



Benefits Summary

(Abbreviations are defined as follows: EE = Employee, ER = Employer, PPO = Preferred Provider Organization, HMO = Health Maintenance Organization, POS = Point of Service, DMO = Dental Maintenance Organization, LTD = Long Term Disability, STD = Short-Term Disability, AD&D = Accidental Death & Dismemberment and CIL = Cash in Lieu of benefit.)

Plan type(s)	Provider (s)	Enrollment date for eligible EEs	Plan Overview
Medical Plans			
HMO	Kaiser Permanente	1 st of the month following hire date	<ul style="list-style-type: none"> • Deductible: None • Co-insurance: 100% provider paid • Office Visit Co-payment: \$10 • Prescription Coverage: \$10 Generic / \$20 Formulary Brand Name. Mail Service (up to 100 day supply) \$20 Generic, \$40 Formulary Brand Name. • Lifetime maximum benefit: Unlimited.
HMO	Blue Shield	1 st of the month following hire date	<ul style="list-style-type: none"> • Deductible: None • Office Visit Co-payment: \$10 • Prescription Coverage: \$10 Generic, \$15 Formulary Brand Name, \$30 Non-Formulary. Mail Service (up to 90 day supply): \$20 Generic, \$30 Formulary Brand Name, \$60 Non-Formulary. • Lifetime Maximum Benefit: Unlimited.
POS	Blue Shield	1 st of the month following hire date	<ul style="list-style-type: none"> • Deductible: HMO: None; PPO & Out of Network: \$500 Individual / \$1,000 Family. • Co-insurance: HMO: N/A; PPO: 10%; Out of Network: 30%. • Office Visit Co-payment: HMO: \$10. • Prescription Coverage: \$10 Generic, \$15 Formulary Brand Name, \$30 Non-Formulary. Mail Service (up to 90 day supply): \$20 Generic, \$30 Formulary Brand Name, \$60 Non-Formulary. • Lifetime Maximum Benefit: HMO: Unlimited; PPO & Out of Network: \$2,000,000.
PPO	Blue Shield	1 st of the month following hire date	<ul style="list-style-type: none"> • Deductible: \$0 In-Network; Out of Network: \$500 Individual / \$1,000 Family. • Co-insurance: In-Network: 10%; Out of Network: 30%. • Office Visit Co-payment: \$10 In-Network. • Prescription Coverage: \$10 Generic, \$15 Formulary Brand Name, \$30 Non-Formulary. Mail Service (up to 90 day supply): \$20 Generic, \$30 Formulary Brand Name, \$60 Non-Formulary. • Lifetime Maximum Benefit: \$6,000,000.

Plan type(s)	Provider (s)	Enrollment date for eligible EEs	Plan Overview
Dental Plans			
PPO	Delta Dental	1 st of the month following hire date	<ul style="list-style-type: none"> • PPO Plan • Dentist of Choice • Deductible \$50 individual / \$150 family. Deductible is waived for Preventive Services. • Preventive Services covered at 100% • Basic Services covered at 80% • Major Services covered at 50% • Orthodontia covered at 50% (Lifetime Max benefit \$1,000 for orthodontia) • Annual Max benefit \$1,000
Vision			
Vision	Company: VSP	1 st of the month following hire date	<ul style="list-style-type: none"> • Paid annual exam • Lenses once every 12 month • Frames every 24 months
Life Insurance Plans / AD&D / LTD			
Life & LTD Insurance	Fortis	1 st of the month following hire date	<ul style="list-style-type: none"> • EE Coverage: Life - \$50,000 • EE Coverage: AD&D - \$50,000 • EE Coverage: LTD - Up to 60% of pre-disability salary to a maximum of \$5,000 per month up to age 65
AFLAC Plans			
Accident / Disability	AFLAC	1 st of the month following hire date	<ul style="list-style-type: none"> • Provides benefits to help cover expenses associated with an accidental injury
Personal Cancer	AFLAC	1 st of the month following hire date	<ul style="list-style-type: none"> • Provides Benefits hospital confinement, radiation, chemotherapy, and surgery. First time occurrence benefit
Personal Sickness Indemnity	AFLAC	1 st of the month following hire date	<ul style="list-style-type: none"> • Benefit paid for physician visits, hospitalization, hospital confinement, major diagnostic exams
Hospital Intensive Care	AFLAC	1 st of the month following hire date	<ul style="list-style-type: none"> • Provides a benefit when individual confined to a hospital intensive care regardless of any other insurance coverage
Short Term Disability	AFLAC	1 st of the month following hire date	<ul style="list-style-type: none"> • Provides a short term source of income should individual become disabled due to sickness or off the job injury
Personal Recovery	AFLAC	1 st of the month following hire date	<ul style="list-style-type: none"> • Pays a first occurrence benefit as well as hospital confinement and continuing care for Heart Attack, Coronary Bypass Surgery, Transplants and Stroke
Flexible Spending Accounts			
HealthCare	AFLAC	1 st of the month following hire date	Maximum EE pre-tax contribution: \$1,000 per year
Dependent Care	AFLAC	1 st of the month following date of hire	Maximum EE pre-tax contribution: \$5,000 per year

Retirement Programs			
Plan type(s)	Provider (s)	Enrollment date for eligible EEs	Plan Overview
401(k)	Massachusetts Financial Services (MFS)	Enrollment is quarterly – Employee eligible next open quarter after hire date.	<ul style="list-style-type: none"> • Formula: EE contributes 1% to 20% of salary up to IRS maximum • ER matching contributions: matching 50% of first 6% of eligible EE's contribution • Online Account managements and advice
Employer Paid Time Off Benefits			
Program	EE Eligibility	Program Overview	
Vacation	Immediately after start of employment	Benefit: 2 weeks per year for first 5 years; 3 weeks per year after 5 years, 4 weeks per year after 10 years	
Holidays	Immediately after start of employment	Benefit: 12 days per year	
Personal/Sick Leave	Immediately after start of employment	Benefit: 5 days per year for personal/sick leave	
Bereavement Leave	Immediately after start of employment	Benefit: up to 3 days of paid bereavement leave	
Other Programs (i.e., Wellness, Fin. Planning, Flex)			
Tuition Reimbursement	After 6 months of employment	<ul style="list-style-type: none"> • Benefit: up to \$2,000 per year of tuition reimbursement with passing grade 	
Employee Referral Bonus Program	Immediately after start of employment	<ul style="list-style-type: none"> • Benefit: Up to \$1,000 discretionary bonus, if the referred applicant is hired and subsequently works at least three months and the referring employee remains a current employee of SBAR 	
Credit Union Membership	Immediately after start of employment	<ul style="list-style-type: none"> • Benefit: Membership in e- Central Credit Union 	
Direct Deposit	Immediately after start of employment	<ul style="list-style-type: none"> • Benefit: Direct deposit of paycheck into financial institution of choice. 	
Financial Planning	Immediately after start of employment	<ul style="list-style-type: none"> • Benefit: Individually customized consulting and seminars on financial and retirement planning, tax strategies, long term care, education funding and estate planning. 	
Reward and Recognition Programs			
Performance Awards	Immediately after start of employment	<ul style="list-style-type: none"> • Benefit: Cash or Gift certificates awarded based on performance, similar to JPL rewards and recognition programs. 	
Night on the Town	Immediately after start of employment	<ul style="list-style-type: none"> • Benefit: Whenever an employee is recognized, either by their fellow employees, supervisors or customers, for going the extra mile as it relates to both customer satisfaction and innovation the employee receives individual recognition and a check (ranging from \$100 to \$500) for this extra effort 	