

2024

# PremierOne Credit Union

## BENEFITS GUIDE



Together, we're just better.

Dear Employees,

This Benefits Guide provides you with valuable information regarding benefits offered to you and your dependents. We encourage you to share this Benefits Guide with your family members and dependents to help you gain a better overall understanding of the benefits available to you.

You are eligible to join at your initial eligibility, during our annual Open Enrollment period or due to a qualifying life event; such as starting a new job, getting married, loss of other coverage or for the birth/adoption of a child. In the case of a qualifying life event. You will have 30 days from the date of the event to join the plan. Otherwise, you may join the plan during the designated annual Open Enrollment period.

The Open Enrollment period generally occurs during the month of **November** with benefit elections becoming effective on **January 1**.

Please carefully review the information contained in this Benefit Guide.



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## Who is Eligible?

### Regular full-time employee working 30+ hours per week

- Eligible Dependents Include: Spouse, Registered Domestic Partner, Child(ren) up to age 26 or Disabled Child(ren) age 26 and over
  - \* Coverage terminates the last day of the month in which your child(ren) turns 26 years old. The spouse and/or child(ren) of your dependent child(ren) are not eligible for coverage.

### Part-Time:

- Eligibility Hours: Working 24-29 hours per week
- Eligibility Years: After one year of employment
- Eligible Plans: Medical Only for Employee's

## How to Enroll

The decisions you make during your New Hire Eligibility enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully. See the next page for more information.

## When to Enroll

You are eligible for coverage the first of the month following 30 days of full-time employment. Remember, after your Enrollment you cannot make changes unless you experience a **Qualifying Event**

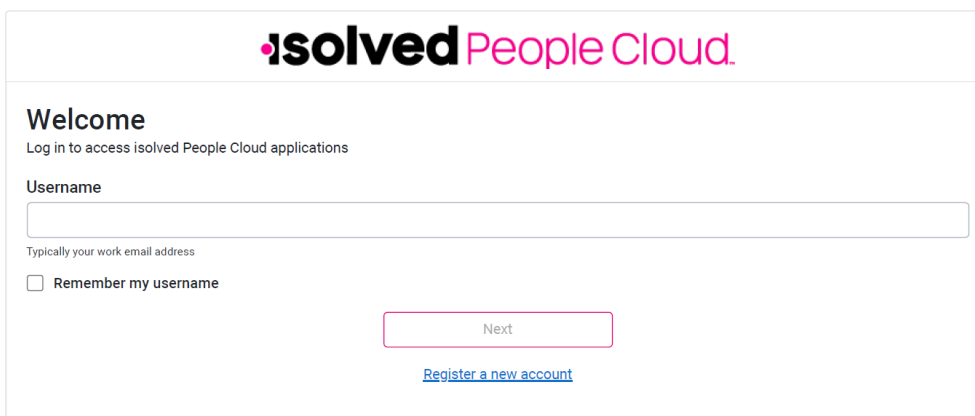
## How to Make Changes

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 - if you move outside of your current plan's coverage
- Change in employment status or a change in coverage under another employer-sponsored plan

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- Please complete your enrollments in the iSolved online portal within 30 days of employment
- **iSolved Site:** <https://amcheck.myisolved.com/>



**isolved** People Cloud.

**Welcome**  
Log in to access isolved People Cloud applications

Username

Typically your work email address

☐ Remember my username

Next

[Register a new account](#)

### NOTE:

- After the Eligibility Period, you cannot make changes to your coverage during the year unless you experience a change in family status. Please refer to the Qualifying Events section on page 4 for list of status changes.

### Reminders:

- **HMO Members** should designate a Primary Care Provider. Otherwise, one will be automatically assigned to you and your dependents. Kaiser Members do not need to select a Primary Care Provider
- Please be sure to Add/Update beneficiary information for Life/ADD in iSolved

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**Beneficiary:** The person who receives the insurance proceeds at the death of the insured.

**Coinsurance:** A percentage of the medical costs you share with your health insurer after you have reached your plan deductible.

**Consumer Driven Health Plan (CDHP):** Another name for a High Deductible Health Plan (HDHP), which is a health insurance plan that is typically characterized by slightly higher out-of-pocket expenses and lower premiums. These plans are frequently paired with a Health Savings Account (HSA) to pay for eligible expenses, tax-free.

**Copay:** The flat fee you pay out of pocket each time you visit a provider.

**Deductible:** The amount you pay during the year for medical services, before your insurance starts to pay.

**Disability:** A physical or mental condition that makes an insured person incapable of performing one or more duties of his or her occupation.

**Flexible Spending Account (FSA):** Also known as a flexible spending arrangement, this is a special account you put money into to pay for certain out-of-pocket health care and dependent care costs. This means you'll save an amount equal to the taxes you would have paid on the money you set aside. You can use funds in your FSA to pay for certain medical and dental expenses for you, your spouse, and your dependents, and to pay for dependent care so you (and your spouse) can work.

**Formulary:** A list of generic and brand name prescribed medications covered by your health plan that treat the same conditions but cost less.

**Network:** A group of doctors, hospitals, and other health care providers that accept payments from your health insurance company. This group has also agreed to provide your care at special negotiated discounted rates, so staying within the network may save you money.

**Out-Of-Pocket Maximum:** The annual limit you must pay out-of-pocket for everything during your plan year, except your monthly premium, which does not count toward the out-of-pocket maximum.

**Premium:** The amount you pay every month for health insurance, usually taken out of your paycheck through payroll deductions.

**Taxable Benefits:** Employer-provided non-cash compensation that is subject to income tax.

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# UnitedHealthcare Medical Plan

UnitedHealthcare Medical Coverage	UHC Select Plus Gold PPO 500		UHC Signature Value Platinum HMO 25/50/20%
UHC Covered Medical Benefits	In-Network	Out-of-Network	In-Network Only
Annual Deductible (Individual/Family)	\$500   \$1,000	\$1,000   \$2,000	None
Out-of-Pocket Maximum (Individual/Family)	\$8,950   \$17,900	\$17,900   \$35,800	\$4,000   \$8,000
Preventive Care	No Charge	Not Covered	No Charge
Office Visit (Primary/Specialist)	\$30 Copay \$60 Copay	50% After Deductible	\$25 Copay   \$50 Copay
Urgent Care	\$50 Copay	50% After Deductible	\$25 Copay   \$75 Copay Outside Medical Group
Emergency Room	\$250 Copay + 20% After Deductible Waived if Admitted	\$250 Copay + 20% After Deductible Waived if Admitted	20% Co-Insurance
Inpatient Hospital Care	\$250 Copay + 20% After Deductible	\$250 Copay + 50% After Deductible	20% Co-Insurance
Diagnostic Lab   X-Ray   Advanced Imaging-rays, Labs & Imaging	20%-40% After Deductible	Not Covered   50% after deductible	\$25 Copay   \$200 Copay
Mental Health Office Visit	\$30 Copay	50% After Deductible	\$25 Copay

UHC Prescription Coverage	Gold PPO 500 (DIAF-P59S)	Signature Value HMO Platinum (DI02 -F92S)
Prescription Coverage	31-Day Supply - Retail Pharmacy *Subject to RX Deductible \$300 Individual/\$600 family	31-Day Supply - Retail Pharmacy No RX Deductible
Tier 1 - Generic	\$15 Copay (Deductible Waived)	\$5 Copay
Tier 2 - Brand	\$55 Copay*	\$40 Copay
Tier 3 - Non-Formulary	\$95 Copay*	\$80 Copay
Tier 4 - Specialty	25% up to \$250 Maximum	25% up to \$250 Maximum
Mail Order	2.5x Copay*	2x Copay*

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

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## UHC Rewards

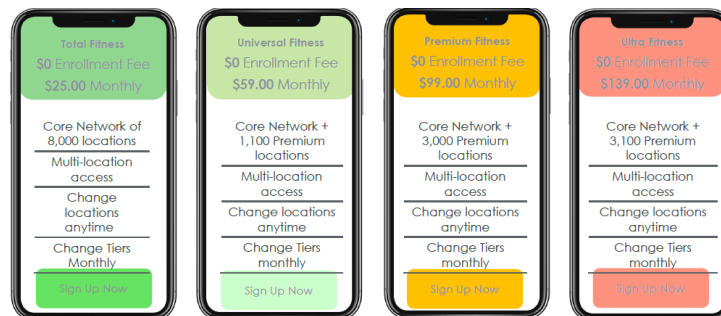
- **Reach Daily Goals:** Track 5,000 steps, 15 minutes of activity or track 14 nights of sleep
- **Complete one-time rewards** activities such as connecting a tracker or taking a health survey
- **Earn up to \$300** per year or get a free Apple Watch and “Earn It Off”
- Sign into [www.myuhc.com](http://www.myuhc.com) and **Select REWARDS**.

## Apple Fitness+

- Sign up online at [uhc.com/apple-fitness-plus](http://uhc.com/apple-fitness-plus) for 12 months of Apple Fitness+!
- Workouts and meditations that can be shared with up To 5 family members

## One Pass Gym & Studio Membership

- Visit [www.myuhc.com](http://www.myuhc.com) and go to Health Resources
- Find “Find One Pass Gym Network”
- Click “Get Started”



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# Kaiser Permanente Medical Plan

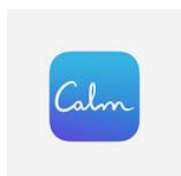
Kaiser Permanente Medical Coverage	Gold 80 HMO 250/35 +Child Dental (Base Plan)	Platinum 90 HMO 0/20 +Child Dental	Silver 70 HMO 1900/65 +Child Dental
Medical Benefits	Kaiser HMO Network	Kaiser HMO Network	Kaiser HMO Network
Annual Deductible (Individual/Family)	\$250   \$500	None	\$1,900   \$3,800
Out-of-Pocket Maximum (Individual/Family)	\$7,800   \$15,600	\$4,500   \$9,000	\$8,750   \$17,500
Preventive Care	No Charge	No Charge	No Charge
Office Visit (Primary/Specialist)	\$35   \$55 Copay	\$20   \$30 Copay	\$65   \$100 Copay
Urgent Care	\$35 Copay	\$20 Copay	\$65 Copay
Emergency Room	\$250 Copay After Deductible, Waived If Admitted	\$150 Copay, Waived if Admitted	45% After Deductible Waived if Admitted
Inpatient Hospital	\$600 Per Day x5 Days After Deductible	\$250 Copay Per Day x5 Days	45% After Deductible
Diagnostic Lab   X-Ray   Advanced Imaging	\$35   \$55   \$250 Copay After Deductible	\$20   \$30   \$100 Copay	\$30   \$75   \$400 Copay After Deductible
Mental Health	\$35 Copay	\$20 Copay	No Copay

Kaiser RX Coverage			
Prescription Coverage (up to 30-day supply)	Gold 80 HMO 250/35+Child Dental (Base Plan)	Platinum 90 HMO 0/20	Silver 70 HMO 1900/65
Generic	\$15 Copay	\$5 Copay	\$20 Copay
Brand	\$40 Copay	\$20 Copay	\$100 Copay
Specialty	20% up to \$250 Maximum After Deductible	10% up to \$250 Maximum	20% up to \$250 Maximum After Deductible

At [www.kp.org](http://www.kp.org) or with the Kaiser Permanente app, you can conveniently stay on top of your care 24/7

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You must be enrolled in Kaiser Permanente  
to for Free Access



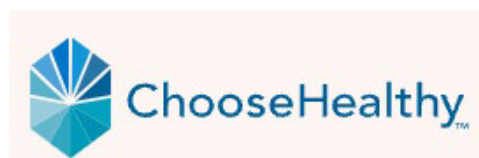
More than 100 guided meditations



Kaiser members have access to free  
90-day Ginger Subscription



Unlimited on-demand workouts



Discounts on wellness products,  
massage therapy and more!

1:1 Phone Call with a Kaiser  
Wellness Coach at no cost to you!

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## Direct Dental Plan

# Dental Plans

As a benefit-eligible employee, you can enroll in the following dental plan through Direct Dental.

Direct Dental		
Type of Service	In-Network	Out-of-Network
Calendar Year Maximum	\$1,500 Per Person	
Deductible (waived for preventive and diagnostic services)	\$25 Individual / \$75 Family	
	Plan Pays:	
<b>Preventive &amp; Diagnostic Services</b> Two (2) exams and two (2) cleanings allowed every 12 months, bitewing x-rays allowed twice every 12 months, full mouth x-rays allowed every 60 months, sealants up to age 18 once every 24 months, space maintainers for dependents to age 16.	<b>100%</b>  <i>Deductible Waived</i>	<b>100%</b>  <i>Deductible Waived</i>  <i>UCR Applies</i>
<b>Basic Restorative Services</b> Basic fillings, periodontal procedures, scaling and root planning once in each quadrant every 24 months, periodontal maintenance therapy twice every 12 months following scaling and root planning, root canal treatment, office visits for observation, repairs to dentures, bridgework, crowns, etc. and oral surgery and anesthesia	<b>90%</b>	<b>80%</b>  <i>UCR Applies</i>
<b>Major Restorative Services</b> Crowns, inlays, bridges, implants, prosthodontics, partial/full dentures	<b>60%</b>	<b>50%</b>  <i>UCR Applies</i>
<b>Orthodontic Services</b> Lifetime maximum of \$1500 per person for all participants.	<b>50%</b>  <b>\$1,500 Lifetime</b>  <b>Maximum</b>	<b>50%</b>  <b>\$1,500 Lifetime</b>  <b>Maximum</b>

## Dental Coverage Restrictions & Exclusions

- Cosmetic services as defined by IRS regulations;
- Crowns/Jackets/Inlays/Onlays/Cast Restorations/Partial and Full Dentures/Implants that are replaced in less than 5 years from placement.

## Dental Coverage Restrictions & Exclusions

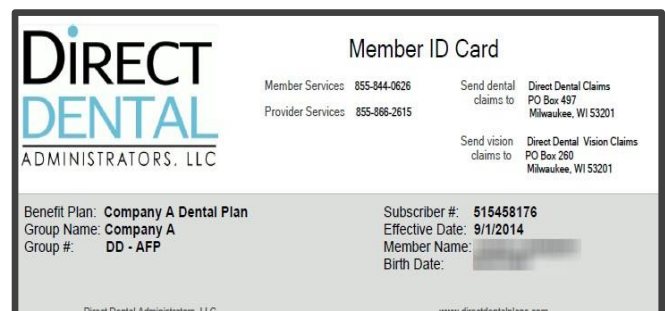
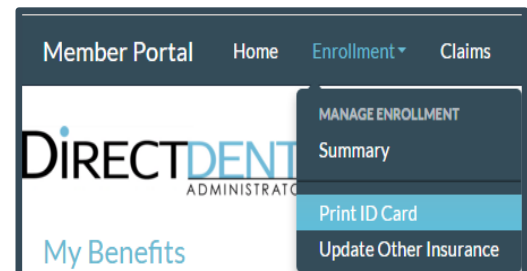
- While you may see any provider, this plan has access to DenteMax Plus PPO (which includes nationwide, DHA and Careington Network providers). When you visit an in-network provider, fees may be up to 30% less than an out-of-network provider. Visit [www.directdentalplans.com](http://www.directdentalplans.com) to find a network dentist near you.
- You no longer need to present a physical identification card when you go to the dentist.
- Dentist can verify eligibility at Provider Services at 855-866-2615, or Direct Dental Provider Web Portal located at [www.directdentalplans.com](http://www.directdentalplans.com)
- You can stretch your benefit dollars and reduce your out-of-pocket expenses by searching for a **DHA network** dentist:
- DHA network dentists offer **discounted rates** for services.
- Out of Network Benefits are paid according to the 90% Usual, Customary and Reasonable (UCR) Fees for the treating dental office zip code.
- Navigate to [www.directdentalplans.com/findprovider](http://www.directdentalplans.com/findprovider) to find a DHA provider near you.

### View your ID Card online

- [www.directdentalplans.com](http://www.directdentalplans.com)
- Go to **Enrollment > Print ID Card**
- Click **View** and your ID Card will generate
- This ID Card format is a PDF and you can print your card on any local printer
- You can also view or save a copy of your card on your mobile device for while you are on the go

### Available on your Mobile Device

- You can access all features of the Member Web Portal on-the-go, 24/7, from your mobile device
- Note - You can view your ID card and show it to your provider right on your smartphone at your dentist's office



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## Vision Plan

As a benefit-eligible employee, you have the option to enroll in the following VSP vision plans offered through VSP.

Plan Feature	In-Network
Well Vision Exam <i>Every 12 Months</i>	\$20 Copay
Lenses <i>Every 12 Months</i>	\$20 Copay
Frames <i>Every 12 Months</i>	\$130 Allowance Certain featured brands have \$150 allowance
Contact Lenses	You can choose contacts instead of glasses every 12 months
LightCare <b>*NEW*</b>	Pre-made and ready-to-wear sunglasses or blue-light filtering glasses are covered by plan's frame and lens benefit and is in lieu of prescription frame and lenses.
<a href="http://www.VSP.COM">www.VSP.COM</a> - search the CHOICE Network	



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## Group Life and AD&D

PremierOne provides Life/AD&D insurance to eligible employees at no cost to you

Benefits	Group Life/AD&D
Life Benefit Amount AD&D Benefit Amount	2x Salary; Max \$500,000 AD&D Coverage equal to Life Amount, includes additional amounts for loss of vision, hearing, etc.
Guaranteed Issue Amount	\$400,000
Accelerated Death Benefit	75% of your life benefit is available to you if you become terminally ill
Waiver of Premium	If totally disabled, your life insurance benefit will continue without payment of premium, subject to certain conditions
Portability & Conversion	Included
Age Reduction Schedule	At age 70, amounts reduce to 65%. At age 75, amounts reduce to 45%

## Long-term Disability

PremierOne provides Long-term Disability insurance to eligible employees at no cost to you

Benefits	Long-term Disability
Monthly Benefit Amount	60% of your monthly income up to \$6,000
Elimination Period	Plan begins to pay 90 days after the onset of the disabling injury or illness
Maximum Benefit Period	If disabled prior to age 68, benefits are payable for 2 years
Pre-Existing Exclusion	3/12: Claims filed in the first 12 months of coverage are not covered if you received medical attention in the 3 months prior to the effective date for a condition that resulted in the disability.

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## Value Added Services

- **Employee Assistance Program:** There is no cost to you for utilizing this service. For confidential consultation and resources, visit [mutualofomaha.com/EAP](http://mutualofomaha.com/EAP), or call 800.316.2796.
- **Financial Wellness:** The financial wellness tool from Enrich is a convenient, one-stop shop that provides you access to a variety of informational and educational resources with one goal in mind - to help you become financially healthy. Visit [mutualofomaha.com/EAP](http://mutualofomaha.com/EAP), click on Managing Finances to start
- **Travel Assistance:** This service is for you and your dependents when you are traveling more than 100 miles from home.
- **Will Preparation:** Online will preparation for those who have life insurance coverage through us. Simply log on to [www.willprepservices.com](http://www.willprepservices.com) and register using the code "mutual-wills"
- **Hearing Discount Program:** Through the partnership with Amplifon Hearing Health care. Call Amplifon at 888.534.1747, and a patient care advocate will assist you in finding a hearing care provider near you.
- **ID Theft Assistance:** Provided by AXA Assistance, ID Theft Assistance helps you and your dependents understand the risks of identity theft, learn how to prevent it, and most importantly, assist you if your information is compromised. Call AXA Assistance at 800.856.9947.



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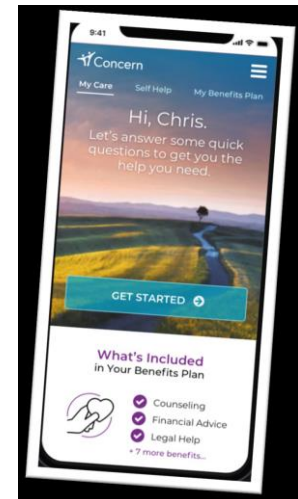


**Your Confidential Employee Assistance Program - Helping find balance between work and home life.**

## Concern's Digital Platform

Your digital front-door for easy, confidential access to personalized support, anytime you need it

- Easy access on your computer or portable devices
- Create your personal dashboard
- Request services, select counselors
- Connect to mindfulness resources from eM Life



**employees.concernhealth.com - 800-344-4222**  
**company code: PREMIERONE**

### Counseling

**5 free phone, video, in-person or chat sessions per issue per 12 months.**

- Difficulty with relationships
- Emotional distress
- Job stress
- Communication / conflict issues
- Substance use
- Grief

### Family Care

#### Parenting & Childcare

- Childcare resources and referrals
- Tutors, mentors and programs for children with special needs
- Teens, college and beyond
- New Baby Kit

#### Adult care needs

- Meals-on-wheels
- Alzheimer's education
- In-home, sub-acute, rehab care

### Legal and Financial

#### Legal Referrals

- Immigration
- Family law
- Estate planning
- Wills & Trust

#### Financial Consultations

- Money management
- Debt consolidation
- Investment basics
- Income taxes

**ID theft resolution**

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## The Advantage Group Flexible Spending Account

You have the option to participate in a Flexible Spending Account (FSA). If you do not enroll in health insurance, you may enroll in the Health Care FSA. However; if you do enroll in one of the health plans, eligibility to participate is dependent on your medical plan election as defined below. For a list of eligible expenses, see Publications 502 and 503 at [www.IRS.gov](http://www.IRS.gov).

Flexible Spending Accounts		
Healthcare FSA	Dependent Care FSA	Commuter Benefits
IRS Annual Maximum \$3,200 Allowable Rollover \$640 (Unused Amount from 2024 Rollover to 2025)	Annual Maximum \$5,000	Monthly Max \$315

FSA Eligible Expenses
<ul style="list-style-type: none"> <li>• Prescriptions and over-the-counter medications</li> <li>• Co-payments, co-insurance and deductibles</li> <li>• Orthodontia, dental and vision care</li> <li>• Counseling and therapy</li> <li>• Chiropractic and acupuncture</li> <li>• See <a href="http://www.enrollwithtag.com">www.enrollwithtag.com</a> for more details</li> <li>• Or log into the TAG Member Portal: <a href="http://enrollwithtag.wealthcareportal.com">enrollwithtag.wealthcareportal.com</a></li> </ul>



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## Dependent Care - Eligible Expenses

### FSA Dependent Care Eligible Expenses (kids under age 13):

- Babysitting or au pair services
- Before and after school programs,
- Day care and nursery school
- Summer day camp
- Elder care services
- See [www.enrollwithtag.com](http://www.enrollwithtag.com) for more details
- Or log into the TAG Member Portal: [enrollwithtag.wealthcareportal.com](http://enrollwithtag.wealthcareportal.com)



## TAG - Accessing Your Account Online or Mobile

### Using your Tax-Free Money:

- Pay with TAG benefit debit card.
  - Payment is made directly from your applicable FSA.
- Submit reimbursement request online or via TAG Benefit Center App.
  - Reimbursement is delivered via direct deposit or mailed check (your choice)
- **Log into the TAG Member Portal:**  
[enrollwithtag.wealthcareportal.com](http://enrollwithtag.wealthcareportal.com)

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## Aflac – Supplemental Benefits

Voluntary benefits can be obtained from Aflac to supplement core coverage.

Employees pay the full cost of these benefits.



### Cancer/ Specified-disease Protection Assurance Option

Coverage when you really need it. Our Cancer Protection Assurance insurance policies help cover innovative treatments with benefits that care for you as a whole person. Learn how Aflac benefits can help.



Initial Diagnosis	\$5,000 / dependent child \$10,000	Lod	\$65 per day
Additional Opinion	\$300	Transportation Benefit	\$.40 per mile
Hospital Confinement	\$200	Extended Care Facility	\$100 per day
Outpatient Hospital Surgical Room	\$200 per day	Home Health Care	\$100 per day
Chemo, Radiation, Immuno Therapy	\$250-\$1,200 month	Hospice Care	\$1000 first day, \$50 after
Hormonal Therapy	\$25 per month	Nursing Services	\$100 day
Topical Chemotherapy	\$150 per month	Reconstructive Surgery	\$500 - \$2000
Surgical Anesthesia	\$100-\$3,400 daily	Egg Harvesting, Storage & Implantation	\$200 - \$1,400
Ambulance	\$250 - \$2,000	Wellness	\$75 per year

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## Aflac supplemental benefits

Our product portfolio is as broad as your needs, with individual insurance policies that help cover the expected – and unexpected – that's sure to come life's way.

**Cancer/Specified-Disease:** Aflac's cancer/specified-disease insurance policy can help you and your family better cope financially if a positive diagnosis of cancer occurs.

**Hospital Confinement Indemnity:** Hospital stays are expensive. An Aflac hospital confinement indemnity insurance policy can help ease the financial burden of hospital stays by providing cash benefits.

**Short-Term Disability:** How would you pay your bills if you're disabled and can't work? An Aflac short-term disability insurance policy can help provide you with a source of income while you concentrate on getting better.

**Critical Illness (Specified Health Event):** An Aflac specified health event insurance policy is designed to help with the costs of treatment if you experience a covered health event.

**Accident:** Accidents happen. When a covered accident happens to you, our accident insurance policy pays you cash benefits, unless assigned otherwise, to help with the unexpected medical and everyday expenses that begin to add up almost immediately.

**Whole or Term Life:** With Aflac's whole life or term life insurance, you can rest easy knowing that your family can have financial security when they need it most.



Your enrollment is November 8th through November 17th. For more information, or to schedule a time with our benefits advisor, scan the QR code.



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Administrator	Website	Phone
UnitedHealthcare Medical	<a href="http://www.myuhc.com">www.myuhc.com</a>	(866) 801-4409
Kaiser Permanente Medical	<a href="http://www.kp.org">www.kp.org</a>	(800) 464-4000
Direct Dental Administrators	<a href="http://www.directdentalplans.com">www.directdentalplans.com</a>	(855) 844-0626
VSP Vision	<a href="http://www.vsp.com">www.vsp.com</a>	(800) 877-7195
Mutual of Omaha Life & LTD	<a href="https://login.mutualofomaha.com/">https://login.mutualofomaha.com/</a>	(800) 775-6000
The Advantage Group (TAG) FSA	<a href="https://enrollwithtag.wealthcareportal.com">https://enrollwithtag.wealthcareportal.com</a>	(877) 506-1660
Concern Health EAP	Employees.concernhealth.com COMPANY CODE PREMIERONE	(800) 344-4222
AFLAC Supplemental	<a href="https://www.Aflac.com">https://www.Aflac.com</a>	(800) 992-3522



## Benefits Questions and Concerns:

**Minerva Tompkins**  
**HR & Payroll Administrator**  
**Email:** [mtompkins@premieronecu.org](mailto:mtompkins@premieronecu.org)  
**Phone:** (408) 995-3180

**Aida Tannous**  
**VP HR & Staff Development**  
**Email:** [atannous@premieronecu.org](mailto:atannous@premieronecu.org)  
**Phone:** (408) 995-3181

## Benefits Questions and Concerns:

**Cindy Stokes, REBC, ChHC, CEBS**  
**Account Executive**  
**Email:** [cstokes@risk-strategies.com](mailto:cstokes@risk-strategies.com)  
**Phone:** (949) 242-9225

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**Martin Hsu, ChFC, CRPC**

Senior Vice President/Wealth Management Advisor

NMLS ID #698188

CA Insurance License #0522776

Merrill Lynch Life Agency CA License #0522776



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Excellence Dedication

Work-Life Balance

Fun

Accountability

Innovation

Honesty

PremierOne  
Credit Union

Extraordinary Service

Respect

Professional Growth

Dynamic service Credibility

Employee Culture

Commitment

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