July 1, 2022 Open Enrollment

Alera Group – Relph Benefit Advisors

Agenda

- ✓ Open Enrollment Overview
- ✓ Health Plan: Medical & Prescription Drug Coverage
- ✓ Dental & Vision Plans
- ✓ Flexible Spending
- Life Insurance, Accidental Death & Dismemberment, & Long-Term Disability
- ✓ Additional Voluntary Benefits
- ✓ Health Advocate



Open Enrollment

Enroll in your benefits Monday, May 9 through Sunday, May 22 Enrollments effective July 1, 2022

Only time of the year to:

- ✓ Enroll in or Change Plans
- ✓ (Re) Enroll in the FSA Plan
- ✓ Add or Remove Dependents

Changes during the year are limited to qualifying events & a 31-day window.

Health Plan Coverage



Medical Plan Overview

- ✓ Introducing Meritain effective July 1, 2022
 - ✓ Independent company of Aetna
 - ✓ Members will continue to use the Aetna Choice POS II Network
- \checkmark No Change in Plan Design
- ✓ Insurance premium changed due to increase in market
- ✓ Visit providers without referral & PCPs are not required (but recommended)
- ✓ Preventative Services Covered by the Plan
 - ✓ Well-Child Visits, Adult Physical (One/Contract Year)
 - ✓ Screening Mammography, Pap Tests,
 - ✓ Immunizations
- Teledoc telemedicine program \$20 Copay for Acute Illnesses & Mental Health
- ✓ Dependents Covered to Age 26



JULY 1, 2022 - JUNE 30, 2023 INSURANCE RATES

Annual Salary 🗸	Employee	Employee + Child(ren)	Employee +	Employee + Spouse + Child(ren)
	Employee Per Pay	Premium - Bi-wee	Spouse	+ child(ren)
< \$30,000	\$27.71	\$73.52	\$102.85	\$137.23
\$30,000 - \$34,999	\$30.35	\$80.53	\$112.65	\$150.30
\$35,000 - \$39,999	\$33.65	\$89.28	\$124.89	\$166.64
\$40,000 - \$44,999 \$45,000 - \$49,999	\$37.60 \$41.56	\$99.78 \$110.29	\$139.58 \$154.28	\$186.24 \$205.85
\$50,000 - \$59,999	\$49.48	\$131.29	\$183.66	\$245.05
\$60,000 - \$69,999	\$57.40	\$152.30	\$213.05	\$284.27
\$70,000 - \$89,999	\$65.31	\$173.31	\$242.44	\$323.47
\$90,000 - \$109,999	\$69.27	\$183.81	\$257.13	\$343.08
>= \$110,000	\$73.23	\$194.31	\$271.82	\$362.68
	mployee Per Pay Pr			
< \$30,000	\$30.02	\$79.65	\$111.42	\$148.67
\$30,000 - \$34,999	\$32.88	\$87.24	\$122.03	\$162.83
\$35,000 - \$39,999	\$36.45	\$96.72	\$135.30	\$180.53
\$40,000 - \$44,999	\$40.74	\$108.10	\$151.22	\$201.76
\$45,000 - \$49,999	\$45.03	\$119.48	\$167.14	\$223.00
\$50,000 - \$59,999	\$53.60	\$142.23	\$198.97	\$265.48
\$60,000 - \$69,999	\$62.18	\$164.99	\$230.81	\$307.96
\$70,000 - \$89,999	\$70.76	\$187.75	\$262.64	\$350.43
\$90,000 - \$109,999	\$75.04	\$199.13	\$278.56	\$371.67
>= \$110,000	\$79.33	\$210.51	\$294.47	\$392.91
	Employee Per Pay	Premium - Non-1	2 month 17 Pays	
< \$30,000	\$42.38	\$112.45	\$157.30	\$209.88
\$30,000 - \$34,999	\$46.41	\$123.16	\$172.28	\$229.87
\$35,000 - \$39,999	\$51.46	\$136.55	\$191.01	\$254.86
\$40,000 - \$44,999	\$57.51	\$152.61	\$213.48	\$284.84
\$45,000 - \$49,999	\$63.57	\$168.68	\$235.96	\$314.83
\$50,000 - \$59,999	\$75.67	\$200.80	\$280.89	\$374.79
\$60,000 - \$69,999	\$87.78	\$232.93	\$325.84	\$434.76
\$70,000 - \$89,999	\$99.89	\$265.06	\$370.78	\$494.72
\$90,000 - \$109,999	\$105.95	\$281.12	\$393.26	\$524.71
>= \$110,000	\$112.00	\$297.19	\$415.73	\$554.69

MEDICAL: Meritain Health (An Aetna Company)



Aetna Choice POS II No Plan Changes for July 1, 2022



Service	In-Network	Out-of-Network
Deductible	\$350 Single \$1,050 Family Tiers	\$800 Single \$2,400 Family Tiers
Coinsurance	Member pays 10%, after deductible	Member pays 30%, after deductible
Medical Out-of-Pocket Max	\$1,300 Single / \$3,900 Family Tiers	\$1,950 Single / \$5,850 Family Tiers
Primary Care	\$20 copay, deductible waived	Deductible & Coinsurance
Specialist	\$25 copay, deductible waived	Deductible & Coinsurance
Mental Health Office Visit	\$25 copay, deductible waived	Deductible & Coinsurance
Diagnostic Labs	Deductible & Coinsurance	Deductible & Coinsurance
Inpatient Hospital	\$200 copay, then 10% coinsurance after deductible	Deductible & Coinsurance
Urgent Care	\$40 copay, deductible waived	Deductible & Coinsurance
Emergency Room	\$125 copay, deductible waived	\$125 copay, deductible waived



NEW Meritain ID Cards

Members will receive Meritain ID Cards prior to July 1, 2022 Covered dependents are now included on all cards CVS RX information will now be included on the Meritain ID Card



Please update all providers with new ID Card information for July 1, 2022



Meritain Member Portal

Website available to all enrolled members – Register once Meritain ID card is received!

- Review benefits and coverage
- View and download claims
- View Explanation of Benefits (EOBs)
- Access benefit plan documents
- Find a doctor
- Access member ID cards

Register or log in at <u>www.meritain.com</u>



How to Register

Access is as easy as 1-2-3

Step 1

Go to www.meritain.com and click Register.

Step 2

Select *Member* under *I am a* and enter your group ID. Then, click *Continue*.

Step 3

You'll need to enter the following information, then select *Submit*:

- Member ID (located on your member ID card)
- Group ID (located on your member ID card)
- First name (employee, spouse or adult dependent)
- Last name (employee, spouse or adult dependent)
- ZIP code
- Email (personal address)
- Date of birth (mm/dd/yyyy)



You can access the portal by computer, tablet or via the Meritain Health mobile app on your iPhone[®] or Android[™].



DocFind Provider Directory

Find Aetna providers online in just a few quick steps

You can use the DocFind directory anywhere you have internet access. Just:



Visit http://www.aetna.com/docfind/ custom/mymeritain/.



Key in the ZIP code, city, county or state of the desired geographical area in the *Enter location here* field. Click *Search*.



Key in Aetna Choice® POS II (Open Access) under Select a Plan. **Or** you can select Aetna Choice® POS II (Open Access) from the list of plans. Click Continue.



There are two options available to search for providers. The guided flow search uses some of our most commonly searched terms and easily organizes them for our users to find. To use the guided search flow, choose and click on one of the categories under *Find what you need by category*. **Or see step five**. Use the search box, which includes type-ahead suggestions and will present provider, facility, specialty and condition search options based on what is entered. These suggested options will present an exact match or relevant providers. *What do you want to search for near* (will display your chosen location).



Choose your provider from the list of providers displayed on the results screen. You can learn more about each by clicking on the provider's name.



Narrow your search results by using the *Filter & Sort* option. Choices include Gender, Languages, Hospital Affiliations, Office Detail, Individual Practice Association Affiliations, Group Affiliations and Provider Type.

*No Change to current provider network



Teledoc Telemedicine Program

Alternative to receive care by visiting a certified medical doctor right from your home, office or on the go for non-emergency medical conditions. Available 24/7/365

Physicians will diagnose your symptoms, prescribe medications (when appropriate) and send the prescription to your nearest pharmacy.

When to Use:

- Primary care doctor is not available
- Instead of going to the ER or Urgent Care (for a non-emergency)
- Traveling and in need of medical care

Treatable Common Conditions:

Allergies, Asthma, Bronchitis, Cold/Flu, Diarrhea, Ear Infections, Fever, Headache, Infections, Insect Bites, Joint Aches, Rashes, Sinus Infections, Skin Infections, Sore Throat





Behavioral Health on Teledoc "Confidential therapy on your terms"

Speak with a licensed therapist from anywhere

Taking care of your mental health is an important part of your overall well-being. With Teladoc's Mental Health, adults 18 and older can get care for anxiety, depression, grief, family issues, and more. Choose to see a psychiatrist, psychologist, social worker, or therapist and establish an ongoing relationship.

As a working mom with two small children, finding 'me time' is almost impossible. So having easy access to an amazing psychologist through Teladoc has been an invaluable benefit. Ade O., Teladoc member

ADOC.

Teladoc doesn't offer a crisis hotline. Appointments must be scheduled.

Why use Teladoc's Mental Health service

- 🕑 Confidential treatment
- Convenience to speak with a therapist from anywhere
- Flexible scheduling
- Quick access to the right provider for you



How to schedule a visit

- Register your Teladoc account via web or app or log in to your account if you're already registered
- Request a visit
- Answer a few questions
- Select your therapist

Request a time for your appointment



Meritain Precertification

Meritain medical management team will help you get the most appropriate care, when and where you need it.

Precertify before the following:

Hospital admissions

Inpatient or outpatient surgery

IV home infusion therapy or chemotherapy

Inpatient substance abuse treatment

Home health care

Admission to an extended care or rehab care facility



Call before you get care

You or your doctor can call Meritain Health Medical Management to verify which procedures need to be precertified.





Additional Meritain Member Resources

Pre-Admission and Post-Discharge Counseling

 Provides educations to members receiving inpatient procedures

Maternity Management

 Connecting members with maternity nurse specialist (RN's) for the duration of pregnancy

Institutes of Quality

Aetna network includes special network of hospitals and facilities known for providing quality care

Product Discounts

 Meritain provides health discounts for healthcare products including blood pressure monitor, electrotherapy,





Prescription Drug Plan Overview

- ✓ No Change in Plan Design for July 1, 2022
- Dickinson College continues to offer prescription drug coverage through CVS Caremark
- ✓ Register for a secure member account at <u>www.caremark.com</u>
 - Locate participating pharmacies
 - Check drug cost, savings, and coverage
 - Manage your prescriptions



CVS Caremark Prescription Drug Coverage

	Short-Term Medicin CVS Caremark Retail Pharmacy Network (Up to a 30-day supply		Long-Term Medicines CVS Caremark Mail Service Pharmacy or CVS Pharmacy Locations (Up to a 90-day supply)	
Generic Medicines* Always ask your doctor if there's a generic option available. It could save you money.	\$10 for one 30-day supply of a generic medicine	\$30 for three 30-day supplies of a generic medicine	\$20 for a generic medicine	
Preferred Brand-Name Medicines* If a generic is not available or appropriate, ask your doctor to prescribe from your plan's preferred drug list.	30% for one 30-day supply of a preferred brand-name medicine	30% for three 30-day supplies of a preferred brand-name medicine	20% for a preferred brand-name medicine	
Non-Preferred Brand-Name Medicines Drugs that aren't on your plan's preferred list will cost more.	50% for one 30-day supply of a non-preferred brand-name medicine	50% for three 30-day supplies of a non-preferred brand-name medicine	34% for a non-preferred brand-name medicine	
Select Generic Medicines*	\$0	\$0	\$0	
Select Brand-Name Medicines*	15%	15%	10%	
Specialty Medicines	\$50 for Preferred Brand-Name Medicines \$100 for Non-Preferred Brand-Name Medicines			
Maximum Out-of-Pocket	\$1,500 per individual /	\$1,500 per individual / \$3,000 per family		





CVS Caremark Prescription Drug

Formulary is the list of medications covered by the plan; updated quarterly

Copay/Coinsurance is determined by type of Medication Tier

- Generics safe, effective & have the same active ingredients as a brand name medication, but cost an average of 80% less
- **Preferred** lower cost or more clinically effective than nonpreferred or excluded
- Non-Preferred highest cost or medications with clinical alternatives
- **Specialty** high complexity medications purchased through a specialty pharmacy
- Excluded medications with clinical alternatives or generics that are not covered by the plan. Members choose an alternative therapy



Nearly 9 out of 10 CVS Caremark[®] prescriptions are for generics³

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CVS Caremark Home Delivery

- Purchase a 90 Day Supply
- Savings to the member
- Contactless delivery
- Secure packaging to protect member privacy



90-day supplies typically cost less than 30-day supplies.

New Service requires a minimum of 90 Day or annual script from your doctor

Provide home delivery pharmacy with...

- ✓ Scripts (or have your doctor send them directly)
- Payment Method (may use flex spending card)
- ✓ Mailing Address

Start Rx Delivery by Mail at Caremark.com/RxDelivery





CVS Caremark Vaccine Coverage

CDC Recommended vaccines can help everyone stay healthier, especially during flu season and the COVID-19 pandemic

Out and about? Get your CDC-recommended vaccines at more than 68,000 convenient locations, including CVS Pharmacy

What will you need? Just take your prescription card and valid photo ID

No Cost to Members!







DickinsonCRX Program

International mail order drug program

- \$0 copay for 90 day supply on certain brand name drugs
- Visit <u>http://www.dickinsoncrx.com/</u> for the full list of eligible medications and more information on the program

What is needed to enroll in the program:

- ✓ Completed enrollment form
- ✓ New prescription for each medication
- ✓ Copy of photo ID



Dental Coverage



Dental Plan Overview

- ✓ No Change in Plan Design or Employee Premiums for July 1, 2022
- Dickinson College continues to offer two dental plans to benefit eligible employees and dependents
- ✓ Dependent children covered to age 26
- ✓ Find a provider at <u>www.unitedconcordia.com</u>
 - Dental network: Elite Plus
- ✓ Create an account at <u>www.unitedconcordia.com</u>
 - Review coverage information
 - Check claim status
 - Print ID cards

All Members will Receive New ID Cards for July 1, 2022

UNITED CONCORDIA®

JULY 1, 2022 ~ JUNE 30, 2023 INSURANCE RATES

Employee Per Pay	/ Premium	Employee (EE)	EE + Spouse or EE + Child	EE + Spouse + Child(ren) or EE + Children
DENTAL	Bi-weekly 26 pays	\$9.54	Ş19.34	\$31.95
United Concordia	Semi-monthly 24 pays	\$10.33	\$20.95	\$34.61
(Concordia Select) Low Option	Non-12 month 17 pays	\$14.59	\$29.57	\$48.87
DENTAL	Bi-weekly 26 pays	\$10.49	\$22.02	\$41.03
United Concordia	Semi-monthly 24 pays	\$11.36	\$23.86	\$44.45
(Concordia Choice) High Option	Non-12 month 17 pays	\$16.04	\$33.68	\$62.75

Demost to Octoment	CONCORDIA	FLEX PLAN
Benefit Category ¹	Low Option Plan Pays	High Option Plan Pays
Class I – Diagnostic/Preventive Services		
Exams		
Bitewing X-rays		
All Other X-rays		100%
Cleanings & Fluoride Treatments	100%	100 %
Sealants		
Palliative Treatment		
Space Maintainers		80% ³
Class II – Basic Services		
Basic Restorative (Includes Posterior Composite Fillings)		
Simple Extractions		
Endodontics	80%	
Nonsurgical Periodontics	00%	80%
Complex Oral Surgery		
General Anesthesia		
Surgical Periodontics	50%	
Class III – Major Services		
Repairs of Crowns, Inlays, Onlays, Bridges & Dentures		80%
Inlays, Onlays, Crowns	50%	50%
Prosthetics (Bridges, Dentures)		507%
Orthodontics for dependent children to age 19		
Diagnostic, Active, Retention Treatment	Not Covered	50%
Maximums & Deductibles (applies to the combination of	services received from network a	nd non-network dentists)
Contract Year Program Deductible (per person/per	\$50/\$150	\$75/\$225
family) (July 1 - June 30)	Excludes Class I	Excludes Class I & Orthodontics
Contract Year Program Maximum (per person)	\$1,000	\$1,500
(July 1 - June 30)		Excludes Orthodontics
Lifetime Orthodontic Maximum (per person)	N/A	\$1,000
In-Network Reimbursement ^₅	Elite Plus	Elite Plus
Non-Network Reimbursement⁵	Advantage/90 th Percentile ⁶	90 th Percentile



MyDentalBenefits Account

Creating an online account with United Concordia's MyDentalBenefits gives you 24/7 access to information on your dental plan:

- See your plan benefits
- Check the status of claims and access EOB's
- Find a dentist near you
- Chat live with customer service
- Print ID cards

How to create an account:

- 1. Go to UnitedConcordia.com/GetMDB
- 2. Enter your **Member ID** number and your **Birthdate** (You can also use the policyholder's SSN instead of the ID)
- 3. Create a username and password to log in



Vision Coverage



Vision Plan Overview

- ✓ No Change in Plan Design or Employee Premiums for July 1, 2022
- Dickinson College continues to offer vision coverage through Vision Benefits of America (VBA)
- ✓ Dependent children covered to age 26
- ✓ Log in to your vision member account at <u>www.vbaplans.com</u>
 - Find a participating provider to maximize your benefits
 - Access your eligibility for services
 - View your claim history and plan coverage
 - View/Print ID card, (card not necessary to access benefits)
 - Access out-of-network claim instructions
- ✓ Vision services frequency
 - Routine exam once every 12 months
 - Lenses once every 12 months
 - Frames once every 24 months





JULY 1, 2022 ~ JUNE 30, 2023 INSURANCE RATES

Employee Per Pay	y Premium	Employee (EE)	EE + Spouse or EE + Child	EE + Spouse + Child(ren) or EE + Children
	Bi-weekly 26 pays	\$1.41	\$3.29	\$4.78
VISION	Semi-monthly 24 pays	\$1.53	\$3.56	\$5.18
Vision Benefits of America	Non-12 month 17 pays	\$2.16	\$5.03	\$7.31



Vision Benefits

	VBA Participating Provider Amount Covered/Benefit	Non-Participating Provider
Mining France (Classes on Contacts)	40.0%	Amount Reimbursed
Vision Exam (Glasses or Contacts)	100%	\$40
Clear Standard Lenses (Pair):		
Single Vision	100%	\$40
Bifocal	100%	\$50
Blended Bifocal	100%	\$50
Trifocal	100%	\$75
Progressives ^D	Controlled Cost ^E	\$75
Lenticular	100%	\$100
Polycarbonate ^c	100%	N/A
Scratch Coat-1 Yr	100%	N/A
Frame ^B	100%	\$50
-OR-		
Elective Contacts (in lieu of eyeglass benefits)		
Material Allowance	\$110	\$110
Fitting Fee	15% off UCR ^A	N/A
-OR-		
Medically Necessary Contacts ^F	100%	\$320

- A Usual, Customary, and Reasonable.
- B Within the program's \$50 wholesale allowance (approximately \$125 to \$150 retail).
- C Available In-Network at no charge for children under age 19.
- D Progressive lenses typically retail from \$150 to \$400, depending on lens options. VBA's controlled costs generally range from \$45 to \$175.
- E Unless otherwise prohibited by law.
- F Medically Required Contacts may only be selected in lieu of all other material benefits listed herein.

Flexible Spending



Flexible Spending Accounts (FSA)

Benefit MUST BE (re)elected every year!

Pre-tax dollars set aside to pay for health or dependent care expenses.

Accounts are "Use It or Lose It" rule!

Healthcare Spending Account (HCFSA)

- \$2,850 Annual Maximum
- Benefit is fully funded July 1 if your expenses occur early in the year
- Covers medical, RX, dental & vision expenses for employee, spouse & children
- Covers OTC and feminine hygiene products

Dependent Care Reimbursement Account (DCFSA)

Up to \$5,000 "family" Annual Maximum (requires Tax ID# of provider)

*Grace Period to incur claims & use 2021-2022 flex money ends September 15, 2022. All claims <u>MUST</u> be submitted by October 31, 2022. Submissions <u>MUST</u> be dated prior to 9/16/2022.



HealthSmart Mastercard

Once enrolled in a Flexible Spending Account, members will receive a Benefits Mastercard from HealthSmart:

- The card may be used to pay for eligible expenses under IRS guidelines, including:
 - doctor's visit and prescription drug co-pays
 - medical plan deductibles
 - eligible medical, dental or vision expenses that are not covered by any other plan.
 - dependent day care expenses (if dependent care account elected)
- The card may be used to pay for eligible expenses at approved merchants that accept MasterCard
- Expenses are limited to your elected annual maximum.
- You must keep copies of all receipts for which you use your card. HealthSmart might request those receipts. If they are requested, and you fail to provide them, your card may be temporarily inactivated.





HealthSmart Member Portal and Mobile App

Create a HealthSmart online account at: https://healthsmart.wealthcareportal.com

- Track balances
- Access account history
- Download forms

Mobile App

Search "myhealth for Healthsmart" in app store

- File claims with camera-based receipt imaging
- Get text alerts for balance and transaction inquiries





Life Insurance, Accidental Death & Dismemberment and Long Term Disabilty

Life Insurance and Accidental Death & Dismemberment (AD&D)

Core Benefit – Paid for by Dickinson College

- Benefit eligible employees covered by Term Life and AD&D Insurance
 - Benefit amount of 3x salary to a maximum of \$650,000 for FT Employees Hired Before January 1, 2008
 - Benefit amount of 2x salary to a maximum of \$650,000 for FT Employees Hired On or After January 1, 2008
- Age reduction applies at ages 65, 70, and 75

Voluntary Benefit – Term Life and AD&D Insurance

- Evidence of Good Health required if enrolling after initial eligibility or for amounts greater than guaranteed issue coverage.
- Employees may elect increments of \$10,000 to a maximum of \$300,000. Age reduction applies at ages 65, 70, and 75.
- Spouse may elect \$10k to lesser of \$150k or 50% of employee amount
- Children to age 26, may elect increments of \$2,500 to a maximum of \$10,000





Long-Term Disability

Paid for by Dickinson College

Provided to benefit eligible employees

- Benefits begin after 180 days of disability.
- 60% of base monthly earnings to a max of \$10,000 per month.
- Payable to normal social security retirement age.





Voluntary Benefit – Accidental Death & Dismemberment (AD&D)

Additional accidental death and dismemberment coverage available to benefit eligible employees through The Hartford

- Elect \$10,000 to \$300,000 in coverage
- Any amount over \$150,000 cannot exceed 10x salary
- Age reduction applies at ages 65 and 70



Additional Voluntary Benefits

Accident and Critical Illness

Personal Accident Indemnity Plan

- Accident Emergency Treatment
- Accident Follow-up Treatment
- Hospitalization Benefit; Initial, Confinement, ICU
- Major Diagnostic Exams
- Physical Therapy
- Accidental Death & Dismemberment
- Wellness Benefit, \$60/year per participants (after 12 months of coverage)

Critical Illness Coverage

- Covered Illnesses include: cancer, heart attack, stroke, major organ transplant, renal failure, coronary bypass
- Wellness Benefit, \$50/year per participant



Home and Auto Insurance

- Voluntary benefit offered to full-time employees at group-discounted rates
- Coverage premiums paid through payroll deductions
- 100% portable you take the coverage with you!
- Options available:

Home	Boat	Motor Home
Auto	Condo	Motorcycle
Personal Excess Liability	Renter's	Recreational Vehicle

Call 1-800-438-6381 for more information or a free quote.



Long Term Care Insurance

Provides coverage for expenses on long term care services received at home, in the community or in a nursing facility.

Eligibility:

- Maintain a permanent US residence and have a valid Social Security Number or Tax Identification Number from the US government.
- Actively at work, full-time (35 hours per week) employees
- Employee's spouse under age 76
- Employee's Parents and Parents-in-law under age 76
- Employee's Grandparents and Grandparents-in-law under age 76
- Employee's or spouse's Adult Children and Siblings under age 76

Enroll Now! Go to: <u>Genworth.com/groupltc</u> Use Group ID: dson and Access Code: groupltc Or call 800-416-3624

All members are direct billed by Genworth.



Genworth Long Term Care Options

	onthly Benefit amount you'll be reim have the following choi		or covered long term	
	Will Reimburse U	p to This Amount For Co	overed:	
Monthly Benefit Choices	Home Care	Assisted Living Care	Nursing Facility Care	
\$1,500/month	\$1,500/month	\$1,500/month	\$1,500/month	_
\$3,000/month	\$3,000/month	\$3,000/month	\$3,000/month	_
\$4,500/month	\$4,500/month	Step 2: Select You	ur Total Coverage Ar	mount
\$6,000/month	\$6,000/month	This is the total am	nount of money availab	ble to pay covered long term care exper
PA cost of care ⁴	\$ 4,109/month		Monthly Benefit you c	ve three Total Coverage choices availab hose.

Monthy Benefit Choices	Total Coverage Choices				
\$1,500/month	\$36,000	\$54,000	\$72,000		
\$3,000/month	\$72,000	\$108,000	\$144,000		
\$4,500/month	\$108,000	\$162,000	\$216,000		
\$6,000/month	\$144,000	\$216,000	\$288,000		

Genworth Long Term Care Options

Step 3: Choose a Benefit Increase Option

This program offers 3 Benefit Increase Options to help you protect against the rising cost of care:

None

Your Monthly Benefit and your Total Coverage Maximum do not change.

Automatic 3% Increase for Life - Compound Your Monthly Benefit and Total Coverage Maximum will automatically increase by 3% compound every year.

Automatic 5% Increase for Life - Compound Your Monthly Benefit and Total Coverage Maximum will automatically increase by 5% compound every year.

A sa	mpling of availab	le plans for a 45	year old.	
Monthly Benefit	\$1,500	\$3,000	\$4,500	\$6,000
Total Coverage	\$ 36,000	\$72,000	\$108,000	\$144,000
Monthly Premium	\$17.13	\$34.27	\$51.40	\$68.53



Health Advocate



Health Advocate Resources



Available to all full-time employees, spouses, dependent children, parents and parents-in-law to assist with navigating benefit options and questions throughout the year

Find the right doctors We'll also locate the right hospitals, dentists and other leading healthcare providers anywhere in the country.	Schedule appointments We can help expedite the earliest appointments with providers including hard-to-reach specialists and arrange treatments and tests.	Help resolve insurance claims Our experts get to the bottom of your issue to assist with negotiating billing and payment arrangements.	Assist with eldercare We address senior issues such as Medicare and related healthcare issues facing your parents and parents-in-law.
Get cost estimates You'll receive comparable costs of common medical procedures in your area to help you make informed decisions.	Work with insurance companies Our team works on your behalf to obtain appropriate approvals for needed services.	Answer questions We help you become informed about test results, treatments and medications prescribed by your physician.	Assist in the transfer of medical records. We'll also handle the details of transferring X-rays and lab results.

Help is Only a Phone Call Away







...and much more