



BENEFITS OPEN ENROLLMENT 2023



WELCOME TO OPTOMI'S 2023 OPEN ENROLLMENT!

Open enrollment refers to your opportunity to:

- Change plans
- Enroll in benefits
- Cancel benefits
- Add or remove dependents to your benefits
> eligible dependents are your legal spouse and dependent children

Any changes that you make during open enrollment will go into effect on January 1st, 2023.

Eligibility

Full-time employees (working a minimum of 30 hours per week) and their eligible dependents can participate in Optomi's benefits. Benefits are effective the first of the month following 30 days of employment.

Mid-year benefits changes

Outside of your annual open enrollment period, you may be eligible to make certain benefits changes during the middle of the year. Please refer to your Summary Plan Description (SPD) for specifics, but examples of when you might be able to make mid-year changes are:

- Marriage or divorce
- Birth, death, or adoption
- Change in eligibility status

New for 2023

The Health Savings Account's (HSA) annual contribution amount has increased for 2023.



This brochure is intended as a convenient summary of all major points of your benefits plan. This brochure does not cover all provisions, limitations, and exclusions. The official plan documents, policies, and certificates of insurance govern in all cases and are available for your inspection at any time.



Need Help?

Contact your Client Advocate! Amber McKnight at OneDigital is on call to assist you with any of your benefits and claims questions or concerns.

- Need help understanding your benefits?
- Have questions regarding a claim or bill?

Call or email Amber McKnight for swift and confidential assistance.

Phone: 1.404.846.4852

Toll-Free: 1.800.304.6157

Email: amcknight@onedigital.com



Medical, Dental, Vision, and Mail Order Pharmacy Anthem

Medical Tel.: 1.855.397.9269

Dental Tel.: 1.877.604.2158

Vision Tel.: 1.866.723.0515

Mail Order Rx Tel.: 1.866.281.4654

www.anthem.com



Life and Worksite Benefits Anthem

Member Services: 1.800.851.8544

www.anthem.com



Employee Assistance Program Anthem

Member Services: 1.888.209.7840

www.ResourceAdvisor.anthem.com



Travel Assistance Anthem

Member Services (U.S./Canada):

1.866.295.4890

Member Services (other locations):

1.202.296.7482

www.anthem.com

► MEDICAL PLAN | ANTHEM

Your medical plans will be offered through Anthem for the 2023 plan year. Please review your plan summaries or SBCs for out-of-network coverage information and full plan details.

Medical Rates (Semi-Monthly)	HSA OAP 5,000/20%/6,900 (In-Network)	Buy-Up 1 - OAP 3,000/0%/4,000 (In-Network)	Buy-Up 2 - OAP 1,000/20%/3,000 (In-Network)
Employee Only	\$231.46	\$322.98	\$335.99
Employee + Spouse	\$462.93	\$645.98	\$671.97
Employee + Child(ren)	\$439.78	\$613.67	\$638.37
Family	\$717.53	\$1,001.25	\$1,041.54

Medical Anthem	HSA OAP 5,000/20%/6,900 (In-Network)	Buy-Up 1 - OAP 3,000/0%/4,000 (In-Network)	Buy-Up 2 - OAP 1,000/20%/3,000 (In-Network)
Preventive Care	You pay \$0	You pay \$0	You pay \$0
For the HSA Plan, you pay out-of-pocket for office visits until you reach your deductible. Then you pay 20% coinsurance.	PCP Visit: 20% after Deductible Specialist Visit: 20% after Deductible Telehealth Visit: \$59	PCP Visit: \$25 Specialist Visit: \$50 Telehealth Visit: First 12 Live Health Online visits are 100% Covered	PCP Visit: \$25 Specialist Visit: \$50 Telehealth Visit: First 12 Live Health Online visits are 100% Covered
For the Buy-Up Plans, first you are subject to a copay for office visits.	Urgent Care Visit: 20% after Deductible Emergency Room Visit: 20% after Deductible	Urgent Care Visit: \$75 Emergency Room Visit: \$250 Copay	Urgent Care Visit: \$75 Emergency Room Visit: \$250 Copay
Should you receive any inpatient or outpatient care (surgeries, x-rays, lab tests), you are subject to the individual deductible.	Individual Deductible: \$5,000 Family Deductible: \$10,000	Individual Deductible: \$3,000 Family Deductible: \$6,000	Individual Deductible: \$1,000 Family Deductible: \$2,000
Then, you are subject to the member coinsurance for any further additional expenses.	Member Coinsurance: You pay 20% of any additional inpatient or outpatient expenses	Member Coinsurance: You pay 0% of any additional inpatient or outpatient expenses	Member Coinsurance: You pay 20% of any additional inpatient or outpatient expenses
If your total expenses (copays + deductible + coinsurance) accumulate to the out-of-pocket maximum, you are then 100% covered for the rest of the year.	Individual Out-of-Pocket Maximum: \$6,900 Family Out-of-Pocket Maximum: \$13,800	Individual Out-of-Pocket Maximum: \$4,000 Family Out-of-Pocket Maximum: \$8,000	Individual Out-of-Pocket Maximum: \$3,000 Family Out-of-Pocket Maximum: \$6,000

Prescriptions Anthem	HSA OAP 5,000/20%/6,900 (In-Network)	Buy-Up 1 - OAP 3,000/0%/4,000 (In-Network)	Buy-Up 2 - OAP 1,000/20%/3,000 (In-Network)
For the HSA Plan, once you meet your deductible you pay 20% coinsurance.	Tier 1: 20% after Deductible Tier 2: 20% after Deductible Tier 3: 20% after Deductible	Tier 1: \$10 Tier 2: \$45 Tier 3: \$90	Tier 1: \$10 Tier 2: \$40 Tier 3: \$70
For the Buy-Up Plans, you pay a prescription copay.	Tier 4: 20% after Deductible	Tier 4: 25% Up to \$500 Maximum	Tier 4: 25% Up to \$500 Maximum

If your total plan expenses (copays + deductible + coinsurance) accumulate to the out-of-pocket maximum, you are then 100% covered for the rest of the year.

Health Savings Account (HSA)

A Health Savings Account (HSA) is a way for you to save pre-tax dollars that can be used to pay for qualified health care expenses like deductibles, copays, coinsurance, prescriptions, vision and dental expenses. The funds can be taken out via payroll deductions and are deposited into the account for future use. For 2023, the HSA maximum annual contributions are \$3,850 for individuals and \$7,750 for family.

Employee Assistance Program (EAP) | Anthem

Optomi provides a confidential Employee Assistance Program (EAP) to you and members of your household. Examples of services provided by the EAP include financial counseling, professional help with drug/alcohol dependence and grief counseling. Services provided are completely confidential and available 24 hours a day, 7 days a week.

100% Employer Paid



► ACCESSORIZE WITH DENTAL & VISION BENEFITS

Your dental and vision coverage will be offered through Anthem for the 2023 plan year. Please review your plan summaries or policy for full plan details.

Dental Rates (Semi-Monthly)	Base Plan	Buy-Up Plan	Vision Rates (Semi-Monthly)		
Employee Only	\$16.33	\$19.95	Employee Only	\$2.84	
Employee + Spouse	\$32.81	\$40.07	Employee + Spouse	\$5.73	
Employee + Child(ren)	\$39.45	\$48.35	Employee + Child(ren)	\$5.44	
Family	\$55.93	\$68.42	Family	\$8.55	

Dental Anthem	Base Plan In/Out-of-Network	Buy-Up Plan In/Out-of-Network	Vision Anthem	In-Network	Out-of-Network
Annual Deductible	\$50 Individual \$150 Family	\$50 Individual \$150 Family	Eye Exam	\$10 Copay	\$30 Allowance
Coinsurance			Lenses		
- Preventive	100%	100%	- Single Vision	\$10 Copay	\$25 Allowance
- Basic	20%	20%	- Bifocal	\$10 Copay	\$40 Allowance
- Major	50%	50%	- Trifocal	\$10 Copay	\$55 Allowance
Orthodontia (Up to age 19)	N/A	50%	Frames	\$130 Allowance	\$45 Allowance
Orthodontia Lifetime Maximum	N/A	\$1,000	Contact Lenses		
Annual Plan Maximum	\$1,000	\$1,500	- Disposable	\$130 Allowance	\$105 Allowance
			- Conventional	\$130 Allowance	\$105 Allowance
			- Medically Necessary	100% Covered	\$210 Allowance
			Frequency		
			Exam/Lenses/Frames/Contacts	12/12/24/12 Months	

Voluntary Life and Accidental Death & Dismemberment (AD&D)* | Anthem

Life and AD&D coverage helps provide financial protection to your loved ones in the event of your death. Your designated beneficiaries will receive a cash payment from the insurance provider.

- Employees can elect Voluntary Life and AD&D for the employee, spouse, and dependent children.
- The cost is based on the amount you purchase and your age at the time of purchase. You can calculate your cost while enrolling in the Optomi's EmployDrive employee portal.

Employee Coverage	Spouse Coverage	Child Coverage
Increments of \$10,000 up to a maximum of \$500,000, not to exceed 5x your earnings	Increments of \$5,000 up to \$250,000, not to exceed 50% of the employee election	Increments of \$5,000, up to \$10,000, not to exceed 50% of the employee election
Guarantee Issue: \$100,000	Guarantee Issue: \$25,000	Guarantee Issue: \$10,000

Please be advised that should you reach age 65, your coverage will reduce by 35%. Should you reach age 70, your coverage will reduce by 50%.

100% Employee Paid

Worksite Benefits | Anthem

Accident*

The group accident policy provides a cash benefit for out-of-pocket expenses associated with an accidental injury and can help protect hard-earned savings should an on or off-the-job accident occur. This benefit provides enrollees with a \$10,000 and a \$20,000 option.

Hospital Indemnity

Hospital Indemnity insurance complements your present major medical coverage by providing cash benefits that can be used to help pay out-of-pocket expenses associated with a hospital confinement.

*If your spouse is also a benefits-eligible employee at Optomi, then you may not be eligible to purchase spousal coverage for Voluntary Life and Accident Insurance benefits. Please refer to plan documents for details.

100% Employee Paid

Travel Assistance Benefits | Anthem

Optomi offers employees a worldwide travel assistance program which provides services 24 hours a day, 7 days a week, when traveling 100 or more miles away from home. This emergency service can arrange and facilitate medical care, medical referrals, emergency medical evacuation, help refill lost, stolen or depleted prescription drugs, assist with lost/delayed luggage and much more. This benefit is offered through the Travel Assistance Program.

100% Employer Paid