Sonny's Enterprises

Open Enrollment 2024-2025



This is an **ACTIVE** enrollment and if no action is taken, you will miss out on benefits!



- Open Enrollment now through Friday August 30th
- Benefit elections can be made through your ADP Self-Service at workforce.adp.com
- Toggle to: Myself>Benefits>Enrollments
- Be sure to Submit enrollment (you can still make changes until August 30th)
- New benefits will start 10/1/2024 please make sure to update your insurance information with your providers prior to receiving services

Qualifying Life Events

> Open Enrollment elections are Effective 10/1/2024 until 9/30/2025

> You are committed to your elections for the next 12 months unless you experience a Qualifying Life Event (QLE), which may include:

- ✓ Marriage / Divorce
- Birth/Adoption/Legal custody of a child
- ✓ Gain or Loss of other Coverage
- Dependent child reaches age 26 (coverage ends at the end of the calendar year)

Your HR Department must be notified with changes due to a Qualifying Event

>Notification must occur <u>within 30 days</u> of the event



Carrier Highlights

Expanded partnership with United Healthcare

- ➢Medical Coverage will be remaining with UHC (options)
- Dental Coverage will be moving to UHC
- ➢ Vision Coverage will be moving to UHC
- ➢Voluntary Supplemental will be moving to UHC

Life and Disability will be remaining with Mutual of Omaha

(new plan UnitedHealthcare



Medical

United Healthcare

Overview

Plan options are changing

- The Choice+ 4000 and Choice+ 750 copay-based plans are no longer active
- The Choice 3000 & Choice 1500 will continue
- We are introducing a new medical plan that includes a Health Savings Account
- There remains a \$0 cost medical option for employee only coverage

UHC Medica

IN-NETWORK MEDICAL BENEFITS	CHOICE EPO 1500	CHOICE EPO 3000
Deductible (Individual / Family)	\$1,500 / \$3,000	\$3,000 / \$6,000
Is Deductible Calendar Year or Policy Year?	Policy Year	Policy Year
Is Deductible Embedded or Non Embedded	Embedded	Embedded
Out of Pocket Maximum (Individual / Family)	\$3,500 / \$7,000	\$5,500 / \$11,000
Coinsurance	20%	20%
Prescription Drugs	\$10 / \$35 / \$60 / 25%	\$10 / \$40 / \$85 / 25%
PHYSICIAN OFFICE VISITS		
Primary Care Physician	\$25	\$30
Specialist	\$50	\$55
Designated Virtual Network Provider	\$10	\$10
HOSPITALIZATION / OUTPATIENT SERVIC	CES	
Inpatient Hospitalization (Facility)	20% After deductible	20% After deductible
Outpatient Surgical Care (Hospital Facility)	20% After deductible	20% After deductible
Emergency Room	\$250	\$350
Urgent Care	\$75	\$75

Please remember:

In-Network with UHC is the **Choice Network**

Deductible and Out-of-Pocket Maximum resets as of 10/1/2024



FITS CHOICE+ HSA

IN-NETWORK MEDICAL BENEFITS

Deductible (Individual / Family) Is Deductible Calendar Year or Policy Year? Is Deductible Embedded or Non Embedded Out of Pocket Maximum (Individual / Family) Coinsurance Prescription Drugs PHYSICIAN OFFICE VISITS Primary Care Physician Specialist Designated Virtual Network Provider HOSPITALIZATION / OUTPATIENT SERVICES

Inpatient Hospitalization (Facility) Outpatient Surgical Care (Hospital Facility)

Emergency Room

Urgent Care

OUT-OF-NETWORK BENEFITS

Deductible (Individual / Family) Out of Pocket Maximum (Individual / Family) Coinsurance

\$4,000 / \$8,000 Policy Year Non-Embedded \$6,500 / \$13,000 0% Deductible first, then \$10 / \$50 / \$100 / 10%

Deductible + Coinsurance Deductible + Coinsurance \$0 not subject to the Deductible

Deductible + Coinsurance Deductible + Coinsurance Deductible + Coinsurance Deductible + Coinsurance

> \$8,000 / \$16,000 \$13,000 / \$26,000

New - HSA Medical Plan

Uses the Choice+ Network

All services subject to the Deductible first. You will receive an **annual employer HSA contribution** of \$500 for employee coverage / \$1,000 for employee and dependent coverage

Employee Only coverage is paid for 100% by Sonny's (Free to you!)

Health Savings Account (HSA)

Why HSA?

- Contributions are tax-free
- Company will deposit money into the HSA for you

 also tax-free
- Funds in the HSA are YOURS they go with you if you leave, they do not expire
- Your HSA money can earn interest and be invested, and the growth is tax-free
- HSA funds can be used to cover medical, dental, and vision expenses (tax-free!)

What's the catch?

- Only available when you enroll in the Choice+ HSA medical plan
- You cannot be enrolled in Medicare or Tri-Care
- You cannot be enrolled in any other health plan that is not an HSA-eligible plan (like a spouse's plan)
- You cannot have the Health Care FSA

	IRS Maximum Contribution	Sonny's Contribution	Maximum you can Contribute
Employee Only	\$4,150	\$500	\$3,650
Employee and dependent(s)	\$8,300	\$1,000	\$7,300

HSA OptumBank

Employer / Employee Contributions Employer funding will be split into 2 deposits (10/1/2024 and 4/1/2025)

You can change your personal contributions any time

You may need to verify your account from OptumBank prior to receiving your HSA card Employees currently enrolled in the Health Care FSA Action Item: You will need to contact HR prior to being able to enroll in the HSA

Remaining FSA contributions and funds will be transferred to a Limited Purpose FSA to be used for qualifying Dental and Vision expenses.



UHC Medical Payroll Deductions

	CHOICE+ HSA	CHOICE EPO 3000	CHOICE EPO 1500
Employee Only	\$0.00	\$40.87	\$80.35
Employee + Spouse	\$176.33	\$249.65	\$295.30
Employee + Child(ren)	\$144.41	\$204.70	\$244.28
Family	\$262.67	\$378.94	\$445.97

Payroll deductions are Bi-Weekly and are pre-tax

Sonny's is offering the 100% Employer Paid Choice+ HSA Medical plan to all Full-Time eligible employees

UnitedHealthcare (UHC) – New plan designs, including an HSA option Network Name: Choice (In Network only) and Choice+ (In & Out-of-Network Coverage)

- Register on <u>myUHC.com</u>
- Download mobile app
- ✓ Access to ID cards: view, print or email
- ✓ Find In-Network doctors and facilities
- ✓ View your claims and payment
- ✓ Easily order prescription refills
- \checkmark Access health and wellness tools and resources
- \checkmark Video chat with a doctor 24/7







Dental

United Healthcare



BENEFITS SUMMARY	DHMO EXCLUSIVE NETWORK PLAN
PREVENTIVE SERVICES-DEDUCTIBLE W	VAIVED
Oral Evaluations	
Prophylaxis: Cleanings	
Flouride Treatment (child only)	*0
Bitewing X-rays, Full Mouth X-rays	\$O
Sealants	
Space Maintainers	
BASIC SERVICES	
Amalgam Restorations (Silver Fillings)	\$0
Simple Extractions	\$10
MAJOR SERVICES	
Periodontal Scaling	\$36
Dentures	\$210+
Crown	\$195+
ORTHODONTIA SERVICES	
Diagnostics and Treatments (age limit: 30)	Child: \$1,850+ Adult: \$1,950+



UHC Dental HMO uses the National Exclusive Network

You will be receiving 2 ID Cards in the mail after 10/1/2024

Digital versions can be viewed at <u>www.myuhc.com</u>

Make sure to get a Pre-Treatment Estimate prior to receiving Major Services

You must stay in-network for services, however, you no longer need to designate a Primary Care Dentist!



BENEFITS SUMMARY	DENTAL PPO
Annual Deductible(Individual/Family)	\$50 / \$150
Annual Benefit Maximum	\$2,500
Out-of-Network is MAC or UCR?	MAC
Out-of-Network is mad of UCR?	IN-NETWORK & OUT-OF-NETWORK
PREVENTIVE SERVICES-DEDUCTIBLE W/	AIVED
Prophylaxis: Cleanings	
Flouride Treatment (child only)	100%
Bitewing X-rays, Full Mouth X-rays	No deductible
Sealants	
Space Maintainers	
BASIC SERVICES	
Amalgam Restorations (Silver Fillings)	100%
Simple Extractions	Deductible applies
MAJOR SERVICES	
Periodontal Scaling	60%
Dentures	Deductible applies
Crown	

ORTHODONTIA SERVICES

Diagnostics and Treatments

UHC Dental uses the UHC National Options PPO 30 Network for their Dental PPO plan

Digital ID cards can be found on <u>www.myuhc.com</u>

Preventive Services are covered at 100% but will count towards your Annual Benefit Maximum

Make sure to get a Pre-Treatment Estimate prior to receiving Major Services, or use the Dental Cost Calculator on <u>www.myuhc.com</u>

50% to \$1,000 Lifetime (Dependents under age 19 only)



UHC Dental Payroll Deductions

	Exclusive Network Plan	PPO
Employee Only	\$6.28	\$13.80
Employee + Spouse	\$10.99	\$27.60
Employee + Child(ren)	\$13.61	\$39.07
Family	\$17.27	\$53.65

Payroll deductions are Bi-Weekly and are pre-tax

Vision

United Healthcare





BENEFIT SUMMARY	UHC VISION IN-NETWORK	OUT-OF-NETWORK	FREQUENCY
Eye Examination	\$10	\$40 allowance	12 Months
Materials Copay	\$10		12 Months
Eyeglass Frames	\$150 allowance; up to 30% discount on amount over allowance	\$45 allowance	24 Months
STANDARD EYEGLASS L	ENSES		
Single Vision		\$40 allowance	
Bifocal	Covered 100% after \$10 copay	\$60 allowance	12 Months
Trifocal	Covered 100% after \$10 copay	\$80 allowance	12 Months
Lenticular		\$80 allowance	
CONTACT LENSES (IN LIEU OF EYEGLASSES)			
Elective	\$160 allowance	\$135 allowance	
Contact Fitting & Evaluation	\$60 allowance		12 Months
Medically Necessary	Covered 100%	\$210 allowance	



Please Note: Contacts and Eyeglasses can be purchased in the same year; however, Allowance will only be applied once per year.



UHC Vision Payroll Deductions

	PPO
Employee Only	\$3.79
Employee + Spouse	\$6.38
Employee + Child(ren)	\$6.51
Family	\$10.29

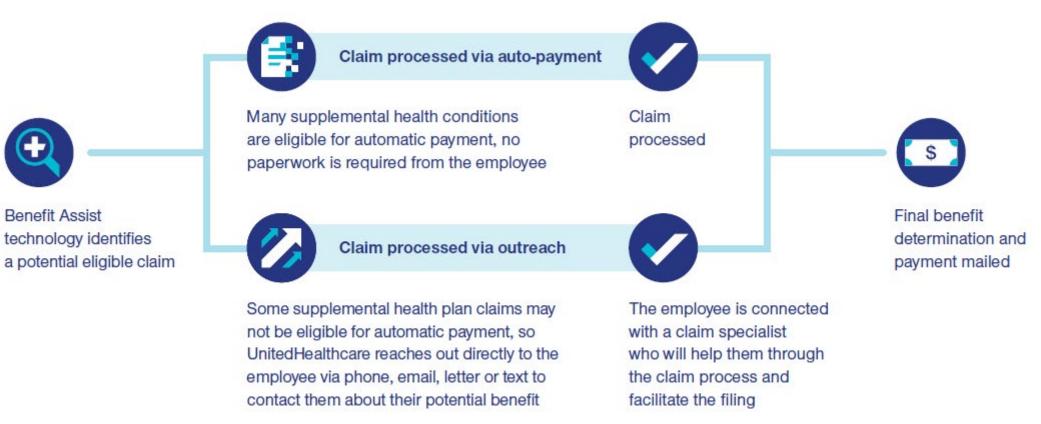
Payroll deductions are Bi-Weekly and are pre-tax

Voluntary Coverage

United Healthcare

Benefit Assist

Benefit Assist



Benefit Assist is available when you enroll in one of our UHC medical plans and one of the Voluntary plans

Benefit Assist

Examples of automatic payments



Group Voluntary Accident On and Off the Job

Group Hospital Indemnity

\$1,500 and \$2,500 Admission benefitsCan be used for maternity\$100 Wellness Benefit included

Group Voluntary Critical Illness \$10,000 and \$20,000 Benefits \$100 Wellness Benefit Allstate will no longer be offered.

Any questions on your current Allstate plans, please contact your Allstate agent: Gavin Williams

info@americaninsuranceplus.com

Life & Disability

Mutual of Omaha



Mutual Of Omaha Basic Life and AD&D





➤What is a Primary Beneficiary?

> What is a Contingent Beneficiary?

Beneficiaries can be updated at anytime through ADP

Voluntary Life + AD&D



- \$500,000 for Employee benefit (but no more than 5x your annual salary)
- \$250,000 for Spouse benefit (Not to exceed your benefit amount)
- > \$10,000 for Child benefit

Evidence of Insurability (EOI)
 will be needed for current
 employees electing this
 benefit and new hires
 electing <u>above</u> the Guarantee
 Issue amounts

Benefit will not be active until EOI has been submitted and approved by Mutual of Omaha

Employer Paid Short-Term Disability

Benefit Summary		
Elimination Period for Accident	7 days	
Elimination Period for liness	7 days	
Benefit Duration	26 Weeks	
Benefit Percent	60%	
Benefit Maximum	\$1,000 per week	

Website: <u>www.mutualofomaha.com</u> Phone: 800-228-7104





Voluntary Long-Term Disability

Benefit Summary		
180 days		
up to 60% of monthly salary		
Social Security Normal Retirement Age as long as you remain disabled		
\$6,000 per month		
Voluntary Vocational Rehabilitation Benefit Survivor Benefit		

Pre-existing conditions:

A pre-existing condition is a condition, regardless of cause, for which medical advice, diagnosis, care or treatment was recommended or received in the **12 months prior** to your enrollment date. The plan will not pay benefits for any pre-existing conditions that result in disability during your first 12 consecutive months of coverage.



Prepaid Legal and Identity Theft Protection

LegalShield / IDShield



LegalShield[®]

To learn more about LegalShield and IDShield please visit: Have You Ever... https://shieldbenefits.com/sonnys/overview or scan the QR code.

- Needed your Will prepared or updated?
- □ Signed a contract?
- □ Received a moving traffic violation?
- Worried about being a victim of identity theft?

The LegalShield Membership Includes:

- Dedicated Law Firm Direct access, no call center
- Legal Advice/Consultation On unlimited personal issues
- Letters/Calls Made on your behalf
- Contracts/Documents Reviewed Up to 15 pages
- Residential Loan Document Assistance For the purchase of your primary residence
- Will Preparation Living Will, Health Care Power of Attorney
- Speeding Ticket Assistance Upload your speeding ticket from the mobile app directly to law firm
- IRS Audit Assistance (Begins with the tax return due April 15th of the year you enroll)
- Trial Defense (If named defendant/respondent in a covered civil action suit)
- Uncontested Divorce, Separation, Adoption and/or Name Change Representation (Available 90 days after enrollment)
- 25% Preferred Member Discount (Bankruptcy, criminal charges, DUI, personal injury, etc.)
- 24/7 Emergency Access For covered situations

- Been concerned about your child's identity?
- Had social media accounts? (Facebook, Instagram, Twitter, Linkedin, Youtube)



IDShield[®]

The IDShield Membership Includes:

- Credit Monitoring Continuous credit monitoring through Experian
- Online Privacy Management IDShield provides consultation and guidance on ways participants can protect their privacy and personally identifiable information across the internet and on their smart devices.
- Reputation Management & Score Scans social media accounts for existing content that could be damaging to participants' online reputation. Ranks your online reputation risk by giving you a score based off the content found on your social media accounts.
- Financial Account Monitoring Accounts monitored include checking, savings, employer 401k accounts, loans and more.
- \$3 Million Protection Policy Coverage for lost wages, legal defense fees, stolen funds and more
- Unlimited Service Guarantee Ensures that we won't give up until your identity is restored!
- Identity Restoration Performed by Licensed Private Investigators to restore your identity to its pre-theft status.
- 24/7 Emergency Access In the event of an identity theft emergency

Flexible Spending Accounts

iSolved





Current Plan Flexible Spending Accounts (FSA) 1/1/2024 - 12/31/2024

More information to come soon for 2025 - Enrollment period typically in NOVEMBER

Please note

If you are currently participating in the Health Care FSA and want to elect the HSA medical plan, please contact your HR Team. Any remaining funds will be moved to a Limited Purpose Flexible Spending Account.

You will not be eligible for the 2025 Health Care FSA account if you are enrolled in the Health Savings Account.

NEXT STEPS



>Open Enrollment Period: Now through Friday, August 30th

- Elections through ADP remember to Submit
- ➢ If you do not take any action, your benefits may not continue
- >Any questions while enrolling??? Contact your IOA Benefit Team or HRBenefits@sonnysdirect.com

➢ Review your elections carefully in ADP − it will show you Enrolled benefits but will not show you benefits you did not review

HRBenefits@sonnysdirect.com

Wpb.benefits@ioausa.com or call 877-446-0424

Plan changes take effect October 1st

Questions?

Thank you for attending!!!

