

# EMPLOYEE BENEFITS GUIDE

2025



# Welcome!

At Virtucom, we recognize our ultimate success depends on our talented and dedicated workforce. We understand the contribution each employee makes to our accomplishments and so our goal is to provide a comprehensive program of competitive benefits to attract and retain the best employees available.

Through our benefits programs we strive to support the needs of our employees and their dependents by providing a benefit package that is easy to understand, easy to access and affordable for all our employees. This brochure will help you choose the type of plan and level of coverage that is right for you.

The Virtucom benefit plan year runs from January 1, 2025 - December 31, 2025. The Virtucom Benefit Plan is a Section 125 Cafeteria Plan: Any employee-paid premiums for elected benefits are withheld from your income on a pre-tax basis, with the exception of Disability, Voluntary Life, and Supplemental Worksite Benefits, which is withheld from your income on a post-tax basis. Taxable income is reduced by the amount of premium paid, so you pay less in taxes and have more take-home pay.



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# Eligibility

You may enroll in the Virtucom, Inc. Employee Benefits Program if you are a regular full-time employee who is actively working a minimum of 30 hours per week.

You may also cover your dependents under our plans. Your dependents include:

1. Spouse or Domestic Partner
2. Children up to age 26
3. Mentally or Physically disabled children beyond age 26

Newly hired employees are eligible to participate in Virtucom's program of the first of the month following date of hire. You may only enroll at time of hire or during annual Open Enrollment, unless you experience a Qualifying Event. Qualifying Events, as specified by the IRS, include but are not limited to:

- Marriage
- Divorce or legal separation
- Birth or adoption of a child
- Death of a spouse or child
- Loss of dependent status (such as reaching age 26)
- Involuntary loss of coverage through a spouse's health plan, due to a spouse's change in employment status.
- You have 30 days from the Qualifying Event date to make any coverage changes; otherwise, you must wait until annual open enrollment.

## How To Enroll

For your convenience, Virtucom has an online system, [www.paylocity.com](http://www.paylocity.com), through which you can:

- View all of your benefit information.
- Compare your benefit options via the plan decision-making tool.
- Make your annual Open Enrollment benefit elections.
- Make changes throughout the year (address update, dependent information, etc.).
- Access a full document library, in which you will find complete benefit summaries, claim forms, prescription discount programs, and more.

### To go through Open Enrollment:

1. Access Paylocity's site at [www.paylocity.com](http://www.paylocity.com)
2. Select Login
3. Enter 110746 as the **Company ID**, as well as your **Username & Password**
4. To retrieve a lost username or password, click the appropriate link for online help
5. Select Login
6. Once in the portal, a pop-up message will appear. **Select Start this Enrollment** to proceed to the next step of the enrollment
7. If a pop-up message does not appear, go to **Self-Service Portal > Benefits > Manage Benefits**

# Understanding Your Benefits

## BENEFIT DEFINITIONS

### In/Out of Network

Some plans give you the freedom to use any healthcare provider of your choice. However, when you use an in-network provider, the percentage you pay out-of-pocket will be based on a negotiated fee, which is usually lower than the actual charges. If you use a provider who is outside of the network, you may be responsible for paying the difference between the Reasonable and Customary (R&C) charges and what the provider charges. R&C charges are set by the insurance carrier and are the amounts that are generally considered reasonable based on what most providers charge for a particular service in a geographic area.

### Copayments and Coinsurance

A copayment (copay) is the fixed dollar amount you pay for certain in-network services on a traditional medical plan. In some cases, you may be responsible for coinsurance after a copay is paid. Coinsurance is the percentage of covered expenses shared by the employee and the plan. In some cases, coinsurance is paid after the insured meets a deductible. For example, if you pay 20% of an in-network covered charge, the plan pays 80%.

### Annual Deductible

Your annual deductible is the amount of money you must first pay out-of-pocket before your plan begins paying for services covered by coinsurance. After you meet your deductible, the plan pays for a percentage of eligible expenses (coinsurance) until you meet your out-of-pocket maximum. If you receive services from an out-of-network provider, the plan pays a lower percentage of coinsurance. Refer to your health care plan summaries for more information.

### Out-of-Pocket Maximum

Some plans feature an out-of-pocket maximum, which limits the amount of coinsurance you will pay for eligible health care expenses. Once you reach the maximum, the plan begins to pay 100% of in network eligible expenses. There may be separate in- and out-of-network annual out-of-pocket maximums. Generally, copays and deductibles do apply to your out-of-pocket maximum.

### Preventive Care Services

Preventive care is covered in-network at 100% for those services that are generally linked to designated routine wellness exams and screenings. Examples of preventive care include:

- Annual routine physicals, immunizations
- Bone-density tests, cholesterol screening
- Mammograms, pap smears, pelvic exams, PSA exams
- Sigmoidoscopies, colonoscopies

There may be limits on how often you can receive preventive care treatments and services. You should ask your health care provider whether your visit is considered preventive or non-preventive care.



# Medical Benefits

Virtucom offers five health plan options through Anthem. You may choose between two qualified high deductible health plan options that can be paired with a health savings account, and three traditional plan options that provide first dollar coverage for provider office visits. Ultimately, the Basic Buy Up Plan, the Deluxe Buy Up Plan, and the Premium Deluxe Plan have copayments for your physician office visits. Under these plans, you pay your copayment at the point of service. If you choose to enroll in either the Basic H.S.A. Plan or the Deluxe H.S.A. Plan, you will be eligible to contribute pre-tax contributions into a Health Savings Account. These contributions can be used to pay for medical, dental, or vision services. If you enroll in the either H.S.A. plan, you must meet your deductible before the plan begins to pay for any of your medical services.

Preventive care is covered at 100% when using in-network providers under all five plans. You do not need to pay a deductible, copay, or coinsurance for preventive services when you receive them from an in-network physician. Preventive care includes services such as annual exams or physicals.

In order for you to receive the most efficient and least costly care, it is important for you to seek care from in-network physicians and facilities. Anthem has a large national network of contracted physicians and facilities that provide negotiated discounts to you for in-network services. To find an in-network doctor or facility go to [www.anthem.com](http://www.anthem.com) > select **"Find Care"** > **"Basic search as a guest"** > **Select, "Medical Plan or Network"** > **Georgia** > **"Medical (Employer-Sponsored)"** > **"Blue Open Access POS"** > **Click "Continue"**

Once you are in possession of your medical ID card, register yourself for a profile at [www.anthem.com](http://www.anthem.com) or through the Anthem Sydney App on your smart phone.

Anthem	BASIC BUY UP		DELUXE BUY UP		DELUXE PREMIUM		BASIC H.S.A.		DELUXE H.S.A.	
	In Network	Out Of Network	In Network	Out Of Network	In Network	Out Of Network	In Network	Out Of Network	In Network	Out Of Network
Individual Deductible	\$3,000	\$9,000	\$1,000	\$3,000	\$500	\$1,000	\$5,000	\$15,000	\$3,300	\$9,000
Individual in a Family	\$3,000	\$9,000	\$1,000	\$3,000	\$500	\$1,000	\$5,000	\$15,000	\$3,300	\$9,000
Family Deductible	\$6,000	\$27,000	\$3,000	\$9,000	\$1,000	\$2,000	\$10,000	\$30,000	\$6,600	\$18,000
Coinsurance Paid by the Plan	80%	50%	80%	70%	100%	70%	80%	50%	100%	70%
Coinsurance Paid by You	20%	50%	20%	30%	0%	30%	20%	50%	0%	30%
Individual Maximum Out of Pocket	\$5,000	\$15,000	\$4,000	\$12,000	\$2,000	\$4,000	\$8,000	\$22,080	\$5,000	\$15,000
Family Maximum Out of Pocket	\$10,000	\$30,000	\$12,000	\$36,000	\$4,000	\$8,000	\$16,000	\$44,160	\$10,000	\$45,000
Preventive Care	Covered 100%	Ded; 50%	Covered 100%	Ded; 30%	Covered 100%	Ded; 30%	Covered 100%	Ded; 50%	Covered 100%	Ded; 30%
Primary Office Visit	\$30 copay	Ded; 50%	\$25 Copay	Ded; 30%	\$25 Copay	Ded; 30%	Ded; 20%	Ded; 50%	Ded; 0%	Ded; 30%
Specialist Office Visit	\$60 copay	Ded; 50%	\$50 Copay	Ded; 30%	\$50 Copay	Ded; 30%	Ded; 20%	Ded; 50%	Ded; 0%	Ded; 30%
Inpatient Hospital	Ded; 20%	Ded; 50%	Ded; 20%	Ded; 30%	Ded; 0%	Ded; 30%	Ded; 20%	Ded; 50%	Ded; 0%	Ded; 30%
Outpatient	Ded; 20%	Ded; 50%	Ded; 20%	Ded; 30%	Ded; 0%	Ded; 30%	Ded; 20%	Ded; 50%	Ded; 0%	Ded; 30%
ER	\$350 copay; 20%		\$150 copay; 20%		\$350 Copay		Ded; 20%		Ded; 0%	
Urgent Care	\$75 copay	Ded; 50%	\$60 copay	Ded; 30%	\$40 Copay	Ded; 30%	Ded; 20%	Ded; 50%	Ded; 0%	Ded; 30%
In-Network Prescriptions	no deductible		no deductible		no deductible		Deductible Applies		Deductible Applies	
Retail Prescription Drugs (30 days)	\$15 / \$45 / \$85 / 25% up to \$350		\$15 / \$45 / \$85 / 25% up to \$350		\$15 / \$45 / \$85 / 25% up to \$350		\$10 / \$30 / \$60 / 25% up to \$350		\$10 / \$35 / \$60 / 25% up to \$350	
Mail Order (90 days)	\$15 / \$135 / \$255		\$15 / \$90 / \$255		\$15 / \$90 / \$255		\$30 / \$90 / \$180		\$10 / \$70 / \$180	

\*Emergency Room copay will be waived if admitted

Semi-Monthly Contribution	BASIC BUY UP	DELUXE BUY UP	DELUXE PREMIUM	BASIC H.S.A.	DELUXE H.S.A.
Employee Only	\$60.55	\$97.74	\$117.07	\$27.66	\$52.17
Employee + Spouse	\$335.15	\$413.40	\$453.90	\$230.32	\$314.84
Employee + Child(ren)	\$297.74	\$370.41	\$408.01	\$202.71	\$279.05
Family	\$684.57	\$815.01	\$882.50	\$488.20	\$649.40



# The Sydney Health mobile app makes healthcare easier

Access personalized health and wellness information wherever you are

Use Sydney<sup>SM</sup> Health to keep track of your health and benefits — all in one place. With a few taps, you can quickly access your plan details, Member Services, virtual care, and wellness resources. Sydney Health stays one step ahead — moving your health forward by building a world of wellness around you.

## Find Care

Search for doctors, hospitals, and other healthcare professionals in your plan's network and compare costs. You can filter providers by what is most important to you, such as gender, languages spoken, or location. You'll be matched with the best results based on your personal needs.

## My Health Dashboard

Use My Health Dashboard to find news on health topics that interest you, health and wellness tips, and personalized action plans that can help you reach your goals. It also offers a customized experience just for you, such as syncing your fitness tracker and scanning and tracking your meals.

## Chat

If you have questions about your benefits or need information, Sydney Health can help you quickly find what you're looking for and connect you to an Anthem representative.

## Virtual Care

Connect directly to care from the convenience of home. Assess your symptoms quickly using the Symptom Checker or talk to a doctor via chat or video session.

## Community Resources

This resource center helps you connect with organizations offering no-cost and reduced-cost programs to help with challenges such as food, transportation, and child care.

## My Health Records

See a full picture of your family's health in one secure place. Use a single profile to view, download, and share information such as health histories and electronic medical records directly from your smartphone or computer.

## ¿Prefieres obtener información en español?

Tienes opciones. Si tu teléfono móvil ya está configurado en español, la aplicación Sydney Health también estará en español. Si no es así, selecciona el **menú** dentro de la aplicación Sydney Health y elige el **idioma de la aplicación**. También puedes visitar [espanol.anthem.com](http://espanol.anthem.com).



## Download the Sydney Health app today

Use the app anytime to:

- Find care and compare costs.
- See what's covered and check claims.
- View and use digital ID cards.
- Check your plan progress.
- Fill prescriptions.



Scan the QR code to download the Sydney Health app.

You can also set up an account at [anthem.com/register](http://anthem.com/register) to access most of the same features from your computer.

In addition to using a telehealth service, you can receive in-person or virtual care from your own doctor or another healthcare provider in your plan's network. If you receive care from a doctor or healthcare provider not in your plan's network, your share of the costs may be higher. You may also receive a bill for any charges not covered by your health plan.

Sydney Health is offered through an arrangement with Caredon Digital Platforms, a separate company offering mobile application services on behalf of your health plan. ©2023 The Virtual Primary Care experience is offered through an arrangement with Hydrogen Health.

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# Search for high-quality doctors and dentists nearby and compare costs

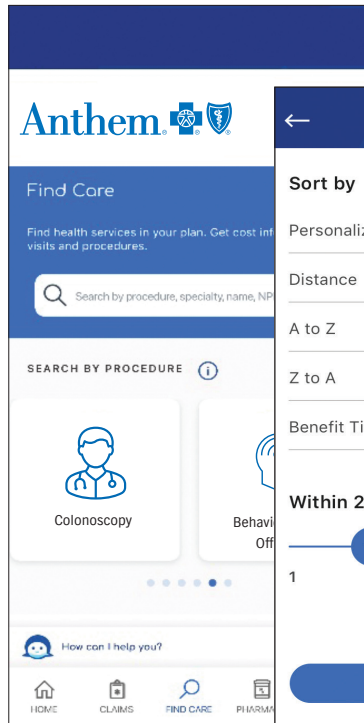
Choosing a doctor and dentist you trust is important – and choosing one in your plan's network can keep your costs down. Using **Find Care** on the Sydney<sup>SM</sup> Health mobile app and anthem.com can help you meet both needs.

## Customizing your search

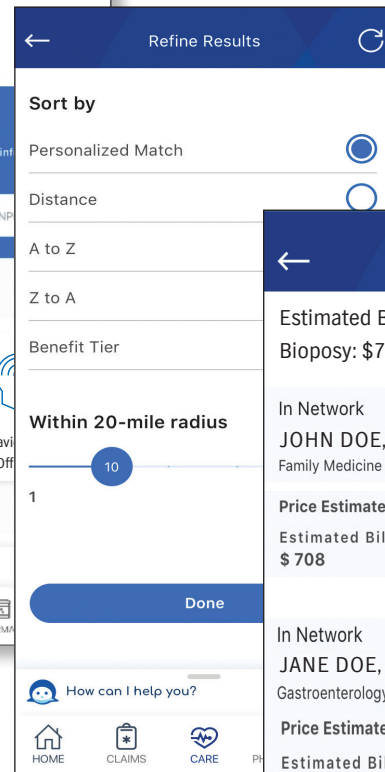
**Find Care** brings together details about doctors, dentists, hospitals, and pharmacies in your plan's network. You can customize your search by name, specialty, or procedure. You can also compare information such as costs, languages spoken, and office hours.\*

To make sure your facility and service (medical, dental or vision) are in your plan's network, view the doctor, dentist or facility profile.

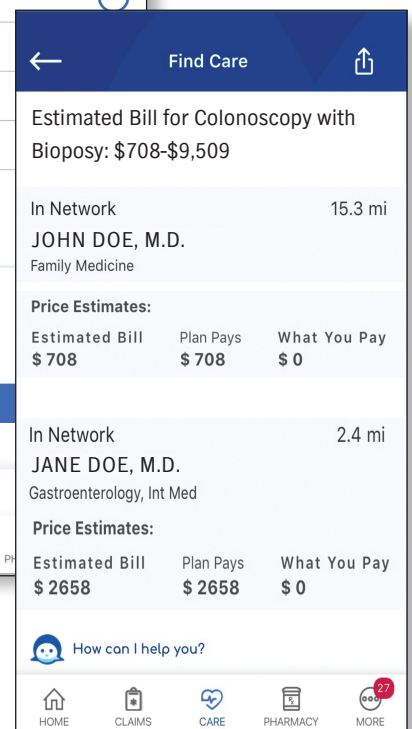
Search by name, specialty or procedure.



Customize and refine results



Compare doctors and cost



## Using the Sydney Health app

You can start using **Find Care** by downloading the Sydney Health app to your mobile device or logging in to anthem.com. Select **Find Care and Cost** from the Care menu.



\*On-screen experiences may vary by user due to personalization experiences, benefit packages, and ongoing user experience improvements.

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# When you need care quickly

Knowing where to go can save you time and money

When you need care right away, the emergency room (ER) might be the first place that comes to your mind. However, the ER may not be the best choice in every situation. You have options when you have a sudden need for care, and knowing what they are can help you save time and money – and feel better sooner.

## Where to go for care

Going to the ER or calling 911 is always your best option for emergencies. If it's not an emergency, you can see your primary care physician (PCP), have a virtual visit with a doctor, or go to a retail health clinic or urgent care center. This chart compares those options:<sup>1</sup>

<p><b>PCP</b></p> <p>Usually available during normal business hours and may also provide medical advice by phone after hours</p>	<p><b>Virtual care</b></p> <p>24/7 access to doctors through the Sydney Health<sup>SM</sup> app, no appointment needed</p>	<p><b>Retail health clinic</b></p> <p>Walk-in care clinics located in certain drugstores and major retailers</p>	<p><b>Urgent care center</b></p> <p>Stand-alone facilities, open extended hours</p>	<p><b>Emergency room</b></p> <p>Stand-alone facilities or part of hospitals, open 24/7</p>
				
<p>cost<sup>7</sup>   average wait<sup>2</sup></p> <p><b>\$\$</b>   <b>18 min</b></p>	<p>cost   average wait<sup>3</sup></p> <p><b>\$</b>   <b>10 min</b></p>	<p>cost   average wait<sup>4</sup></p> <p><b>\$\$</b>   <b>30 min</b></p>	<p>cost   average wait<sup>5</sup></p> <p><b>\$\$\$</b>   <b>30 min</b></p>	<p>cost   average wait<sup>6</sup></p> <p><b>\$\$\$\$</b>   <b>90 min</b></p>
<p>Mild asthma, back pain, flu-like symptoms, allergies, fever, sprains, diarrhea, eye or sinus infection, rash, urinary tract infection (UTI), sore throat, earaches, bumps, minor cuts and scrapes, and other nonemergency symptoms</p>	<p>Flu-like symptoms, allergies, fever, sinus pain, diarrhea, eye infection, rash, UTI</p>	<p>They help ensure tests Sore throat, earaches, bumps, minor cuts and scrapes, UTI</p>	<p>Sprain and strains, nausea, diarrhea, ear or sinus pain, minor allergic reactions, cough, sore throat, minor headache, UTI</p>	<p>Signs of a heart attack (chest pain) or stroke (sudden numbness and slurred speech), difficulty breathing, and severe burn or bleeding – and any other symptoms where it is reasonable to think you are having a life-threatening emergency or your health is in serious jeopardy</p>

# Expanding your virtual care options

Find complete care support, on your time, through the **Sydney Health app**

## Visit with a doctor at your convenience

Accessing the care you need, when you need it, matters. That's why our Sydney<sup>SM</sup> Health mobile app connects you to a team of doctors ready to help you on your time. There are two secure ways to find no-additional cost care through our app:

- 1 **Chat with a doctor 24/7 without an appointment**
  - Urgent care support for health issues, such as allergies, a cold, or the flu.
  - New prescriptions<sup>1</sup> for concerns such as a cough or a sinus infection.
- 2 **Schedule a virtual primary care appointment**
  - Routine care, including virtual annual preventive care (wellness) visits and prescription refills.<sup>1,2,3,4</sup>
  - Personalized care plans for chronic conditions, such as asthma or diabetes.

## Assess your symptoms with the Symptom Checker

When you're sick, you can use the Symptom Checker on Sydney Health to answer a few questions about how you're feeling. That information is run against millions of medical data points to provide care advice tailored to you.

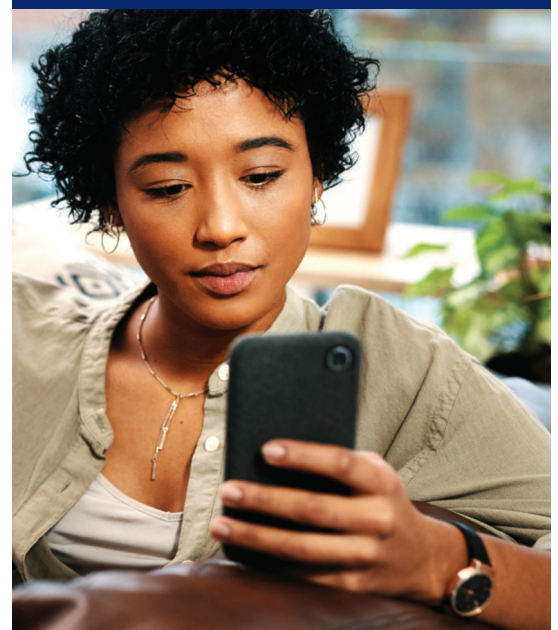
## Save money and time with virtual care

Sydney Health brings care to you anywhere, anytime. The Symptom Checker is always free to use, while virtual primary care visits and on-demand urgent care through the app are available at no-additional cost.

▶ Download our Sydney Health mobile app today.



Set up your account right away and it will be ready to use when you need it.



**85%** of virtual visits **resolve** the person's need.<sup>5</sup>

<sup>1</sup> Virtual annual preventive care (wellness) visits through the Sydney Health app are available starting September 2022. The virtual annual preventive care (wellness) visit is covered in full unless the employer has a limit or cap under their benefit plan.

<sup>2</sup> Virtual primary care medical services provided by Preventive Medical Associates P.C. through an arrangement with Hydrogen Health, which provides the virtual care platform.

<sup>3</sup> Eligible employees are those who have not yet had an annual preventive care (wellness) visit during the plan year (either virtual or in-person) whose group benefit plan covers a virtual primary care exam. If an employer group has a cap on the number of preventive care (wellness) visits that are covered in full and the employee has exceeded the cap but would like to have another preventive care (wellness) visit, they may be responsible for copays and other out-of-pocket costs for the visit. Employees should consult their benefit plan and/or contact Member Services if they have any questions.

<sup>4</sup> Your doctor will determine if a prescription is needed at time of visit.

<sup>5</sup> K Health analysis of Q4 2020 visit dispositions.

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In addition to using a telehealth service, you can receive in-person or virtual care from your own doctor or another healthcare provider in your plan's network. If you receive care from a doctor or healthcare provider not in your plan's network, your share of the costs may be higher. You may also receive a bill for any charges not covered by your health plan.

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# Wellbeing Solutions





## Focus on your well-being and earn rewards up to \$700

### The more activities you complete, the greater your reward

The Wellbeing Solutions program connects you with easy-to-use digital health and wellness tools that can help you stay your best. When you complete any of the activities listed below sponsored by your employer, you'll earn rewards to put toward electronic gift cards for select retailers. You choose the activities you'd like to complete to receive the maximum of \$700.

Activity Type	Activities	Amount
 Preventive care	Have an annual preventive wellness exam or well-woman exam with your doctor	\$20
	Get an annual cholesterol test <sup>1</sup>	\$5
	Have a colorectal cancer screening (ages 45 and older)	\$25
	Have a routine mammogram (women ages 40 to 74)	\$25
	Get an annual flu shot	\$10



Activity type	Activities	Amount
 <p><b>Condition management programs</b></p>	ConditionCare: Work one on one with your health coach and earn rewards for participating in and completing the program <sup>2</sup>	\$175 (\$75 participation and \$100 for completion)
	Building Healthy Families: Support is available through the Sydney <sup>SM</sup> Health app wherever you are in your family planning process, such as trying to conceive or raising your toddler <sup>3</sup>	\$125 (\$30, \$35, \$30, \$30)
	Well-being Coach – Weight Management: Receive one-on-one coaching by phone as you complete your goal to earn a reward <sup>4</sup>	\$50
	Well-being Coach – Tobacco Cessation: Receive one-on-one coaching by phone as you complete your goal to earn a reward <sup>5</sup>	\$50
	Complete a diabetic foot exam <sup>6</sup>	\$20
	Have diabetic lab tests <sup>6</sup>	\$30
 <p><b>Digital and wellness activities</b></p>	Log in to your Anthem account	\$5
	Connect a fitness or lifestyle device	\$5
	Complete a health assessment and receive tailored health recommendations	\$20
	Complete action plans around eating healthy, weight management, and physical activity	Up to \$25 (\$5 per action)
	Track your steps	Up to \$60 (\$2 per 50,000 steps tracked)
	Complete Well-being Coach digital daily check-ins <sup>7</sup>	Up to \$25 (\$5 per milestone)
	Update your contact information	\$15
	Use any Employee Assistance Program (EAP) service <sup>8</sup>	\$5
	Participate in the Emotional Wellbeing Resources Program	\$5
	Read five articles or watch five videos on Sydney Health or at <b>anthem.com</b>	\$5

### Well-being Coach can help you meet your goals

The Well-being Coach digital coaching app from Lark offers you 24/7 personalized support. Well-being Coach can help you maintain a healthy weight, quit tobacco, and improve your nutrition, exercise habits, mindfulness, and sleep. If you need extra support with weight management or quitting tobacco, talk to a certified health coach.

Access Well-being Coach in the Sydney Health app or at **anthem.com**.

### Earn rewards

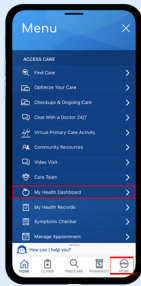
Here's how and when you'll earn rewards for completing the activities already mentioned.

**Preventive care:** Simply visit your doctor for any of the screenings or appointments listed in the chart. Your rewards are added to your account after your claim is processed, which may take up to 60 days.

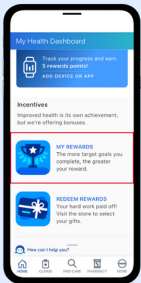
**Condition management:** Rewards are added to your account as you meet certain benchmarks or complete a program. Programs include ConditionCare (for asthma, diabetes, and heart or lung conditions), Building Healthy Families, and Well-being Coach for weight management and tobacco cessation.

**Digital and wellness activities:** Log in to the Sydney Health app or **anthem.com** to complete available activities, such as taking a health assessment, participating in the Well-being Coach digital program, and tracking your steps. Rewards are added to your account as activities are completed.

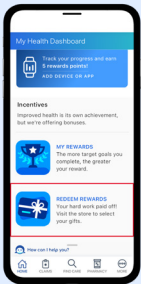
# Use your rewards toward electronic gift cards for select retailers.



1 To view your rewards, open the Sydney Health app or go to **anthem.com**. Next, go to *My Health Dashboard*.



2 Select **My Rewards**.

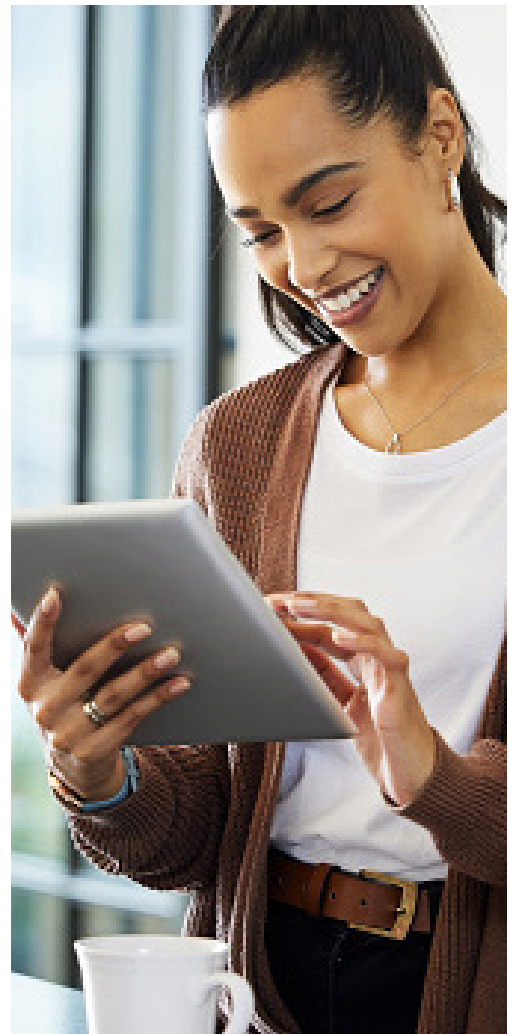


3 Select **Redeem Rewards** to see how much you've earned. Use your rewards toward electronic gift cards from popular retailers, including Amazon™, Uber®, Gap™ Options (all brands), Apple®, Target®, The Home Depot™, and TJ Maxx®. The minimum gift card amount is set by each individual retailer.

You have six months after your employer's current plan year ends to redeem reward dollars on electronic gift card(s) or the rewards will be forfeited.



Download the **Sydney Health** app by scanning this QR code with your phone's camera.



## Do you have questions?

Log in at **anthem.com** or open the **Sydney Health** app. Then go to *My Health Dashboard* and select **My Rewards** to learn more. You can also call Member Services at the number on your ID card.

1 Annual cholesterol test eligibility: men 35 years and older, women 40 years and older with a full cholesterol (lipid) panel.

2 Adult members identified as moderate or high risk are eligible for ConditionCare and may receive a reward for participation in 1 of 5 ConditionCare programs and completion for 1 of 5 ConditionCare programs: (chronic obstructive pulmonary disease (COPD), coronary artery disease (CAD), asthma, diabetes, and congestive heart failure (CHF). Rewards include \$75 for program participation and \$100 for program completion.

3 Building Healthy Families milestone completion dates: BHF Pregnancy Screener must be completed in first trimester; at least 1 of 6 mini assessments must be completed by one day prior to delivery; postpartum assessment must be completed by 56 days after delivery. Building Healthy Families rewards include \$30 for profile completion, \$35 for a BHF Pregnancy Screener, \$30 for completing at least 1 of 6 mini assessments, \$30 for a postpartum assessment.

4 Well-being Coach Weight Management program (telephonic) is available for members who are identified as high risk based on a body mass index (BMI) of 30 or higher.

5 Well-being Coach Tobacco Cessation program (telephonic) is available for members who are identified as high risk based on any tobacco usage.

6 Adult members must be diagnosed with diabetes to receive a reward for completing a diabetic foot exam and diabetic lab tests. Lab tests include Hemoglobin A1c test, LDL or Lipid test, Microalbumin and eGFR (estimated glomerular filtration rate) lab tests.

7 Members may earn rewards for completing quarterly Well-being Coach digital milestones while logging daily check-in activities on the app. Daily check-in reward values: first check-in: \$5; next 15 check-ins during first quarter: \$5; 25 check-ins during second through fourth quarters: \$5 each quarter. Log in to Sydney Health or anthem.com to download the Well-being Coach digital app. Well-being Coach is provided by Lark Health.

8 Your employer must provide coverage for Anthem EAP to earn a reward for using EAP services.

Sydney Health is offered through an arrangement with Carelon Digital Platforms, a separate company offering mobile application services on behalf of your health plan.

We encourage you to actively participate in your rewards program. You have six months after your employer's current plan year ends, to redeem reward dollars on to electronic gift card(s) or the rewards will be forfeited.

All preventive care activities are claims-based, which means your completion is determined when a claim is processed. Medical waivers apply to claim-based activities.

You have six months after your employer's current plan year ends, to redeem reward dollars on to electronic gift card(s) or the rewards will be forfeited.

A subscriber and spouse/domestic partner may earn rewards when eligible activities are completed and, in some instances, are verified by an Anthem claim.

The reward amount you receive may be considered income to you and subject to state and federal taxes in the tax year it is paid. You should consult a tax expert with any questions regarding tax obligations.

Electronic gift card availability may vary. The list of retailers available for electronic gift card rewards redemption is subject to change. Log on to [anthem.com](http://anthem.com) or open the Sydney Health app to explore the electronic gift card options available to you.

Anthem Blue Cross and Blue Shield is the trade name of Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. Independent licensee of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.



# Health Savings Account

## PROVIDED BY HSA BANK

### HEALTH SAVINGS ACCOUNT (HSA)

Virtucom wants you to be in the driver's seat when it comes to making informed healthcare spending decisions. Please take a few minutes to educate yourself on the basics of our Consumer-Driven Health Plan. The most important aspect of an HDHP is the opportunity to contribute to an HSA. The HSA provides pre-tax dollars to pay your out-of-pocket eligible expenses. You are only eligible for an HSA if you are enrolled in the Basic H.S.A. Plan or the Deluxe H.S.A. Plan. In addition to the benefit of putting away pre-tax contributions to pay for your healthcare expenses, **Virtucom provides you with \$50 per month toward their Health Savings Accounts. That is \$600 annually added to your HSA!**

Your Health Savings Account will remain with H.S.A. Bank in 2025. Your balance will roll over into the new plan year.

Your HSA Bank account balance will no longer be available on your myCigna.com account. Your balance can be located at [www.hsabank.com](http://www.hsabank.com). You are able to set account preferences through [www.hsabank.com](http://www.hsabank.com).

#### Maximum Contribution

- Employee Only = Up to \$4,300 annually for 2025
- Employee + Dependent(s) = Up to \$8,550 annually for 2025
- For those who are over age 55, you may make an additional \$1,000 "catch-up" contribution into your account.
- Virtucom's contribution to your HSA does count toward the IRS maximum contribution

This is a bank account and its your money. Any funds remaining in the account at the end of the year roll over to the next year and its your to keep even if you change jobs or retire.

#### What Expenses Are Allowed?

For a full list, reference IRS publication 502

- Medical, dental, and vision expenses.
- Prescription medications (including prescribed over-the-counter drugs).
- COBRA and Long-Term Care premiums.
- Acupuncture and chiropractor.
- Labs and x-rays.

#### Advantages of an HSA

- HSA funds used for eligible expenses are tax-free.
- Contributions reduce your taxable income and earnings grow tax-free.
- HSA funds roll over from year to year.
- HSA accounts are portable and yours to keep, regardless of your employer or insurance carrier.
- Deposits can be invested in mutual funds once you have deposited \$2,000 in your account.

#### Things to Consider

- Plans eligible for HSAs come with a higher annual deductible.
- HSA-eligible plans work differently than traditional plans. Take the time to fully understand how your plan works.
- You will need to save receipts for eligible expenses for tax filing purposes.
- You are not eligible for an HSA if you are covered by your spouse's health plan, healthcare FSA, Medicare, or TRICARE.



# Dental Benefits

Virtucom offers you dental insurance through Anthem. Your out-of-pocket costs are lowest when you visit a participating network provider; if you choose to use a dentist who does not participate in the network, your out-of-pocket costs will be higher and you could be balance-billed for any charges that Anthem considers above reasonable and customary.

Visit [www.anthem.com](http://www.anthem.com) to search for an in-network dentist.

After you have registered on [Anthem.com](http://Anthem.com), you will be able to search for in-network dentists through your profile or via the mobile app.

Anthem	Anthem Dental PPO
<b>Deductible</b>	
□ Individual	\$25
□ Family	\$75
<b>Annual Maximum</b>	\$1,000
<b>Preventive Services</b>	100%
<b>Basic Services</b>	80%
<b>Major Services</b>	50%
<b>Periodontics</b>	50%
<b>Endodontics</b>	50%
<b>Orthodontics (dependents up to age 19)</b>	50% to \$1,000 Lifetime Max
<b>Out of Network Reimbursement</b>	80th UCR

Semi-Monthly Contributions	Anthem Dental
Employee Only	\$10.24
Employee + Spouse	\$23.04
Employee + Child(ren)	\$32.90
Family	\$50.77



# Vision Benefits

Virtucom offers you vision insurance through Anthem. Costs are lowest when you visit a participating network provider. To locate a provider, please visit [www.anthem.com](http://www.anthem.com)

Anthem offers a PPO network called the Blue View Vision network.

Vision Benefits	Anthem	
	In-Network	Out-of-Network
<b>Exam Frequency</b>	1 every calendar year	
<b>Copayment for Exam</b>	\$20 copay	Up to \$42
<b>Lenses Frequency</b>	1 every calendar year	
<b>Single Vision lenses</b>	\$20 copay	Up to \$40
<b>Bifocal Lenses</b>	\$20 copay	Up to \$60
<b>Trifocal Lenses</b>	\$20 copay	Up to \$80
<b>Frames</b>	\$130 retail allowance	Up to \$45
<b>Frame Frequency</b>	1 every other calendar year	
<b>Contact Lenses</b>	\$130 retail allowance	Up to \$105

Semi-Monthly Contributions	Anthem Vision
Employee Only	\$1.52
Employee + Spouse	\$3.24
Employee + Child(ren)	\$3.32
Family	\$5.84



# Life/AD&D Insurance

## VOLUNTARY LIFE INSURANCE PROVIDED BY MUTUAL OF OMAHA

You may purchase life insurance up to \$150,000 with no medical questions asked when initially eligible. If you don't enroll in Voluntary Life coverage when first eligible as a new hire, you will be required to submit an Evidence of Insurability Form (EOI) medical questionnaire if you decide to elect coverage at a later date, even if the elected amount is below the Guaranteed Issue Amount. Mutual of Omaha must approve your application before your coverage will go into effect.



	Employee Benefit
<b>Employee Benefit</b>	Lesser of 5x salary or \$300,000 in \$10,000 increments
<b>Employee G.I.</b>	5x annual salary, up to \$150,000
<b>Spouse Benefit</b>	Increments of \$5,000 up to \$150,000, not to exceed 50% of employee amount
<b>Spouse G.I.</b>	\$30,000
<b>Child Benefit</b>	\$10,000
<b>Child G.I.</b>	\$10,000
<b>Reduction Schedule</b>	35% reduction at age 65 and 50% reduction at age 70

### TO CALCULATE YOUR PER PAY PERIOD PREMIUM:

1. Determine the amount of voluntary life and AD&D coverage you would like to elect
2. Multiply the amount in step 1 by the sum of your age rate and the AD&D rate then divide \$1,000
3. Divide the amount in step 2 by your 24 to determine your pay period premium. You have 24 pay periods over the course of the calendar year.
4. Repeat steps 1-3 to calculate the premium cost to your spouse and child, if you choose to add coverage.

Age Banded Rates per \$1,000	Employee/Spouse Rate
< 29	\$0.094
30-34	\$0.104
35-39	\$0.138
40-44	\$0.226
45-49	\$0.344
50-54	\$0.546
55-59	\$0.875
60-64	\$1.269
65-69	\$2.179
70-74	\$4.869
75+	\$10.231
	<b>Rate per \$1,000 of coverage</b>
<b>Accidental Death &amp; Dismemberment</b>	\$0.021
<b>Child Rate</b>	\$0.021



# Disability Insurance

## PROVIDED BY MUTUAL OF OMAHA

### SHORT-TERM DISABILITY BENEFIT (STD)

Virtucom offers eligible employees the option to purchase group Voluntary Short Term Disability benefit through Mutual of Omaha. Short-term disability provides income replacement on a weekly basis for a limited period of time should you become disabled and unable to work due to a non-work-related illness or injury.

Short-Term Disability	
Weekly benefit amount	60%
Weekly benefit maximum	\$1,500
Waiting period	Accident - 7 days
	Sickness - 7 days
Benefits duration	12 weeks

### TO CALCULATE YOUR PER PAY PERIOD PREMIUM:

1. Multiply your annual salary by 60% then divide by 52 weeks to determine your covered weekly earnings.
2. Multiply the amount in step 1 by your age band rate then divide \$10. If your weekly earnings amount is greater than \$1,500 then you will automatically use this maximum amount.
3. Multiple the amount in step 2 by 12 and then divide by 24 to determine your per pay period premium.

Age Banded	Rate Per \$10 of Covered Weekly Benefit
< 29	\$0.379
30-34	\$0.403
35-39	\$0.405
40-44	\$0.460
45-49	\$0.524
50-54	\$0.642
55-59	\$0.825
60-64	\$0.987
65-69	\$1.112
70-74	\$1.445
75+	\$1.445

### LONG-TERM DISABILITY BENEFIT (LTD)

Virtucom also provides you the opportunity to purchase Long-Term Disability protection. Long-term disability provides income replacement on a monthly basis for a longer period time should you become disabled and unable to work due to a non-work-related illness or injury.

Long-Term Disability	
Monthly benefit amount	60%
Monthly benefit duration	\$5,000
Benefits duration	Reducing Benefit Duration to Social Security Normal Retirement Age
Pre-existing condition limitation	6/12
Waiting period	90 days

### TO CALCULATE YOUR LTD RATE:

$$\text{Annual Salary} / 12 \text{ months} / 100 * \$0.850 = \text{Monthly Premium}$$

### To Calculate Your Per Pay Period Premium:

1. Divide your annual salary by 12 months to determine your covered monthly earnings
2. Divide the amount in step 1 by \$100 and then multiply that amount by the rate associated with your age band.
3. Divide the amount in step 2 by 24 to determine your per pay period premium.

Age Banded	Rate Per \$100 Monthly Covered Payroll
< 29	\$0.167
30-34	\$0.254
35-39	\$0.368
40-44	\$0.768
45-49	\$1.006
50-54	\$1.376
55-59	\$1.791
60-64	\$1.880
65-69	\$1.975
70-74	\$2.073
75+	\$2.177

# Voluntary Accident Insurance

## PROVIDED THROUGH MUTUAL OF OMAHA

Voluntary accident insurance pays a benefit to you for accidental injuries, both on and off-the-job, plus benefits associated with the treatment of the injury. Based on the severity of your accident, Mutual of Omaha provides a lump-sum payment to you directly and you can use the funds in any way you choose. Some of the accidents covered include, but are not limited to: fractures, burns, concussions, lacerations, dislocations, and many more. This plan pays in addition to other coverage. It can be used on it's own or to fill a gap left by other coverage and the benefits are paid directly to you. This benefit is 100% employee paid.

Semi-Monthly Contribution	Accident
<b>Employee Only</b>	\$5.45
<b>Employee + Spouse</b>	\$8.53
<b>Employee + Child(ren)</b>	\$10.51
<b>Family</b>	\$13.83

# Voluntary Critical Illness Insurance

## PROVIDED THROUGH MUTUAL OF OMAHA

Voluntary critical illness insurance pays a benefit when you are diagnosed with a critical illness such as a heart attack, stroke, and other threatening conditions as defined in the certificate. You can use the benefits however you please, such as for medical bills, a wheelchair, your mortgage, childcare, and more. You have the option to purchase Critical Illness insurance for yourself as well as your dependents. You can purchase increments of \$5,000 up to \$20,000 in Critical Illness Insurance. This benefit is 100% employee paid.

BENEFIT CATEGORY/CRITICAL ILLNESS BENEFIT	
<b>Heart/Circulatory Category</b>	
Heart Attack (Myocardial Infarction)	100% of the CI Principal Sum
Heart Transplant/Placement on UNOS List	100% of the CI Principal Sum
Heart Valve Surgery	25% of the CI Principal Sum
Coronary Artery Bypass	25% of the CI Principal Sum
Aortic Surgery	25% of the CI Principal Sum
Stroke	100% of the CI Principal Sum
<b>Organ Category</b>	
Major Organ Transplant/Placement on UNOS List	100% of the CI Principal Sum
End-Stage Renal Failure	100% of the CI Principal Sum
Acute Respiratory Distress Syndrome (ARDS)	25% of the CI Principal Sum
<b>Childhood/Developmental Category (These benefits are available to children only.)</b>	
Cerebral Palsy*	100% of the CI Principal Sum
Structural Congenital Defects*	100% of the CI Principal Sum
Genetic Disorders*	100% of the CI Principal Sum
Congenital Metabolic Disorders*	100% of the CI Principal Sum
Type 1 Diabetes*	100% of the CI Principal Sum
<b>Cancer Category</b>	
Cancer (Invasive)	100% of the CI Principal Sum
Bone Marrow Transplant	50% of the CI Principal Sum
Carcinoma in Situ	25% of the CI Principal Sum
Benign Brain Tumor	25% of the CI Principal Sum

Age	Monthly Rates per \$1,000
<30	\$0.249
30-39	\$0.441
40-39	\$0.974
50-59	\$2.094
60-69	\$4.458
70-79	\$8.229
80-99	\$11.005





## Hospital Indemnity

### PROVIDED THROUGH MUTUAL OF OMAHA

Hospital stays can be expensive. Hospital indemnity insurance can help you manage expenses if you or a loved one becomes hospitalized, by providing you with a lump-sum payment to use as you see fit. Because most medical plans may not cover all expenses, taking steps to help protect yourself can make a big difference. While in the hospital, you may need various treatments, tests and therapies to get up and about again. These services may create out-of-pocket costs beyond what your medical plan may cover, in addition to deductibles, co-pays and other expenses that come with out-of-network care.

Even more, household expenses like your rent or mortgage, car payment or child care may become harder to keep up with while you focus on recovering.

Hospital Admission	Confinement Amount
<b>Hospital Admission</b> —limited to a combined total of 2 admissions, with a claim separation of 30 days, per policy year. Hospital Admission & Hospital ICU Admission benefits are not payable on the same day.	
Hospital Admission	\$1,000 per day
ICU Admission	\$2,000 per day
<b>Hospital Confinement</b> —limited to a combined total of 30 days per policy year. Hospital/ICU confinement benefits are not payable on the same day as Hospital/ICU admission benefits.	
Daily Hospital Confinement	\$100 per day
Daily ICU Confinement	\$200 per day
Daily Newborn Nursery Care Confinement	\$75 per day, up to 2 days per policy year

Semi-Monthly Contribution	Hospital Indemnity
<b>Employee Only</b>	\$7.25
<b>Employee + Spouse</b>	\$16.67
<b>Employee + Child(ren)</b>	\$10.01
<b>Family</b>	\$20.01



## 401(k)

Virtucom has a robust 401(k) plan that matches 100% of employee contributions up to 4% of total compensation. In order to be eligible for this contribution, you must work at Virtucom for a continuous 6 month period. This is for all eligible employees who are 21 years of age working either full-time or part-time.

## Paid Time Off (PTO)

Virtucom offers employees 10 days of paid vacation, 4 paid personal days and 7 sick days throughout the calendar year. In addition, Virtucom recognizes 9 paid holidays throughout the year.



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OR BENEFITS QUESTIONS?  
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- ✓ Claims Review
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- ✓ Understanding your benefits and how they work

**Before calling,  
please be sure to  
have the following  
information  
available:**

- » Full name
- » SSN
- » Date of Birth
- » Explanation of Benefits (if applicable)
- » Dependent information (if applicable)
- » Date of service
- » Provider name
- » Billed amount

**Ironwood Claims Advocacy**

[benefitsclaims@ironwoodins.com](mailto:benefitsclaims@ironwoodins.com) | **877.437.6854**

*Speaking with Ironwood is always confidential.*



# Contact Information

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<b>Anthem Medical/Rx</b>	Anthem	1-800-331-1476	<a href="http://www.anthem.com">www.anthem.com</a>
<b>Dental</b>	Anthem	1-800-331-1476	<a href="http://www.anthem.com">www.anthem.com</a>
<b>Vision</b>	Anthem	1-800-331-1476	<a href="http://www.anthem.com">www.anthem.com</a>
<b>Life and Disability</b>	Mutual of Omaha	1-800-877-5176	<a href="http://www.mutualofomaha.com">www.mutualofomaha.com</a>



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