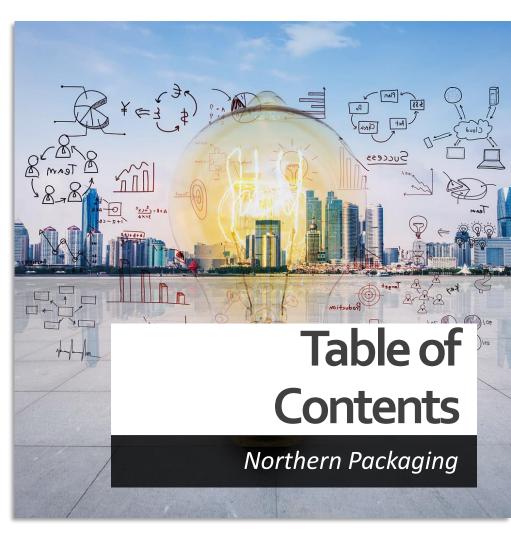


Northern Packaging Benefits Guide

Provided by The Benefits Group



Your Plan Information
Major Medical4- <u>6</u>
GAP7- <u>8</u>
Telemedicine & EAP9- <u>10</u>
Ancillary Insurance <u>11</u>
Dental (Core & Buy-Up) <u>12-13</u>
Vision <u>14</u>
Short & Long Term Disability <u>15-16</u>
Critical Illness17
Critical Illness17





Your Plan Information



Term	Definition	Northern Packaging	
Effective Date	The time of year when your insurance rates are released and your coverage becomes active	April 1	
Open Enrollment	Period of time when employees may make changes to their elected benefit options	March	
Waiting Period	Period of time which must pass before your health care coverage can begin	90 days following date of hire	
HAP Michigan Network	Ensure your doctor participates in the network before seeking care	Search Your Doctor <u>HERE</u>	
HAP Cigna Network	Out of state employee's health network	Search Your Doctor <u>HERE</u>	
HAP Applications & Waiver	Be sure to use the correct EPO or HMO Application	Download <u>HERE</u>	
Full Principal Summary, App, & Waiver		Download <u>HERE</u>	
GAP Summary & Application	Your GAP benefit & instructions for use	Download <u>HERE</u>	



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Northern Packaging: Major Medical

Helpful Terms

- **Deductible** The amount you pay for your healthcare services before your health insurer pays.
- **Coinsurance** A certain percent you must pay each benefit period after you have paid your deductible.
- **Copay** The amount you pay to a healthcare provider at the time you receive services. Your plan has **no** copays.
- Maximum Out of Pocket The most you have to pay for covered services in a plan year. After you spend this amount on deductibles, copayments, and coinsurance, your health plan pays 100% of the costs of covered benefits.





Michigan Employee's Medical Plans

<u>HMO</u> \$6,500 <u>HDHP</u>

Download Full Plan Summary <u>Here</u>

Service	Benefit	
Deductible	\$6,500 Single / \$13,000 Family	
Coinsurance	30%	
Out of Pocket Maximum	\$6,900 Single / \$13,800 Family	
Primary Care Visit	Deductible / Coinsurance	
Emergency Room Visit	Deductible / Coinsurance	
Urgent Care	Deductible / Coinsurance	

EPO \$4,000

Download Full Plan Summary Here

Service	Benefit	
Deductible	\$4,000 Single / \$8,000 Family	
Coinsurance	30%	
Out of Pocket Maximum	\$8,150 Single / \$16,300 Family	
Primary Care Visit	\$40	
Emergency Room Visit	\$300 <u>After</u> Deductible	
Urgent Care	\$65	

Search HAP's Michigan Network Here



Out-Of-State Employee's Medical Plans

EPO \$6,500 **HDHP**

Download Full Plan Summary Here

Service	Benefit	
Deductible	\$6,500 Single / \$13,000 Family	
Coinsurance	30%	
Out of Pocket Maximum	\$6,900 Single / \$13,800 Family	
Primary Care Visit	Deductible / Coinsurance	
Emergency Room Visit	Deductible / Coinsurance	
Urgent Care	Deductible / Coinsurance	

EPO \$4,000

Download Full Plan Summary Here

Service	Benefit	
Deductible	\$4,000 Single / \$8,000 Family	
Coinsurance	30%	
Out of Pocket Maximum	\$8,150 Single / \$16,300 Family	
Primary Care Visit	\$40	
Emergency Room Visit	\$300 <u>After</u> Deductible	
Urgent Care	\$65	

Search HAP's CIGNA Out-Of-State Network Here



Your GAP Insurance



In addition to your Major Medical HAP plan, you will also receive a secondary **GAP** plan.

GAP is a "bucket of money" designed to help cover out-ofpocket expenses from your major medical plan.

Northern Packaging GAP Option:

\$5,000 Inpatient (per person) with \$2,500 Outpatient (2x per family)

GAP Helps Cover:

- Deductible
- Coinsurance
- Some Copays

Note: GAP does not cover prescriptions, home healthcare, mental/nervous treatment, or substance abuse.

Click to watch

instructional video!

Download your GAP instruction sheet <u>here</u>



7

GAP: Instructions for Use

Tell your provider that you have a GAP Plan that pays directly to providers for most services that go towards deductible and coinsurance. Submit both your GAP Health Plan card with your HAP ID card.

How it works:

- Provider bills HAP first.
- HAP generates "Explanation of Benefits" (EOB) and sends to provider (to confirm payment eligibility).
- Provider sends EOB to GAP.
- GAP pays provider directly.



Should you need to submit a claim after leaving the doctor's office, go to: <u>OptiMedHealth.com</u> > Members > Claims

Download your GAP instruction sheet here





\$o Copay Telemedicine

Telemedicine is available to Northern Packaging' employees through your GAP plan.

On average, it takes just 12 minutes for a physician to return your call and 30 minutes to get resolution. Should you need to consult a doctor, **it costs just \$0.00. No hidden fees. No surprises.** This is healthcare that never requires you to read between the lines.

To register and to view instructions for use, click <u>here</u>.

Illnesses Treated:

Respiratory Infections – Sinusitis / Bronchitis Urinary Tract Infections Pharyngitis / Sore Throat / Strep Throat Pink Eye / Conjunctivitis Seasonal Allergies Cold & Flu Indigestion / Diarrhea Shingles Poison Ivy Minor Sprain and Muscular Strains Motion Sickness when Traveling



Employee Assistance Program (EAP)

Registered nurses provide expert advice about wellness, conditions, and steps to help lead a healthier life. They are available at any time 24/7. Access to an experienced nurse is just a phone call away.

Do you want to:

- Lose weight and keep it off?
- Quit smoking?
- Find out first aid information?
- Eat a healthier diet?
- Manage your stress?
- Start an exercise program?
- Find out more about a disease or condition?



Summary of Services:

Counseling

Up to three (3) counseling sessions are available for issues affecting employees <u>and</u> dependents.

Family Caregiving

Legal

A 30 minute phone or in-person consultation is available to help answer basic legal questions and simplify the process of obtaining legal help.

Financial

Convenience

Complimentary referrals to convenience services to help members make the most of their money and free time.

Online Tools and Information

The site provides a wide array of life management tools to help members with a variety of personal and/or work related issues in a private and convenient manner.

View or download access information here

All discussions between you and your EAP professional are confidential. Information regarding your contact with the EAP cannot be released without your written consent, except in the following situations: by court order, imminent threat of harm to self or others, or in situations of abuse.

Ancillary Insurance

Voluntary Dental, Vision, Short & Long Term Disability, Group Life, Voluntary Life, & Critical Illness

-





Voluntary Core Dental

Northern Packaging offers a **network-only** Voluntary Dental Insurance plan designed to provide excellent coverage and save you money!

Ensure your dentist is participating in Principal's network before seeking care by clicking <u>here</u>.

Download Your Core Dental Plan Summary <u>here</u>.

Tier	Weekly Rate
Employee Only	\$4.53
Employee + 1 Dependent	\$9.63
Family	\$17.46





Voluntary Buy-Up Dental

Northern Packaging offers an **in-and-out of network** Voluntary Dental Insurance plan designed to provide excellent non-network coverage!

Ensure your dentist is participating in Principal's network before seeking care by clicking <u>here</u>.

Download Your Buy-Up Dental Plan Summary <u>here</u>.



Tier	Weekly Rate
Employee Only	\$7.97
Employee + 1 Dependent	\$16.40
Family	\$30.06



Voluntary Vision

Ensure your eye care provider is participating in VSP's network by clicking <u>here</u>.

Walmart and Sam's Club eye care is included in VSP's network.

Download Your VSP Vision Plan Summary <u>here</u>.

Tier	Weekly Rate	
Employee Only	\$1.31	
Employee + Spouse	\$2.97	
Employee + Child(ren)	\$3.19	
Family	\$5.22	





Short Term Disability

Short Term Disability is offered to all active, full time employees.

A maximum of 60% of your predisability earnings can be covered, starting on the 8th day after an accident, and the 8th day after a sickness.

Short Term Disability benefits last up to 12 weeks.

Download full Short Term Disability plan summary and rates <u>here</u>.



Eligibility		
Job Class	All Members	
Eligible Members	All active, full time employees (except seasonal, temporary, or contract workers) who work at least 30 hours per week	
	Benefits Payable	
Primary Weekly Benefit	\$50.00 increments between \$100.00 and \$1,500.00, not to exceed 60% of predisability earnings.	
Benefit Amount	Primary Weekly Benefit less other income sources	
Definition of Earnings	Base wage	
	Benefit Qualification	
Elimination Period	Benefits begin on the 8th day for accident and 8th day for sickness	
Benefit Payment Period	Up to 12 weeks after the elimination period is satisfied	
Maternity	Treated the same as any other disability	
	Additional Benefits	
Rehabilitation Incentive Benefit	5% increase in the primary weekly benefit	
Limitations & Exclusions		
Pre-Existing Conditions	3 months prior/12 months insured	
Other Limitations	There are additional limitations to your coverage. A complete list is included in your booklet.	



Long Term Disability

Long Term Disability is offered to all active, full time employees.

60% of your predisability can be covered to a maximum benefit of \$6,000/month. Benefits begin after 90 days of disability.

Download full Long Term Disability plan summary and rates <u>here</u>.

Eligibility		
Job Class	All Members	
Eligible Members	All active, full time employees (except seasonal, temporary, or contract workers) who work at least 30 hours per week	
	Benefits Payable	
Primary Monthly Benefit	60% of your predisability earnings up to \$6,000.	
Benefit Amount	Primary monthly benefit less other income sources	
Definition of Earnings	Base wage	
Benefit Qualification		
Elimination Period	90 days	
Own Occupation Period	2 years	
Maximum Benefit Payment Period	To age 65	
	Additional Benefits	
Rehabilitation Incentive Benefit	5% increase in the monthly benefit percentage	
Survivor Benefit	Three times your primary monthly benefit to your survivor.	
	Limitations & Exclusions	
Pre-Existing Conditions	12 months prior/12 months insured	
Other Limitations	There are additional limitations to your coverage. A complete list is included in your booklet.	





Critical Illness

Critical Illness insurance is available to all active, full-time employees working at least 30 hours/week.

Download full Critical Illness plan summary and rates <u>here</u>.

Benefits Payable			
		% of Scheduled Benefit for First Occurrence	% of Scheduled Benefit for Additional Occurrences
Covered Illnesses	Cancer One	100%	100%
	Cancer Two	25%	25%
	Heart Attack	100%	100%
	Major Organ Failure	100%	100%
	Stroke	100%	100%
	 Benefits for a first occurrence of a different critical illness will be payable if incurred more than 12 months after the preceding critical illness. Benefits for additional occurrences of the same critical illness will be payable if incurred more than 12 months after the preceding critical illness and 12 months treatment free. 		
	Schedule	ed Benefits	
	Employee Benefits	Spouse Benefits	Child Benefits
Scheduled Benefit	You may choose to purchase a benefit in increments of \$5,000	You may choose to purchase a benefit in \$2,500 increments. NOTE: Spouse coverage terminates at age 70.	\$2,500
Minimum Scheduled Benefit	\$5,000	\$2,500	Not Applicable
Maximum Scheduled Benefit	\$50,000	\$25,000 Cannot exceed 50% of your scheduled benefit	Not Applicable
Guarantee Issue	\$10,000\$5,000Not ApplicableFor benefit amounts above the guarantee issue, proof of good health is required.Image: Comparison of the second s		Not Applicable
Maximum Lifetime Benefit	Two times the scheduled benefit amount.		





Group Life Insurance

\$15,000 + Accidental Death & Dismemberment

Northern Packaging offers Group Life Insurance and Accidental Death and Dismemberment.

Download your full plan summary here.





Voluntary Life Insurance

\$10,000 Minimum, \$300,000 Maximum

Northern Packaging provides employees the option to purchase additional Life Insurance.

Download Your Voluntary Life Insurance Plan Summary & Rate Sheet <u>here</u>



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Click HERE to watch instructional video!

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Experience savings at your local pharmacy. With savings up to 80% off, you're going to want to tell all of your friends and family. Try it! You'll be surprised how many times it will beat your insurance.

DID YOU KNOW?

Over 30% of prescriptions never get filled due to high costs.

30%

40% 40% of the top ten prescription drugs have increased by over 100% in price.

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WWW.CLEVERRX.COM



Provider Links & Claims Support

Always contact your HR representative *first*!

HAP

www.HAP.org (313) 872-8100

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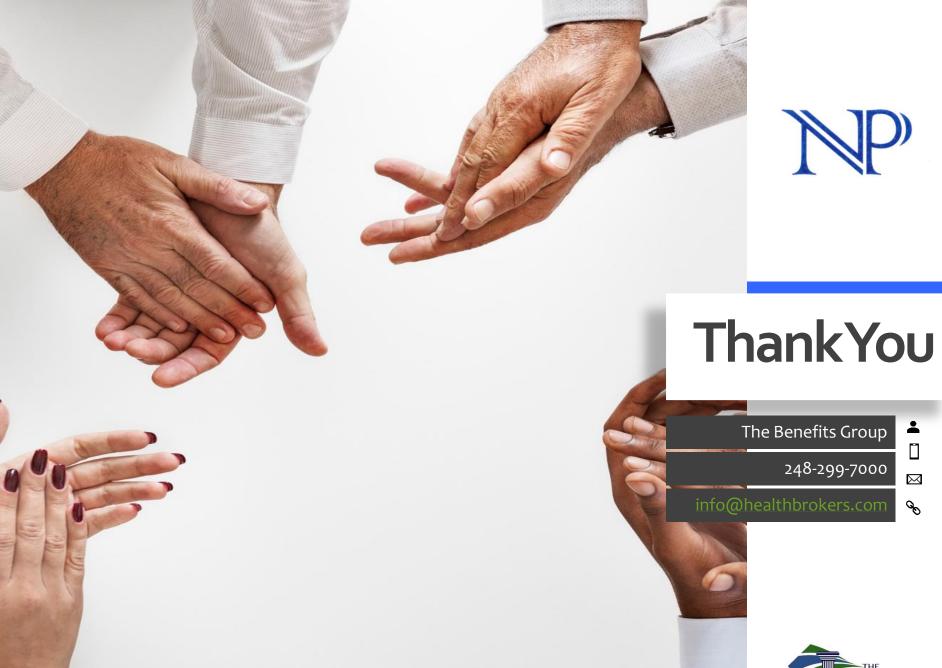
www.Principal.com 800-123-4567

OptiMed GAP

www.OptiMedHealth.com

800-482-8770 Claims assistance email: customercare@optimedhealth.com





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