



2023 Benefits Enrollment Presentation

Enrollment Dates: October 26 – November 09

Changes Effective: January 1, 2023





Agenda



- Eligibility & Enrollment Overview.
- What's New & Changing?
- Review Benefits Plans and Programs.
- Next Steps.
- Questions & Answers.

Eligibility & Enrollment





Benefits Enrollment

All employees must go into Paycom to enroll or waive benefits by 11/09/2022.



Open Enrollment 10/26 – 11/09

- Add, change or remove dependents from your coverage.
- Enroll, change or waive coverage.
- Elect/Add voluntary life insurance.
- Update beneficiary information (allowed any time).



Qualifying Events for Mid-Year Changes

- Marriage or divorce.
- Birth or adoption of a child.
- Gain/Loss of coverage.
- Loss of dependent status.
- Move out of or into a service area.



**Must contact Human Resources
within 30 days of event!**



Who is Eligible to Enroll?

Employees

- Full time and Part time employees working at least 20 hours a week.

New Employees

- Medical, Dental, Vision, FSA, HSA, Pet Insurance, Identity Theft, Benefit eligibility begins 1st of the month following date of hire.
- Life, Disability, Worksite, benefit eligibility begins 1st of the month following 90 days.

Eligible Dependents

- Spouse.
- Domestic partner.
- Dependent children and step-children & Domestic partner children:
 - Medical, dental and vision: to age 26.
 - Children of any age who are incapable of self-support due to a physical or mental disability may potentially be covered.

Note: Premiums for state registered/unregistered domestic partners who do not meet the tax dependent definition of IRC section 152 for the employee, may be considered taxable income (unregistered domestic partners will not meet the relationship test under IRC section 152). Premiums for children/registered Domestic Partners step-children under age 26 are not taxable. Premiums for children/stepchildren over age 26 are taxable if not an IRC section 152 tax dependent.



What's New or Changing, Effective Jan 1, 2023?

What's New or Changing?

- **Medical Benefits – AmeriBen**
 - 3 new plans are being offered by NOAH for the 2023 plan year!
 - New ID cards for all
 - Plans are still administered by AmeriBen with the BCBSAZ Network of providers and Navitus network of pharmacies. However, the majority of benefits and premium costs have changed.
 - Plans have been simplified and more diverse options are now available to NOAH employees and your families.
 - Copay Max Plus has been added to the PPO plan options to help employees with high cost medications to try and find funding to help reduce costs.
 - Employees who enroll in the High Deductible Health Plan (HDHP) are eligible to contribute to a Health Savings Account will see an increase in contributions from NOAH.
- **All employees must go through the enrollment system with Paycom to chose one of these new plans for 2023.**

Medical





Plan Highlights Comparison



Costs when using a BCBS Provider	Base PPO Plan	Buy-Up PPO Plan	HDHP Plan
Annual Deductible	\$6,000 / \$12,000	\$750 / \$1,500	\$3,000 / \$6,000
OOB Max	\$6,450 / \$12,900	\$5,000 / \$10,000	\$6,450 / \$12,900
PCP/Specialist	\$35 / \$70 copay	\$35 / \$70 copay	10% after ded.
Preventive	0% deductible waived	0% deductible waived	0% deductible waived Expanded list of preventive medications are also covered 0% deductible waived
Emergency / Urgent Care	\$250 / \$70 copays	\$250 / \$70 Copays	20% after deductible
Inpatient Hospital / Outpatient Services	20% after ded.	20% after ded.	20% after ded.
TeleDoc	\$20 copay	\$20 copay	20% after ded. (approx. \$49)
Prescriptions	\$10/\$20/\$50/\$250	\$10/\$20/\$50/\$250	\$10/\$20/\$50/\$250 after deductible
Employer HSA Contribution	No	No	Yes, NOAH will match up to Individual \$600 / Family \$1,200

When using a NOAH provider on either of the PPO plans your Primary Care Physician (PCP) visits will be reduced to \$5 and your Specialist visits will be reduced to \$10!

Out of network benefits are available on all plans. Please see your Benefit Guides and Plan documents for additional details.

Pharmacy Benefits – Navitus

Copay Max Plus – PPO Plans only

New Pharmacy benefit program effective 01/01/2023. Under the Copay Max Plus Program, if your prescription has copay assistance that you qualify for, the amount you pay for select medications may be reduced to \$0!

If your medication is eligible for this program Navitus may put a hold on your first fill (or first fill after 1/1/2023) and ask you to call in to speak with Member Services and prescreen you for eligibility.

- If you are not eligible they will release your medication to be filled normally.
- If you do qualify, Navitus will ensure you can pick up a days supply of medication to get you through until the discounted pricing can be applied

Specialty Medications Pharmacy - Lumicera Health Services

Specialty medications are most often treat chronic or complex conditions and may require special storage or close monitoring. Ordering new prescriptions through our specialty pharmacy partner, Lumicera Health Services is simple. Just call a patient care specialist at 1.855.847.3553 to get started. They will work with you and your prescriber to fill your prescription. The Lumicera team will call and verify your information and review medication details.

For a current version of the prescription drug list(s) or get help with your RX benefit questions, go to <https://members.navitus.com> or call 1-844-268-9789. Navitus Customer Care is available 24 hours a day, 7 days a week.

Medical Cost Breakdown

The rates below are effective January 1, 2023 – December 31, 2023.

- NOAH has 26 pay periods but only deducts premiums twice a month (24 pays)

Coverage Level	Payroll Deduction 24 Pays	
	Full-Time Employee	Part-Time Employee
Ameriben - Base PPO Plan		
Employee Only	\$15.00	\$37.50
Employee and Spouse/Registered Domestic Partner	\$63.49	\$158.72
Employee and Child(ren)	\$60.57	\$151.41
Employee and Family	\$110.48	\$276.19
Ameriben - Buy-Up PPO Plan		
Employee Only	\$75.00	\$187.50
Employee and Spouse/Registered Domestic Partner	\$225.00	\$562.50
Employee and Child(ren)	\$162.00	\$405.00
Employee and Family	\$375.00	\$937.50
Ameriben – High Deductible Plan		
Employee Only	\$40.00	\$100.00
Employee and Spouse/Registered Domestic Partner	\$120.00	\$300.00
Employee and Child(ren)	\$86.40	\$216.00
Employee and Family	\$200.00	\$500.00

A \$25 Spousal surcharge will be added if your spouse has employee benefits at their workplace but chooses to enroll in NOAH plans instead.

How Do I Choose?

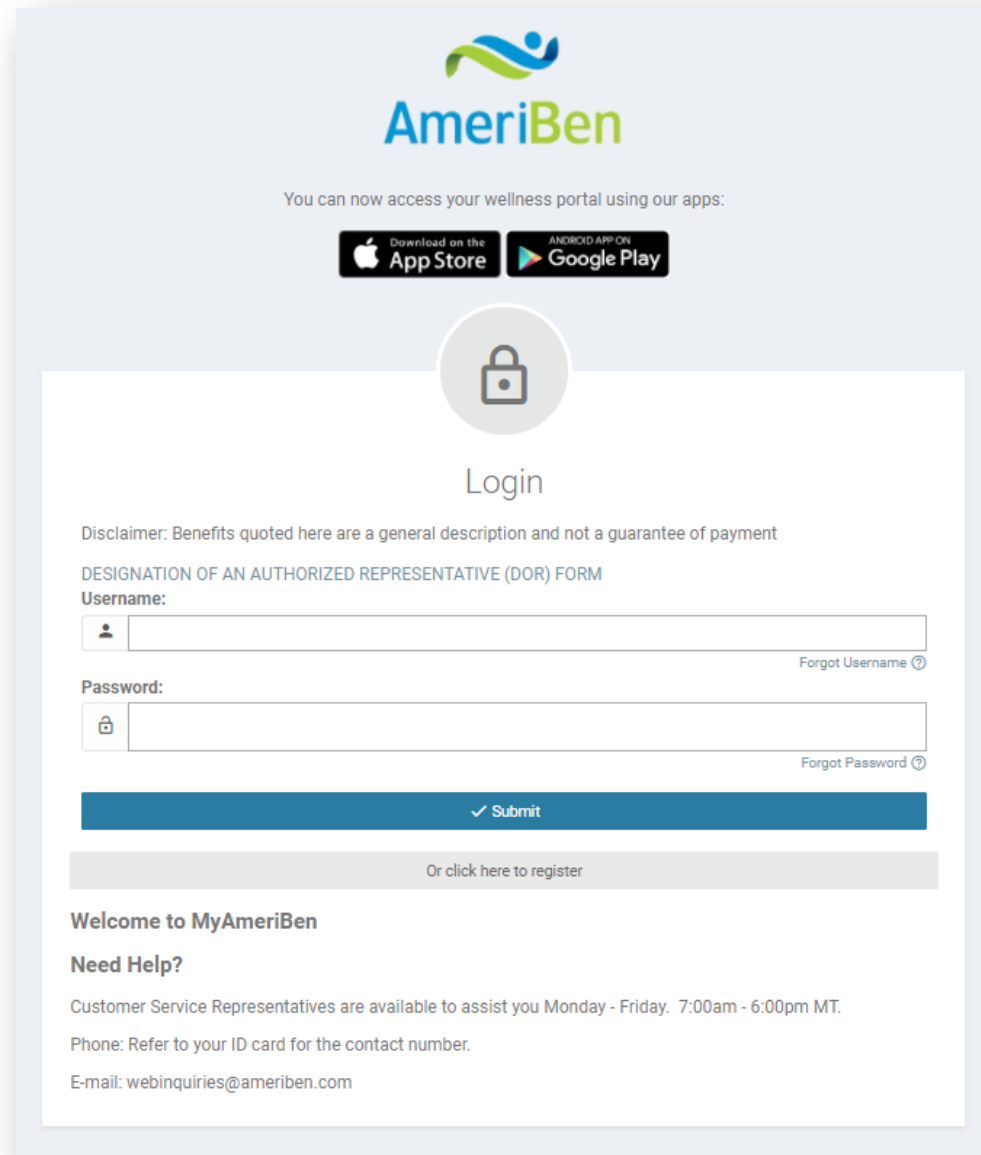
1. **Guesstimate your medical expenses for yourself and your family in the next year**
 - a. Do I only go in for Physicals and maybe a cold once a year?
 - i. If so, Base and Buy-up plan offer me the same copays and free preventive services
2. **Do I have big upcoming expense that will apply to deductible and coinsurance?**
 - a. If so, am I likely to hit the Out of pocket Maximums?
3. **What are my medication costs?**
 - a. Can I afford them if I have to pay full cost on the HDHP plan until my deductible is met?
4. **What am I paying annually for this benefit? Is it saving me enough in lower costs when I see the doctor to offset the premiums?**
 - a. Base plan saves \$1,440 a year over the Buy-up plan.
 - b. HDHP saves \$1,440 a year over the Buy-up plan when NOAH H.S.A. contributions are factored in.
 - c. Can I use these dollars for an Accident, Hospital or Critical Illness policy to reduce my risk?
 - d. Will I contribute this savings into my Health Savings account so the money is there if I need it?

Tools, Resources & Discounts





AmeriBen: Online or On-the-go!



The screenshot shows the AmeriBen login interface. At the top is the AmeriBen logo. Below it, text states: "You can now access your wellness portal using our apps:" followed by "Download on the App Store" and "ANDROID APP ON Google Play" buttons. A central padlock icon is above the "Login" heading. A disclaimer reads: "Disclaimer: Benefits quoted here are a general description and not a guarantee of payment". Below this is the "DESIGNATION OF AN AUTHORIZED REPRESENTATIVE (DOR) FORM" section. It includes a "Username:" label and a text input field with a "Forgot Username" link. Below that is a "Password:" label and a password input field with a "Forgot Password" link. A blue "Submit" button with a checkmark is positioned below the password field. A grey button below it says "Or click here to register". At the bottom, there is a "Welcome to MyAmeriBen" section, a "Need Help?" heading, and contact information: "Customer Service Representatives are available to assist you Monday - Friday. 7:00am - 6:00pm MT.", "Phone: Refer to your ID card for the contact number.", and "E-mail: webinquiries@ameriben.com".

- Verify or check claim status
- View plan and coverage information
- Cost and quality information.
- View and share your ID Cards.
- Connect to your HealthEquity HSA Vendor





How to Find a Provider



Neighborhood Outreach Access to Health

Go to:

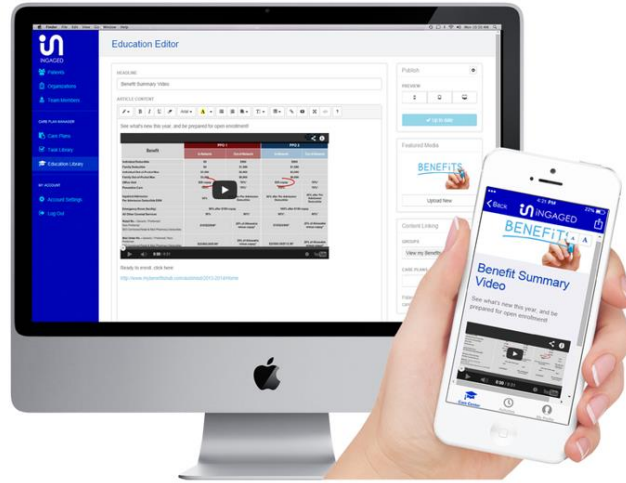
<https://noahhelps.org/providers/>

Blue Cross Blue Shield of AZ

- Go to: www.azblue.com/chsnetwork or
- Call: 1-855-961-5370
- Search by location, by name, or advanced search. Use the Select a Plan drop down menu and select *Arizona PPO* .



iNGAGED: Mobile Benefits App



With iNGAGED, you can take your Employee Benefits information on the go!

- View our company's benefit plans and resources, 24/7.
- Access policy information and group numbers.
- Quickly contact a benefits carrier.
- Keep up with important benefit plan announcements.
- Store images of your ID cards directly in the app.



Company Code: **NOAH**

Or, login online at
www.ingagedbenefits.com



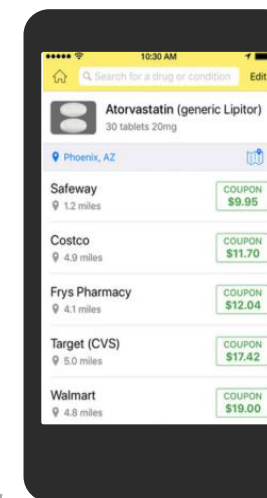
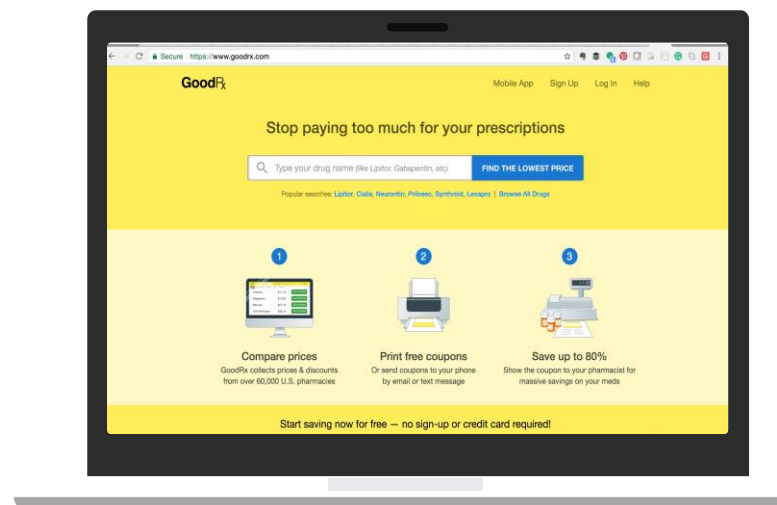


Save Money on Prescriptions

- Go to www.goodrx.com or download the mobile app to search for less expensive drugs at various pharmacies in your area.
- Enter the name of your prescription, zip code and select “Find the Lowest Prices.”



GoodRx





Tips to be a Savvy Healthcare Consumer



Understand your coverage.

Which services are covered under my available plans?



Shop around for care.

Are there less costly treatments available elsewhere?



Know your budget.

Which plan best fits my needs and my wallet?



Opt for generic prescriptions.

Is my prescription available in a generic brand?



Find your local in-network urgent care.

Which providers participate in my plans' network?



Review your bills.

Do my Explanation of Benefits (EOBs) reflect correct services and pricing?



Take advantage of preventive care.

How can I reduce my need for healthcare services?



Prepare for appointments.

What questions should I have prepared?



Telehealth Services

Teladoc allows employees to access medical care through a U.S. board-certified doctors by phone or video for non-urgent medical issues 24/7/365.

Cost:

- AmeriBen Base Plan PPO:
 - Medical & Behavioral Health: \$20 copay
- AmeriBen Buy-up Plan PPO:
 - Medical & Behavioral Health: \$20 copay
- AmeriBen HDHP PPO:
 - Medical: \$49
 - Behavioral Health: Initial \$200, \$95 for ongoing visit, Psychologist will cost \$85 per visit

To get started:

- Teladoc: 800-835-2362 or visit www.teladoc.com.
- Download Teladoc's mobile app



Health Savings Account (HSA)





What is the High Deductible Health Plan (HDHP) + Health Savings Account (HSA) Option?



Using an HDHP



In-Network or Out-of-Network



HSA Funds



Primary Care Physician

or



Specialist



What to know about your Health Savings Account



You own your HSA



Your money rolls over year after year



You choose how much to contribute (max. amounts apply)



Paired with a high-deductible health plan



You receive a triple tax advantage



HSA Eligibility Rules

For you to be eligible to contribute to an HSA, you must:

Be enrolled in a qualified High Deductible Health Plan (HDHP).



- **NOT** be enrolled in a non-HDHP including a spouse's plan, Medicare, Tricare or prescription drug only plan.
- **NOT** be claimed as a dependent on another individual's tax return, other than your spouse's.
- **NOT** have received any hospital care or medical services from the Veterans Administration, in the last three months (unless these services were related to a service-connected disability).
- **NOT** be enrolled in a Healthcare Flexible Spending Account (FSA) or a Health Reimbursement Account.

Your qualified dependents may also use the HSA funds, even if they are not covered under an HDHP.



HSA Contribution Limits

Calendar Year Maximum Contribution	NOAH Contributes	Your Maximum Contribution	2023 Limit
Employee Only	\$600	\$3,250	\$3,850
Employee + dependents	\$1,200	\$6,550	\$7,750
Additional “catch-up” if 55 or older	\$0	\$4,250 \$7,550	\$1,000

- Maximum contribution is reduced pro-rata for partial year enrollment (i.e. 1/12 for each month of HDHP Coverage).
- The calendar deductible is not pro-rated from the enrollment date like the fund is.
- NOAH will match employee contributions up to \$600 for Employee Only and \$1,200 for Employee + dependents.



HSA Eligible Expenses

The IRS regulates how you can spend your HSA funds. Visit www.HSAstore.com to view a comprehensive eligibility list!



Eligible Expenses

- Unreimbursed qualified medical, dental and vision expenses.
- Prescriptions.
- Medical Supplies.
- Laser surgery.
- Orthodontia.
- Medical premiums for COBRA, or health coverage while receiving unemployment compensation.
- Medicare Parts B & D.



Ineligible Expenses

- Cosmetic or elective surgery.
- Personal trainers.
- Maternity clothes.
- Life insurance premiums.
- Toiletries.
- Career counseling.
- Teeth whitening.
- Vet bills.

Keep in Mind...

- Funds can be used towards eligible expenses even after you are no longer covered by an HSA-qualified plan.
- If you use an HSA for non-IRS approved medical expenses, you will be subject to pay earned income taxes on the misused funds as well as a 20% excise tax.



Where are my HSA Funds?

HealthEquity manages your Health Savings Account. Money is deposited at into an interest-bearing account.

- The current interest rate and annual yield are available at www.HealthEquity.com
- Rates are subject to change without notice.
- The HSA must be established and an initial deposit must be made before you can be reimbursed for eligible expenses or use funds.
- You will be responsible for the monthly service fee if you leave NOAH or change medical plans, as the HSA account still belong to you.

HealthEquity®

Flexible Spending Account (FSA)





What is a Flexible Spending Account (FSA)?

An FSA is a pre-tax benefit, which allows you to set aside a specific pretax dollar amount for unreimbursed medical, dental, vision and dependent care expenses.

- FSA Plan Year: January 1, 2023 – December 31, 2023.
- It is not required that you be enrolled in your company's medical plans.
- If you'd like to participate in an HSA compatible plan (i.e., HDHP), you should not elect the Healthcare FSA because you would no longer be eligible to contribute to your HSA.



Contribution Limits

\$3,050 + **\$5,000**
Healthcare Dependent Care

Any statements concerning actuarial, tax, accounting, investment or legal matters are based solely on our experience as insurance brokers and are not to be relied upon as actuarial, accounting, tax, investment or legal advice, for which you should consult your own professional advisors.



Using the Flexible Spending Account (FSA)

How to use your Flexible Spending Account



Determine your estimated FSA healthcare expenses for the plan year



Set up annual (pre-tax) deductions from your paycheck



Use FSA debit card or submit a claim to your administrator with receipts as proof of your incurred eligible expenses



Up to \$570 of FSA funds can roll over to the next year, after all qualified expenses are reimbursed at the end of the current plan year





FSA Eligible Expenses

The IRS regulates how you can spend your FSA funds. Visit www.FSAStore.com to view a comprehensive eligibility list!

Healthcare FSA



Medical

- Copays/Deductibles.
- Prescriptions.
- Hospital costs.
- Smoking cessation.
- Fertility/Family planning.
- Acupuncture/Chiropractic.



Dental

- Deductible.
- Copays.
- Orthodontia.



Vision

- Prescription glasses.
- Sunglasses.
- Contact lenses/products.
- Laser eye surgery.



Physician prescription not required

- Sunscreen, SPF 30+.
- Denture adhesives.
- First aid supplies.
- Diagnostic tests & monitors.
- Durable medical equipment.
- Menstrual care products.

Dependent Care FSA



- Daycare centers or school programs for children under age 13.
- In-home day care.
- Summer day camp.
- Elder care or dependents not capable of self-care.



Limited Purpose Flexible Spending Account



Maximize Savings



HSA



Medical



Limited Purpose FSA



Dental



Vision

Dental:

- Out-of-pocket costs.
- Orthodontia.

Vision:

- Out-of-pocket costs.
- Prescription glasses and sunglasses (frames and lenses).
- Contact lenses and products.
- Laser eye surgery.



Voluntary Coverages & Products





Voluntary Coverage Options

Voluntary benefits are optional and 100% employee paid.



Accident

- Pays cash to help offset the expenses associated with accidents or injuries:
 - Deductible/Copays.
 - Ambulance.
 - Surgery.
 - And much more!
- One rate based on your enrollment tier (employee, spouse, and/or child/ren)



Critical Illness

- Pays a lump-sum \$10,000, \$20,000 or \$30,000 benefit directly to you upon diagnosis.
- Helps pay for out-of-pocket medical expenses associated with a serious illness (e.g. heart attack, stroke, coma, kidney failure, etc.).
- Guarantee issue amount is \$20,000, which means no health questions required.



Hospital

- Pays you a fixed benefit for every day you are in the hospital up to a max.
- A cash benefit when you need it.
- Affordable group rates based on your age and if you want to cover a spouse/domestic partner and/or child(ren).

Dental





Dental Plans



Dental PPO Plan Overview:

- Freedom to see a wider network of dentists.
- You don't need to select a Primary Care Dentist and a specialty services referral is not necessary.
- You will pay a higher amount for services from an out-of-network dentist.

Note: If you're planning to have extensive dental work or if total charges for anticipated claims are expected to exceed your plan's minimum predetermination amount of \$200, a Predetermination of Benefits is suggested so you can fully understand your out-of-pocket cost before receiving services.



Delta Dental - Dental PPO Plan



Plan Highlights	Delta Dental Base Dental PPO		Delta Dental Buy-Up Dental PPO		Delta Dental Enhanced Dental PPO	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Deductible						
Individual		\$50		\$50		\$50
Family		\$150		\$150		\$150
Annual Maximum		\$1,500		\$2,000		\$4,000
Preventive (<i>deductible waived</i>)	0%	20%	0%	20%	0%	20%
Basic Services	20%	50%	20%	50%	0%	20%
Major Services	50%	Not Covered	50%	50%	20%	20%
Orthodontia Services	Not Covered	Not Covered			Not Covered	Not Covered
Adult	N/A	N/A		50%	N/A	N/A
Child up to age 26	N/A	N/A		50%	N/A	N/A
Lifetime Maximum	N/A	N/A		\$2,500	N/A	N/A

Dental Cost Breakdown

The rates below are effective January 1, 2023 – December 31, 2023.

Coverage Level	Payroll Deductions 24 Pays	Payroll Deductions 24 Pays
	Full-Time Semi-monthly	Part-Time Semi-monthly
Delta Dental - Base Plan		
Employee Only	\$8.32	\$9.15
Employee and Spouse / Domestic Partner	\$15.46	\$17.01
Employee and Child(ren)	\$18.52	\$20.38
Employee and Family	\$25.88	\$28.47
Delta Dental – Buy-up Plan		
Employee Only	\$17.28	\$19.28
Employee and Spouse / Domestic Partner	\$25.50	\$29.50
Employee and Child(ren)	\$38.03	\$42.03
Employee and Family	\$40.63	\$44.63
Delta Dental – Enhanced Plan		
Employee Only	\$21.60	\$23.76
Employee and Spouse / Domestic Partner	\$43.65	\$48.02
Employee and Child(ren)	\$53.10	\$58.41
Employee and Family	\$65.15	\$71.66

Vision





VSP Vision PPO Plan



Participating Retailers:



Plan Highlights

VSP Vision PPO

	In-Network	Out-of-Network
Exam – Every 12 months	\$10	Reimbursed up to \$45
Materials Copay	\$30	N/A
Lenses – Every 12 months		
Single	Covered in full after \$30 copay	Reimbursed up to \$30
Lined Bifocal	Covered in full after \$30 copay	Reimbursed up to \$50
Lined Trifocal	Covered in full after \$30 copay	Reimbursed up to \$65
Frames – Every 12 months		
Frames	\$150 Frame Allowance, 20% off any amount billed above frame allowance *Extra \$20 allowance on Featured frame brands	Reimbursed up to \$70
Additional Pairs of Glasses	20% off unlimited additional pairs of prescription glasses and/or nonprescription sunglasses	N/A
Contacts – Every 12 months, in lieu of lenses & frames		
Medically Necessary	Covered in full after copay	Reimbursed up to \$105
Elective	Covered in full, up to Contact lens allowance	Reimbursed up to \$210
VSP Laser VisionCare Program Discounted access for laser vision correction services	Average savings of 15-20% off retail price or 5% off promotional price	

Vision Cost Summary

The rates below are effective January 1, 2023 – December 31, 2023.

Coverage Level	Payroll Deduction 24 Pays	Payroll Deduction 24 Pays
VSP Vision	Full-Time Semi-monthly	Part-Time Semi-monthly
Employee Only	\$3.93	\$3.93
Employee and Spouse / Domestic Partner	\$6.29	\$6.29
Employee and Child(ren)	\$6.42	\$6.42
Employee and Family	\$10.35	\$10.35

Life Insurance and AD&D





Basic Term Life and AD&D



100%
Employer Paid

1X salary up to
\$200,000

Update Your Beneficiaries!

Underwritten by:



IRS Regulation: Employees can receive employer paid life insurance up to \$50,000 on a tax-free basis and do not have to report the payment as income. However, an amount in excess of \$50,000 will trigger taxable income for the “economic value” of the coverage provided to you.



Voluntary Term Life and AD&D



**100%
Employee Paid**

Coverage Level

Description

Employee

Increments of \$10k not to exceed 5x annual salary up to \$500k max.

Spouse

Increments of \$5k up to \$250k max. not to exceed 50% of the employee elected and approved Life amount.

Child

Flat \$10k (15 days old to age 26, increments of \$5,000 to maximum of \$10,000.

Guaranteed Issue amount:

Employee: \$150,000; Spouse: \$30,000; Children: all amounts

Underwritten by:



Employees may increase their current life insurance election by 2 increments without submitting a Statement of Health/Evidence of Insurability if their total election is under the Guaranteed Issue amount.

Disability Coverage





Short Term Disability (STD)

100%
Employer Paid

**60% of weekly earnings
up to \$2,500 per week.**

Eligible after 7 days.

Underwritten by:



Note: If you reside in CA, NY, NJ, RI, HI or PR, your benefits will be coordinated with the mandated disability program offered in your state



Long Term Disability (LTD)

100%
Employer Paid

**60% of Monthly earnings
up to \$15,000 per month.**

Eligible after 180 days.

Underwritten by:



Employee Assistance Program (EAP)





Employee Assistance Program (EAP)

100%
Employer Paid
866-248-4096

- **Confidential counseling for you and your immediate family members.**
 - Available 24 hours a day, 7 days a week.
 - 6 face to face consultations per member per issue per year.
 - Unlimited telephonic counseling available.
 - Website password: NOAH
 - Online resources: www.liveandworkwell.com
 - Interactive Digital Resources through Sanvello & Talkspace

- **Examples for how the EAP can support you:**

COVID-19 related resources 	Childcare/ eldercare 	Family/ relationships 	Legal/ financial 	Alcohol/ drug abuse 	Grief/loss
-----------------------------------------------	-------------------------------------	--------------------------------------	---------------------------------	------------------------------------	-----------------------



Additional Benefits





Voluntary Identity Theft Program

100%
Employee Paid

Allstate
IDENTITY PROTECTION

Under this program, reimbursements are made up to \$1,000,000 identity theft expense.

- See and control your personal data with Allstate Digital Footprint
- Monitor Social Medical Accounts for questionable content.
- Catch fraud with tri-bureau monitoring
- Lock your TransUnion Credit Report in a click and get credit freeze assistance.
- Receive alerts
- Get reimbursements for fraud related losses, like stolen 403 (b) & HSA funds
- Protect yourself and your family (everyone that's "under your roof and wallet")



Voluntary Pet Insurance

100%
Employee Paid

NOAH is pleased to offer our employees the opportunity to save on your veterinary care.

- One low price includes preventative accident and sick care.
- Employees receive instant savings of 20-50% off every veterinary visit.
- Employees will follow the link in Paycom to enroll in United Pet Care insurance. These premiums will be paid directly to United Pet Care and will no longer be payroll deducted.

For more information, please reach out to UPC at www.unitedpetcare.com/NOAH

Call - 602-266-5303





Voluntary Legal Plan

100%
Employee Paid



MetLife
Legal Plans

MetLife Legal provides employees, spouses and dependents convenient access to legal services including a network of attorneys with telephonic advice and office consultations. Services may include:

- Will preparation.
- Trusts.
- Power of attorney.
- Real estate matters.
- Debt matters.
- Family law matters.
- Identity theft.

Company Perks & Value Added Services



Company Perks

To round out your benefits package, NOAH offers these additional perks to support both your personal and professional needs.

Highlights of the Company Perks are listed in your Benefit Enrollment Guide. Please see Human Resources for more details.

Some of them include:

- Holidays
- Paid time Off (PTO)
- Paid Sick Time (PST)
- Bereavement Leave
- Tuition Reimbursement
- Retirement – 403 (b)

Value added services

The Hartford – Value Added Services

- **Funeral Concierge Services** - Suite of online tools and live support, family advocacy and professional negotiations of funeral prices with local providers. To learn more information, call 866.854.5429 or visit www.everestfuneral.com/hartford. Use code:HFEVLC
- **Beneficiary Assist Services** – The Hartford offers you Beneficiary Assist counseling that can help you or your beneficiaries named in your policy code with emotional, financial and legal issues that arise after loss. Includes unlimited 24/7 phone access for legal and financial advice or emotional counseling with up to five face-to-face sessions, for up to a year from the date the claim is filed. For more information, call: 800.411.7239.
- **EstateGuidance & Will Services** - Through the Hartford you have access to EstateGuidance. It helps you protect your family’s future by creating a will online – backed by online support from licensed attorneys. Just follow the instructions to create a will that’s customized and legally binding. Visit: www.estateguidance.com Use code: WILLHLF
- **Travel Assistance & ID Theft Protection** - Travel Assistance with ID Theft Protection includes pre-trip information, to help you feel more secure while traveling. You can access professionals across the globe for medical assistance when traveling 100+ miles away from home for 90 days or less. ID Theft services are available to you and your family at home or when traveling. Call 800.243.6108, Collect from other locations: 202.828.5885, **Travel Assistance Identification Number: GLD-09012**
- **Ability Assist Counseling Services** - Offers 24/7 access to master’s level clinicians, includes three face-to face visits per occurrence per year for emotional concerns and unlimited phone consultations for financial, legal, and work-life concerns.
Call toll free: 800.964.3577 or Register visit, www.guidanceresource.com Use Company Code: HLF902 Use Company Name: ABILI Select “ability Assist Program” to create your own confidential user name and password.
- **HealthChampion SM2 Health Support Services** – HealthChampion offers Health Care Navigation support if you have become disabled or are diagnosed with a critical illness. You will receive guidance on care options, helpful resources and help with timely and fair resolution of issues Call toll free: 800-964-3577

Next Steps





Next Steps & Reminders



Date(s)	Action
Wednesday, October 26 – Wednesday, November 09	Open Enrollment information becomes available and Benefits Enrollment Meetings will be held
Wednesday, October 26	Online Enrollment System opens for elections
Wednesday, November 09	Online Enrollment System closes at 11:59pm (Pacific Time) and all elections must be finalized prior to system close
Saturday, January 1, 2023	Changes become effective
Friday, January 6	Any changes to payroll deductions will be seen in paycheck

Reminders:

- Fill your RX prior to 12/31
- Print your confirmation from PayCom
- Check your first Paycheck to ensure your benefits are deducting correctly
- Check your Flexible Spending Balance



Your Benefits Team



Who to contact	Contact Information
MEMBER ENROLLMENT SUPPORT	https://benefitenrollment.as.me/NOAH
CLIENT SERVICE EXECUTIVE, Faith Bracken	fbracken@lovitt-touche.com 520-722-7203
CLIENT MANAGER, Barb Elcess	belcess@lovitt-touche.com 520-722-7104
CLAIMS ADVOCATE, Maureen Wigham	mwigham@lovitt-touche.com 602-385-7066
HUMAN RESOURCES, Kathy Bergman	kabergman@honorhealth.com 623-853-6364

All rights reserved. No part of this document may be reproduced or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without prior written permission of Marsh & McLennan Insurance Agency LLC company.

This document is not intended to be taken as advice regarding any individual situation and should not be relied upon as such. Marsh & McLennan Insurance Agency LLC shall have no obligation to update this publication and shall have no liability to you or any other party arising out of this publication or any matter contained herein. Any statements concerning actuarial, tax, accounting or legal matters are based solely on our experience as consultants and are not to be relied upon as actuarial, accounting, tax or legal advice, for which you should consult your own professional advisors. Any modeling analytics or projections are subject to inherent uncertainty and the analysis could be materially affective if any underlying assumptions, conditions, information or factors are inaccurate or incomplete or should change. CA Insurance Lic: 0H18131

