

# 2021 employee benefit guide



Welcome to Capcom. This guide provides an overview of coverage choices and enrollment information so you can build the best benefits package for you and your family.

## **Employee Benefits Overview / Eligibility Requirements**

Capcom is committed to providing exceptional benefits to our employees. Keeping in mind the unique and diverse needs of our employees, we have put together a benefits program that will help protect the personal and financial well being of you and your family.

Upon joining Capcom your benefits will begin the first of the month following date of hire, unless hired on the first, then you are effective that same date. The plan and dependent elections that you

make when you are hired or during annual Open Enrollment are effective for the entire plan year unless you experience a qualifying event (marriage, birth, adoption, or loss of coverage).

Capcom holds an annual Open Enrollment for employees for a January 1st effective date. During that time, you can make changes to your benefit plan elections such as adding or deleting your spouse, dependents and/or changing health plans.

If you experience a Qualifying Event after Open Enrollment, you must notify Human Resources within 30 days, otherwise you will be required to wait until the next Open Enrollment to make any changes to your benefit plan elections.

If
you work
30+ hours per
week, you are
eligible to enroll in
the benefit
plans.



## **Eligible Dependents**

You may cover your dependents under many of the benefit plans as long as they are one of the following:

- Your spouse or domestic partner
- Your child(ren) up to age 26 regardless of student or marital status
- Your disabled child(ren) regardless of age if incapable of self-sustaining employment, and if the disability began before the limiting age

#### **Medical Insurance**

Capcom is proud to offer medical benefits to all eligible employees through Kaiser Permanente and Aetna.

Kaiser Permanente HMO plans offer a wide range of care and support to help you stay healthy. As a Kaiser member you can receive medical care at any Kaiser facility, simply present your ID card to receive services.

Aetna's PPO plan is referred to as Open Access Managed Choice (OAMC) POS. The POS plan gives members the ability to manage their care with a PCP or, if they choose, see any doctor (including specialists) without a referral. Pre-authorizations may be required.

For more information about the plans offered visit *benefits.filice.com/capcom* to review plan designs, required notices, evidence of coverage, documents and much more.

Kaiser Permanente (CA only)	Traditional HMO		
Individual Deductible	\$0		
Family Deductible	\$0		
Individual Out of Pocket Maximum	\$1,500		
Family Out of Pocket Maximum	\$3,000		
Office Visit	\$10 copay		
Specialist Visit	\$10 copay		
Preventive Care	No Charge		
Acupuncture*/Chiropractic	\$15 copay/\$15 copay (20 visits per year)		
Diagnostic Lab/X-Ray	No Charge		
Complex Radiology (CT, MRI, PET)	No Charge		
Inpatient Hospital	\$100 per admission		
Outpatient Surgery	\$10 per procedure		
Urgent Care	\$10 copay		
Emergency	\$100 per visit (waived if admitted)		
Rx Generic	\$10 copay		
Rx Brand Name	\$25 copay		
Rx Specialty	\$25 copay		
Group No.	48195		
Phone No.	800-464-4000		
Web	www.kp.org		

<sup>\*</sup>available for pain management-physician referred

Aetna	Open Access Managed Choice (OAMC) POS		
rectio	In Network	Out of Network	
Individual Deductible	\$250	\$500	
Family Deductible	\$500	\$1,000	
Individual Out of Pocket Maximum	\$2,500	\$5,000	
Family Out of Pocket Maximum	\$5,000	\$10,000	
Office Visit	\$10 copay	30% after deductible	
Specialist Visit	\$20 copay	30% after deductible	
Preventive Care	No Charge	30% after deductible	
Acupuncture/Chiropractic (20 visits per year)	\$20 copay	30% after deductible	
Diagnostic Lab, X-Ray	10% after deductible	30% after deductible	
Complex Radiology (CT, MRI, PET)	10% after deductible	30% after deductible	
Inpatient Hospital	10% after deductible	30% after deductible	
Outpatient Surgery	10% after deductible	30% after deductible	
Urgent Care	\$35 copay	30% after deductible	
Emergency	10% after \$250 (waived if admitted)	10% after \$250 (waived if admitted)	
Rx Tier1	\$10 copay	Not Covered	
Rx Tier 2/Tier 3	\$30 copay/\$50 copay	Not Covered	
Rx Tier 4	30% up to \$250	Not Covered	
Group No.	108765		
Phone No.	877-204-9186		
Web	www.aetna.com		

#### **Dental Insurance**

Dental coverage is provided for you and your family members through Guardian. Guardian has one of the nation's largest selection of network dentists and growing fast, with over 115,000 dentists at more than 370,000 locations. To find a dentist, go to <a href="https://www.guardiananytime.com">www.guardiananytime.com</a>.

Dental	In Network	Out of Network	
Preventive Care (exams, cleanings, x-rays)	100%	100%	
Basic Care (basic fillings, extractions and oral surgery)	90%	80%	
Major Care (crowns, inlays and on-lays, bridges and dentures)	60%	50%	
Deductible	\$50 individual/\$150 family	\$50 individual/\$150 family	
Maximum Benefit	\$1,500 per calendar year (per member)	\$1,500 per calendar year (per member)	
Orthodontia (child only)	50% up to \$1,500 lifetime		
Maximum Rollover	\$1,500		
Rollover Threshold	\$700		
Rollover Amount	\$350		
Rollover Account Limit	\$1,250		
Group No. 00568763	800-627-4200	www.guardiananytime.com	

#### **Vision**

Capcom employees are offered vision benefits through VSP. The VSP Signature Network has 23,000 doctors, located in rural and metropolitan areas throughout the nation. VSP doctors provide both eye exams and eye wear, making for a convenient "one-stop" means of obtaining eye care benefits. Visit www.vsp.com and search using the VSP Signature Network.

VSP Signature Network	In Network	Out of Network	
Office Visit / Examination (every 12 months)	\$10 copay	Plan pays up to \$50	
Prescription Glasses Copay	\$30 copay		
Lens Replacement (every 12 months)	100% after copay	Reimbursement Varies	
Single Vision	100% after copay	Plan pays up to \$50	
Bifocal	100% after copay	Plan pays up to \$75	
Trifocal	100% after copay	Plan pays up to \$100	
Frame Replacement (every 12 months)	\$150 allowance + 20% discount	Plan pays up to \$70	
Contact Lenses (in lieu of glasses, every 12 months)	Up to \$60 copay \$130 allowance	Plan pays up to \$105	
Group No. 12270283	800-877-7195	www.vsp.com	

## **Group Term Life / AD&D Insurance**

Capcom provides all eligible employees with a Group Term Life/AD&D policy through Mutual of Omaha for 2x your annual salary up to a maximum of \$750,00 with a Guarantee Issue amount of \$425,000.

#### **Voluntary Term Life / AD&D Insurance**

You may choose to purchase Voluntary Life Insurance from Mutual of Omaha for yourself, your spouse and/ or your child(ren) in amounts between \$10,000 and \$500,000, not to exceed 5x your basic annual salary. Guarantee Issue amount is \$100,000. You must elect coverage for yourself to purchase coverage for your dependents.

## **Short Term Disability Insurance**

Capcom provides all eligible employees with Short Term Disability (STD) coverage through Mutual of Omaha. The STD benefits start on the 8th day following an accident or illness and pays 66.67% of your salary up to \$2,308 per week for 12 weeks.

# **Long Term Disability Insurance**

Capcom also provides employees with Long Term Disability (LTD) coverage through Mutual of Omaha. The LTD benefit provides you with income if you are not able to return to work after 90 days of disability due to an illness or injury.

Mutual of Omaha will pay up to 66.67% of your salary to a maximum benefit of \$10,000 per month. LTD benefits are offset by income from other sources such as Social Security and/or Workers' Compensation.

# **Employee Assistance Program (EAP)**

Capcom offers an Employee Assistance Program for all eligible employees through Mutual of Omaha. This EAP has trained professionals to work with you and your family as you search for solutions to personal and workplace issues. With the EAP you have access to confidential resources day or night by calling 800-316-2796 or visiting www.mutualofomaha.com/eap

#### **Travel Assistance Program**

As part of your employee benefits package, your Mutual of Omaha Group Life Insurance includes Worldwide Travel and ID Theft Assistance. While traveling more than 100 miles from home you may access travel assistance services 24/7 by calling 800-856-9947. Your travel assistance benefit automatically includes identity theft assistance at no additional cost.

## Flexible Spending Account (FSA)

Capcom provides you the opportunity to pay for out of pocket medical, dental and vision for you and your eligible dependents with pre-tax dollars through Flexible Spending Accounts. Employees may contribute a maximum of \$2,750 to the Health Care Flexible Spending Account. We offer this plan as part of your benefits because it is important to help build your financial future.

## **Qualified Transportation Plan (QTP)**

The Qualified Transportation Plan allows you to set aside pre-tax dollars per month to pay for qualified transportation expenses. The Parking Account can be used to pay for eligible parking expenses associated with your workplace. The Transit Account can be used to pay for eligible transit expenses associated with travel to and from work on a licensed public carrier.

## **Employee Monthly Contributions**

Carrier	Aetna PPO	Kaiser HMO	Guardian Dental	VSP
Employee Only	\$94.35	\$57.40	\$4.65	\$1.30
Employee+Spouse	\$281.15	\$202.05	\$14.15	EE + 1 \$2.70
Employee+Child(ren)	\$247.20	\$177.95	\$19.85	N/A
Employee+Family	\$434.00	\$298.50	\$31.70	EE + 2 \$5.00

If you have any questions or unresolved issues after contacting member services with one of our insurance providers, you are welcome to contact our Filice Benefits Team. They will answer any questions you may have concerning your employee benefits and claim issues.

#### **Filice Benefits Team**

Email: teamohara@filice.com

Visit your benefits website for further detailed information at: benefits.filice.com/capcom

