



Welcome to Open Enrollment

Plan Year: 2022

A&F

WE INVEST IN CUSTOMER SUCCESS®

Pick the best benefits for you and your family.

AT&F strives to provide you and your family with a comprehensive and valuable benefits package. We want to make sure you’re getting the most out of our benefits—that’s why we’ve put together this Open Enrollment Guide.

Open enrollment is a short period each year when you can make changes to your benefits. This guide will outline all the different benefits AT&F offers, so you can identify which offerings are best for you and your family.

Elections you make during open enrollment will become effective on **January 1st, 2022**. If you have questions about any of the benefits mentioned in this guide, please don’t hesitate to reach out to **AT&F HR**.

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Welcome to Open Enrollment

Who is Eligible?

If you're a full-time employee at **AT&F**, you're eligible to enroll in the benefits outlined in this guide. Full-time employees are those who work 30 or more hours per week. Newly hired team members benefits are effective the 1st day following 30 days from your date of hire. In addition, the following family members are eligible for medical, dental, vision, and voluntary benefits coverage:

- Spouse
- Children up to age 26

How to Enroll

Are you ready to enroll? The first step is to review your current benefits. Did you move recently or get married? Verify all of your personal information and make any necessary changes.

Once all your information is up to date, it's time to make your benefit elections. The decisions you make during open enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully.

Enrolling in benefits is completed by logging into your Paycor account. You will need to complete the Open Enrollment Task. Before you begin, have your life insurance beneficiary information and any dependent information available.

Remember: if you do not make your 2022 benefit elections, you will automatically be defaulted to your prior year elections, except for the FSA, which will default to zero (\$0) elections.

Contact AT&F Human Resources with any questions.

The benefits you choose during open enrollment will become effective on **January 1st, 2022**.

How to Make Changes

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period. Qualifying events include things like:

- Marriage, divorce or legal separation
- Birth or adoption of a child
- Change in child's dependent status
- Death of a spouse, child or other qualified dependent
- Change in residence
- Change in employment status or a change in coverage under another employer-sponsored plan

Helpful Health Terms

Co-Insurance:

A percentage of medical plan costs that you pay after your deductible is met.

Deductible:

A fixed dollar amount that you pay before the plan will begin paying benefits.

Out-of-Pocket Maximum:

The maximum you will pay for your benefits until treatment is covered at 100%.

In-Network:

Doctors, hospitals, and other providers with whom the medical plan has an agreement to care for its members. Covered employees and dependents have lower out-of-pocket costs when using in-network providers.

Out-of-Network:

Care received from a doctor, hospital, or provider with whom the plan does not have an agreement. Covered employees and dependents pay more to use out-of-network providers.

Primary Care Physician (PCP):

PCPs are Family Practitioners, Internists, Pediatricians, OB/GYNs, Nurse Practitioners, or Physician Assistants.

AT&F's Wellness Incentives

Whether your goal is to have more energy, lose weight, manage stress, or improve your diet, AT&F's Wellness program can help you. We consider Wellness to be a vital part of our overall benefits program.

As healthcare costs continue to rise, we strive to offer competitive health benefits to take care of you and your family. A successful wellness program means our Team Members are improving their lives and we are working together to manage rising health insurance costs.

AT&F will continue the Wellness Program for 2022.

To qualify for the Wellness Program Discount, you need to:

- Have a physical completed during the following time frame (4/1/2021 – 3/31/2022).
- If your spouse is covered under the plan, they will also need to have a physical completed during that time frame.
- Return the appropriate form(s) back to AT&F Human Resources by 3/31/2022 to continue to receive the Wellness Program Discount for the remainder of 2022.

To qualify for the Tobacco-Free Discount, you need to:

- Be tobacco-free for all of 2022 and complete the appropriate form.
- If your spouse is covered under the plan, they will also need to be tobacco-free for all of 2022 and complete the appropriate form.
- If you and/or your spouse is not currently tobacco-free, you may also qualify for the premium discount effective 1/1/2022 by enrolling in the Quit & Stay Quit Wellness Coaching Program by 12/31/2022 offered to you at no charge through AT&F. See AT&F Human Resources for details.

Wellness Program Disclosure

Your health plan is committed to helping you achieve your best health status. Rewards for participating in a wellness program are available to all employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact Human Resources and we will work with you to find a wellness program with the same reward that is right for you considering your health status.

Medical Coverage 2022

Health Insurance

AT&F offers four medical plan choices: two (2) PPO Plans and two (2) High Deductible Health Plans (also known as HDHPs).

The charts on the following pages illustrate a brief outline of each plan. Please refer to the plan certificate or summary plan description for complete plan details.

PPO Plans	Core Plan PPO \$1500		Max Coverage PPO \$500	
Benefits Coverage	In-Network Benefits	Out-of-Network Benefits	In-Network Benefits	Out-of-Network Benefits
Annual Deductible				
Individual	\$1,500	\$4,000	\$500	\$2,500
Family	\$3,000	\$8,000	\$1,000	\$5,000
Maximum Out-of-Pocket				
Individual	\$5,000	Unlimited	\$3,000	Unlimited
Family	\$10,000	Unlimited	\$6,000	Unlimited
Physician Office Visit				
Primary Care	\$30 copay	40% after deductible	\$25 copay	40% after deductible
Specialty Care	\$60 copay	40% after deductible	\$50 copay	40% after deductible
Preventive Care				
Adult Periodic Exams	0%	40% after deductible	0%	40% after deductible
Well-Child Care	0%	40% after deductible	0%	40% after deductible
Diagnostic Services				
Urgent Care	\$60 copay	40% after deductible	\$50 copay	40% after deductible
Emergency Room (Copay waived if admitted)	\$250 copay. 20% after deductible	\$250 copay. 20% after deductible	\$250 copay. 20% after deductible	\$250 copay. 20% after deductible
Inpatient/Outpatient	20% after deductible	40% after deductible	20% after deductible	40% after deductible
Retail Pharmacy (30 Day Supply) *				
Generic (Tier 1)	\$10 copay	Not Covered	\$10 copay	Not Covered
Preferred (Tier 2)	\$40 copay	Not Covered	\$30 copay	Not Covered
Non-Preferred (Tier 3)	\$80 copay	Not Covered	\$60 copay	Not Covered
Preferred Specialty (Tier 4)**	\$160 copay	Not Covered	\$120 copay	Not Covered
Mail Order Pharmacy (90 Day Supply)				
Generic (Tier 1)	\$25 copay	Not Covered	\$25 copay	Not Covered
Preferred (Tier 2)	\$100 copay	Not Covered	\$75 copay	Not Covered
Non-Preferred (Tier 3)	\$200 copay	Not Covered	\$150 copay	Not Covered
Individual	\$1,600	N/A	\$3,600	N/A
Family	\$3,200	N/A	\$7,200	N/A

*The Rx Plan requires the use of Mail Order for maintenance medications after the 3rd fill at Retail. If you keep your Rx at Retail, you will be charged 2x the copay amount for that prescription.

**Non-Formulary Specialty Prescriptions are not covered

Medical Coverage 2022

High Deductible Health Plans (HDHP)	No Contribution HSA \$5000		Low Contribution HSA \$2000*	
Benefits Coverage	In-Network Benefits	Out-of-Network Benefits	In-Network Benefits	Out-of-Network Benefits
Annual Deductible				
Individual	\$5,000	\$5,000	\$2,000	\$5,000
Family	\$10,000	\$10,000	\$4,000	\$10,000
Maximum Out-of-Pocket				
Individual	\$5,000	\$10,000	\$2,000	\$10,000
Family	\$10,000	\$20,000	\$4,000	\$20,000
Physician Office Visit				
Primary Care	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Specialty Care	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Physician Office Visit				
Adult Periodic Exams	0%	40% after deductible	0%	40% after deductible
Well-Child Care	0%	40% after deductible	0%	40% after deductible
Diagnostic Services				
Urgent Care	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Emergency Room	0% after deductible	0% after deductible	0% after deductible	0% after deductible
Inpatient/Outpatient	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Retail Pharmacy (30 Day Supply) **				
Generic (Tier 1)	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Preferred (Tier 2)	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Non-Preferred (Tier 3)	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Preferred Specialty (Tier 4)***	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Mail Order Pharmacy (90 Day Supply)				
Generic (Tier 1)	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Preferred (Tier 2)	0% after deductible	40% after deductible	0% after deductible	40% after deductible
Non-Preferred (Tier 3)	0% after deductible	40% after deductible	0% after deductible	40% after deductible

*Non-Embedded Deductible – the total family deductible must be met before the coverage starts paying for healthcare services for any individual member.

**The Rx Plan requires the use of Mail Order for maintenance medications after the 3rd fill at Retail. If you keep your Rx at Retail, you will be charged 100% of the amount for that prescription

***Non-Formulary Specialty Prescriptions are not covered

Medical Contributions

Below are the bi-weekly (26/year) premium rates for the medical plans.

You can qualify for a discount on your premium rates by:

- Being tobacco-free (if married, both you and your spouse must be tobacco-free) and/or
- Participating in our wellness program.

Team Member Contributions				
Core Plan - PPO \$1500				
	Tobacco-Free & Wellness Participant	Tobacco-Free (No Wellness)	Tobacco User & Wellness Participant	Tobacco User (No Wellness)
Single	\$45.50	\$59.75	\$67.25	\$81.00
Family	\$130.00	\$160.00	\$175.00	\$200.00

Team Member Contributions				
Max Coverage Plan - PPO \$500				
	Tobacco-Free & Wellness Participant	Tobacco-Free (No Wellness)	Tobacco User & Wellness Participant	Tobacco User (No Wellness)
Single	\$78.25	\$92.50	\$100.00	\$113.75
Family	\$195.00	\$225.00	\$240.00	\$265.00

Team Member Contributions				
No Contribution HSA Plan - \$5000				
	Tobacco-Free & Wellness Participant	Tobacco-Free (No Wellness)	Tobacco User & Wellness Participant	Tobacco User (No Wellness)
Single	\$0.00	\$0.00	\$0.00	\$0.00
Family	\$0.00	\$0.00	\$0.00	\$0.00

Team Member Contributions				
Low Contribution HSA Plan - \$2000				
	Tobacco-Free & Wellness Participant	Tobacco-Free (No Wellness)	Tobacco User & Wellness Participant	Tobacco User (No Wellness)
Single	\$48.50	\$62.75	\$70.25	\$84.00
Family	\$125.00	\$155.00	\$170.00	\$195.00

New 2022 Prescription Benefit Manager



AT&F evaluates your prescription drug benefit manager every year to make sure you are getting the best possible pricing and for your medications. We are happy to announce that we are changing from our prior pharmacy management company OptumRx to **PROACT Pharmacy Benefit Management**.

This change will be effective **January 1st, 2022**.

How to utilize your new Pharmacy Benefits:

- **You will be receiving new ID Cards from PROACT Pharmacy Benefit Management**
- **You will need to provide your current pharmacist or pharmacy with your new ID Cards for proper processing**

Using ProAct's Mail Order Pharmacy has its Advantages:

ProAct Pharmacy Services will deliver maintenance prescriptions, up to a 90-day supply, **directly to your door** for the cost of your mail order pharmacy copay. It is reliable, secure, and convenient ... and you will likely lower your out-of-pocket costs. Plus, standard shipping is free!

ProAct Pharmacy Services operates with the sole purpose of ensuring that you receive your medications on time at the convenience of your home. This is our commitment to you:

- State-of-the-art automation for increased efficiencies
- On-site licensed pharmacists
- Free standard delivery
- Auto-Refill Program
- Interfacing with prescribers – when your refills run out, we will reach out to your physician's office on your behalf
- 24/7/365 access to live Help Desk representatives
- Access to convenient tools on a secure web portal to view and manage your prescriptions

New for 2022 Specialty Drug Program- Payer Matrix



- **Adding Payer Matrix Specialty Drug Program effective January 1st, 2022**
- Provides employee assistance for relief of select high dollar specialty drugs
- Works in partnership with your New Rx Benefit Manager **Pro Act Rx**
- All plan participants using specialty drugs are required to meet prior authorization criteria and administrative review under Payer Matrix program
- If you take a Specialty Drug, you must enroll in the Payer Matrix program, or you will be responsible for 100% co-insurance or the full cost of your medication
- **If you are NOT eligible for Payer Matrix, your case will be automatically submitted for benefit reconsideration**
- Works with you to find Rx Manufacturer Assistance Programs
- You will have a Care Coordinator assigned to you
- Care Coordinator works on your behalf to help you receive your specialty medication on time, every month, once you are in the program





Dental Benefits- Basic

AT &F offers you choice between two dental plans through **United HealthCare**. In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings, and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

We're happy to say that there are no cost changes to your dental benefits for 2022. The following chart outlines the dental benefits we offer. Please refer to the plan certificate or summary plan description for complete plan details.

Preventive/Diagnostic Care

- ✓ Exams
- ✓ Cleanings
- ✓ Routine X-rays

Basic Care

- ✓ Fillings
- ✓ Simple Extractions
- ✓ Emergency Treatment

Major Care

- ✓ Oral Surgery
- ✓ Endodontics
- ✓ Periodontics
- ✓ Inlays/Onlays/Crowns
- ✓ Bridges
- ✓ Dentures

Benefits Coverage	United HealthCare Dental PPO – Basic Plan	
	In-Network Benefits	Out-of-Network Benefits
Annual Deductible		
Individual	\$50	\$50
Family	\$150	\$150
Waived for Preventive Care	Yes	Yes
Annual Maximum		
Per Person / Family	\$1,000	\$1,000
Preventive	100%	100%
Basic	80%	80%
Major	50%	50%

Team Member Contributions (Bi-Weekly; 26/year)	
Voluntary Dental – Basic Option	
Single	\$11.88
+ Spouse	\$23.11
+ Child(ren)	\$24.21
Family	\$36.01

Dental Benefits - Enhanced

AT &F offers you choice between two dental plans through **United HealthCare**. In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings, and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

We're happy to say that there are no cost changes to your dental benefits for 2022. The following chart outlines the dental benefits we offer. Please refer to the plan certificate or summary plan description for complete plan details.

Preventive/Diagnostic Care

- ✓ Exams
- ✓ Cleanings
- ✓ Routine X-rays

Basic Care

- ✓ Fillings
- ✓ Simple Extractions
- ✓ Emergency Treatment

Major Care

- ✓ Oral Surgery
- ✓ Endodontics
- ✓ Periodontics
- ✓ Inlays/Onlays/Crowns
- ✓ Bridges
- ✓ Dentures

Orthodontia

- ✓ Children up to age 19

Benefits Coverage	United HealthCare Dental PPO	
	In-Network Benefits	Out-of-Network Benefits
Annual Deductible		
Individual	\$50	\$50
Family	\$150	\$150
Waived for Preventive Care	Yes	Yes
Annual Maximum		
Per Person / Family	\$1,500	\$1,500
Preventive	100%	100%
Basic	90%	90%
Major	60%	60%
Orthodontia (children to age 19)	50%. \$1,500 lifetime max	50%. \$1,500 lifetime max

Team Member Contributions (Bi-Weekly; 26/year)	
Voluntary Dental	
Single	\$17.63
+ Spouse	\$32.90
+ Child(ren)	\$38.35
Family	\$53.47

Vision Benefits

AT&F provides voluntary vision insurance through **United HealthCare**. The benefits outlined below apply when using an in-network provider. Should you choose a non-network provider, applicable out-of-network reimbursements would apply. You may search for a network provider at www.myuhc.com.

	United HealthCare Vision Plan
Copay	
Routine Exams	\$10 copay
Materials	\$25 copay
Frequency	
Exams	12 months
Lenses	12 months
Frames	24 months
Vision Materials	
Lenses	Benefit varies by type of lens (i.e. single vision, bifocal, trifocal) Optional lens upgrades may be provided at a discount (i.e. scratch-resistant, polycarbonate, progressive, etc.) The Lens Option List can be found at www.myuhcvision.com .
Contacts	Elective contacts are in lieu of eyeglasses. Formulary contact lenses (disposable): up to four (4) boxes included after copay Non-formulary contact lenses: \$125 allowance Medically necessary contact lenses: Covered in full after copay
Frames	Covered at 100% (up to \$130 allowance) every 24 months

Team Member Contributions (Bi-Weekly; 26/year)	
Voluntary Vision	
Single	\$2.29
+ Spouse	\$4.35
+ Child(ren)	\$5.10
Family	\$7.17

Company-Paid Benefits

AT&F values its team members and provides company-paid life and long-term disability (LTD) insurance at no cost based on team member eligibility and employment status. Please refer your certificate for additional details.

Important Reminder!

Be sure to assign a beneficiary or living trust to ensure your assets are distributed according to your wishes. This should be completed annually but may be done at any time throughout the year by contacting HR for the appropriate forms or updating your beneficiary information in Paycor.

Voluntary Life and AD&D

In addition to the Company-Paid Life and AD&D coverage, you have the option to purchase additional Voluntary Life and AD&D insurance to cover any gaps that may be a result of age reduction schedules, cost of living, existing financial obligations, etc.

United HealthCare Voluntary Life/AD&D	
Team Member (\$10,000 increments)	
Minimum	\$10,000
Maximum	5x annual salary or \$500,000
Guarantee Issue	\$150,000
Spouse (\$5,000 increments)	
Minimum	\$5,000
Maximum	\$100,000; limit 50% of Team Member election
Guarantee Issue	\$30,000
Dependent (\$2,000 increments)	
Minimum	\$2,000
Maximum	\$10,000; limit 50% of Team Member election - Age 14 days to 6 months: \$250 - 6 months to age 19 (25 if FT student): \$10,000

Evidence of Insurability: If you enroll yourself and spouse in voluntary life insurance when first eligible, you can request up to \$150,000 of Voluntary Life/AD&D coverage for yourself and up to \$30,000 of coverage for your spouse without evidence of insurability (proof of good health) required. If you do not enroll in this plan when first eligible, any amount of Voluntary Life/AD&D coverage requested later, will require satisfactory Evidence of Insurability form to be completed for you and/or your spouse.

Voluntary Life and AD&D Rates

Listed below are the rates should you elect additional Life and AD&D insurance for you, your spouse, and dependents. There is also a rate calculator to assist you in determining your per paycheck cost.

Voluntary Life/AD&D Monthly Rates per \$1,000	
Team Member/Spouse (Based on Team Member age)	
Age <25	\$0.14
25-29	\$0.14
30-34	\$0.15
35-39	\$0.17
40-44	\$0.24
45-49	\$0.38
50-54	\$0.61
55-59	\$0.92
60-64	\$1.42
65-69	\$2.52
70-74	\$4.47
75+	\$4.47
Dependent Election/Cost per Month	
\$2,000	\$0.48
\$4,000	\$0.96
\$6,000	\$1.44
\$8,000	\$1.92
\$10,000	\$2.40

To calculate your monthly premium cost:				
\$ _____ Benefit	x	\$ _____ Rate	=	\$ _____ Subtotal
			÷	\$1,000
			=	\$ _____ Monthly Cost

Spending Accounts

Dependent Care Reimbursement Account (DCRA)

AT&F offers access to a dependent care reimbursement account to assist with costs related to dependent care. This account allows you to fund the costs of dependent care on a pre-tax basis. The care must be provided by a dependent care center or by an individual who can provide a name, address, and taxpayer identification number. You may contribute up to a maximum of **\$5,000 each year**, per household. Although you may not take the childcare tax credit if you choose this option, you may save more depending on your income level.

- You can use your account throughout the year to help pay for eligible expenses; funds must be in the account before being reimbursed.
- Your expense must be for the purpose of allowing you and, if married, your spouse to work.
- **If you are married and file a joint tax return, your combined maximum election amount is \$5,000. If you are married but filing separate tax returns, the maximum amount is \$2,500.**
- A dependent care FSA helps reimburse you for the work-related cost of care for a qualifying dependent. A qualifying dependent is:
 - A tax dependent of yours who is under age 13, or
 - Any other tax dependent of yours, such as an elderly parent, who is physically or mentally incapable of self-care and has the same principle residence as you
 - A spouse who is physically or mentally incapable of self-care and has the same principle residence as you.
 - **The plan year runs January 1, 2022 through December 31, 2022.**



Flexible Spending Accounts

Paying for health care can be stressful. That's why **AT&F** offers an employer-sponsored flexible spending account (FSA).

What are the benefits of an FSA?

There are a variety of different benefits of using an FSA, including the following:

- **It saves you money.** Allows you put aside money tax-free that can be used for qualified medical expenses.
- **It's a tax-saver.** Since your taxable income is decreased by your contributions, you'll pay less in taxes.
- **It is flexible.** You can use your FSA funds at any time, even if it's the beginning of the year.

You cannot stockpile money in your FSA. **If you do not use it, you lose it.** You should only contribute the amount of money you expect to pay out of pocket that year.

What is a dependent care FSA?

Dependent Care FSAs allow you to contribute pre-tax dollars to qualified dependent care. The maximum amount you may contribute each year is \$5,000 (or \$2,500 if married and filing separately).

How do I enroll?

Fill out the FSA Enrollment Form during Open Enrollment. Even if you signed up last year, you must re-enroll for 2022.

FSA Case Study

Because FSAs provide you with an important tax advantage that can help you pay for health care expenses on a pre-tax basis. Due to the personal tax savings you incur, your spendable income will increase. The example that follows illustrates how an FSA can save money.

Bob and Jane's live in Texas and have a combined annual gross income of \$45,000. They are married and file their income taxes jointly. Since Bob and Jane expect to spend \$3,000 in eligible medical expenses in the next plan year, they decide to direct a total of \$2,750 (the maximum allowed amount per individual, for that taxable year) into their FSAs. The table demonstrates their savings.

	Without FSA	With FSA
Gross income	\$45,000	\$45,000
FSA contributions	\$0	(-\$2,750)
Gross income	\$45,000	\$42,250
Estimated taxes	(-\$5,532)*	(-\$4,999)*
After-tax earnings	\$39,468	\$37,251
Eligible out-of-pocket expenses	(-\$3,000)	(-\$400)
Remaining spendable income	\$36,468	\$36,851
Spendable income increase	--	\$383

Health Savings Accounts

Health savings accounts (HSAs) are a great way to save money and budget for qualified medical expenses. HSAs are tax-advantaged savings accounts that accompany high deductible health plans (HDHPs). HDHPs offer lower monthly premiums in exchange for a higher deductible (the amount you pay before insurance kicks in).

What are the benefits of an HSA?

There are many benefits of using an HSA, including the following:

- **It saves you money.** HDHPs have lower monthly premiums, meaning less money is being taken out of your paycheck.
- **It is portable.** The money in your HSA is carried over from year to year and is yours to keep, even if you leave the company.
- **It is a tax-saver**—HSA contributions are made with pre-tax dollars. Since your taxable income is decreased by your contributions, you'll pay less in taxes.

The maximum amount that you can contribute to an HSA in 2021 is \$3,600 for individual coverage and \$7,200 for family coverage. **In 2022, it increases to \$3,650 for individual coverage and \$7,300 for family coverage.**

Additionally, if you are age 55 or older, you may make an additional “catch-up” contribution of \$1,000. You may change your contribution amount at any time throughout the year as long as you don't exceed the annual maximum.

HSA Case Study

Justin is a healthy 28-year-old single man who contributes \$1,000 each year to his HSA. His plan's annual deductible is \$1,500 for individual coverage. Here is a look at the first two years of Justin's HSA plan, assuming the use of in-network providers. (This example only includes HSA contribution amounts and does not reflect any investment earnings.)

Year 1	
HSA Balance	\$1,000
Total Expenses:	
- Prescription drugs: \$150	(-\$150)
HSA Rollover to Year 2	\$850
Since Justin did not spend all of his HSA dollars, he did not need to pay any additional amounts out-of-pocket this year.	



Year 2	
HSA Balance	\$1,850
Total Expenses:	
- Office visits: \$100	
- Prescription drugs: \$200	(-\$300)
- Preventive care services: \$0 (covered by insurance)	
HSA Rollover to Year 3	\$1,550
Once again, since Justin did not spend all of his HSA dollars, he did not need to pay any additional amounts out-of-pocket this year.	

Additional Benefit Offerings

As a AT&F employee, we are proud to offer you the following benefits paid for by the company:

Teladoc (though UMR)

Teladoc gives you access 24 hours, 7 days a week to a U.S. board-certified doctor through the convenience of phone, video, or mobile app visits. It's an affordable option for quality medical care!

Teladoc doctors can treat many medical conditions including cold & flu symptoms, allergies, pink eye, respiratory infection, sinus problems, skin problems, and more.

Visit [Teladoc.com](https://teladoc.com) or 1-800-Teladoc or download the app today.

Member Assistance Program

Life is stressful, and sometimes the constant challenges can become overwhelming. When you have unresolved problems, it can take a serious toll on both your work and home life.

To help you through difficult times, a Member Assistance Program is available to you. The Member Assistance program provides confidential support whenever you need it at no cost to you.

The program includes the following services:

- **Toll-free Member Assistance line:** Phone access to a master's-level counselor, 24 hours a day, 7 days a week. To reach Member Assistance, call 1-877-660-3806.
- **24/7 access to liveandworkwell.com:** Online access to an interactive website that provides tools and information to help enhance your work, health, and life
 - There are two ways to login:
 - 1) create your own username and password under "Members: Login or Register"; OR
 - 2) use the access code "LTDEAP" under "Guest Access"
- **Referrals for face-to-face counseling:** Referrals to a national network of licensed and certified clinicians for up to three sessions
- **Legal services:** Free 30-minute telephone or in-person consultation with an attorney for help with legal concerns (an attorney may be retained for ongoing services at a 25% discounted rate)
- **Referral to helpful resources:** Referrals to community resources from a database of more than 100,000 contacts

Will and Trust Preparation Services

Will and trust preparation services are available to team members at no additional cost. The services, provided by Consolidated Legal Concepts, Inc. (CLC), are designed to help with estate planning. Through CLC, team members have access to the following resources:

- **Educational articles** about wills, trusts, and related legal topics
- **Standard legal forms** for each state
- **Tools for preparing legal documents** at home
- **Private, secure online storage** of the legal documents created
- **Telephone assistance** when using the assisted document preparation service

You can access the services in the way you find most convenient:

- Electronic access for online self-service will and trust preparation at **CLCLegalforms.com**
- Phone access for assisted legal document preparation service at **800-773-0888**

Contact Information

Have Questions? Need Help?

In addition to contacting **AT&F Human Resources**, you also have access to **Armada Risk Partners**, customer service department. They are there to provide you help with elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals, and their primary responsibility is to assist you.

They can be reached at **216-350-5059** Monday through Friday 8:00am to 4:00pm Eastern Standard Time or via e-mail at **lbarrios@armadarisk.com**. If you need assistance outside of regular business hours, please leave a message and they will promptly return your call or e-mail message by the end of the following business day.

Please contact **AT&F Human Resources** to complete any changes to your benefits that are not related to your initial or annual enrollment.

Carrier Customer Service

	CARRIER	PHONE NUMBER	WEBSITE
Medical	UMR (TPA)	800-826-9781	www.umar.com
Pharmacy Benefit Management	ProAct	877-635-9545	www.proactrx.com
Rx Specialty Drug Program	Payer Matrix	877-305-6202	www.payermatrix.com
Dental	UHC	877-816-3596	www.myuhc.com
Vision	UHC	800-638-3120	www.myuhc.com
Life and AD&D	UHC	866-556-8298	
Long Term Disability (LTD)	UHC	866-556-8298	
Voluntary Life/AD&D	UHC	866-556-8298	

The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the guide and actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about the guide, please contact HR.