BENEFIT HIGHLIGHTS

PLAN YEAR: JAN. 1 - DEC. 31, 2021









WHAT TO KNOW



TWO HEALTHCARE PLANS

We offer a High Deductible Health Plan (HDHP) with a Health Savings Account (HSA) and a Standard plan. The HDHP has a \$1,500 deductible if you enroll as an individual, and a \$3,000 deductible if you enroll with dependents. The Standard Plan has a \$500 deductible if you enroll as an individual, a \$1,000 deductible if you enroll with one dependent, and a \$1,500 deductible if you enroll with multiple dependents. A deductible is the amount of money you pay out-of-pocket for services before insurance starts to pay.

HEALTH SAVINGS ACCOUNT

A health savings account, or HSA, is a great way to save for healthcare expenses. If you enroll in the HDHP, you will be able to open an HSA. See page 5 of this booklet for more details.

BENEFITS WEBSITE

Your benefits website, **www.sightandsoundbenefits.com**, is your one-stop-shop for information about your benefits and healthcare. Take a look!



MEDICAL BENEFITS



If you are a full-time employee of Sight & Sound, regularly working over thirty (30) hours per week, you are eligible to participate in the Benefits Program. You have the option to enroll yourself and/or your eligible dependents in Sight & Sound's benefits program.

Eligible dependents include: (1) Your legal spouse (if your spouse is employed and is offered medical coverage by his/her employer, they are not eligible for coverage under the Sight & Sound plan); (2) your children under the age of 26. Only those dependents who meet the eligibility requirements can enroll for coverage.

The medical plans are administered by Meritain through the Aetna network.

	STANDARD PLAN	HDHP	
Plan Year Deductible	\$500 Employee \$1,000 Employee + 1 \$1,500 Family	\$1,500 Employee \$3,000 Family If enrolled as a family, one person can satisfy the full \$3,000 family deductible	
Medical Tax Savings Account	N/A	Health Savings Account (HSA)	
Out-of-Pocket Maximum (includes deductible, copays, and Rx)	\$6,350 Employee \$11,025 Family	\$4,350 Employee \$6,525 Family	
Referrals Required	No	No	
Alere Family Health (for employees at the Lancaster location)	\$0	\$0	
Preventive Care Services - e.g., annual mammogram, annual physical or well child visit (based on age and any diagnoses)	\$0	\$O	
Office Visit	\$25	100% Covered after Deductible	
Specialist Office Visit	\$40	100% Covered after Deductible	
Outpatient Routine X-ray	80% Covered after Deductible	100% Covered after Deductible	
Outpatient Complex Diagnostic - e.g., MRI, CT Scan	80% Covered after Deductible	100% Covered after Deductible	
Outpatient Lab	80% Covered after Deductible	100% Covered after Deductible	
Outpatient Surgery	80% Covered after Deductible	100% Covered after Deductible	
Inpatient Hospital	80% Covered after Deductible	100% Covered after Deductible	
Urgent Care Visit	\$40	100% Covered after Deductible	
Emergency Room	\$125 – Waived if Admitted	100% Covered after Deductible	
PRESCRIPTION DRUG PLAN (Retail: 30-day supply / Mail Order: 90-day supply)			
Prescription Drug Out-of-Pocket Maximum	\$1,000 per person with a family max of \$3,000	Combined with Medical Out-of-Pocket Maximum	
Generic Preferred	15%	\$5 / \$10 Copay after Deductible	
Preferred Brand Name	20%	\$15 / \$30 Copay after Deductible	
Non-Preferred Generic and Brand Name	30%	\$30 / \$60 Copay after Deductible	
Specialty Medications administered through Archimedes Rx	\$O	\$0	

CONTACT INFORMATION

Medical

www.meritain.com 1-888-324-5789





MEDICAL 24 PAYROLL DEDUCTIONS	STANDARD PLAN	HDHP
Employee	\$112	\$91
Employee + Spouse	\$197	\$154
Employee + Child(ren)	\$197	\$154
Employee + Family	\$239	\$187

DENTAL BENEFITS

The dental plan is administered by Guardian.

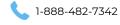


	In-Network DentalGuard Preferred	Out-of-Network
Plan Year Deductible (individual / family)	\$50 / \$150	\$50 / \$150
Annual Maximum (per individual)	\$1,500	\$1,500
Preventive & Diagnostic Services	100%	100%
Basic Services (fillings, simple extractions)	90%	80%
Major Services (root canal, crowns, bridge, dentures)	60%	50%
Orthodontia (up to age 19)	Not Covered	Not Covered

CONTACT INFORMATION



https://www.guardianlife.com/login





DENTAL 24 PAYROLL DEDUCTIONS	PLAN COST
Employee	\$18.59
Employee + Spouse	\$39.30
Employee + Child(ren)	\$39.30
Employee + Family	\$60.00





VISION BENEFITS

The vision plan is administered by Guardian. The benefits listed below are available to you once every 12 months.

	In-Network	Out-of-Network
Well Vision Examination	\$20 copay	Guardian will pay a max of \$50 after \$20 copay
Medically Necessary Contact Lenses (available in lieu of complete set of glasses)	\$20 copay	Guardian will pay a max of \$210 after \$20 copay
Elective Contact Lenses (not medically necessary; available in lieu of complete set of glasses	Guardian will pay a max of \$130 (copay waived)	Guardian will pay a max of \$120 (copay waived)
Frames	Guardian will pay a max of \$130 retail + 20% off balance after \$20 copay	Guardian will pay a max of \$48 after \$20 copay
Lenses	\$20 copay – coverage includes single vision, bifocal, trifocal or lenticular lenses	Single Vision - Guardian will pay a max of \$48 after \$20 copay Bifocal - Guardian will pay a max of \$67 after \$20 copay Trifocal - Guardian will pay a max of \$86 after \$20 copay Lenticular - Guardian will pay a max of \$126 after \$20 copay
	Discounts averaging	

CONTACT INFORMATION

Laser Surgery – available

one time per eye per



lifetime

https://www.guardianlife.com/login



1-888-482-7342



N/A

VISION 24 PAYROLL DEDUCTIONS		
Employee	\$4.01	
Employee + Spouse	\$8.03	
Employee + Child(ren)	\$8.03	
Employee + Family	\$12.86	

15% off the network

provider's normal charge

for laser surgery or 5% off

any promotional price, whichever is better



HEALTH SAVINGS ACCOUNT (HSA)

What is an HSA?

A health savings account (HSA) is an account that you can use to pay medical expenses. It's like a personal savings account, except that you use the money only for qualified medical, dental, and vision expenses. Money in the savings account can help pay the deductible. Money left in the savings account earns interest and is yours to keep.

It's Yours.



Your HSA is yours. You own it, and you can use the money in your HSA to pay for eligible healthcare expenses for your dependents, even if they're not on your plan.



Funds Roll Over.

If you have leftover money at the end of the year, it simply rolls over to the new plan year. You don't lose it.

Tax-Free Savings.

goes in tax-free as well as fully tax-

is tax-free as long as you use that money for



MAX CONTRIBUTIONS FOR 2021

\$3,600 per year for an individual. \$7,200 per year for a family. And an extra \$1,000 if you're over age 55.

CONTACT INFORMATION



mww.healthequity.com/members/contact



1-866-346-5800





OTHER BENEFITS

Direct Primary Care

For employees of the Lancaster location, you can receive primary care services at Alere Family Health at no cost. This benefit is only for those enrolled in a Sight & Sound medical plan. Learn more at www.sightandsoundbenefits.com.

Life Insurance & AD&D

Life Insurance provides additional financial protection for you and your family in the event of your death or serious accident. Sight & Sound Ministries, Inc. provides all employees 150% of your annual pay to a maximum of \$150,000 in Life and AD&D insurance. There is no cost for this coverage.

MRxEmpower

Because of our partnership with MRxEmpower with GoodRx, you can easily research and compare prescription prices to help you make an informed decision and save money! Register at magellanrx.com/member/registration.



OTHER BENEFITS

Employee Assistance Program

Sight & Sound is committed to the health and well-being of our employees and their families. If you are struggling with a personal issue, our EAP through Guardian can help you tackle issues before they become more serious and difficult to manage. Call 1-800-386-7055 for unlimited phone consultations, and up to 3 referrals to local counselors at no charge.

College Tuition Benefit

Employees participating in the Guardian Dental Plan will earn Tuition Rewards that can be used to pay for up to one year's tuition at a SAGE Scholar college for an eligible dependent. Visit guardian.collegetuitionbenefit.com/index.cfm to learn more.



VOLUNTARY BENEFITS

The benefits below are available to you should you choose to purchase them. These voluntary benefits are entirely funded by you, not Sight & Sound.

Short-Term Disability

Short-Term Disability through Guardian provides you some financial relief during a time of temporary or permanent disability. Your benefit amount is 60% of your basic weekly earnings to a maximum of \$1,500 a week. The maximum benefit duration is 11 weeks of payment (4 weeks for a routine pregnancy/6 weeks for a cesarean section). The elimination period (amount of time you must be out of work prior to being eligible for an STD claim) is 14 consecutive days. Regular full-time and contracted cast employees are eligible for this coverage.

Voluntary Additional Life Insurance & AD&D

This voluntary benefit is offered by Guardian. It will enhance the limit provided to you by Sight & Sound Ministries, Inc. You may choose coverage at a minimum of \$20,000 and a maximum of \$500,000 or 5x (times) base annual salary (whichever is the lesser). Coverage is offered in increments of \$10,000. Coverage for your spouse cannot exceed 50% of your election and coverage for your child(ren) cannot exceed 10% of your election.

401(k) Retirement Plan

Sight & Sound welcomes and encourages all employees to participate in the 401(k) retirement plan. This plan offers tax free savings for the future and retirement.

Visit out Benefits Website for more details: www.sightandsoundbenefits.com



WE ARE AT YOUR SERVICE

We have great news for all employees who have chosen to enroll in our healthcare & benefits program. As our benefits consultants, Lacher can help you get the most from your healthcare and benefits program.

WE WILL HELP YOU OR A MEMBER OF YOUR FAMILY WITH

- ✓ Any claims that you believe haven't been properly paid
- ✓ Questions regarding a bill sent by a doctor, dentist, lab or hospital
- ✓ Further clarification on any insurance matters
- Questions about your healthcare benefits

DEDICATED ADVOCATE

We have a dedicated advocate who is ready to help you deal with any situation in a discreet, confidential manner.

Our advocate is:

Rebecca Gebelein

Direct line: 215-721-1015 benefits@sight-sound.com

Fax: 215-723-8604

LACHER





To enroll or make a change to your healthcare coverage, go to **www.sightandsoundbenefits.com** and click on the 'Enrollment' link.

For details about your healthcare plans and your rights as a participant, visit www.sightandsoundbenefits.com.

This Benefit Highlights describes highlights of our healthcare & benefits in non-technical language. Your specific rights to benefits under the plan are governed solely, and in every respect, by the official plan documents and not the information in this Benefit Highlights. If there is any discrepancy between the description of the benefits as contained in the materials and the official plan documents, the language of the official plan documents shall prevail as accurate. Please refer to the planspecific documents for detailed plan information. Any of these benefits may be modified in the future to meet Internal Revenue Service rules or otherwise as decided by Sight & Sound. This Benefit Highlights may not be redistributed in any form or by any means without express, prior permission in writing. Carrier specific information was provided by Aetna.

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