

# Benefits At A Glance Hawaii Part-Time Home Health Field Employees





### **Benefits Overview**

BAYADA offers a comprehensive benefits plan designed to meet the needs of our employees:

#### Paid Time Off (PTO)

Immediately upon hire, you will earn Paid Time Off (PTO). PTO is accrued weekly and equates to four weeks per year at your agreed upon productivity adjusted for any "no pay units" taken.

#### Medical, dental, and vision plans

Employees are newly eligible the first of the following month after working at BAYADA for 4 consecutive weeks with 20 or more hours each week. If an eligible employee does not enroll during the newly eligible period, the employee must wait for the next open enrollment period or experience a Qualifying Life Event (QLE). An employee must continue to work 80 or more hours each month to maintain eligibility. If an employee does not work more than 80 hours, the employee will lose coverage at the end of the month.

#### **Retirement benefits**

Eligibility to participate in the 401(k) starts on your date of hire and you can enroll after receiving your first BAYADA paycheck. You can contribute to the 401(k) on a pre-tax and/or after-tax (Roth) basis up to the IRS annual minimum. You may be eligible for a discretionary employer match after meeting age and service requirements (excluding catch-up contributions). For more information, visit

bayada.com/benefits/find-benefits/retirement-plans.

#### Hawaii state disability

You are covered under the state disability plan. To be eligible, you must have at least 14 weeks of Hawaii employment in which you were paid for 20 hours or more, earned no less than \$400 in the 52 weeks preceding the first day of disability, and are currently employed.

#### Life insurance

You will become eligible for a company paid \$5,000 term life insurance policy after working a minimum of 1,000 benefit credit hours in the previous calendar year.

#### Voluntary accidental life, critical illness, hospital indemnity

You will become eligible the first of the month after 90 days of service.

#### **Tuition reimbursement**

You will be eligible for tuition reimbursement for one 3-credit course per semester as approved by your office director.

#### **Direct deposit**

You have the option to directly deposit your weekly paycheck. You may choose to split the check into up to three accounts (checking, savings or a combination of each). This service is available to all employees at time of hire (no waiting period).

#### **Online earnings statement**

All employees will have 24/7 access to view their earnings statements online by visiting <u>field.bayada.com</u>.

#### Identity theft protection

BAYADA has partnered with IdentityForce to sponsor identity protection for group-eligible employees. Each year, millions of people have their identity stolen. That's why it's more important than ever to be protected.

#### Public Service Loan Forgiveness partner

Public Service Loan Forgiveness (PSLF) is a program administered by the US Department of Education, which allows full-time employees of qualifying nonprofit employers to have the remaining balance of their Federal Direct student loans forgiven after making 120 (10 years) qualifying monthly payments under a qualifying repayment plan. Nonprofit entities of BAYADA are qualifying employers. For more information, view the Public Service Loan Forgiveness section under bayada.com/benefits/find-benefits/additional-benefits.





# **HMSA and Kaiser Medical Coverages**

	HMSA PPO Plan	HMSA PPO Plan		
	In network	Out of network	In network only	
Annual deductible		Subject to Balance Billing		
Individual deductible	\$350		None	
Family deductible	\$1,050		None	
Coinsurance	80%	80%	N/A	
Individual coinsurance maximum	\$3,000		\$2,500	
Family coinsurance maximum	\$9,000		\$7,500	
Office visit	\$17 copay; deductible applies	\$17copay; deductible applies	¢ 4 E	
Specialist office visit			– \$15 copay	
Preventative care	100% covered	Covered up to HMSA Allowed Amount	100% covered	
Emergency room	80% after deductible		\$75 copay + 20% coinsurance for ambulance services	
Inpatient hospitalization	80% after deductible	80% after deductible	\$75 copay per visit	
Outpatient surgery	80% after deductible	80% after deductible	\$15 copay	
Prescription generic	\$7 copay	\$7 copay & 20% coinsurance	\$10 retail; \$20 mail order	
Prescription brand non-formulary	\$30	\$30	\$10	
Prescription brand formulary	\$30 + \$45 (other brand name cost share)	\$30 + \$45 (other brand name cost share)	\$45	
Prescription mail order (90- day supply)	\$11 / \$65 / \$200	\$11 / \$65 / \$200	2 times retail for a 90-day supply	



# **HMSA and Kaiser Dental Plans**

	HMSA	Kaiser Permanente (HDS)		
Preventative & diagnostic				
Examinations	100% twice per calendar	100% twice per calendar		
	year	year		
Cleanings	100% twice per calendar year	100% twice per calendar year		
Bitewing x-rays	100% once per calendar	100% twice per calendar		
Ditewing X rays	year	year		
Fluoride (age 18 &	100% twice per calendar	70%		
younger)	year			
Space maintainers	70% Age 13 and under	70% Through age 17		
Other x-rays	70%	70%		
Other services				
Endodontics	70%	70%		
Periodontics	70%	70%		
Prosthodontics	50%	50%		
Roll over Amount	Up to \$500 (max accumu- lation \$1,250)	n/a		
Calendar year maximum	\$1,500	\$1,200		



## EyeMed Vision Plan

Services	Member cost in-network	Out-of-network reimbursement
Exam Frames	\$10 copay \$150 allowance 20% off balance over \$150	Up to \$25 Up to \$75
Contact lens fit and follow-up:		
Standard	Up to \$40	N/A
Premium	10% off retail price	N/A
Frequency		
Exam	Once every 12 months	
Frames	Once every 24 months	
Standard plastic lenses*	Once every 12 months	
Contact lenses*	Once every 12 months	

Please see the Summary Plan Documents for full details on participating providers and covered services. Included with medical plan only, cannot enroll separately.

\* Standard plastic lenses or contact lenses covered once every 12 months.

