

# 2022 BENEFITS SUMMARY

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The information contained in this document are subject to change at any time and without any notification.

Sirona Recovery is proud to offer a competitive benefits package for our staff. From paid vacation (enjoy your birthday off!), holidays, and sick time to extremely affordable health & dental insurance options, short- and long-term disability, and free vision insurance, we're confident that we can meet your needs as an employee in our network.

We are always reviewing and strengthening our offerings to find ways to benefit all employees.

# **PAY PERIODS**

Employees are paid semi-monthly on the 15th and last day of the month.

# VACATION

Full-time employees are entitled to 80 hours of paid vacation during each of the first two years of employment. Upon completion of the second and for the third, fourth and fifth year of employment, full-time employees are eligible for 120 hours of paid vacation. Upon completion of five years of employment, employees are eligible for 160 hours of paid vacation for each full year of employment thereafter. Carryover of vacation is not allowed. New employees are credited with 80 hours of vacation following their 90-day anniversary.

90 days - 2 years: 80 hours | 3-5 years: 120 hours | 5 years: 160 hours

## PAID HOLIDAYS

- New Year's Day
- Martin Luther King Day
  Labor Day
  Thankagini
- Memorial Day
- Juneteenth Day
- July 4th (Independence Day) December 24th
- Thanksgiving Day
- Thanksgiving Friday
- December 25th
  - December 31st

## SICK LEAVE

Full-time employees are entitled to 9 paid sick days per anniversary year. An employee with less than full-time service in any anniversary year will receive sick time on a pro-rated basis based on the number of hours worked during that anniversary year. Sick leave may be accumulated to a maximum of 20 days.

## **PERSONAL DAYS**

Full-time employees are provided with 3 paid personal days per anniversary year.

## **BIRTHDAY LEAVE**

Employees receive a paid day off on their birthday.

## **HEALTH INSURANCE**

Full-time employees are eligible for health insurance on the first of the month following their hire date. United Healthcare is the health insurance carrier.

# Plan 1 • United Healthcare-Copay/PPO Plan

Deductible:	\$2,000 Single / \$4,000 Family (Embedded) (In-Network) \$5,000 Single / \$10,000 Family (Out of Network)
Coinsurance:	80% In-Network / 60% Out of Network
Preventive Care (In-Network):	Covered at 100%
Annual Out of Pocket Maximums:	\$6,000 Single / \$12,000 Family (In-Network) \$11,000 Single / \$22,000 (Out of Network)
Prescription Drugs:	\$15 Tier 1/\$45 Tier 2/\$85 Tier 3/\$200
Office Visits (PCP/SCP) (In-Network):	\$35 Primary Care (Under 19:100%)/\$70 Specialist
Emergency Room:	\$350 Copay
Urgent Care:	\$100 Copay
Virtual Visits:	\$10 Copay
Hospitalization	Deductible & Coinsurance

ELECTION	PER PAYCHECK DEDUCTION (24)
EMPLOYEE ONLY	\$40.37
LIMITED FAMILY*	\$80.74
FAMILY	\$124.73

\*Limited family is Employee + Spouse or Employee + 1 or more children

# Plan 2 • United Healthcare-HDHP/HSA Plan

Deductible:	\$2,000 Single / \$4,000 Family (In-Network) \$3,500 Single / \$7,000 Family (Out of Network)
Coinsurance:	80% In-Network / 60% Out of Network
Preventive Care (In-Network):	Covered at 100%
Annual Out of Pocket Maximums:	\$6000 Single / \$12,000 Family (In-Network) \$9,500 Single/\$19,000 Family (Out of Network)
Office Visits (PCP/SCP) (In-Network):	Deductible & Coinsurance
Emergency Room:	Deductible & Coinsurance
Urgent Care:	Deductible & Coinsurance
Virtual Visits:	Deductible & Coinsurance (\$50 Fee)
Hospitalizations:	Deductible & Coinsurance
Retail Drug Co-pays:	Deductible & Coinsurance

ELECTION	PER PAYCHECK DEDUCTION (24)
EMPLOYEE ONLY	\$22.50
LIMITED FAMILY*	\$45.00
FAMILY	\$67.50

\*Limited family is Employee + Spouse or Employee + 1 or more children.

### **DENTAL INSURANCE**

Available on a voluntary basis at the employee's expense via payroll deduction. The dental insurance is with United Healthcare.

# United Healthcare Dental Plan • Highlights

Deductible:	\$50 single/\$150 Family
Preventive	100% (not subject to deductible)
Basic Services	80% coverage after deductible
Major Services	50% coverage after deductible
Annual Maximum	\$1,500 per person/per calendar year
Orthodontic Services (up to age 19)	50%
Lifetime Orthodontic Maximum	\$1,500 per person

ELECTION	PER PAYCHECK DEDUCTIONS
EMPLOYEE ONLY	\$2.50
EMPLOYEE + SPOUSE	\$5.00
EMPLOYEE + CHILD(REN)	\$5.00
FAMILY	\$7.50

## **VISION INSURANCE**

#### www.myuhc.com

Vision insurance is available on a voluntary basis with United Healthcare and provided at **NO COST!** 

# United Healthcare Vision Plan • Highlights

Vision Exam:	Employee pays \$10 then covered at 100% every 12 months
Lenses:	Covered after a \$10 copay every 12 months (upgrades/other add-on's available at additional copayments)
Frames:	\$130 allowance, then 30% off balance every 24 months
Contact Lenses (in lieu of eyeglasses):	\$130 retail allowance, Formulary-Up to four boxes

The above are in-network benefits only. Please refer to the complete benefit summary for out of network benefits.

# FLEXIBLE SPENDING ACCOUNT (FSA)

This plan allows employees to pay for certain expenses using pre-tax dollars. Employees deduct monies from their paycheck before federal, state, Social Security and Medicare taxes are calculated. The monies are withheld from each paycheck in equal installments and reimbursed once an employee shows proof that the service was rendered. Expenses that qualify for reimbursement are Dependent Care and Medical Reimbursement (maximum \$2750/yr). Our Flexible Spending Account is administered through Diversified Benefit Services.

# **HEALTH SAVINGS ACCOUNT (HSA)**

Employees that enroll in the Option 2 High Deductible Health Plan (HDHP) can set up a Health Savings Account (HSA). This is a tax-favored account that can be used for current and future medical expenses. A health savings account can be funded with your tax-exempt dollars, by your employer, to help pay for eligible medical expenses not covered by an insurance plan, including the deductible, and coinsurance. Our Health Savings Account is administered by Optum Bank with United Healthcare.

## LIFE & AD&D

Sirona Recovery provides benefit eligible employees with \$25,000 of group life and accidental death & dismemberment (AD&D) insurance at no cost to you. The life insurance is provided by The Standard insurance company.

# Supplemental Life/AD&D • UnitedHealthcare

Employees who wish to supplement their employer sponsored Life and Accidental Death & Dismemberment (AD&D) insurance benefits may purchase additional insurance as outlined below.

BENEFIT	COVERAGE
EMPLOYEE LIFE BENEFIT AMOUNT	INCREMENTS OF \$10,000 UP TO 5 TIMES YOUR ANNUAL EARNINGS OR \$500,000
EMPLOYEE AD&D BENEFIT AMOUNT	INCREMENTS OF \$10,000 UP TO 5 TIMES YOUR ANNUAL EARNINGS OR \$500,000
DEPENDENT LIFE BENEFIT AMOUNT	
SPOUSE	INCREMENTS OF \$5,000 UP TO 50% OF THE EMPLOYEE AMOUNT OR \$250,000
CHILD	INCREMENTS OF \$2,000 UP TO 50% OF THE EMPLOYEE AMOUNT OR \$10,000
GUARANTEE ISSUE AMOUNT	
EMPLOYEE	\$100,000
SPOUSE	\$20,000
CHILD	\$10,000

#### AGE REDUCTION FORMULA (REDUCES THE ORIGINAL AMOUNT BY THE FOLLOWING)

35% AT AGE 65 | 50% AT AGE 70 | 65% AT AGE 75

# **SHORT & LONG-TERM DISABILITY**

Short- and long-term disability insurance is provided to you at NO COST!

# Short-term Disability Plan • Highlights

Maximum Weekly Benefit:	60% of your earnings up to \$1,000 per week
Duration of Benefits:	Up to 180 days

Your weekly benefit becomes payable after you have been continuously disabled for seven days.

# Long-term Disability Plan • Highlights:

Duration of Benefits: Up to 3.5 years

If you become disabled, your benefits begin after the 180th day of your disabling ACCIDENT or ILLNESS. Long Term Disability benefits start after your short term disability benefits have been exhausted.

# 401(K)

Employees may enroll on the 1st of the calendar year quarter following 3 months of service and 300 hours of work. Contributions to the plan are voluntary and limited by the maximum amount allowed by law.