-pay (x 2 for 90-day mail)	After deductible is satisfied \$25 co-pay (x 2 for 90-day mail)
Tier 3 Non-Preferred	\$50 co-pay (x 2 for 90-day mail)	After deductible is satisfied \$50 co-pay (x 2 for 90-day mail)
Multi-Sourced Non-preferred Brand*	Payer Matrix Program	
*Out of network reimbursed at 50% of network rate after co-pay		



<sup>\*</sup> See specialty drug carve-out



#### What is Payer Matrix?

Payer Matrix reduces the cost of your high dollar prescription drugs by working directly with you in order to obtain alternative funding though the manufacturer, foundations, grants, and international sourcing

#### Do I qualify?

A Care Coordinator will be assigned to work directly with you if your plan has any prescriptions with the qualifying specialty drugs and will assist with any questions you may have about the process.

If you take a specialty drug, please visit the specialty drug list on the Coast Benefits website.

Payer Matrix, LLC is a Patient Advocacy Company who partners with companies like Coast to address and assess the financial risk and growing liability related to specialty drug costs

Payer's advocacy model successfully obtains alternative funding for high-cost drugs, thus reducing the cost to the member.

When applicable, the program utilizes manufacturer assistance programs to achieve these goals

Payer Matrix can possibly save 100% of your current out of pocket expense for this medication.

If the Plan Participant is eligible for a Payer Matrixidentified alternate funding program and chooses not to enroll in that program, he/she will be responsible for the full cost of his/her applicable Specialty Drug prescription.



# Coordinating Specialty Prescriptions is Complex and Requires High-Touch Care

Patient Receives a Script and Triaged to Pharmacy, PBM, and Vendor



Patient receives a Welcome Call



Patient completes Consent & Onboarding forms



Leverage Technology To Create Efficiencies And Coordination



Research Appropriate Funding and Sourcing Options



Coordinate with Patient, Prescriber, and Other Providers



Coordinate with
Pharmacy and Any
Administration
Provider Required



Member is notified and medication is shipped



Administration Coordinated and Scheduled



Monitor and Track Compliance and Adherence



Confidentia



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

#### H.S.A. Overview

- Set aside a portion of your paycheck—before taxes—into an account you own (Reduces taxable income)
- Help you pay for qualified medical, dental, and visions expenses for you and your dependents tax free (even if not on your plan)
- Employee Controls Disbursements (not a reimbursement program)
- Will receive a debit card for HSA funds or can use bill-pay feature online
- Can pay with credit card and reimburse yourself

#### **2024 Funding Limits**

- \$4,150 Individual (up \$300 from 2023)
- \$8300 (up \$550 from 2023)
- If over 55, add \$1,000 to limits above

#### **Admin/Online Access**

- Log-in to Nue Synergy: https://nuesynergy.com/resources/for-participants/ to view your account activity
- See the company payroll department to make changes to your HSA contribution election



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

#### **Qualifying Expenses:**

- Deductibles, Co-Insurance, Regular Bills Received From Medical, Dental, Vision Providers
   See IRS Pub 502 for more information
- Self-Policing Account Please save receipts with annual tax file

#### **Tax Advantages:**

- Employee Contributions Reduce Taxable Income
- Can invest in pre-selected mutual funds tax free (minimum balances apply)
- When funds are used for qualified expenses, no taxes apply
- If you are disabled or reach age 65, you can receive non-medical distributions without penalty, but you must report the distribution as taxable income (similar to traditional 401k)

#### Other Account Information:

- Employee Owns Account
- Rolls-over year to year (not use it or lose it)
- If employee leaves Coast in future, can keep with Optum or Roll-over to different H.S.A.
   Administrator



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

#### **Eligibility Restrictions:**

- If you are claimed as a dependent on someone else's taxes
- You are covered by any other health insurance policies that are not considered High Deductible Health Plans (HDHPs)
- You are currently on Medicare (previous H.S.A. funds can pay Medicare premiums A/B)
- If you participate in an unlimited FSA or HRA through your employer or your spouse's employer, (Limited or Dependent FSA is allowed with H.S.A)
- You and your spouse can each have an HSA if you both have high deductible coverage. If you have family HDHP coverage (Min deductible \$1600 individual or \$3200 family), the maximum contribution is split equally unless you and your spouse agree on a different division

#### **HSA: Eligible Expenses - Keep your Receipts!**



Acne treatment\* Acupuncture

Allergy & Sinus medication\*

Antacids\*

Antibiotic ointment\*

Anti-diarrheal\*

Antifungal foot cream\* Anti-gas medication\* Anti-itch cream/gel\*

Antiseptic\*

Asthma treatment\*

Bandages/gauze

Birthing classes or Lamaze

Blood pressure monitor

Braces (knee, ankle, wrist)

Breast pump Burn cream\*

Chiropractic services

Coinsurance Cold/hot pack

Cold sore treatment

Cold/cough medication\*

Compression stockings

**Contacts & solutions** 

Copays CPAP machine

Crutches

**Deductibles** 

Dental services

Diabetic supplies

Diaper rash ointment\*

Digestive Aids\*

Drug addiction treatment

Ear wax removal kits\*

Eve drops

Feminine AntiFungal/Anti-Itch\*

First Aid Kit Flu shots

**Group therapy** 

Hearing aids & supplies Hemorrhoid medication\*

Hormone therapy

Hospital fees

**Humidifiers** 

Immunizations\*

Incontinence supplies

Individual counseling

Insect bite treatment\*

Lab work

**Lactation Consultant** 

Lactose intolerance pills\*

Laser eye surgery

Laxative\*

Lice treatment products\*

Massage therapy

Medical records

Motion sickness relief\*

Nasal strips

Naturopathic visits

Orthodontia

Orthotic inserts

Oxygen and equipment

15

Pain relievers\*

Parasitic treatment\*

Physical exams

\*\*Please refer to the IRS Publication 502 for full qualifications list

Things that are hygienic or cosmetic in nature are not eligible. Some Items that are hygienic:

Toothbrushes Toothpaste Toiletries Some items that are cosmetic: Veneers Teeth whitening / bleaching Cosmetic Surgery



#### What is the role of 6 Degrees?

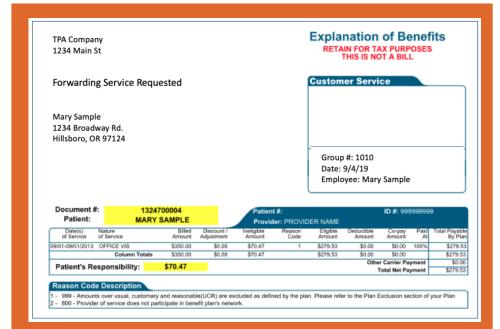
- Allows members to go to a provider of their choice
- Discounts and negotiates balance bills on your behalf
- Please notify 6 degrees if you receive a balance bill!
- Loomis will send you an Explanation of Benefits (EOB) in the mail
- Always look at the Patient Responsibility to see what you owe.
- If you receive something from a hospital or physician stating you owe more than what the patient responsibility is on your EOB, call **Loomis** to report it. This is called a Balance Bill.

Please submit your balance bill within 60 days of receiving to avoid additional liability.

#### **Contact Information:**

Phone: 888-615-6398

info@6degreeshealth.com www.6degreeshealth.com



#### What is the process?

- ✓ Loomis will send you an Explanation of Benefits (EOB) in the mail
- Always look at the Patient Responsibility to see what you owe.
- If you receive something from a hospital or physician stating you owe more than what the patient responsibility is on your EOB, call Loomis to report it. This is called a Balance Bill.

## Regenexx Orthopedic Stem Cell Therapy

https://regenexxbenefits.com/coast

Or 844-948-1117

# Orthopedic Stem Cell Therapy - Regenexx Are you considering an orthopedic surgery?

#### **Orthopedic Stem Cell Therapy**

In some cases Orthopedic stem cells can be an alternative to traditional orthopedic surgeries. Employees and dependents are now covered by Regenexx®, an alternative to orthopedic procedures.

Regenexx invented the field of Interventional Orthopedics, a medical specialty that uses regenerative medicine, including stem cell and blood platelet procedures, to treat a broad range of orthopedic conditions. Regenexx provides an innovative, nonsurgical relief to repair damaged bone, cartilage, muscle, tendon, and ligament through outpatient procedures that prevent up to 70% of patients from continuing on to elective orthopedic surgery.





Learn more information at www.coastmgtbenefits.com



## Magellan eMbrace

#### Up to 8 Counseling Sessions at no cost to employee

- Gallup Wellbeing Survey
  - go to Member.magellanhealthcare.com
  - click "Take the Survey" on top or bottom of the hone page to get your Personalized Plan
     & Wellbeing Score
- Counseling Access
  - go to Member.magellanhealthcare.com
  - click "Find Care" on the top toolbar
  - Click Virtual counseling "get started" for our virtual therapy platform. (Mobile app available)
  - Click "Browse for local car providers" to find a in person counselor that meets your specific preferences.



#### Member Website

Member.MagellanHealthcare.com

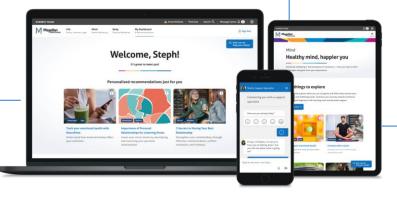


# Personalized recommendations

Members are guided to services and resources that are right for their needs

#### Alerts and proactive reminders

Dashboard view with notifications, upcoming events and trending resources



#### Support for Life, Mind and Body

Comprehensive content topics and resources including services, videos, articles, webinars and apps

#### Interactive, real-time support

Live chat bot and translation into 5 languages

#### The Process

1 4

Step 1: Complete the Gallup Wellbeing Finder



Step 2: Receive your Wellbeing Score

Based on your responses to the Gallup® Wellbeing Finder
We've calculated your Wellbeing Score and
created your personalized plan



Overall, you appear to be Struggling.

Don't worry, based on your answers, we have created your Personalized Plan.

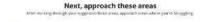
This plan helps you improve the important areas of your life.

How is my score calculated?

## Step 3: Follow your Personalized Plan

#### **Personalized Plan**









Last, but not least

Career 

Way cover community in your owners, well being when you make puriode, produced

# Counseling

- ✓ 40,000+ providers nationwide to meet in-person or via telehealth
- ✓ Virtual therapy appointments within 24 hours via text, phone, video or live chat
- Patient provider matching tools
- Support for anxiety, burnout, grief, relationship problems, stress, substance misuse and trauma

Members can filter counselors by expertise in specific disorders, age groups and specialized populations and are matched to the best modality



# Virtual Therapy

- ✓ **Quick and easy access to care,** typically within 24 hours
- Counseling for the entire family—individuals, couples and teens
  - Match to a therapist
  - Modalities: Text message, phone, chat or videoconference
- ✓ **Staffed by licensed**, trained, experienced and accredited psychologists, marriage and family therapists, clinical social workers, and professional counselors



# Digital Emotional Wellbeing Program

- Behavioral economics

   and gamification to drive sustained engagement
- Access educational content on topics ranging from mindfulness to common behavioral health concerns
- Address anxiety and depression anytime, anywhere with Magellan's DCBT programs
- Connect with Magellan's virtual and in-person providers\*
- Track behaviors like mood, sleep, stress and pain, and see progress

- Complete activities such as breathing exercises, meditation, yoga or journaling
- Clinically validated
   assessments
   for screening and ongoing risk
   monitoring
- Sync to other trackers
  such as Fitbit, Garmin and
  MyFitnessPal through Apple
  Health or Google Fit







<sup>\*</sup>If included in benefit package purchased

## Life Enrichment Services



Guiding members to services that help them with the ups and downs of life

- Work-Life Services
  Support for all life stages
- ID Theft Resolution Guidance from a Fraud Resolution Specialist™

- Legal Services

  Meet with an attorney
- Financial Wellbeing
  Expert help from a Money Coach
- ✓ **Discount Center**National and local discounts





## **Dental Benefits**







## MetLife Dental Plans (High/Low)

Find a provider at <a href="www.metlife.com/dental">www.metlife.com/dental</a> - No Card Needed (SS# lookup)

	In-Network	Out-of-Network
	High Plan	
Coverage Tunes	In-Network	Out-of-Network
Coverage Type:	% of Negotiated Fee	% of R&C Fee
Type A - Preventive	100%	100%
Type B - Basic Restorative	90%	90%
Type C - Major Restorative	60%	60%
Type D – Orthodontia	50%	50%
Annual Maximum Benefit:		
Per Individual	\$2500	\$2500
Deductible		
Individual	\$50	\$50
Family	\$150	\$150

	In-Network	Out-of-Network	
	Low Plan		
Coverage Type:	In-Network	Out-of-Network	
Coverage Type:	% of Negotiated Fee	% of R&C Fee	
Type A - Preventive	100%	100%	
Type B - Basic Restorative	80%	80%	
Type C - Major Restorative	50%	50%	
Type D – Orthodontia	NS	NA	

Annual Maximum Benefit:		
Per Individual	\$2000	\$2000
Deductible		
Individual	\$50	\$50
Family	\$150	\$150



## **Option 2: Willamette Dental Plan**

Willamette is a copay-driven plan design Please refer to summary of benefits booklet for full details of coverage

BENEFIT	COPAYS
Annual Maximum	No Annual Maximum
Deductible	No Deductible
General or Orthodontic Office Visit	\$15 per visit
Diagnostic & Preventive Services	Covered with the Office Visit Copay
Restorative Dentistry Fillings Porcelain-Metal Crown	\$30 Copay \$275 Copay
Oral Surgery	Single Tooth - \$25 Copay Surgical Extraction - \$125 Copay
Dental Implants	Implant benefit maximum of \$1,500 per calendar year
Ortho	\$150 (Pre) / \$2800 Comprehensive





### **MetLife Vision Plan**

Find a Vision provider at <a href="https://www.metlife.com/vision">www.metlife.com/vision</a>
No Card Needed (SS# Lookup)

#### In-network benefits

There are no claims for you to file when you go to a participating vision provider. Simply pay your copay and, if applicable, any amount over your allowance at the time of service.

Frequency

Eye exam

Once every 12 months

- Eye health exam, dilation, prescription and refraction for glasses: At no additional cost after a \$10 copay.
- Retinal imaging: At no additional cost Up to a \$39 copay on routine retinal screening when performed by a private practice provider.

<u>Frame</u>

Once every 12 months

- · Allowance: \$150 after \$0 eyewear copay.
- Costco, Walmart and Sam's Club: \$85 allowance after \$0 eyewear copay.
   You will receive an additional 20% savings on the amount that you pay over your allowance.
   This offer is available from all participating locations except Costco, Walmart and Sam's Club.

#### Standard corrective lenses

Once every 12 months

• Single vision, lined bifocal, lined trifocal, lenticular: At no additional cost after **\$0** eyewear copay.

#### Standard lens enhancements

Once every 12 months

#### Contact lenses instead of eye glasses

- Contact fitting and evaluation: At no additional cost with a maximum copay of \$60.
- Elective lenses: \$150 allowance.

#### Out-of-network reimbursement\*

You pay for services and then submit a claim for reimbursement. The same benefit frequencies for In-network benefits apply.

Once you enroll, visit <u>www.metlife.com/mybenefits</u> for detailed out-of-network benefits information.

- Eye exam: up to \$45
- Single vision lenses: up to \$30

Frames: up to \$70

Lined bifocal lenses: up to \$50

Contact lenses:

- Lined trifocal lenses: up to \$65
- Elective up to \$105
- Lenticular lenses: up to \$100
- Necessary up to \$210

#### In-network value added features:

Additional lens enhancements: In addition to standard lens enhancements, enjoy an average 20-25% savings on all other lens enhancements.<sup>1</sup>

Savings on glasses and sunglasses: Get up to 20% savings on additional pairs of prescription glasses and non-prescription sunglasses, including lens enhancements. At times, other promotional offers may also be available.<sup>1</sup>

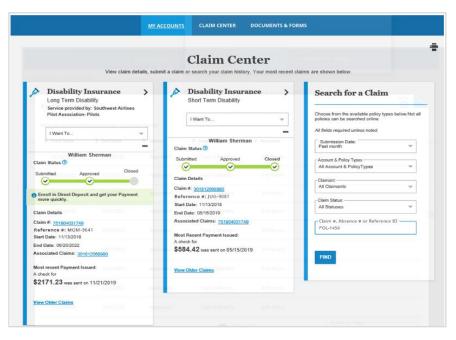
Laser vision correction: 2

Potential savings averaging 15% off the regular price or 5% off a promotional offer for laser surgery including PRK, LASIK and Custom LASIK. This offer is only available at MetLife participating locations.

<sup>\*</sup>If you choose an out-of-network provider, you will have increased out-of-pocket expenses, pay in full at time of service, and file a claim for reimbursement.

## MetLife.com/MyBenefits

### Online Employee Portal to View Metlife Benefits



#### With MyBenefits you can...

- View enrollment status
- Check recent claims and status
- Find essential forms
- Update profile information
- Digital ID Card
- Access educational tools
- View all your claims summary and detail across all products
- Customize and filter claims by date, product, group, and claim number
- Print, email and download claim information
- Easy-to-read claim status information, including disability direct deposit payments
- Integrated tutorials and videos





# Voluntary Pet Insurance



#### Protect your fur family from the unexpected

Pet insurance is coverage for dogs and cats that can help you be prepared for unexpected vet costs.

You can take advantage of benefits like:

- Flexible coverage with up to 90% reimbursement<sup>1</sup> and freedom to visit any U.S. licensed vet
- Only provider to offer family plans, covering multiple cats and dogs on one policy
- Optional Preventive Care coverage
- 24/7 access to Telehealth Concierge Services
- Discounts up to 30% and additional offers on pet care, where available
- MetLife Pet mobile app makes it easy to submit and track claims and manage your pet's health and wellness.

\*\*Direct Bill To Employee

## **Lincoln Life**

- Company Paid Life Insurance (Replacing Mutual of Omaha)
- New Voluntary Life Offering
  - Access through Employee Navigator link in SYNC or
  - Access through link from Benefits Website (first page)
  - https://www.employeenavigator.com/benefits/Account/R egister (company identifier: CPMgt)-
  - Take Advantage of True Open Enrollment
    - Guaranteed Issue
    - Group Buying Power
    - Minimum Group Participation is Required



## Life and AD&D



- A cash benefit of \$15,000 to your loved ones in the event of your death, plus a matching cash benefit if you die in an accident
- A cash benefit to you if you suffer a covered loss in an accident, such as losing a limb or your eyesight
- Accident Plus -If you suffer an AD&D loss in an accident, you may also receive benefits for the following on top of your core AD&D benefits: coma, plegia, education, childcare, spouse training, and more
- Benefits reduce at age 65
- · Must be Enrolled in Medical to Receive



Customer service: 1-800-423-2765
Visit LincolnFinancial.com

## Voluntary Life – What is it?

- Provides a cash benefit to your loved ones in the event of your death
- Voluntary Life is an added employee-paid benefit on top of your Basic Life benefit (\$15k)
- You have the option to increase the Voluntary Life death benefit up to \$500,000 in the event of your death
- You can also enroll your spouse, so you receive a cash benefit in the event of their death.
- Basic Life (\$15k) + Voluntary Life (Up to \$500k) = Total Death Benefit

## How to Enroll

- Employees can enroll up to \$200,000 of benefit, without requiring medical history
  - Option to enroll up to \$500,000, with medical history
- Spouses can enroll up to \$30,000 of benefit, without requiring medical history
  - Option to enroll up to 50% of employee amount, with medical history
- Children can also be enrolled in \$1k increments up to \$10k

.Employee Life		
Coverage Options	Increments of \$10,000	
Maximum coverage amount	This amount may not exceed the lesser of 5 times Annual Earnings (rounded up to the nearest \$10,000) or \$500,000	
Minimum coverage amount	\$20,000	
Guaranteed Life coverage amount	\$200,000	
Your coverage amount will reduce by 35 of the original amount when you reach a	% when you reach age 65; an additional 15% age 70. Terminate upon retirement.	
.Spouse Life The amount of Dependent Life Insurance coverage cannot be greater than 50% of the Employee Benefit.		
Coverage Options	Increments of \$5,000	
Maximum coverage amount	This amount may not exceed the lesser of 5 times Employee's Annual Earnings (rounded up to the nearest \$5,000) or \$250,000	
Minimum coverage amount	\$10,000	
Guaranteed Life coverage amount	\$30,000	
Coverage amounts are reduced by 35% when an employee reaches age 65; and additional 15% of the original amount and an employee reaches age 70. Terminate upon the employee's attainment of age 70 or retirement, whichever occurs first.		
.Dependent Child(ren) Life		
Day 1 but under 26 years, or 26 years if unmarried and a full-time student	Increments of \$1,000 with a minimum of \$2,000 and a maximum of \$10,000	

## Yearly Increases

 Employees/Spouses can increase coverage by \$20k/\$10k each year, without needing to provide medical history

• Now: \$200k

• Year 1: \$220k

• Year 2: \$240k

• Year 3: \$260k

• Year 4: \$280k

• Year 5: \$300k

.Employee Life		
Coverage Options	Increments of \$10,000	
Maximum coverage amount	This amount may not exceed the lesser of 5 times Annual Earnings (rounded up to the nearest \$10,000) or \$500,000	
Minimum coverage amount	\$20,000	
Guaranteed Life coverage amount	\$200,000	
Your coverage amount will reduce by 35 of the original amount when you reach a	% when you reach age 65; an additional 15% age 70. Terminate upon retirement.	
.Spouse Life The amount of Dependent Life Insurance coverage cannot be greater than 50% of the Employee Benefit.		
Coverage Options	Increments of \$5,000	
Maximum coverage amount	This amount may not exceed the lesser of 5 times Employee's Annual Earnings (rounded up to the nearest \$5,000) or \$250,000	
Minimum coverage amount	\$10,000	
Guaranteed Life coverage amount	\$30,000	
Coverage amounts are reduced by 35% when an employee reaches age 65; and additional 15% of the original amount and an employee reaches age 70. Terminate upon the employee's attainment of age 70 or retirement, whichever occurs first.		
.Dependent Child(ren) Life		
Day 1 but under 26 years, or 26 years if unmarried and a full-time student	Increments of \$1,000 with a minimum of \$2,000 and a maximum of \$10,000	

## What happens if you leave the company?

- Employees who been enrolled in Voluntary Life for 12months can keep Voluntary Life coverage even after employment terminates, at same pricing
  - Benefit last to SSNRA (Age 67)
- For example, after termination, an employee may keep his/her Life insurance and be billed directly for any premiums due.
  - This allows the employee to retain the insurance coverage even though he/she is no longer a part of the group/employer.

### Monthly Cost Example

Coverage Amount: \$100k

Age Range: 40-44

Rate: \$0.130

### **Calculate Cost:**

1) Rate: \$0.130

2) Coverage Amount: \$100k

3) Divide \$100k by 1,000 = 100

4) Multiply 0.13 by 100 = \$13/month

<b>Group Life</b>	Rates for \	/ou	G	roup Life F	Rates for Y	our Spous	se	Group	Life Rates	for your
Employee	Life			Employee	Life			Depen	dent Child(	ren)
Age	Premium			Age	Premium					
Range	Rate			Range	Rate				hild(ren) Life	
0 - 24	\$0.060			0 - 24	\$0.060			Pre	mium Rate, pe \$1,000	ſ
25 - 29	\$0.060			25 - 29	\$0.060				\$0.120	
30 - 34	\$0.070			30 - 34	\$0.070			_	\$0.120	
35 - 39	\$0.080			35 - 39	\$0.080				ordable mont	
40 - 44	\$0.130			40 - 44	\$0.130				n covers all o	•
45 - 49	\$0.220			45 - 49	\$0.220			eligible (	dependent ch	ildren.
50 - 54	\$0.370			50 - 54	\$0.370					
55 - 59	\$0.570			55 - 59	\$0.570				be eligible fo	
60 - 64	\$0.890			60 - 64	\$0.890				e or depende	
65 - 69	\$1.610			65 - 69	\$1.610		cannot be confined on the date the increase or addition is to take effect, it will take effect when			
70 - 74	\$2.870			70 - 74	\$2.870					
75 - 79	\$4.740			75 - 79	\$4.740	the confinement ends.				
80+	\$9.600			80+	\$9.600			the com	memeric end	J.
Calculate Your Cost  Use the appropriate rate provided in the tables above to calculate your cost based on the amount of coverage you select. The following example calculates the monthly cost for a 36-year-old employee who would like to purchase \$100,000 in employee voluntary term life insurance coverage.										
	Calc	ulatio	on Example			Example	You	Spouse	Child(ren)	
	Step 1 Using the table above, enter the rate that corresponds with your age.			\$0.080						
	Step 2 Enter the desired coverage amount in dollars.			\$100,000						
	Enter the desired coverage amount in Step 3 increments of \$1,000. To calculate, divide			100						

the coverage amount by \$1,000.

Calculate the monthly cost. Multiply Step



### **Online Will Prep**



- Online Will Preparation via EstateGuidance
- Allow you to designate who'll receive your property and assets when you're gone. Without a will, your state determines how your estate is distributed.
- Where Do I Begin?
  - Go to EstateGuidance.com and click Get Started
  - Create your account and enter LIFEKEYSWA in the Promotional Code
  - Click Get Started under Last Will and Testament





# **AFLAC Voluntary**

- Accident
- Critical Illness
- Hospital
- Short Term Disability
- No Minimum Group Participation Required
- See Link in SYNC HR, Coast Benefits Website, or direct at <a href="https://www.employeenavigator.com/benefits/Account/Register">https://www.employeenavigator.com/benefits/Account/Register</a>
   er (company identifier: CPMgt)-



# Why Aflac?

Are you financially prepared for <a href="mailto:sickness">sickness</a>, <a href="mailto:injury">injury</a>, or <a href="mailto:surgery?">surgery?</a>



**Health Insurance Pays** 

**Doctors and Hospital bills** 





### Everyday Family Expenses/Bills

House
Car
Food
Cell Phone
Internet/cable
Fuel
Utilities
Insurance
Etc...

# Why Accident?

### Protects against unexpected out-of-pocket costs that major medical may not cover

- 1 out of 8 people seek medical attention for an injury in the U.S. each year.
- 29.3 million people make a trip to the ER for unintentional injuries in the U.S. each year.

#### Help You Hold On To What's Yours

- Benefits are paid directly to you
- Fast claims processing—usually in an average of 4 days<sup>2</sup>
- Cash benefits to help cover everyday living expenses such as:
  - Rent & Mortgage Groceries
  - Transportation

### From initial emergency-room treatment to follow ups and more:

- · Broken teeth, concussions and lacerations
- Hospital confinement
- Ambulance, ground and air transportation
- Wheelchairs, crutches, other medical appliances
- Surgery and anesthesia
- · Burns, lacerations, fractures
- Physical therapy



Monthly Premiums			
Coverage	Premium		
Employee	\$22.04		
Employee and Spouse	\$35.29		
Employee and Child(ren)	\$45.90		
Family	\$59.15		

# Why Critical Illness?

- With heart attacks affecting more than 900,000 people each year and strokes affecting about 795,000 people each year<sup>1</sup>
- · Rising premiums, deductibles and a higher patient share of medical costs is a reality and a growing concern
- Employees' total out-of-pocket costs for medical care can be as high as 40% under certain plans<sup>2</sup>

#### Critical Illness/Cancer Insurance

Stroke

Cancer

- Disorder
- ALS
  - MS
- Heart Attack Autism Spectrum Coronary Artery Bypass Graft Surgery (CABG)
  - Sudden Cardiac Arrest
- End-Stage Renal Failure
- Major Human Organ Transplant

Employee Uni-Tobacco Monthly Premiums					
Age	\$10,000	\$20,000	\$30,000		
18-29	\$7.56	\$13.60	\$19.64		
30-39	\$11.47	\$21.42	\$31.38		
40-49	\$20.60	\$39.68	\$58.75		
50-59	\$38.64	\$75.76	\$112.88		
60+	\$71.64	\$141.75	\$211.87		

Spouse Uni-Tobacco Monthly Premiums					
	Age	\$5,000	\$10,000	\$15,000	
	18-29	\$4.18	\$6.84	\$9.50	
	30-39	\$6.14	\$10.75	\$15.37	
	40-49	\$10.70	\$19.88	\$29.06	
	50-59	\$19.72	\$37.92	\$56.13	
	60+	\$36.22	\$70.92	\$105.62	

# Why Hospitalization?

Hospital costs have doubled in the last decade, but what major medical covers has not.

- \$30,000 is the average cost of a 3-day hospital stay in the U.S.<sup>1</sup>
- Over 35 million people are admitted to hospitals and nearly 118 million people in their emergency departments each year.<sup>1</sup>

Aflac plan benefits are predetermined and are paid regardless of any other insurance policyholders have.

- 100% Guaranteed-Issue
- · No pre existing conditions
- Includes pregnancy

Monthly Premiums	
Coverage	Premium
Employee	\$35.26
Employee and Spouse	\$68.92
Employee and Child(ren)	\$54.44
Family	\$88.10

With Aflac Hospital Advantage Policies here's what policyholders can expect.

- · Hospital Confinement/Admission
- · Daily Hospital Confinement
- Intensive Care
- Intensive Care Step-Down Unit
- Annual Health Screening

**EXAMPLE OF BENEFITS PAYMENT** 



Hospital payout
\$1,000
confinement
\$150
total
\$1,150

# Why Short Term Disability?

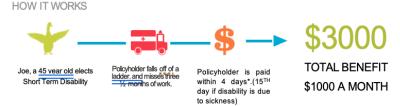
#### It helps protect employees' paychecks.

- 30% of all employed people (35-65 years old) experience some form of disability in their careers<sup>1</sup>
- Over 37 million Americans are classified as disabled —more than 50% of them are in their working years<sup>2</sup>

### With Aflac Short Term Disability here's what policyholders can expect.

- 6mos benefit period
- 0/14 elimination
- Guarantee Issue up to \$3000/mo benefit
- Up to 60% of benefit based on your income

Monthly Rates per \$100 of monthly benefit				
Age Band	18-49	50-64	65-74	
Premium Rate	\$2.76	\$3.31	\$4.14	



\*\* in this example: Joe's monthly premium is \$27.60 (\$2.76 x 10)



# Around-the-clock medical care with MeMD® telemedicine services

With MeMD telehealth services, you can connect to a board-certified, U.S.-licensed medical provider, or licensed behavioral health specialist, from almost any location. Day and night. Weekends and holidays. All using your phone or computer. You'll get a confidential diagnosis along with a personalized treatment plan, including prescriptions\* for common medications when medically necessary. Best of all, your family members can use the program as well.



#### Activate and log in to your account

at **www.MeMD.me/Aflac**, using your email address for the member ID and email fields.



#### Consult a physician, PA, nurse practitioner or licensed behavioral health specialist

in real time by video or phone, using the MeMD app. Visit fee varies by service type.



#### Prescription for common medicines,

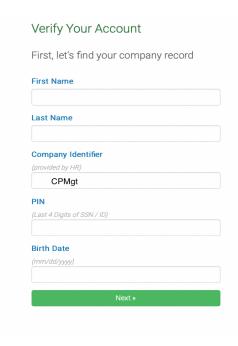
if medically necessary, will be submitted electronically by MeMD to your pharmacy of choice.\*



Wave goodbye to the waiting room

# Enroll now by visiting the site or learn more by scanning the QR code for Coast Property Management's mobile app

https://www.employeenavigator.com/benefits/Account/Register







# 2024 Open Enrollment Next Steps

- Login to <u>Sync-HR</u> if you are changing any benefits by Deadline of Dec 10<sup>th</sup>
- If you select HDHP/ H.S.A. option, please setup an H.S.A. bank account and complete payroll deduction information (see H.S.A. tab on website)
- Aflac Products or Lincoln Voluntary Life, please login to: <a href="https://www.employeenavigator.com/benefits/Account/Register">https://www.employeenavigator.com/benefits/Account/Register</a> (company identifier: CPMgt)- Take Advantage of this true open enrollment!!
- For more information visit: <u>www.coastmgtbenefits.com</u>
- Matt Christensen E: Matt@LBGAdvisors.com T: 425.548.3336
- Jason Jakobsen E: Jason@LBGAdvisors.com T: 206.371.9720



### **Contact Information and Resources**

BENEFIT	PROVIDER	WEBSITE / CONTACT	PHONE
Medical Benefits	Loomis	benefits@loomisco.com	800-367-3721
Pharmacy Benefits	Magellan Rx	www.magellanrx.com	800-424-7908
Specialty Drugs	Payer Matrix	customerservice@payermatrix.com	877-305-6202
6 Degrees Health (NEW)	Balance Billing	info@6degreeshealth.com	888-615-6398
HSA	Nuesynergy	integra-flex.com/coastmgt	855-345-9151
Dental	MetLife	www.metlife.com	800-638-5433
Dental	Willamette	www.WillametteDental.com	855-433-6825
Vision	MetLife	www.metlife.com	800-638-5433
Life Insurance	Lincoln	www.LincolnFinancial.com	800-423-2765
Aflac Voluntary	Aflac	david rojas@us.aflac.com	253-313-4776
Orthopedic Stem Cell	Regenexx	www.regenexxbenefits.com/coast	844-948-1117
Human Resources	COAST	www.coastmgtbenefits.com mcarlson@coastmgt.com	425-339-3638
Claims Advocate	LBG Advisors	Kris: kris@lbgadvisors.com	425-778-2800

### **Required Notices**

The U.S. government requires companies offering certain employee benefit plans to inform covered employees and their dependents about laws/provisions that affect the governance and/or coverage within those plans. The company has full details available for you concerning the following laws/provisions:

Summaries of each can be found on the employee benefits website. For complete information and more detailed explanations about any of these notices, contact your HR department. Also, from time to time, you may receive detailed explanations directly from the company via letter or email.

- Notice of HIPAA Special Enrollment Rights
- Medicare Part D Notice
- Children's Health Insurance Program
- The USERRA Private Notice
- Notice of Patient Protection Provisions
- Women's Health and Cancer Rights Act
- Summary of Benefits and Coverage
- The Exchange Notice FLSA
- Newborn and Mothers Health Protection
- COBRA Election Notice