



# 2020 Benefits Orientation

For New Team Members





# Objectives

- Benefits Eligibility
- Overview of Benefits Programs
- How to Enroll in Your Benefits
- Available Resources

# Comprehensive Benefits Package

## Health Benefits

- Three Medical Plans
- Two Dental Plans
- Two Vision Plans
- Critical Illness
- Hospital Indemnity Plans

## Financial Security Benefits

- Life Insurance
- Employee Supplemental Life Insurance
- Dependent Life Insurances
- Short and Long-Term Disability
- Business Travel Accident Insurance
- 401(k) Plan

## Paid Time Off

- Accrued Time Off (Vacation and Sick)
- Holidays
- Parental Leave
- Community Service Leave

## Other Great Benefits

- Adoption Assistance
- Auto, Home and Pet Insurance
- Commuter Benefits
- Employee Assistance Plan (EAP)
- Employee Discounts
- Flexible Spending Accounts (Healthcare FSA, Dependent Care FSA)
- Identity Theft Services
- Legal Services
- Tuition Reimbursement

# Benefits Eligibility

If you are a.....	You're eligible for.....
Full-time or part-time regular employee scheduled to work 30 or more hours per week	ALL benefits
Temporary employee or an intern scheduled to work 30 or more hours per week	Medical, hospital indemnity plan, 401(k) Plan, business travel accident insurance, commuter benefits and employee discounts
Part-time regular employee scheduled to work less than 30 hours per week	401(k) Plan, business travel accident insurance, commuter benefits and employee discounts, Employees who are scheduled to work 20-29 hours are also eligible for paid time off to include holiday and ATO (vacation/sick time)
Temporary employee or an intern schedule to work less than 30 hours per week	401(k) Plan, business travel accident insurance, commuter benefits and employee discounts





## Enrolling in Your Benefits *(except 401k)*

How?	<a href="http://www.yourbenefitscenter.com">www.yourbenefitscenter.com</a>
When?	Enroll within 30 days of your hire date
Effective Date?	First of the month following your hire date. Team members hired on the first of the month are eligible for benefits as of the date of hire.

# Benefits Payroll Deductions

- Once your benefits become effective, a benefit premium will be due with each pay check that a benefit is effective.

For example, if hired on September 16, benefits are effective on October 1.  
Benefits deductions begin on October 11 pay date.

PAY DATE	PAY PERIOD END DATE
October 11	October 5
October 25	October 19

October						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		



## Health Benefits

- Medical Insurance
- Hospital Indemnity Plan
- Critical Illness Insurance
- Dental Insurance
- Vision Insurance

# Healthcare Lingo

## Annual Deductible

The amount you pay before the plan begins sharing the cost

## Out-of-Pocket Maximum

The most you'll pay in a year for eligible healthcare services. After you reach the out-of-pocket maximum, the plan covers 100% of eligible expenses for the remainder of the year.

## Coinsurance

The percentage of the cost you pay for a service after the plan's deductible.

## Copay

A fixed dollar amount you pay for a covered healthcare expense.

## In-Network Provider

Doctors, hospitals and service providers that contract with your healthcare plan are called in-network providers. You usually pay less when you use an in-network provider.

## Premiums

The amount that is deducted from your paycheck to pay for your coverage. Your medical, dental and vision plan premiums are deducted from your paycheck pre-tax\*

\*The cost of coverage for a domestic partner comes out of your paycheck after taxes.



# Medical Plans



South Carolina

[www.southcarolinablues.com](http://www.southcarolinablues.com)

## Core Plan

**2000 Plan with HSA**

**1400 Plan with HSA**

### Plan features:

- Use any doctor
- Save with in-network providers
- In-network preventive care covered at 100%
- Pharmacy Benefits
- Health Savings Account (HSA) (does not apply to the Core Plan)
- Blue CareOnDemand<sup>SM</sup>
- Essential Advocate<sup>SM</sup> (24 Hour Nurseline)
- Health Coaches
- RALLY
- Member Discounts
- Medical Plan ID Card

# Medical Plans



South Carolina

## Core Plan

Plan offers Higher Deductible and Out-of-Pocket Cost, but offers Copays for Office Visits and Prescriptions. Lowest paycheck cost.

## 2000 Plan

This plan is the middle offer. It is a qualified HSA plan.

## 1400 Plan

Plan offers the Lowest Deductible and Out-of-Pocket Cost. It is a qualified HSA plan. Highest paycheck cost.

### How the plans differ

- Deductibles
- Out of Pocket Maximums
- Copays
- Payroll contributions
- HSA vs no HSA

# Medical Plans



South Carolina

	CORE PLAN	2000 PLAN with HSA	1400 PLAN with HSA
	IN-NETWORK		
<b>Deductible (only needs to be met once per year)</b>	\$5,350 individual and \$10,700 family	\$2,000 individual and \$4,000 family	\$1,400 individual and \$2,800 family
<b>Coinsurance Percentage</b>	You pay 30% after deductible	You pay 20% after deductible	You pay 20% after deductible
<b>Out-of-Pocket Maximum</b>	\$6,850 individual and \$13,700 family	\$6,500 individual and \$13,000 family	\$3,050 individual and \$6,100 family
<b>Physician Office Visit</b>	You pay \$25 copay for Primary Care Physician (or \$60 copay for specialist), then plan pays 100%	You pay 20% after deductible	You pay 20% after deductible
<b>Inpatient Hospital Stay</b>	You pay 30% after deductible	You pay 20% after deductible	You pay 20% after deductible
<b>Urgent Care</b>	\$60 copay	You pay 20% after deductible	You pay 20% after deductible
<b>Emergency Room</b>	You pay 30% after deductible	You pay 20% after deductible	You pay 20% after deductible

The above is a brief summary of the plans. For plan specifics including costs, visit the Library tab on [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com).

# Prescription Drug Plan



South Carolina

	CORE PLAN	2000 PLAN with HSA	1400 PLAN with HSA
IN-NETWORK			
<b>31 Day Supply from a Retail Pharmacy</b>	<p><b>Generic:</b> \$20 copayment</p> <p><b>Preferred:</b> \$40 copayment</p> <p><b>Non-Preferred:</b> \$80 copayment</p>	<p><b>Generic:</b> \$10 copayment after deductible</p> <p><b>Preferred:</b> 20% coinsurance after deductible (\$30 minimum / \$60 maximum)</p> <p><b>Non-Preferred:</b> 20% coinsurance after deductible (\$40 minimum / \$80 maximum)</p>	<p><b>Generic:</b> \$10 copayment after deductible</p> <p><b>Preferred:</b> 20% coinsurance after deductible (\$30 minimum / \$60 maximum)</p> <p><b>Non-Preferred:</b> 20% coinsurance after deductible (\$40 minimum / \$80 maximum)</p>
<b>90 Day Mail-Order Supply</b>	<p><b>Generic:</b> \$40 copayment</p> <p><b>Preferred:</b> \$90 copayment</p> <p><b>Non-Preferred:</b> \$200 copayment</p>	<p><b>Generic:</b> \$20 copayment after deductible</p> <p><b>Preferred:</b> 20% coinsurance after deductible (\$60 minimum / \$120 maximum)</p> <p><b>Non-Preferred:</b> 20% coinsurance after deductible (\$80 minimum / \$160 maximum)</p>	<p><b>Generic:</b> \$20 copayment after deductible</p> <p><b>Preferred:</b> 20% coinsurance after deductible (\$60 minimum / \$120 maximum)</p> <p><b>Non-Preferred:</b> 20% coinsurance after deductible (\$80 minimum / \$160 maximum)</p>

The above is a brief summary of the plans. For plan specifics including out-of-network coverage, visit the Library tab on [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com).

# Prescription Drug Plan

- Mandatory generic requirement under all three medical plans
- If you obtain a brand name drug and a generic equivalent or over-the-counter drug is available, you will be required to pay:
  1. the difference between the cost of the generic equivalent (or over-the-counter drug) and the higher cost of the brand name drug plus
  2. the prescription drug copayment or coinsurance for the brand name drug.

For example:

You are taking a brand name drug with a cost of \$250. The retail cost for the generic is \$45. You are enrolled in the CORE Plan.

For the brand name drug, you will pay:

	\$250 (the brand name drug retail cost)
Minus	\$ 45 (the generic drug retail cost)
Plus	<u>\$ 40 (the preferred brand copay)</u>
Total	\$245 (your cost)

If you use the generic equivalent, you would only pay \$20, the generic copay amount under the CORE plan.



# What is a Health Savings Account (HSA)?

## 2000 and 1400 Medical Plans

HSA is a tax-advantaged account that you own. Funds can be used to pay for qualified medical expenses today or can be saved for future expenses.

Account advantages:

- You don't pay income taxes on the money you put in your account: No tax on contributions; No tax on interest earnings; No tax when funds are used for qualified health expenses
- Earn interest on cash account and invest when your balance reaches a certain amount
- No "Use it or Lose It"
- Portable – it stays with you when you leave your company or retire

BCBS of South Carolina's HSA Administrator: HSA Bank

# Why Contribute to Your HSA

Jan makes \$38,000 per year

She believes she is going to have \$520 in out-of-pocket medical expenses for the year.

Annual Salary:	\$38,000	Annual Salary:	\$38,000
Amount to her HSA:	\$520	Amount to her HSA:	\$0
Total Taxable Income:	\$37,480	Total Taxable Income:	\$38,000
Fed Income Taxes:	\$ 2,839	Fed Income Taxes:	\$ 2,905
FICA:	<u>\$2,868</u>	FICA:	<u>\$ 2,907</u>
Total Take Home Pay:	\$31,773	Total Take Home Pay:	\$32,188
		Medical Expenses:	<u>\$ 520</u>
		Total Take Home Pay	\$31,668

Jan saves **\$105** by using her HSA to pay for her medical expenses

Example is illustrative only. Your individual tax situation may differ.

# HSA Contribution Limits

## HSA Medical Plans

### 2020 HSA Contribution Limits:

- The IRS sets limits on the amount that may be contributed each year. For 2020, these limits are:
  - \$3,550 for employee only coverage
  - \$7,100 for employee + dependent(s) coverages
  - If you are age 55 or older, you may make an additional catch-up contribution of \$1,000.
- Contribution limits includes both employee and employer contributions.
- Limit does not include catch-up contributions, which can be made in addition to maximum.



# HSA Debit Card

## HSA Medical Plans

BCBS of South Carolina's HSA Administrator: HSA Bank

- Manage your HSA account online at [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com)
  - Check balance
  - Pay bills online
  - Order additional cards
  - Withdraw funds
  - Invest your HSA dollars
- HSA Bank Customer Service: 1-866-471-5946



# Earn an Employer Contribution to Your HSA

## HSA Medical Plans

Complete the online health survey and either

- 1) Three missions on the Rally tool; or
- 2) Your annual wellness exam

For each action, you'll receive an employer contribution to your HSA of:

- \$200\* for employee only medical plan coverage (total contribution of \$400)
- \$400\* for employee + dependent(s) medical plan coverage (total contribution of \$800)

Amount is pro-rated for new hires

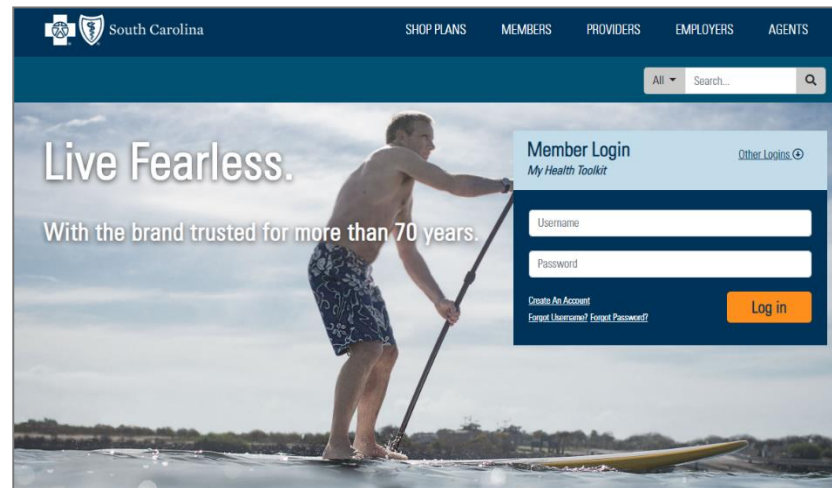
- For example, if your effective date of medical coverage is March 1 and you elect employee only coverage and complete the online health survey, your prorated employer contribution will be:
- $(\$400 \text{ annually} \div 12 \text{ months}) \times 10 \text{ remaining months} = \$333.33 \text{ employer contribution}$



# Earn an Employer Contribution to Your HSA

## HSA Medical Plans

- To complete the online health survey or a Rally mission, log into the My Health Toolkit at [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com).
- The employer funding will be deposited into your HSA by the end of the next month following your completion of your eligible healthy activity.



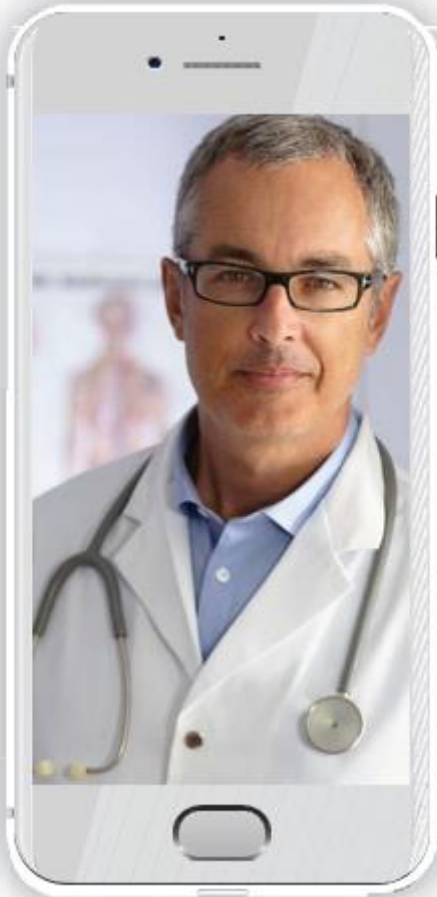
# Health Incentive Account

## CORE Medical Plan

Get rewarded for making healthy choices

- Complete the online health survey and either
  - Three missions on the Rally tool; or
  - Your annual wellness exam
- Earn a \$625 credit towards the plan's deductible for each activity you complete (for a total credit of \$1,250)
  - If your spouse is enrolled in the plan, he/she can also earn \$625 for each activity up to \$1,250.
  - You and your spouse must complete each activity prior to meeting the Core Plan's deductible.
- The deductible credit(s) will appear in your summary explanation of benefits (EOB).
- To complete the online health survey or a Rally mission, log into the My Health Toolkit at [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com).

# Blue CareOnDemand<sup>SM</sup> Video Visits Health Incentive Account



## Consult with a doctor 24/7

To Access Blue CareOnDemand:

- Visit [www.BlueCareOnDemandSC.com](http://www.BlueCareOnDemandSC.com)
- or download the Blue CareOnDemand app for your Apple or Android device

*You will need to register and create a patient profile before your first visit.*

What is the cost for each consultation?

- \$15 per visit if enrolled in the Core medical plan
- \$59 per visit if enrolled in a medical plan with an HSA. The fee will be applied to your deductible and out-of-pocket maximum

# Health Coaching

One-on-one coaching from a health care professional for free.



## *Behavioral and chronic disease coaching*

- Attention deficit hyperactivity disorder (ADHD)
- Asthma (pediatric and adult)
- Bipolar disorder
- Coronary artery disease (CAD)
- Congestive heart failure (CHF)
- Chronic obstructive pulmonary disease (COPD)
- Depression

- Diabetes (adult and pediatric)
- Hypertension (high blood pressure)
- Hyperlipidemia (high cholesterol)
- Metabolic health
- Migraine
- Recovery support

## *Wellness and healthy lifestyle coaching*

- Back care
- Maternity (pregnancy and postpartum care)
- Stress management

- Tobacco-free living
- Weight management (adults and children)

- To enroll, call the health coaching team at 1-855-838-5897.
- Or to learn more and download resources, log in to the My Health Toolkit at [www.SouthCarolinaBlues.com](http://www.SouthCarolinaBlues.com) then select Wellness/Health Coaching.

# 24/7 Nurseline – Essential Advocate<sup>SM</sup>

Speak with a registered nurse for free.

Get help with:

- Concerns about medications and side effects.
- Finding a doctor, specialist or urgent care center.
- Scheduling an appointment with your doctor.
- Comparing costs before scheduling medical treatment.
- Preparing for surgery and taking steps for a healthy recovery.
- Locating helpful programs and resources in your community.



**To speak with a nurse, call Essential Advocate<sup>SM</sup> at 1-888-521-2583.**



# Hospital Indemnity Plan (HIP)



- Supplements your medical plan and pays a lump-sum cash benefit plus daily benefits directly to you for a covered inpatient hospital stay
- You can use the cash benefit to help pay for your medical plan deductible, coinsurance or everyday living expenses
- There are two Hospital Indemnity Plan options:
  - Aetna HIP 2000
  - Aetna HIP 1400
- Under each HIP option, two types of benefits are paid:
  - **A lump-sum benefit** of \$1,400 or \$2,000 for one stay in the hospital during the coverage year; **plus**
  - **A daily benefit** of \$100 per day, for up to 100 days that a member is an inpatient in a hospital per coverage year.

# Critical Illness Insurance



Coverage Options	
Employee	Benefit of \$10,000, \$20,000 or \$30,000
Spouse/Domestic Partner	100% of employee's benefit amount*
Dependent Child(ren)	100% of employee's benefit amount*
Rates	Varies by election

*\*Coverage is guaranteed provided (1) the employee is actively at work and (2) any dependents to be covered are not under medical restriction as described in the Certificate. Some states require the insured to have medical coverage.*

- Covered conditions include cancer, bone marrow and organ transplants, heart attack, stroke and kidney failure.
- A pre-existing condition clause does not apply.
- A complete list of covered conditions is available on [www.yourbenefitcenter.com](http://www.yourbenefitcenter.com)

# Dental Plan



	Basic Plan		Premium Plan	
	PPO Dentist	Premier Dentist	PPO Dentist	Premier Dentist
<b>Annual Deductible</b>	\$50 Individual and \$150 per Family		\$50 Individual and \$150 per Family	
<b>Annual Benefit Maximum per Covered Individual</b>	\$1,000	\$750	\$2,000	\$2,000
<b>Diagnostic and Preventive Services</b> (exams, cleanings, sealants, x-rays)	You pay 0% Deductible does not apply	You pay 50% Deductible does not apply	You pay 0% Deductible does not apply	You pay 0% Deductible does not apply
<b>Basic Services</b> (fillings, root canals, treatment for gum disease, oral surgery)	You pay 20% after the deductible	You pay 50% after the deductible	You pay 10% after the deductible	You pay 20% after the deductible
<b>Major Restorative Services</b> (crowns, bridges, dentures, implants)	You pay 50% after the deductible	You pay 50% after the deductible	You pay 40% after the deductible	You pay 50% after the deductible
<b>Orthodontia</b> (only for dependent children under age 19)	Not covered	Not covered	You pay 50% Maximum lifetime benefit of \$2,000 / child	You pay 50% Maximum lifetime benefit of \$2,000 / child

The above is a brief summary of the plans. For plan specifics including costs, visit the Library tab on [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com).

# Vision Plan



	VSP Standard Plan	VSP Premium Plan
<b>WellVision Exam</b>	\$10 copay	\$10 copay
<b>Prescription Glasses</b>	\$20 copay	\$10 copay
<b>Frames</b>	\$150 allowance included in prescription glasses	\$225 allowance included in prescription glasses
<b>Lenses</b>	Included in Prescription Glasses	Included in Prescription Glasses
<b>Lens Enhancements</b>	Up to \$175	\$0
<b>Contacts</b> (instead of glasses)	\$120 allowance	\$200 allowance

The above is a brief summary of the plans. For plan specifics including costs, visit the Library tab on [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com).

# Financial Security Benefits

- Life Insurance
- Employee Supplemental Life Insurance
- Dependent Life Insurances
- Short and Long-Term Disability
- Business Travel Accident Insurance
- 401(k) Plan with Employer Match



# Life and AD&D Insurance



Insurance	Coverage Amounts	Employee or Employer Paid?
Basic Life	\$50,000 or 1x salary	Employer
Basic AD&D	1x salary	
Employee Supplemental Life Spouse/Domestic Partner Life Child Life Voluntary AD&D Rates	1x - 6x salary up to \$1 million Up to \$300,000. Amount may not exceed 100% of the employee's supplemental life \$5,000 increments up to \$20,000 Employee and family coverage 1x - 6x salary up to \$1 million Vary by election	Employee

# Business Travel Accident Insurance

- A death benefit of 2x annual salary (minimum benefit of \$100,000/maximum benefit of \$1,000,000) in the event of loss of life while conducting business travel
- Includes worldwide travel assistance that provides emergency medical, emergency travel, and pre-trip assistance.

Plan details located on [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com)

# Short and Long Term Disability

## Short Term Disability (Employer Paid)

Income Replacement	60% of weekly base salary
Benefit Effective Date	6 <sup>th</sup> regularly scheduled workday of absence
Maximum Benefit Period	182 calendar days in a 12 month period

## Long Term Disability (Employee Paid)

Income Replacement	60% of monthly base salary (max monthly benefit of \$25,000)
Benefit Effective Date	180 <sup>th</sup> day of absence
Maximum Benefit Period	Social Security Retirement Age
Employee Premium	\$0.182 per \$100 of covered salary per year based on your annual pay
Tax Treatment	Benefit is not taxable



# 401(k) Plan

Provision	Details
Enroll, change or stop contributions	At any time
Employee Contributions	1%-60% of your eligible compensation each pay period up to the IRS annual maximum
Eligible Compensation	Salary, overtime, bonuses*
2020 IRS Annual Maximum	\$19,500 Can contribute an additional \$6,500 if age 50 or older for a total of \$26,000

\* If you contributed to a prior employer's plan in 2020, those contributions, along with the contributions you make to the HireRight 401(k) Plan count towards the IRS limit

\*\* For a complete list of eligible compensation, refer to the 401(k) Plan SPD

\*\*\* The payroll system will not include any contributions you may have made during the calendar year with a prior employer. When deciding how much to contribute to the HireRight 401(k), you will need to include any contributions you made with your prior employer if you believe you may reach the IRS maximum.

# 401(k) Plan – Enroll Today!

- To enroll, contact Fidelity Investments
  - Website: [www.401k.com](http://www.401k.com)
    - Enrollment Guide, Summary Plan Description, Contribution Calculator and Retirement Income Simulator
  - Phone: 1-800-835-5097
  - Easy Enroll
    - In just 60 seconds, get started in the Company's 401(k) plan
    - Easy Enroll at: [www.NetBenefits.com/Easy](http://www.NetBenefits.com/Easy)
    - After enrolling, you can adjust your approach at any time to fit your changing needs
    - One-on-one guidance is always available



## Other Great Benefits

- Adoption Assistance
- Auto, Home and Pet Insurance
- Educational Assistance Program
- Employee Assistance Program (EAP)
- Employee Discounts
- Health and Dependent Care Flexible Spending Accounts
- Legal and Identity Theft Benefits
- Transportation Commuter Spending Accounts
- Accrued Time Off

# Adoption Assistance

- The Company will reimburse allowable expenses up to a maximum of \$2,500 per child once the adoption is final
- The child being adopted must be 18 years of age or younger



Policy and forms located on [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com)

# Auto, Home and Pet Insurance



Plan	Services	Cost per Paycheck
MetLife Auto & Home <sup>®</sup>	<ul style="list-style-type: none"><li>• Special group discounts</li><li>• Payroll deduction</li><li>• Tenure discount</li><li>• Policies available include auto, home, condo &amp; renter's insurance, RVs, boats, motorcycles and more.</li></ul>	Contact MetLife for rates
Veterinary Pet Insurance (VPI)	<ul style="list-style-type: none"><li>• A variety of plans available to fit your needs and your budget</li><li>• Visit any veterinarian—even specialists and emergency providers</li><li>• Medical policies cover diagnostic tests, X-rays, prescriptions, surgeries, hospitalization and more</li><li>• Optional wellness coverage is available for preventative care</li></ul>	Contact MetLife for rates

**To enroll, call MetLife at 1-800-438-6388**

# Educational Assistance Program

Program Details	
Yearly Maximum	\$5,250
Reimbursement Amount per Grade	A or B: 100% C: 75% Below C: No reimbursement Pass in a Pass/Fail Course: 75%
Reimbursable Items	Tuition, Books, Parking, Lab Fees
Obligation to Stay	24 Months
Accreditation	CHEA

Policy and forms located on [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com)

# Employee Assistance Program (EAP)

- Helps you plan for and manage events that affect your work, health and family
- Confidential support, resources and information
- Available to you and your dependents
- No enrollment is necessary and this benefit is 100% employer paid.

ComPsych Guidance Resources

Call: 1-855-649-3017 (TDD: 1-800-697-0353)

Visit: [www.guidanceresources.com](http://www.guidanceresources.com)

To register, use company Web ID: **HIRERIGHT**

# Employee Discount Program

## Discount Categories

Banking	Entertainment
Car Purchase & Rentals	Home Relocation Services
Cellular Phones	Internet/TV/Home Phone Services
Clothing	Wellness
Computers & Electronics	Student Loan Refinancing
And more.....	



To view Corporate Discounts, visit the Knowledge base on AskHR



# Health and Dependent Care FSA

Plan	IRS Annual Maximum
<b>Health Care Flexible Spending Account (FSA)</b> (Not available if enrolling in an HSA medical plan)	\$2,700 per year to pay for eligible out-of-pocket health care expenses
<b>Dependent Care Flexible Spending Account (FSA)</b>	\$5,000 per year to pay for eligible out-of-pocket dependent care expenses (or \$2,500 if married filing separate tax returns)

**Important!** You must incur qualified expenses to cover the money in your account(s) by December 31, 2020, and submit any claims for reimbursement by March 31, 2021; otherwise, you lose any remaining money. Leftover money cannot be rolled over into the next plan year.

For a complete list of qualified health care and dependent care expenses, visit [www.irs.gov](http://www.irs.gov), click on “Forms and Publications” and then select IRS Publication 502 for health care expenses and IRS Publication 503 for dependent care expenses.

# Legal and Identity Theft Services



Plan	Services
LegalShield Services	<ul style="list-style-type: none"><li>• Advice on an unlimited number of topics</li><li>• Letters and phone calls on your behalf</li><li>• Legal document review</li><li>• Will preparation</li><li>• Video law library</li></ul>
IDShield	<ul style="list-style-type: none"><li>• Up-to-date credit reports and personal credit scores</li><li>• Continuous credit report monitoring</li><li>• New activity email alerts</li><li>• Identity theft restoration services</li><li>• Fraud alerts issuance</li><li>• Local/national database searches for activity in your name</li></ul>

# Transportation/Commuter Accounts



Plan	IRS Pre-tax Monthly Maximum
Parking	\$270
Mass Transit	\$270

- To enroll, visit [www.wageworks.com](http://www.wageworks.com)
- Enrollment, changes or cancellations must be made by the 4th of the month prior to the benefit commuting month.

# Accrued Time Off (ATO)

## ATO Accrual Schedule

Length of Service	Accrual Rate per Pay Period (in hours)	Maximum Annual ATO Accrued
Completed 0 up to 1 year	6.15 hours per pay period	160 hours
Completed 2 years up to 4 years	7.69 hours per pay period	200 hours
Completed 5 years +	9.23 hours per pay period	240 hours

- Team members are eligible to carry over a maximum of fifty-six (56) hours of unused ATO into the next calendar year, subject to applicable law.
- The Accrued Time Off policy can be found in the Knowledge base on AskHR under Policies.

# Time Off Programs: Holiday Calendar

8 Holidays	2 Floating Holidays		
New Year's Day	(1) Team Members may use the floating holidays on or between January 1 to December 31		
Martin Luther King Jr Day			
Memorial Day	(2) <b><u>New Team Members</u></b> must be hired 90 days prior to using floating holidays. Floating holiday hours for the new team members are granted per the following schedule		
Independence Day			
Labor Day	Team members hired on or between:		
Thanksgiving Day			
Day after Thanksgiving	JAN 1 – JUNE 30	JULY 1 – SEPT 30	OCT 1 – DEC 31
Christmas Day	16 hours	8 hours	0 hours

Payroll and holiday calendars can be found on AskHR under Payroll.

# Time Off Programs

## Parental Leave

- New fathers and mothers are eligible for five days of paid leave at 100% of salary following the birth, adoption or placement of a child.
- For new mothers who give birth, paid parental leave may be used during the first week of short-term disability (the waiting period).

## Community Service

- Time-off to volunteer for one day (8 hours) per calendar year (whole or half day increments).
- Team members regularly working 20 hours or more per week are eligible.
- The community service organization must be a 501(c)(3) non-profit organization, Company-recognized volunteer activities or a child's school-related activities.

# Where to Get Benefits Information

**Your Benefits Center**

**1-844-217-8215**

**8am to 11pm ET, Monday – Friday**

**[www.yourbenefitscenter.com](http://www.yourbenefitscenter.com)**

# Next Steps

- Copy of the New Hire Benefits PowerPoint can be found on [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com) under the Benefits Info tab.
- Take a moment to read the resources available to you on [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com).
- Enroll in new hire benefits. Once you receive your welcome e-mail, log onto [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com) to enroll in your new hire benefits.
- Upon receipt of the Fidelity enrollment email, log on to Fidelity's website, [www.401k.com](http://www.401k.com), to enroll in the 401(k) Plan.



# Where to get Benefits information

## Your Benefits Center

- 1-844-217-8215
- 8am to 11pm ET, Monday – Friday
- [www.yourbenefitscenter.com](http://www.yourbenefitscenter.com)



# Thank you.



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