

Benefit Guide

January 1, 2024 –
December 31, 2024

ONE80
PLACE

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Eligibility

Eligibility

All full-time employees working 30 hours or more per week are eligible for benefits. All ancillary benefits will begin on the 1st of the month following your date of hire.

For medical coverage, if your hire date is on days 1-10 your benefits will begin alongside your ancillary coverage. If your hire date falls on days 11-31 of the month, medical coverage will begin the first of the month following 30 days.

Eligible Dependents

Your eligible dependents include:

- Your legal spouse
- Dependent children up to age 26
- Dependent children over age 26 that are incapable of self-support due to total physical or mental disability (under most benefits outlined).

If you choose to enroll your spouse and/or dependent children, you will need to provide the following information:

- Name
- Social Security Number
- Date of Birth
- Address (if different)
- Tobacco status



Qualifying Events

The elections you make will remain in place through December 31, 2024. You cannot add or drop coverage or dependents unless you experience a qualifying event. Some examples of qualifying events are listed below, that may allow you to make changes.

- Marriage/Divorce
- Birth or Adoption of a Child
- Change in Child's Dependent Status
- Loss / Addition of Other Coverage
- Eligibility change due to relocation
- Medical Child Support Order

You have 30 days from the date of the event to notify Human Resources; otherwise, you must wait until the next enrollment period.

Please Note: Not every change in status permits a change in benefits plan elections. The election must be consistent with the change in status that is occurred.



Enrollment

PLEASE NOTE there are TWO platforms you must log into

New for 2024, One80 Place will be utilizing separate enrollment portals for its medical and ancillary enrollments. The following pages in this Benefit Guide contain important information about your ancillary benefit offerings. For ancillary elections, you will use the Employee Navigator platform.

Medical – SureCo

For your medical coverage, One80 Place has partnered with a third-party administrator, SureCo, to provide our employees with the “Power of Choice” regarding your medical benefits.

SureCo’s Enrollment Platform will be exclusively utilized for our employees’ medical benefit elections. You will be able to choose from a selection of individual plans offered in your state for you and your dependents with your portion of the premium withheld from your paycheck as pre-tax payroll deductions. It is very important to review all documents in the Sureco platform, so you are well prepared to make the right decision for your medical coverage.

*Employees must log into the Sureco Enrollment Platform to elect or decline benefits (medical only) for 2024. This is NOT a passive enrollment.

How to Register

Register for the first time by following instructions in the welcome email sent to you on the first day of your open enrollment (or eligibility window).

You may also click “New User? Sign up here” through the below link and enter the following information to register your account:

<https://enrollme.hixme.com/login>

- Phone Number, Email
- Zipcode
- Date of Birth
- Last 4 digits of security number (SSN)

Ancillary – Employee Navigator

Register for the first time:

www.employeenavigator.com/benefits/account/register

Company Identifier: **One80-Place2023**

After you set up your account:

www.employeenavigator.com/benefits/account/login

Log in using the username and password you set up when you first registered.

Paylocity Single Sign-On

Employees have an option to log into Employee Navigator without a username or password when using the SSO link within the Paylocity self-service portal.

To access the Single Sign-On link:

- Employees should login to their Paylocity self-service portal
- Navigate to the menu on the upper left-hand side of their Paylocity account
- Click on the “Employee Navigator” link

Note: First time users will be asked to accept a one-time Terms and Conditions page.



Health Savings Account (HSA)

If you enroll in a Qualified High Deductible Health Plan (HDHP) Medical Plan, **you have the option to contribute to a Health Savings Account (HSA)**. With an HSA, you can gain more control over your health care expenses because contributions, interest and withdrawals for qualified health care expenses are all tax-advantaged. Your savings can be used to pay for qualified health care expenses today, tomorrow, next year – for your life.

To be eligible to contribute to an HSA, you must meet the following requirements:

- Be covered under an HSA-qualified health plan on the first day of any month for which eligibility is claimed (as described in IRS Publication 969);
- Not be enrolled in Medicare;
- Not be claimed as a dependent on someone else's tax return;
- Have no other insurance except what is permitted by the IRS (see IRS Publication 969).

Why choose an HSA?

With an HSA, you get to take some of the money that would have gone to pay for higher health insurance premiums and put it into your own pocket. You can use the HSA to pay for qualified medical expenses, or you can save it and let it grow with tax-free interest from year to year.

- You don't lose it if you don't spend it. The HSA, including all the money in the account, is yours. You take the account with you when you change jobs, retire, or leave your qualified health plan.
- You don't have to pay taxes on withdrawals for eligible medical expenses.
- Even if you lose your qualified plan in the future, you can still use the remaining funds in your HSA on qualified medical expenses.
- You will be provided a debit card to use at point of purchase. Be sure to keep your receipts as the IRS may request these in the event of an audit.

Contribute through pre-tax payroll deductions?

- All employees enrolled in an HSA-qualified health plan must set up their HSA using the financial institution of their choice, then provide the necessary banking information to Human Resources to enter into the payroll system so you can begin contributing to your HSA through pre-tax payroll deductions.

2024 IRS HSA Contribution Limits*

Individual \$4,150	Family \$8,300	Age 55+ Catch up Contribution: Additional \$1,000
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*These limits are based on your medical plan coverage level.

Questions about your HSA?
Contact your HSA Administrator or your Tax Advisor



Flexible Spending Accounts (FSA)

You have the option to contribute to a Flexible Spending Account. Participating in a Flexible Spending Account (FSA) is an opportunity to put aside payroll dollars tax-free, to pay for eligible expenses. Eligible medical expenses are described in IRS publication 502, but in general your FSA can be used for expenses **(that are not otherwise reimbursed)** relating to medical, dental, vision, pharmacy, and eligible dependent care expenses incurred during the plan year.

Make an election based on your estimated expenses (up to the limits) for this plan year **January 1, 2024 - December 31, 2024**. Your election will be payroll deducted evenly each pay period through the end of the plan year.

There are two types of FSA's:

Health Care FSA: This account is used to reimburse medical, dental, vision, and pharmacy out-of-pocket expenses incurred by you and your dependents. Those that are not eligible to participate in the Health Savings Account (HSA) should consider participating in this account.

Dependent Care FSA: This account is used to reimburse expenses related to care of your eligible dependents while you (and your spouse, if married) work. Covered expenses must be for dependent children 13 and under, or any person of any age whom you claim as a dependent on your taxes that is mentally or physically incapable of caring for himself/herself.

How to submit a claim:

Use the FSA debit card to pay for claims at time of service. If you do pay out of pocket for a claim, you can file a claim electronically by setting up an account at mytasc.com or through the **myTASC Mobile App**; submit claims through the website, mobile app, or via mail/fax. Since the FSA is regulated by the IRS, you may be required to provide documentation to substantiate your claim.

January – December 2024 FSA Contribution Limits

Health Care FSA
\$3,200

Dependent Care FSA
\$5,000 if you are a single or married and filing jointly;
\$2,500 if you are married and are filing separately.

Use-It-or-Lose-it: If you have unused FSA Dollars at the end of the plan year...

Grace Period: 2.5 months after plan year end date. You have until **Mar. 15th** of the *following* plan year to incur and submit claims for reimbursement using any balance in the *prior* plan year annual election.

Run Out Period: 90 days after the plan year ends to submit any remaining eligible claims incurred during the *prior* plan year for reimbursement. All unused funds from prior year annual election are forfeited once run out period ends.



Questions about your FSA?

www.tasconline.com · (800 422-4661)



Dental

Benefit Period: January 1 – December 31

Your Dental plan is administered by **Delta Dental**. There is a network available for you; the coverage may be significantly reduced if you obtain services out-of-network.

Network: Delta Dental PPO / Premier

www.deltadentalsc.com

Your Semi-Monthly Cost

Coverage Level	Dental
Employee Only	\$5.28
Employee & Spouse	\$20.22
Employee & Child(ren)	\$20.00
Employee & Family	\$37.59

The following benefit summary is a non-legal outline of the benefits. Refer to the full plan documents for more specific details.

In-Network Benefits*	
Deductible	\$0
Annual Maximum Benefit - Applies to Basic and Major Services only	\$1,000 per member per year
Preventive Services	
Oral Exams / Cleanings (twice per benefit year)	Member Pays 0% of allowed charges*
X-rays - Bitewing (once per benefit year)	
Flouride Treatment (under age 19, twice per benefit)	
Emergency palliative treatment	
Sealants (ages 6-15)	
Basic Services	
Fillings	Member Pays 20% of allowed charges*
Periodontal Maintenance	
Simple Extractions	
Space Maintainers (up to age 19)	
X-rays - Full Mouth (once per 36 months)	
Major Services	
Inlays / Crowns / Onlays	Member Pays 50% of allowed charges*
Bridges / Dentures	
Endodontics (root canal treatment)	
General Anesthesia	
Surgical/Non-Surgical Periodontics	
Oral Surgery	
Surgical Extractions	

*You may be subject to less coverage and/or balance billing if you go out-of-network.



Vision

Benefit Period: January 1 – December 31

Your Vision plan is administered by **Delta Dental**. There is a network available for you; the coverage may be significantly reduced if you obtain services out-of-network.

Network: EyeMed Insight Network

www.deltadentalsc.com/vision

Your Semi-Monthly Cost

Coverage Level	Vision
Employee Only	\$2.88
Employee & Spouse	\$5.40
Employee & Child(ren)	\$6.13
Employee & Family	\$8.93

*Vision premiums are eligible to be deducted pre-tax.

The following benefit summary is a non-legal outline of the benefits. Refer to the full plan documents for more specific details.

In-Network Benefits**

Eye Exam (every 12 months)

Exam	\$10 copay
Contact Lens Fitting	\$40 allowance (standard) / 15% discount* (non-standard)

Materials (every 12 months)

Glasses and/or Contact Lens	\$150 allowance, after one-time \$25 copay. After allowance, 20% discount on glasses & 15% discount on contact lens*
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Discounts*

Refractive Surgery / Lasik Surgery	10-20%
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**Submit a claim form and itemized receipts to be reimbursed for out-of-network providers.

*Discounts available at most providers.





Life/AD&D



One80 Place provides you with Basic Life/AD&D. You also have the option to purchase additional Life/AD&D insurance for yourself and your dependents. **Be sure to keep your beneficiary up to date!**

The following benefit summary is a non-legal outline of the benefits. Refer to the full plan documents for more specific details.

Basic Life/AD&D

You are provided with \$15,000 Life/AD&D Insurance. This benefit amount is subject to age reductions starting at age 65.

Voluntary Life/AD&D

You have the option to purchase additional Life/AD&D insurance for yourself and your dependents. You must elect coverage for yourself in order to elect for your dependents.

New hires are eligible to elect up to the guaranteed issue amount without completed health questions.

Employees currently enrolled are eligible to elect an additional \$10,000 (up to the guaranteed issue amount) without completing health questions; this feature applies to the employee amount only.

Employees not currently enrolled are required to submit health information for approval to elect coverage. Evidence of Insurability (EOI) for new elections and/or elections over the guaranteed issue amount at any time can be submitted online at www.mutualofomaha.com/eoi. **Group Number: G000AXS3**



Coverage Level	Guaranteed Issue Amount (New Hires)	Benefit Maximum
Employee \$10,000 increments Benefit amount reduces when employee turns age 70.	\$100,000	5x salary up to \$300,000
Spouse \$5,000 increments Spouse coverage terminates when employee turns age 70	\$25,000	50% of employee's amount up to \$50,000
Children - covers all children \$1,000 increments (\$2,000 min)	\$10,000	\$10,000

Your cost is based on the amount you select and your age. View your specific cost when you enroll online.



Disability



You have the option to elect Short Term and Long-Term Disability. Disability replaces a portion of your income should you be unable to work due to a covered disability.

The following benefit summary is a non-legal outline of the benefits. Refer to the full plan documents for more specific details.

Voluntary Short-Term Disability

As a new hire, you are eligible to elect coverage without completing health questions.

You will have the opportunity to elect during each annual open enrollment period without completing health questions; however pre-existing condition limitations will still apply.

Evidence of Insurability (EOI) for new elections outside of annual open enrollment period can be submitted online at www.mutualofomaha.com/eoi. **Group Number: G000AXS3**

Benefit Amount Maximum Benefit	60% if weekly earnings Up to \$1,200 per week
When Benefits Begin Maximum Benefit Duration Pre-existing Condition Limitation	15 th day 11 weeks 3 month look back / 6-month exclusion

Your cost is based on your earnings. View your specific cost when you enroll online.

Voluntary Long-Term Disability

As a new hire, you are eligible to elect Long Term Disability without completing health questions.

You will have the opportunity to elect Long Term Disability during each annual open enrollment period, but you will be required to complete health questions; pre-existing condition limitations will still apply.

Evidence of Insurability (EOI) for new elections outside of being a new hire can be submitted online at www.mutualofomaha.com/eoi. **Group Number: G000AXS3**

Benefit Amount Maximum Benefit	60% of monthly earnings Up to \$6,000 per month
When Benefits Begin Maximum Benefit Duration Pre-existing Condition Limitation	91 st day Social Security Normal Retirement Age 12 month look back / 12-month exclusion

Your cost is based on your earnings. View your specific cost when you enroll online.



Additional Voluntary Benefits



You have the option to elect these additional voluntary benefits through **Mutual of Omaha**. These benefits provide a payment directly to you if you have an eligible claim. Refer to the full certificate and rider specifications for full details on coverage, including limitations/exclusions and pre-existing condition limitations. The following benefit summary is a non-legal outline of the benefits. Refer to the full plan documents for more specific details.

Critical Illness

If you or a covered family member is diagnosed with a covered critical illness, you will receive a cash benefit based on the coverage amount you selected and on the percentage payable for that condition. **This plan includes a \$50 health screening benefit (payable once per calendar year, per insured person.)**

A pre-existing condition limitation of 12 month look back / 12-month exclusion applies if you are newly electing this coverage.

Employees currently enrolled are eligible to elect an additional \$5,000 (up to the guaranteed issue amount) without completing health questions; this feature applies to the employee amount only.

Evidence of insurability (EOI) for electing over the guaranteed issue amount can be submitted online at www.mutualofomaha.com/eoi. Group Number: G000AXS3

Coverage Level	Guaranteed Issue Amount (New Hires)	Benefit Maximum
Employee Coverage reduces when employee turns age 70 (Increments of \$5,000)	\$30,000	\$50,000
Spouse Coverage reduces when employee turns age 70 (Increments of \$5,000)	\$15,000	50% of employee's benefit amount, up to \$25,000
Children – covers all children	\$5,000	25% of employee's benefit amount, up to \$10,000

Your cost is based on the amount you select and your age. View your specific cost in your enrollment system. Coverage for eligible children is automatically added; a separate premium is not required.

Accident

This plan can help cover your out-of-pocket expenses associated with an off-job accident. Benefits paid correspond with hospital and intensive care confinement. Your plan also includes coverage for a variety of other occurrences such as: dismemberment, dislocation/fracture, and ambulance services.

Your Semi-Monthly Cost

Coverage Level	Employee Only	Employee & Spouse	Employee & Child(ren)	Employee & Family
Accident	\$4.49	\$7.68	\$10.28	\$13.90



Retirement Planning



Retirement Planning

Take an important first step toward being ready for tomorrow.

One80 Place sponsors a Safe Harbor 401(k) Plan which is available to all full-time employees after one year of services has been completed.

One80 Place matches dollar for dollar any contribution you make up to 3% of your salary plus an additional \$0.50 for any contribution you make above 3% up to 5% of your salary. Therefore, if you contribute 5% One80 Place will match a total of 4%

Employees that have been with One80 Place less than a year are able to roll over old plans from other employers.

If you are interested talking more about your individual retirement planning, Rock Amick (our financial advisor) is available to help via phone, zoom, etc. He can be contacted at rock@bigrockwm.com or 843-573-7965

If you have been here for a year, you can sign up a www.voyaretirementplans.com/enrollmentcenter. You will need to enter plan #819365 and Verification #81936599.

If you are interested in rolling over a previous retirement account, please contact Voya at www.voya.com or 888-311-9787



Employee Assistance Program



Your employer wants to support you in being your best at work and in your personal life by providing an EAP. When you have emotional issues or questions, you can contact this confidential resource. This resource is available to you and your dependent family members.

Counseling Sessions (10 free face-to-face sessions – per person/benefit period for you and your family members)

Personal Concern	Marital/Relationship Issues	Grief and Loss
Family Conflict	Workplace Concerns	Anger Management
Alcohol/Substance Abuse	Stress Management/Anxiety	

Life Management Services (10 free services – per person/benefit period for you and your family members)

Financial Counseling	Legal Services	Adult Care Resources
College Consult Resources	Child Care Resources	Parenting/Adoption Resources

Go online or call today!

www.firstsuneap.com · (800) 986-8143



Contact Information and Online Resources

One80 Place

Hannah Moffitt, Human Resources Manager
Email: hmoffitt@one80place.org
Phone: (843) 737-8360

Carriers – Member Services

For assistance with ID cards/ID numbers, verification of coverage, covered benefits, prior-authorizations and claims issues.

USI Benefit Resource Center (BRC)

The BRC has a team of Benefit Specialists that are available to research and solve elevated claims, unresolved eligibility problems and other benefit issues which you or your employees may need assistance with. **The BRC is available Monday through Friday from 8am to 5pm (local time) and can be reached at 855-874-0835 or via e-mail at BRCSouth@usi.com.**

Flexible Savings Account*	TASC	www.tasconline.com (800) 422-4661
Dental*	Delta Dental	www.deltadentalsc.com (800) 335-8266
Vision*	Delta Dental (EyeMed Insight Network)	www.deltadentalsc.com/vision (877) 226-1412
Life/AD&D, Accident, Critical Illness*	Mutual of Omaha	www.mutualofomaha.com (800) 775-8805
Disability*	Mutual of Omaha	www.mutualofomaha.com (800) 877-5176
Employee Assistance Program (EAP)*	First Sun EAP	www.firstsuneap.com (800) 968-8143
Medical	SureCo	employee.experience@sureco.com (949) 989-4906

Use the Employee Navigator platform to login and make elections*

This is your benefits & enrollment portal, dedicated to providing you with up-to-date information about your Benefits. Log in to view your elections, plan documents, benefit details, and health care reform notices. **You may request a paper copy of any document at any time from Human Resources.**

To login after you set up your account:

Visit www.employeenavigator.com/benefits/account/login and log in with the username and password you set up when you first registered. (See pg. 4 for more info)



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Thank you!