

# OPEN ENROLLMENT 2021 October 26 November 13

Enroll To Have a Secured Future

# PC(USA) Optional Benefits

- Delta Dental
- Davis Vision
- Flexible Spending
- TransAmerica Portable
- One America Portable

# **Board of Pensions Benefits**

- Medical and Prescription Drug
- Aetna Dental
- Supplemental Death Benefits
- Retirement Savings Plan

## Delta Dental - Optional Dental Plans

#### Delta Care (Exclusive Provider)

- Low Premium rates for Standard Dental Benefits
- No Deductible, No Maximum
- No Restrictions on Pre-Existing Coverage
- Fixed Co-Payments for Basic and Major Services
- Co-Payments also Covers Lab Fees
- Delta Care Benefits are only available through Dentists who are in the Delta Care Network

#### Delta PPO & PPO Plus Premier

- Deductibles of \$50 for individuals & \$150 for family
- Dependents are covered up to the age of 26
- Most of the services are covered at 50% of the allowable amounts
  - Annual Maximum of \$1,000
- A waiting period for Orthodontia Treatments



### **Delta Care Plan Monthly Rates**

Single	Employee & Spouse	Employee & Children	Family (Employee, Children and Spouse)
\$18.36	\$36.80	\$40.60	\$64.04

### Delta PPO & PPO Plus Premier Monthly Rates

STATE OF STREET

Single	Employee & Spouse	Employee & Children	Family (Employee, Children and Spouse)
\$29.93	\$65.82	\$73.30	\$115.20
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# **Davis Vision Optional Vision Plan**

#### Eve Exams

Every 12 months – Covered In Full – with a \$10 co-pay

#### Spectacle Lenses

Every 12 months– Cover In full for standard visions, lined bifocal/trifocal Lenses – with a \$20 co-pay

#### Frames

Every 24 months – Covered In Full for any fashion or designer frames in The Davis Vision Collection (up to \$160 value)

Contact Lenses Every 12 months – Covered In Full - \$20 co-pay (Allowance of \$60 or \$130 Based on lense type)

#### **Monthly Rates**

Single	Employee & Spouse	Employee & Children	Family (Employee, Children and Spouse)
\$6.98	\$12.57	\$13.27	\$20.95



# Flexible Spending Account Optional

A Flexible Spending Account (FSA) allows you to use tax-free dollars from your paycheck to pay for the following:

- Healthcare Expenses
- Dependent Care
- Transportation & Qualified Parking Expenses

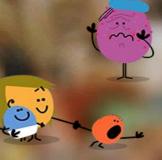


## Healthcare

#### **Eligible Flexible Spending (FSA) expenses:**

Deductibles	Co-payments
Office Visit Co-Pays	Prescription Drugs
Doctor & Lab Fees	Prescription glasses/contacts
Eye Exams	Medical Equipment
Chiropractic Services	Dental Expenses
Physical Exams	Physical Therapy
Lasik Eye Surgery	Orthodontia Treatments

Maximum Allowed for 2021 is \$2.800



### **Dependent Care**

**Eligible expenses for Dependent Care** 

2	After School Care	Custodial/Elder Care
	Day Care	Montessori Schools (Pres-K)
ć	Nanny Expenses	Nursery Schools
	Pre-Schools	Private Sitters (must claim income)
. 7	Summer Day Camps	Extended Day Programs

Maximum amount allowed for 2021

- \$5,000 for married filing a joint tax return
- \$2,500 if married filing separate
- \$5,000 if single



# Transportation Spending Account

#### <u>Benefits</u>

- · Contributions are non-taxable for employees
- Use to pay for qualified parking expenses for work, mass transit passes, or vanpooling.
  You will enjoy the pre-tax savings of between 25% 40% on these expenses.
- Purchase mass transit or parking passes on-line at your local provider's website; have them delivered to your home or office for convenience.
- For 2021 you may contribute a maximum of \$260 per month for parking fees and/or transit passes or vanpooling.

#### Eligible Expenses

- Transit Passes Any pass, token fare card, voucher, etc.
- Vanpooling Transportation to and from work and an employee's residence if in a commuter highway vehicle

Unused Transit Dollars are rolled over into the next plan year.



### Use it or Lose It!

- Our FSA plan offers a 2 1/2 month extension to claim or use your 2021 funds.
  - March 15, 2021 is the deadline to use your funds for 2021.
    March 31, 2021 is the deadline to submit your claims for 2021.

**FSA** Store

### How To Submit Claims?

- By fax to 502-244-1162
- Questions? 502.244.1161
- By email to claims@bmsllc.net
- By mail to BMS LLC, PO Box 43656 Louisville, KY 40253
- Online www.myflexonline.com
- MyFlexMobile free app available via iTunes store or Google Play

To Access FSA Store:

- Visit fsastore.com/BMSCSR
- **Click FSA Store link on**
- BMSLLC.net

#### Transamerica Critical Assistance Plus - Portable

#### Benefits

- Helps pay for the cost with initial occurrence of serious illnesses like
- heart attack, stroke, cancer and other illnesses listed in the policy
- Coverage amounts range from \$10,000 to \$50,000
- Coverage for spouse and children (under the age of 25)

### Transamerica Accident Advance - Portable

Accident Advance pays benefits you can use for medical bills and other out-of-pocket expenses – or for any other purpose, including paying your mortgage or other bills. Benefits

- Helps to offset your major medical deductible
- Spouse and children coverage available
- Convenient payroll deductions
- Guaranteed issue Coverage
- Benefits are paid directly to you
- You can keep you coverage if you change jobs or retire.



# One America Group Term Life Insurance Portable

Benefits

- Plan offers flexibility to choose a benefit amount that fits your budget
- Affordable Group Rates coverage beginning at \$10,000 up to \$500,000
- Coverage for Spouse and children available
- Convenient payroll deduction
- Guaranteed issue for timely applicant