

Summary of Employee Benefits

January 1, 2016 - December 31, 2016



Medical Insurance | Blue Shield & Kaiser

Partnership HealthPlan is proud to offer medical benefits available to all eligible employees through Blue Shield of California and Kaiser Permanente. A detailed benefit description is provided below.

Blue Shield of California has the largest selection of providers in California with over 48,000 participating providers. Over 85% of all physicians and hospitals in the United States are Blue Shield plan providers. Please see detailed plan summary for out of network costs on the Blue Shield plans.

Kaiser Permanente- We will be offering 2 plans this year. As a Kaiser member you can receive medical care at any Kaiser facility. Simply present your ID card to receive services.

	Blue Shield			Kaiser	
	Full PPO Combined Deductible 35-500	Full PPO HSA* Aggregate Deductible 2250/4500	Access+ HMO Admit Inpatient 20-250	High HMO \$20 Copay Plan	HSA Qualified Deductible HMO Plan*
	In Network	In Network	In Network		
Individual Deductible (Calendar Year)	\$500	\$2,250	\$0	N/A	\$2,000
Family Deductible (Calendar Year)	\$1,000	\$4,500	\$0	N/A	\$4,000
Individual Out of Pocket Max.	\$3,500	\$3,000	\$1,500	\$1,500	\$3,000
Family Out of Pocket Max.	\$7,000	\$6,000	\$3,000	\$3,000	\$6,000
Office Visit	\$20	20%	\$20	\$20	\$30 after deductible
Preventive Care	\$0	\$0	\$0	\$0	\$0
Well Baby	\$0	\$0	\$0	\$0	\$0
Annual Exams	\$0	\$0	\$0	\$0	\$0
Diagnostic Lab, X-Ray/Complex	\$60/20%	\$25/\$100 + 20%	\$0	\$0	\$10/\$50 after deductible
Inpatient Hospital	\$100/admit	\$100/admit + 20%	\$250/admit	\$250/admit	\$250/admit after deductible
Outpatient Hospital	20%	20%	\$150/procedure	\$20/procedure	\$150/procedure after deductible
Emergency**	\$100 + 20%	\$100 + 20%	\$100	\$100	\$100
Rx Tier 1***	\$10	\$10	\$10	\$10	\$10
Rx Tier 2/3/4***	\$30/\$50/30%	\$25/\$40/30%	\$30/\$50/20%	\$20	\$30

www.blueshieldca.com

www.kp.org

*See more info on employer HSA Funding on HSA Section of brochure

** Not subject to the Calendar Year Deductible

*** Rx Generic and Brand Name drugs for Kaiser plans are up to 30 day supply



Health Savings Account | HSA Bank

An HSA, or Health Savings Account, is a unique tax-advantaged account that can be used to pay for current or future healthcare expenses. When combined with a high-deductible health plan, it offers savings and tax advantages that a traditional health plan can't duplicate. Partnership HealthPlan will be contributing to your HSA account at HSA Bank based on your election status. Partnership will contribute monthly \$187.50 individual/\$375 family towards your Blue Shield deductible of \$2,250/\$4,500. Partnership will contribute monthly \$166.67 individual/\$333.34 family towards your Kaiser deductible of \$2,000/\$4,000.

The maximum amount that you can contribute to a HSA in 2016 is \$3,350 for individual coverage and \$6,750 for family coverage. If you are 55 or older you may make an additional catch-up contribution of \$1,000. Authorized Signers who are 55 or older must have their own HSA in order to make the catch-up contribution.

Employees set up account

1-800-357-6246

www.hsabank.com



Dental Insurance | Direct Dental

Under the PPO plan, you can visit any licensed dentist of your choice, and your family may select different dentists. You can change dentists at any time, go to a dental specialist of your choice and receive dental care anywhere in the world.

Dental	In Network	Out of Network
Deductible	\$50 per person, \$150 per family	\$50 per person, \$150 per family
Preventive Services (3 cleanings a year)	Covered at 100%	Covered at 100%
Basic Services (Fillings, simple extractions, oral surgery)	90% coinsurance	80% coinsurance
Major Services (Bridges, crowns, partial and full dentures)	60% coinsurance	50% coinsurance
Annual Maximum	\$2,000 per person	\$2,000 per person
Orthodontic (adult and child)	\$1,500 lifetime	\$1,500 lifetime

Group No.:

1-855-844-0626

www.directdentalplans.com



Vision Insurance | VSP

Partnership HealthPlan employees are offered vision benefits through Vision Service Provider (VSP). VSP has a network of 23,000 doctors, located in rural and metropolitan areas throughout the nation. VSP doctors provide both eye exams and eyewear, making for a convenient "one-stop" means of obtaining eyecare benefits.

Benefit	Choice Network
Office Visit Examination Co-pay (1x every 12 months)	\$20 Co-payment
Lens Replacement (1x every 12 months):	
Single Vision	100%
Bifocal	100%
Trifocal	100%
Frame Replacement (1x every 24 months)	\$130 + 20% off over allowance
Contact Lenses (in lieu of glasses, 1x every 12 months)	\$130 allowance + contact lens exam

Group No.: 12251672

1-800-877-7195

www.vsp.com



Flexible Spending Accounts | ADP

Partnership HealthPlan provides you the opportunity to pay for out-of-pocket medical, dental, vision and dependent care expenses with pre-tax dollars through Flexible Spending Accounts. Employees may contribute up to a maximum of \$2,550 to the Health Care Flexible Spending Account, depending on your companies plan. If you choose an HSA health plan and enroll into a Flexible Spending Account it will be considered "limited purpose" and can only be used for dental and vision expenses. The maximum you can contribute to the Dependent Care Flexible Spending Account is \$5,000. We offer this plan as part of your benefits because it is extremely important to help build your financial future.

See website to access your account

1-800-654-6695

www.filice.com/benefits/partnership



Life and Disability Insurance | Unum

Partnership HealthPlan offers Life and AD&D, Long Term Disability and Short Term Disability coverage for all eligible employees through Unum.

Life Insurance <i>(Employer Paid Premium)</i>	Short Term Disability <i>(Employer Paid Premium)</i>	Long Term Disability <i>(Employer Paid Premium)</i>
Life and AD&D benefit 1x annual salary with a Guarantee Issue and maximum amount of \$150,000.	60% of weekly salary to a maximum of \$2,310 per week. Benefits begin 7 days after an accident or illness	60% of monthly salary to a maximum of \$10,000 per month. Maximum benefit duration is until your Social Security Retirement Age

No.: 411045

1-800-275-8686

www.unum.com



Voluntary Benefits | Unum

Partnership HealthPlan offers all benefit eligible employees the opportunity to elect Accident, Critical Illness and Whole Life insurance during annual enrollment. These benefits provide financial protection for you and your family. You may take the coverage at no additional monthly cost should you retire or change employers.

Accident Insurance	Group Critical Illness Insurance	Whole Life Insurance
<ul style="list-style-type: none"> - Pays you a benefit if you suffer an injury due to an accident - Over 50 injuries and treatments covered - No maximum number of benefit payments or claims filed - Wellness Benefit \$50 - No health questions asked! 	<ul style="list-style-type: none"> - Pays a benefit if you suffer a serious illness such as a heart attack, stroke or cancer - 11 covered illnesses are covered under the plan - Employees can elect up to \$50,000; spouses \$30,000; children are automatically covered at no cost - Wellness Benefit \$50 - Guarantee issue available during one's initial enrollment - \$10,000 for employees and \$5,000 for spouse with no health questions asked! 	<ul style="list-style-type: none"> - Level benefit and premiums are present throughout duration of the policy - The cash value or equity of the policy builds at a guaranteed interest rate of 4.5% - Employees can elect up to \$300,000; spouses \$75,000; children \$50,000 - Future Insurability - If you elect the minimum amount this year, you can buy additional coverage up to the guarantee issue at subsequent enrollments with no health questions asked!

Individual policy IDs will be assigned

1-800-275-8686

www.unum.com



Employee Assistance Program | Unum

Partnership HealthPlan also offers an Employee Assistance Program for all eligible employees through Unum. Employee Assistance Program (EAP) is a confidential service available to help all employees and their dependents with issues they may be facing. This service is staffed by experienced clinicians and available by calling a toll-free phone line 24 hours a day seven days a week. A guidance consultant will refer to online, community or in-person counseling sessions with a licensed professional. In California, employees are eligible for three in-person counseling sessions per year at no charge. Call any time with personal concerns, including such as relationship or marital issues, stress, job pressures or legal advice and resources.

1-800-854-1446

www.lifebalance.net (user ID + password: lifebalance)



Travel Assistance | Unum

As part of your employee benefits package, Travel Assistance Program is available if you or an immediate family member is traveling more than 100 miles from home or in a foreign country for business (employees only) or pleasure. This emergency service is available by calling a toll-free phone line 24 hours a day seven days a week. Example of the services and assistance this program can provide include medical consultation and evaluation by western-trained physicians, hospital admission guarantee, emergency prescription services, legal services and lost luggage assistance.

1-800-872-1414 Outside U.S.- 609-986-1234 medservices@assistamerica.com Ref. No.: 01-AA-UN-762490

Employee Cost Per Pay Period*

Carrier	Blue Shield of California			Kaiser	
	HMO	PPO	HSA	High HMO	HSA
Enrollment					
Employee Only	\$10.05	\$10.36	\$0.00	\$8.83	\$0.00
Employee + 1	\$82.40	\$84.99	\$49.17	\$63.66	\$39.58
Employee + 2	\$132.24	\$136.40	\$49.17	\$114.96	\$39.58

*Dental, Vision, Life, Disability, EAP included

Waivers of medical only will receive \$350 per month; waivers of dental/vision combined will receive \$40 per month

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

Filice Service Team

Email: teamohara@filice.com

Visit your benefits website for further detailed information at -
www.filice.com/benefits/partnership

This summary is not intended to provide a complete plan description. If there is an actual or apparent conflict between this benefit summary or the Evidence of Coverage (EOC) booklet and the official plan documents, the provisions of the EOC prevail.

IMPORTANT: All official documents relating to the Partnership HealthPlan Employee Benefits Program, including the Evidence of Coverage (EOC) booklets, HIPAA Privacy Notice, Initial COBRA Notice, Medicare Part D Notice and any other relevant Plan Documents or Notices, are available electronically through the Partnership HealthPlan benefits website. You may also receive a paper copy of any of the documents by contacting HR.