

2023 Guide

Employee Benefit Program

MEDICAL | DENTAL | VISION | HSA | HRA | FSA | DISABILITY | LIFE



COMMUNITY

BRIDGES



Our employees are our most valuable asset.

That’s why at Community Bridges we are committed to a comprehensive employee benefit program that helps our employees stay healthy, feel secure and maintain a work/life balance.

Stay Healthy

- Medical, Prescription and Dental Care
- Health Coaching
- Flexible Spending Accounts
- Vision
- Wellness
- Fitness Reimbursement
- WW/Weight Management Reimbursement
- Harlowe Rewards Program

Feeling Secure

- Life/Accidental Death and Dismemberment
- Short Term Disability
- 403(b)

Work/Life Balance

- EAP
- PTO (includes sick, personal, and vacation time)
- Holidays

Medical Insurance

Who is Eligible and When:

Eligibility for medical coverage is effective the first of the month following 60 days of full time employment. New employees have 30 days to elect medical coverage. Regular full time employees working 30 hours or more per week are eligible to participate in the Medical Plan with Agency contribution. Your coverage will end on the last day of employment.

Benefits You Receive:

Community Bridges will continue to offer medical benefits through Health Plans, Inc. with the same \$2000/\$4000/\$6000 deductible plan. Please note that laboratory services through Quest and LabCorp will be at no charge to you. If you use any other laboratory, the cost will go toward your deductible.

When seeking medical care, please remember to tell your providers that your medical plan is through HPI. Please give them the information located on the back of your membership card. Our plan is not Harvard Pilgrim for billing, it is Health Plans, Inc.



We will continue with the prescription drug plan through Southern Scripts. **This plan has no deductible!** Southern Scripts offers prescription drug savings through their First Choice preferred pharmacies and their Variable Copay network. Using the First Choice pharmacies can save both you and the agency in costs of prescriptions. Combining a First Choice preferred pharmacy while using savings from the Variable Copay network could result in a significantly lower copayment for hundreds of medications. Please see the prescription drug section of this guide for more information.

Please refer to the plan's Summary of Benefits for a full outline of coverage.


For complete details about the various Community Bridges Premium Contribution schedules, please contact Human Resources.




This below table summarizes your benefits under Harvard Pilgrim's New England Network and United Healthcare National Network. Please see your Benefit Handbook and Prescription Drug Brochure for detailed information on benefits covered by the plan and the terms and conditions of coverage. When you receive care from an In-Network provider, you'll enjoy the highest level of benefits at the lowest possible cost to you.

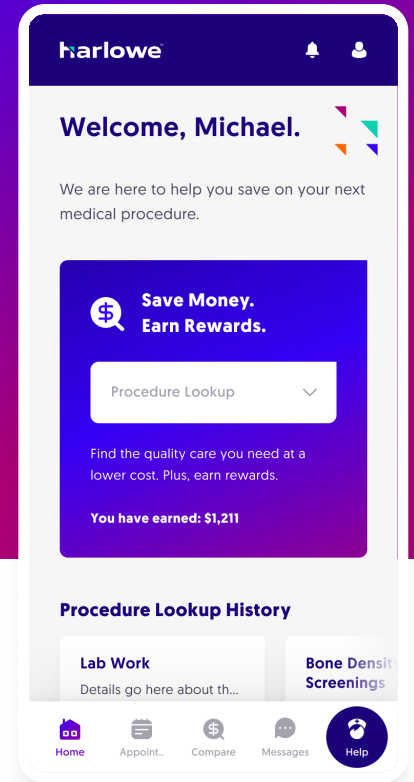
Benefit Highlights	National EPO Plan
Network	Harvard Pilgrim New England Network United Healthcare National Network No Referral Needed
Deductible	\$2,000 / \$4,000 / \$6,000
Out-of-Pocket Maximum (includes Medical and Rx)	\$6,500 / \$13,000
Preventive Care, Services, Tests	No charge, covered 100%
Office Visits	<p>Copay Level 1 - \$25 Copay Includes PCPs, OB/GYN, Licensed mental health professionals, Certified midwives, Nurse practitioners (see summary of benefits for full list)</p> <p>Copay Level 2 - \$50 Copay Includes most outpatient specialty care</p>
Acupuncture (limited to 20 visits per calendar year)	Copay Level 1: \$25 per visit
Chiropractic Care (limited to 12 visits per calendar year)	Copay Level 1: \$25 per visit
Emergency Room	Deductible, then \$250 copay per visit
Hospital Inpatient Services	Deductible, then no charge
Laboratory Services	<p>Quest and LabCorp: No charge Other Plan Providers: Deductible, then no charge</p>
Surgery, Outpatient	Deductible, then no charge
Therapies: Physical/Occupational/Speech (limited to 60 visits combined per calendar year)	Copay Level 2: \$50/visit
X-Rays, Advanced Radiology	Deductible, then no charge
Vision Exam	In Network and Out of Network: \$25 Copayment per visit
In Home Sleep Study	In Network Only: \$100 copayment
Cologuard In Home Colon Cancer Screening Test	Covered In Full
Urgent Care Copays	<p>Convenience Care Clinic: Copay Level 1 - \$25 per visit Urgent Care Clinic: \$25 per visit Hospital Urgent Care Clinic: Deductible, then \$75 per visit</p>

This summary of benefits is not a contract. It is a general description of the benefits. Complete information about all benefits, limitations and exclusions is in the HPI Schedule of Benefits which will be distributed at open enrollment and is available from Human Resources. If you need further information, please call the HPI Customer Service number at 877-906-5730.

Your Health, Your Choice. Welcome To The Driver's Seat.



-  Your Facility
-  Our Facility
-  Your Savings
\$854



Find Quality Healthcare That Fits Your Budget

From one provider to another, healthcare costs can vary drastically, even for the exact same procedure. Navigating those options can be difficult—but it doesn't have to be with a team of experts always a call away. Meet Harlowe: your personal guide to quality, affordable healthcare.

When you choose a lower cost provider for an outpatient test or procedure, **you'll be eligible for a reward equal to 20% of the savings.*** Already using a lower cost provider? **Receive a \$10 reward just for contacting us to confirm.** Call us to ask about all of your upcoming outpatient tests and procedures.

Save Money, Earn Rewards. Here's How It Works:

Compare: Contact our Nurse Navigators by phone or Live Chat whenever you need an outpatient procedure. We'll gather a bit of information from you and then begin our search for high quality, lower cost care near you.

Schedule: Our Nurse Navigators will support the re-scheduling process, and help you better understand what to expect at your appointment.

Reward: Earn 20% of what you saved! Once your claim has been processed, we'll send your reward. Keep an eye on your mail!

Get Started! Visit [harlowehealth.com](https://www.harlowehealth.com) or call (844) 994-5276

*\$50 minimum savings required to be eligible. \$2,000 maximum reward per procedure

Introducing The Harlowe App

Our Nurse Navigators are just a tap away. Download our app to chat about providers, prices, and potential savings for your next outpatient test or procedure—and track your rewards! Keep an eye out for updates for your device.



harlowe[™]

Additional Medical Plan Info

Wellness

If you are currently on our health insurance plan, you have various wellness opportunities available to you between January 1, 2023 – December 31, 2023. Please stay tuned for 2023 wellness information.

– EPO Plan –

Your new EPO plan allows you access to in-network care with the Harvard Pilgrim Provider network and coverage outside of New England through the United Healthcare Options PPO network. There is no need to choose a primary care provider (PCP) or get referrals to see a specialist. Preventive care is covered 100% in-network. Please note that you will save money when you stay in-network.

Your plan includes programs for your health:

- Manage diabetes, heart, lung or other chronic conditions by enrolling in HPI's complex condition management program to work with a dedicated nurse who can help you improve well being.
- Breathe easier – get help managing your asthma and avoiding your triggers to reduce missed days at work or school.
- You don't have to face serious illness alone – you and your family will get personal support from an experienced nurse care manager to help you get the right care at the right time.

Call the number on the back of your ID card for more information.

Laboratory Services Through Quest or LabCorp

If you use Quest or LabCorp for your laboratory services, there will be no charge to you.

Local Lab Locations Include:

Concord

Quest Diagnostics, 10 Ferry St.	715-5910
Quest Diagnostics, 280 Pleasant St.	866-697-8378
LabCorp@ConvenientMD, 8 Louden Rd.	226-9000

Belmont

Quest Diagnostics at Clear Choice MD, 96 Daniel Webster Hwy.	267-0656
LabCorp@ConvenientMD, 77 Daniel Webster Hwy.	737-0550

Gilford

Quest Diagnostics, 14 Country Club Rd.	866-697-8378/524-5946
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Tilton

Quest Diagnostics at Clear Choice MD, 75 Laconia Rd.	729-0050
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Additional Medical Plan Info (cont.)

Convenience Care and Urgent Care

As you know, in a medical emergency, you should always dial 911 or go to the nearest Emergency Room. But, when your condition isn't life threatening, there are many places where you may seek care that are far less expensive for you than the ER

Urgent Care and Convenience Care Clinics are becoming a popular alternative for non-emergency care. Their doctors, assistants and nurses treat broken bones, cuts, fevers, and conditions that need immediate care. While your Emergency Room visit will go toward your deductible and if you've met your deductible you will then need to pay an expensive copayment, your Convenience Care (for instance, CVS Minute Clinic) copayment is only \$25 and your Urgent Care Clinic (for example, Convenient MD or Concentra) copayment is only \$25!

Convenient MD now offers Labs with a quick 2-3 day turnaround, and at no charge to you as they use LabCorp, X-rays, IV fluid antibiotics at a considerable savings to all, and free flu shots! Please go to <https://convenientmd.com/patient-services> to learn more about Convenient MD's offerings.

Urgent and Convenience Care save you considerable expense.

Doctor on Demand

For HPI members, Doctor on Demand can treat many common medical conditions through live online video. See and talk to a board-certified doctor from your home or office through your smartphone, tablet or computer. You and your family get a convenient way to receive care. PCP visits and 25 minute Psychology sessions are currently offered at no cost to you. This will remain in effect until 60 days after the end of the National emergency due to the COVID-19 epidemic. After that time, your cost will be \$0.00 per visit. You need to download the app now and then you will be prepared when someone in the family comes down with a UTI, skin rash, pink eye or influenza. Most prescriptions can be instantly sent to your nearest pharmacy. You'll be glad a doctor is only a few taps away on the day you can barely get out of bed. Go to www.doctorondemand.com to start your visit on your computer or to download the app on your smartphone. You will save yourself and the agency money as well as reducing emergency room visit waits/cost when you use Doctor on Demand or stand alone Urgent Care facilities.

Doctor on Demand also offers behavioral health care. The most common conditions that Doctor on Demand treats are depression, relationship issues, workplace stress, social anxiety, addiction, trauma and loss. The service is not meant for crisis or emergency situations. Anyone experiencing a crisis or emergency should call 911 or go to the nearest emergency room.

To get started, visit doctorondemand.com to set up an account, or download the app on your smartphone.

Additional Medical Plan Info (cont.)

HPI's My Plan

For 24/7 online access to your plan and account details, sign up for HPI's My Plan. With My Plan you will be able to find a primary care provider, view, print or order your member ID card, review your claims, check your benefits, request claim reimbursements, view or print applicable tax forms and more. You will also be able to access your Southern Scripts prescription drug plan, all with one single sign on! There is no need to go to the Southern Script site for this information. To register for My Plan, go to the website listed on the back of your member ID card (it will be at the top). Click on the "Members" section and the link to "Get Registered." Enter your information to create your username. Dependents will need to have the five-digit home zip code and last four digits of the employee's social security number to register.

Health Care Partnership

Keeping Health benefit costs contained so that our premiums and your payroll deductions don't rise is a partnership. Knowing your benefits, getting cost estimates, going to participating providers, going to preventative visits, and utilizing savings with prescriptions all add up to BIG savings. If you want to learn more about less out of pocket expenses and savings on health benefits attend an open enrollment meeting or view the yearly presentation. During the year there will be educational sessions on benefits you can attend to learn more about your benefits. Reminder: Don't delete the emails Human Recourse sends out each month with up to date great benefit information!

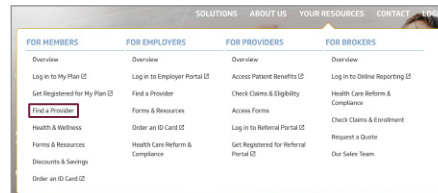
Harlowe – Medical Care Savings

Community Bridges is offering you the Harlowe Rewards Program, a program which will help you to find quality care at reduced costs. When you choose to switch to a low-cost provider for any outpatient test or procedure your doctor orders, you'll be eligible for a cash reward equal to 20% of the savings. Harlowe nurses will help you to find the best service at the best price and are just a phone call away. They will assist with every step of the process, helping with rescheduling, transferring of medical records and other needs. To reach a Harlowe nurse call 866-797-4100. Please see the Harlowe flyer in this guide for more details.

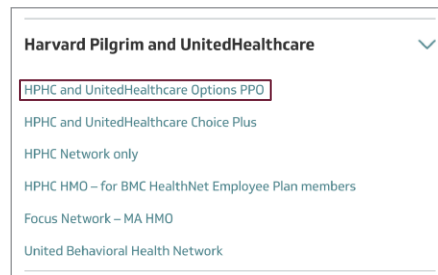
Find a Harvard Pilgrim or UnitedHealthcare Provider Online

Already an HPI member? For quick access to your provider network search tool, use your member ID number to register for **My Plan**.

1. Go to **hpiTPA.com** and visit the Members Section.



2. Click **Find a Provider**, and then choose **HPHC and UnitedHealthcare Options PPO Network** from the Harvard Pilgrim and UnitedHealthcare network list.

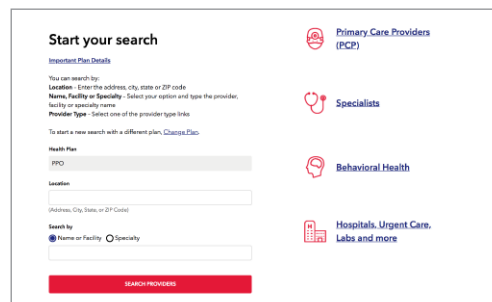


3. To find a provider, you can search by:

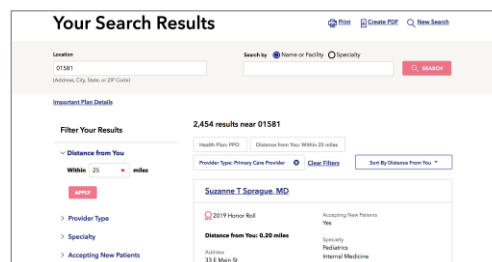
Location: Enter an address, city, state or ZIP Code.

Name, Facility or Specialty: Select your option and type in the provider, facility or specialty name.

Provider Type: Select one of the provider type links.



4. View your results. You can refine your results by choosing from the Filter Your Results list.



Have questions? Contact HPI Customer Service at 800-532-7575 or visit us online at hpiTPA.com



Manage your plan online With My Plan

24/7 access to your plan and account details



Register in Minutes!

- 1** Go to the website listed on the back of your member ID card (it will be at the top)
- 2** Visit the **Members** section and click the link to **Get Registered**
- 3** Enter your information to create your username and password

If you are a dependent, be sure to have the five-digit home ZIP Code and the last four digits of the employee's (plan subscriber's) social security number.

Access all of your account details* in one secure location anytime, anywhere!

- Review your claims
- Check your benefits
- Access your prescription drug plan
- Search your provider network
- Download a report of your claims
- Request claim reimbursements
- View, print or order your member ID card
- View or print applicable tax forms
- Find a Primary Care Provider (PCP)
- View your health spending account details



** You will have access to details applicable to your plan. Please note, not all of the items listed above apply for all plans.*

On your mobile device!



Have questions? Contact HPI Customer Service at the phone number or website listed on the back of your member ID card.



AchieveHealth®

Programs For Your Health

Personalized programs included in your benefit plan.

Your Health. Your Benefits.

When it comes to feeling your best, your needs are unique to you. Sometimes a little encouragement, understanding and support is all you need to feel better. Whether you're actively trying to improve your well-being, or you're just thinking about it, you and your family have access to unlimited, confidential health coaching sessions to help you reach your goals.

What is my health coaching benefit?

- Unlimited coaching sessions available to you and your covered family members
- Offered at no cost to you
- Completely confidential

Health coaches can help you to:

- Make a personalized plan to help you achieve success
- Access tools to help you reach your goals
- Incorporate lifestyle changes that will help you maintain your goals for a lifetime such as:
 - Losing weight and keeping it off
 - Quitting tobacco use— for good
 - Reducing stress in all areas of your life
 - Feeling more physically fit
 - Gaining more control over your chronic condition (diabetes, high blood pressure, high cholesterol or asthma just to name a few)

Or, just talk to someone about your health who can help motivate you.

How it works

- Talk with your coach over the phone at times convenient for you.
- Appointments can be up to one hour, depending on your needs.
- Coaches are available M–Th 8am to 10pm and Friday, 8am to 6pm (EST).

Additional health programs

- Case management - support when you need it.
- Personalized preventive health report.



To learn more, or to enroll in the program:
Call (866) 234-4635 to speak to a health coach
Or, enroll online at enroll.trestletree.com

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Prescription Drugs

In 2022 Community Bridges will continue to provide your Prescription Drug benefits through Southern Scripts. Southern Scripts offers you multiple ways to save on your prescription drugs. Using a First Choice network pharmacy is the most cost-effective way to get your prescriptions. Examples of First Choice pharmacies include Wal-Mart, CVS, Target, Hannaford, Osco & Sam's Club. Examples not in First Choice are Walgreens and Costco.

An additional benefit to your prescription coverage is The Variable Copay Program. This program is designed to combat the rising cost on high cost medications by the use of coupons provided by the manufacturer to greatly reduce costs for eligible medications such as Humira, Enbrel and Prolia, to name a few. Your copay may be greatly reduced with First Choice preferred pharmacies and the Southern Scripts Variable Copay network for over 2,000 variable copay medications. If you are eligible to receive this manufacturer variable copay subsidy, your copay for that drug will be the maximum manufacturer copay subsidy for that drug. If you are not eligible, your copay will be the copay amount listed for the drug according to the chart below.

The Pharmacy Locator, which will enable you to find a local in-network pharmacy, a mail order pharmacy and Variable Copay medication eligibility can be found at: www.southernscripts.net/members.php The Group Number which you will enter is B64.

Mail Order Pharmacy

Southern Scripts offers a mail order prescription option through Postal Prescription Services (PPS). With PPS you may purchase a 90 day supply of your medications. PPS may be reached at 800-552-6694, or you may go to ppsr.com to set up an account which will allow you to transfer prescriptions, order refills, review expense reports and view prescription histories for yourself and your family.

To set up an account:

1. Select "Register" from the upper right-hand corner of the PPS website
2. Enter your email address, create a password
3. Select "Create Account"

Ordering New or Transferred Prescriptions:

Once you have added a patient to your online PPS account, it is easy to add new prescriptions or transfer prescriptions from another pharmacy:

1. Select "Add a Prescription" from the left navigation menu and follow the on-screen steps for PPS to request a new prescription from your doctor or a transferred prescription from another pharmacy.
2. Your doctor can send a new prescription to PPS by electronic prescribing, fax, phone, or mail.
3. Or, if your doctor has given you a paper prescription, you should mail it to PPS at:
PPS Prescription Services
PO Box 2718
Portland, OR 97208-2718

Generally, it takes about 3-5 business days for PPS to contact your prescriber or pharmacy to obtain your prescription(s). If you requested a refill of these prescriptions, they will be sent as soon as the prescriptions are received and filled.

Prescription Drugs

Southern Scripts Prescription Plan			
	First Choice	Retail-Non-First Choice (limited to 30-day supply)	Mail Order (61-90-day supply)
Generic (lesser of price or copay)	1-30 Day: \$10 31-60 Day: \$20 61-90 Day: \$30	1-30 Day: \$20	\$25
Preferred	1-30 Day: \$35 31-60 Day: \$70 61-90 Day: \$10	1-30 Day: \$45	\$87.50
Compound	1-30 Day: \$50	1-30 Day: \$60	
Non-Preferred	1-30 Day: \$50 31-60 Day: \$100 61-90 Day: \$150	1-30 Day: \$60	\$150
Specialty Meds are all limited to 30-day supply, and must be filled at a specialty network pharmacy. Compounds are limited to a 30 day supply.			
Generic	15% coinsurance to a max of \$200		
Preferred	15% coinsurance to a max of \$200		
Non-Preferred	15% coinsurance to a max of \$200		

ScriptSourcing - Change Effective 1/1/2023

Effective 1/1/23, Community Bridges has partnered with ScriptSourcing for our prescription drug program. **This is a change from our current plan with International Rx.** If you are currently enrolled with International Rx, your enrollment will automatically transfer over to ScriptSourcing - there is nothing you will need to do!

One of the enhancements allows Community Bridges enrollees to receive certain medications for a \$0 copay! You may take a prescription medication that is eligible for a \$0 copay through the International Pharmacy Program (IPP).

Benefits of ScriptSourcing's International Pharmacy Program:

- Community Bridges Members have a \$0 copay for name brand medications
- A 90-day supply will be shipped directly to your home
- ScriptSourcing saves our health plan money, which translates into lower premiums, copays, and deductibles

In order to take advantage of this special opportunity, you must speak to a pharmacy advocate from ScriptSourcing. Please see Contacts page for info on getting started!

Please note: This Rx program is **completely voluntary** and we want you to do what is best for you and your family's health. You will still have the option to use your Southern Scripts prescription card and pay the applicable copay for your medication(s) at the pharmacy or via mail-order.

Southern Scripts



FirstChoice – FirstChoice is the preferred pharmacy network of Southern Scripts, offering access to reduced prescription costs at 50,00+ participating FirstChoice pharmacies across the nation. Participating FirstChoice pharmacies offer, on average, lower cost on medications for covered drugs than a standard (non-preferred) pharmacy. FirstChoice consists of both independent (local/community) and retail (national/regional) pharmacies. Participating FirstChoice pharmacies also offer the added benefit of filling a 90 day supply of medications. Non-FirstChoice pharmacies are limited to a 30 day supply. Please see the Southern Scripts flyer for more details.

PPS – Postal Prescription Services is the mail order pharmacy for Southern Scripts. For further information go to ppsr.com, call 800-552-6694 or see the Southern Scripts flyer.

Variable Copay – Variable Copay utilizes manufacturer-provided coupons to significantly reduce the cost on eligible high cost brand and specialty medications. With Variable Copay, your out of pocket costs for prescription drugs may be reduced or eliminated by a drug manufacturer's coupon. The remaining drug coupon dollars are used to offset the costs to the employer. Please see the Southern Scripts flyer for more details.

Southern Scripts Member Portal – the Southern Scripts Member Portal provides a variety of helpful features that make it easy to manage all aspects of your prescription drug benefit. With this tool you may see your benefit details, manage your account and prescription history, locate a pharmacy, look up a drug price and request a new ID card. To access your Member Portal:

1. Visit southernscripts.net/members
2. Select Member Portal on the left navigation
3. Login to the Pharmacy Benefits Portal with your credentials. Note: First time users need to create an account by following the hyperlink on the Member Portal page

Price Check Tool – The Drug Pricing Tool allows members to price their prescription drugs at any pharmacy in a few easy steps. To access the Drug Pricing tool, please go to the Member Portal mentioned above or check the Southern Scripts flyer for more details.

1. Visit southernscripts.net/members
2. Select Member Portal on the left navigation
3. Login to the Pharmacy Benefits Portal
4. Select Pharmacy Locator on the top navigation
5. Enter Zip Code
6. Select Search Radius
7. Locate your desired pharmacy and select the Price Check option
8. Enter drug name, desired quantity and days supply for the drug
9. Select Search

Flexible Spending Accounts

Flexible Spending Accounts (FSAs) allow you to set aside pre-tax dollars to pay yourself back for eligible health care and dependent care expenses. There are two types of FSAs: **Health Care FSA** and **Dependent Care FSA**.

Health Care FSA: For our 2023 plan, you may elect up to a maximum of \$3,000 to receive reimbursement for out-of-pocket health care expenses for you and your family members. These medical, dental, vision or other health care related expenses cannot be eligible for reimbursement through any insurance or other benefit program. Out-of-pocket health care expenses incurred by you and your family are eligible if the service occurred during the plan year and while you are making contributions to the plan. You can be reimbursed up to your full annual election, less any previous reimbursements. Please note that you are not eligible to have a Health Care FSA if you have the HSA.

Dependent Care FSA: A Dependent Care Flexible Spending Account allows you to set aside a portion of your paycheck tax free to pay for dependent care expenses. Per IRS regulations you are allowed to elect up to \$5,000 per calendar year per family (\$2,500 if married and filing separately) and receive reimbursement to pay for dependent care, which allows you and your spouse to work outside your home, to seek employment or to attend school full-time. Eligible expenses must be incurred during the plan year and while you are making contributions to the plan. When submitting a claim, you can only be reimbursed up to the amount you have contributed to date, less any previous reimbursements.

Healthcare FSA Rollover Feature

You may rollover up to \$600 of unused Healthcare FSA funds at the end of the plan year to the next plan year.

This rollover amount does not impact your maximum election for the following plan year. (e.g. If you have a maximum election limit of \$3,000 and rollover \$600, you could have access to up to \$3,600 for the next plan year.)

The FSA Accounts are administered by Group Dynamic.

Pre-Tax Savings Example		
	Without FSA	With FSA
Gross Pay	\$25,000	\$25,000
Health Care FSA Contribution	\$0	-\$1,000
Taxable Income	\$25,000	\$24,000
Taxes*	-\$6,413	-\$6,156
Take Home Pay after Taxes	\$18,587	\$17,844
Health Care Expenses	-\$1,000	-\$1,000
Available Income	\$17,587	\$16,844
Tax-Free Reimbursement from FSA	\$0	\$1,000
Net Income	\$17,587	\$17,844

*Assumes federal withholding of 15%, state withholding equal to 20% of federal and social security withholding of 7.65%. For illustrative purposes only. Actual dollar amounts and savings may vary.



→ That's a savings of \$257 for the year!

The CARES Act of 2020

The Coronavirus Aid, Relief, and Economic Security (CARES) Act was signed into law on March 27th, 2020. A part of this Act repeals the rule enacted in the Affordable Care Act that prohibited over-the-counter medicines (i.e., non-prescribed) other than insulin from being "qualified medical expenses." Thus, users of Health Savings Accounts, Flexible Spending Accounts, and Health Reimbursement Accounts would be able to use funds in those accounts to cover over-the-counter medical products, including those needed in quarantine and social distancing, without a prescription.

One of the major changes enacted by the CARES Act is the recognition of menstrual care products as medical care. As such, they are now reimbursable via account based health plans like HSAs, FSAs, and HRAs. Under the law, menstrual care products are defined as tampons, pads, liners, cups, sponges or other similar items used in respect to menstruation.

In 2023 Community Bridges will continue to offer a comprehensive Dental plan through Delta Dental. Dental benefits are available to all full time staff who work 30+ hours per week. An overview is outlined below.

New:

- Expenses incurred for covered Diagnostic and Preventive services do not accrue to your annual maximum.

Delta Dental - Explanation of Benefits In-Network Out-of-Network

Plan Deductible (waived for Preventive Services) Individual \$25 Family Limit \$75	
Annual Maximum	\$1500 per person per plan year NEW: Expenses incurred for covered Diagnostic and Preventive services do not accrue to your annual maximum.
Preventive Services Covered at 100%	Exams, cleanings, x-rays oral cancer screenings, fluoride once in a 12 month period to age 19, sealant applications to permanent molars for children to age 19
Basic Services Covered at 80% after deductible	Fillings (including white fillings on anterior and posterior teeth), simple extractions, includes periodontics and endodontics
Major Services Covered at 50% after deductible	Dentures, crowns, inlays, implants
Orthodontia Services Covered at 50%	\$1500 lifetime max per patient Orthodontia services available for dependent children to age 19

To find a dentist, simply visit www.deltadentalma.com and click on the *Find a Dentist* link and then select Delta Dental PPO Plus Premier. Or you can call Delta Dental customer service at 800-872-0500.

Vision Plan

DeltaVision

In 2023 Community Bridges will continue to offer a Vision Care Plan but will be changing carriers to DeltaVision (EyeMed Network). This is a hardware only plan, meaning that exams are not included with the vision plan. An annual vision exam is included in the HPI medical benefits for a \$25 copay. This is a 100% employee paid benefit. Employees working 30 or more hours per week are eligible for the Vision Care Plan on the first of the month following 60 days of employment. This plan includes many savings opportunities for employees interested in purchasing prescription glasses and lenses. Please see the Plan Description for details.



DeltaVision Plan Summary of Hardware Vision Benefits

	Participating Provider	Non-Participating Provider
Frames	\$150 allowance; 20% off balance	\$75 allowance
Lenses		
Single	Covered 100% after \$10 copay	\$25 allowance
Bifocal	Covered 100% after \$10 copay	\$40 allowance
Trifocal	Covered 100% after \$10 copay	\$55 allowance
Contact Lenses		
Elective Conventional	\$150 allowance, then 15% off balance	\$120 allowance
Elective Disposable	\$150 allowance, member pays balance	\$120 allowance
Medically Necessary (limit 1 pair)	Covered 100%	\$200 allowance
Frequency (based on date of service)		
Lens or contact lenses	Once every 12 months	Once every 12 months
Frame	Once every 24 months	Once every 24 months

Please see your official plan document for full details regarding this vision plan.

Short Term Disability

Community Bridges provides full-time employees working 30+ hours per week with short-term disability income benefits, and pays the full cost of this coverage. In the event you become disabled from a non work-related injury or sickness, disability income benefits are provided as a source of income. Employees must notify Human Resources in order to fill out the required forms. Doctor's certificates may be required.

Benefits Begin: 1st day of Disability for Accidental Injury, 8th day of Disability for Sickness

Benefits Payable: Benefits are available for up to 26 weeks

% of Income Replaced: 60% of your weekly salary

Maximum Benefit: Up to \$500 per week

Life Insurance

The Hartford

Basic Life Insurance

Life insurance offers you and your family important financial protection. Community Bridges provides full-time employees working 30+ hours per week a 100% employer paid basic term life insurance plan **of 1x your annual salary up to a maximum of \$150,000**. You are also provided with a 100% employer paid Accidental Death and Dismemberment (AD&D) insurance which provides benefits if a serious injury or death results from an accident.

Beginning 1/1/22 Community Bridges has raised the age for the reduction schedule for life insurance to better support our older workers. Under the new schedule, life insurance will now reduce by 35% at age 70 and 50% at age 75.

Voluntary Life Insurance

Full-time employees working 30+ hours per week who would like to supplement their group life insurance benefits may purchase additional coverage. This benefit is 100% employee paid.

New hires can purchase up to 5x salary in increments of \$10,000, not to exceed \$500,000. Coverage is also available for spouses and dependent children. Spouses may purchase 50% of the employee amount up to \$250,000. Medical questions will be asked for new employees electing over \$200,000 or their spouses electing over \$30,000. At open enrollment each year employees who have already purchased voluntary life can buy up to 4 additional increments of \$10,000 with no medical questions asked, up to the maximum of \$500,000. Spouses can buy up to 2 increments of \$5,000 with no medical questions asked.

For existing employees who want to purchase voluntary life for the first time, evidence of insurability will be required.

Please remember that spousal premiums will be calculated based on employee age.

Term Life Insurance is designed to cover individuals for the elected term period, and not thereafter.

Value Added Benefits from The Hartford

Please see Human Resources for brochures on any of the following benefits available from The Hartford: Funeral Planning and Concierge Services, Estate Guidance and Will Services, Beneficiary Assist Counseling Services, Travel Assistance Services with ID Theft Protection and Assistance, and Ability Assist EAP.

New 403(b) Matching Retirement Plan

Community Bridges takes great pride in making sure that employees of the Agency have access to top notch benefits. One such benefit is providing a means for each employee to participate in a retirement savings plan that meets the employee's individual retirement needs. **Currently Community Bridges provides a 1% match for retirement savings.**

Our retirement plan provider is American Funds and the broker for our plan is Joe Altobello from Financial Guide. Joe provides one-on-one consultation and quarterly educational seminars to all employees of Community Bridges.

You may contact Joe directly by calling: 603-471-4342 or 603-860-7553 (cellphone) to set up a personal appointment. Joe will walk you through the plan, answer questions, and help with filling out the paperwork.

All employees working part time (at least 20 hours per week) and full time are eligible for participation in the 403b retirement plan.

Plan booklets with full information and sign-up sheets are available upon request with Human Resources.

Employee Assistance Program

Community Bridges will continue to offer an Employee Assistance Program (EAP) through Concord Hospital to all agency employees. The EAP is a workplace funded, confidential service, designed to help employees reduce stress, balance their work and family responsibilities and improve the quality of their lives. The program consists of services including: individualized assessments, referral to community resources, support for work-related issues, couples and family support, consultations, training and workshops. All services are free, confidential, accessible 24 hours a day, 365 days a year, and available to all members of your household whether or not you elect health insurance coverage. Please contact Concord Hospital EAP at 603-227-7125 or 1-800-435-4464 x. 3121 or e-mail eap@crhc.org for further information and assistance. Please Note: Until the COVID-19 Pandemic is resolved, Concord Hospital EAP is primarily meeting with clients via telephone and through online video-counseling meetings; face-to-face meetings are occurring in the EAP offices on an as-needed basis.

Holidays

The office is closed for 11 holidays each year. Holiday pay is provided either through accrual/use of Paid Time Off (PTO) or, for those employees who work at our residences, is paid as premium pay when employee works the actual holiday (may not coincide when office is closed). See Holiday pay policy for full details.

Paid Time Off

Full-time regular (not temporary) or part-time regular employees who normally work at least 20 hours per week are eligible to receive paid time off (PTO) formerly known as earned time.

Paid time off is used for all paid time off from work. This includes vacations, personal days, sick days, bereavement and holidays. Employees are expected to provide a minimum of two weeks notice for scheduled time off for vacation and at least 24 hours notice for doctor appointments. Requests for time off must be authorized by an employee's supervisor on a first come/first served basis in accordance with staffing needs. The agency recognizes that there are times when employees will need to use PTO and will not be able to provide notice (i.e. illness, bereavement). Employees are still eligible to use PTO for those absences, but must provide reasonable and timely notice to their supervisor and they should be aware that excessive unscheduled absences will be subject to disciplinary action in accordance with Employee Handbook policy. No advance notice is necessary to use PTO on an agency recognized holiday.

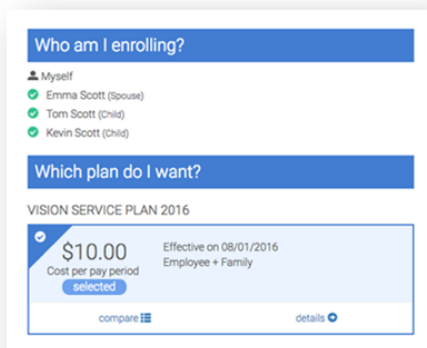
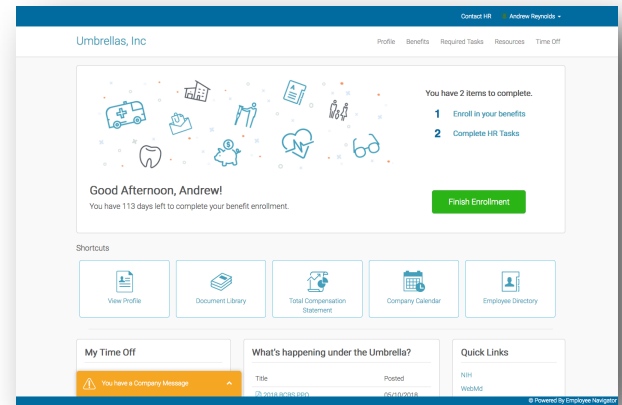
When an employee terminates employment or is no longer eligible to participate in the PTO plan, the unused earned time balance will be paid out in accordance with the PTO policy.

Employee Navigator

Community Bridges Brings you Employee Navigator! An Anytime, Anywhere Benefits Information Portal

Benefit communication: At the heart of the Employee Navigator system is a robust communication engine to help you best understand your benefits. Features include:

- Policy summaries & documents
- Side-by-side plan comparisons
- Carrier phone numbers
- Plan rates, eligibility and contributions



Online Enrollment: Community Bridges offers online benefit elections! Just register your account using our service key (**Bridges**), add all your dependents and update any other personal information, and then review your new benefit options. You can then choose who to cover and what plans you would like with the click of your mouse! Click submit at the end, and you're done for the year!

Document Resource Library: The document library puts all the forms you would ever need right in your hand without a trip to Human Resources and without printing everything off! We've made sure to include the basic documents for our benefit plans and will be adding our HR documents as well – make sure to check back soon!

Getting Started: <https://www.employeenavigator.com/benefits/Account/Register>

Start off by browsing to the above registration link to set up your account. Enter your First Name, Last Name, the Company Identifier (**Bridges**), the last 4 digits of your SSN and your Birthday. You can then set up a username and password and have full access to the Employee Navigator Portal.

Already have an account?

Log in here: <https://www.employeenavigator.com/benefits/Account/Login/>

Verify Your Account

First, let's find your company record

First Name

Last Name

Company Identifier
(provided by HR)
Bridges

PIN
(Last 4 Digits of SSN / ID)
####

Birth Date
(mm/dd/yyyy)
01/01/1980

Contacts

Who do I contact with questions or changes to my plans?

Any questions about the available benefits should be addressed to the Human Resources Department at 225-4153 or by email at HRteam@cbinnh.org. Remember to contact Human Resources if you have a change of address, phone number, or a significant life change such as: marriage, divorce, addition or deletion of dependents.



Plan / Carrier	Phone Number	Website
Community Bridges HR	225-4153	HRteam@cbinnh.org
Medical Insurance Health Plans, Inc.	877-906-5730	www.healthplansinc.com/members
Harlowe Rewards Program	866-797-4100	N/A
Health Coaching & Case Management AchieveHealth by Health Plans, Inc.	866-325-1550	N/A
Prescription Plan Southern Scripts Postal Prescription Services (PPS)	800-710-9341 800-552-6694	www.southernscripts.net www.ppsrx.com
ScriptSourcing International Pharmacy	Use the link below to schedule a 15-30 minute call with a Pharmacy Advocate: https://calendly.com/member-advocacy-team/enroll-in-our-0-rx-copay-program Or contact ScriptSourcing directly at 410-902-8811	
Dental Northeast Delta Dental	800-832-5700 -or- 603-223-1234	www.nedelta.com
Vision DeltaVision (through EyeMed)	866-723-0513	www.nedelta.com/DeltaVision
Flexible Spending Accounts Group Dynamic, Inc.	800-626-3539 fax: 207-781-3841	clientservices@gdynamic.com www.gdynamic.com
Employee Assistance Program (EAP) Concord Hospital	603-227-7125 -or- 800-435-4464 x. 3121	eap@crhc.org
403(B) Retirement Plan Joe Altobello, Financial Guide	603-471-4342 -or- 603-860-7553	www.americanfunds.com/retire

This benefit booklet
is provided to employees of



courtesy of

Borislow
INSURANCE

This booklet is provided for your convenience and is for informational purposes only. Community Bridges and Borislow Insurance are not responsible for errors, omissions or changes initiated by Community Bridges, Borislow Insurance, or a Third Party. The Subscriber Certificate(s) and applicable riders define the terms and conditions of these benefits in greater detail. If there is a discrepancy between the information in this pamphlet and the official subscriber certificate(s) and/or riders, the official subscriber certificate(s) and/or riders will always govern. Although this guide may reference an individual policy (voluntary benefit(s)), these individual policies available through employment with the Plan Sponsor are not subject to ERISA or the provisions of this Plan even though our benefit materials may mention such benefits. The Plan Sponsor does not sponsor, endorse, or contribute toward these voluntary benefits and they are not considered part of any program of benefits maintained by the Plan Sponsor. This guide is not a contract and does not intend to create contractual obligations of any kind. While Community Bridges intends to continue these plans, it reserves the right to change, amend or terminate them at any time for any reason including COVID-19 developments. Revised November 16, 2022.