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2016 - 2017 Employee Benefits Guide

The financial security and general welfare of our employees is of vital importance to Kass Shuler, P.A. This is why we provide you and your family with an employee benefits package. Our primary objective in selecting these products is quality, insurance company stability, and the opportunity to purchase coverage you might need at competitive prices.

The financial impact of medical costs can be severe if you are not properly protected. With this in mind, Kass Shuler, P.A. provides insurance plans to all eligible employees and their families. We urge you to take advantage of the enrollment period so you may better protect yourself and your family against the high cost of medical care.

ELIGIBILITY

You and your dependents are eligible for benefits if you are classified as an active full-time employee working 30 or more hours a week. Your coverage is effective the first of the month following a 60 day waiting period. New Hires should enroll within the first 30 days of employment. You may cover your spouse and your eligible dependent children.

ANNUAL ENROLLMENT

“Open Enrollment” is the time of year in which you may enroll, drop, or make changes to your benefits. The benefit choices you make should be tailored to your personal needs. After the open enrollment period ends, you may not add, delete, or change the coverage you have selected for yourself and your dependents until the next open enrollment period, which is held every year in March for an effective date of April 1st. The only exception is if you have a qualifying event. A qualifying event includes, but is not limited to:

- Marriage or divorce
- Birth or adoption of a dependent child
- Change in custody of a dependent child
- Death of a spouse or dependent child
- Your spouse has a change of employment or status affecting benefits coverage
- Your change of employment status
- You experience an involuntary loss of other group benefits coverage

ENROLLMENT PROCEDURES

Medical Plan / Life / Accidental Death and Dismemberment / Dental / Voluntary Plans

- If you are eligible and would like to enroll, you will need to complete an Enrollment Form, which Bernadette Neely will email to you along with other benefits within your 60 day waiting period. At that time, you will have an opportunity to schedule an appointment to meet with a Benefit Counselor to enroll in these benefits. If you have any questions, see Paula St. Clair for assistance with these benefits.

Not all plan provisions, limitations, and exclusions are included in this publication. In the event of any conflict between the information contained in this publication and the plan provisions, the Plan Documents and insurance contracts will govern. Copies of those documents are available from Administration for your inspection during normal business hours.

Your 2016 / 2017 Benefits

Kass Shuler, P.A. believes that benefits are a critical part of your work and family life, and will continue to do everything we can to provide you with benefits that will fit your needs.

Medical Plan

Cigna will continue to be Kass Shuler, P.A.'s health care provider for 2016/2017. We will continue to offer a choice of 3 plan designs: Open Access HSA (**NEW OPTION**), PPO Choice and a PPO Preferred. This allows you to select the plan that best suits your lifestyle and healthcare spending.

Cigna Open Access HSA		Cigna PPO Choice Plan			Cigna PPO Preferred			
Coverage	In-Network Providers	Coverage	In-Network Providers	Non-Network Providers	Coverage	In-Network Providers	Non-Network Providers	
Deductible (Individual/Family)	\$4,000 / \$12,000 <i>(If family is enrolled, the Individual deductible and out of pocket no longer apply. One individual will not have to meet more than \$6,850 in a Calendar year.)</i>	Deductible (Individual/Family)	\$1,000 / \$3,000	\$3,000 / \$9,000	Deductible (Individual/Family)	\$500 / \$1,500	\$2,000 / \$6,000	
Co-Insurance Percentage	80%	Co-Insurance Percentage	80%	50%	Co-Insurance Percentage	90%	50%	
In-Patient Hospital (Pre-cert Required)	80% after ded.	In-Patient Hospital (Pre-cert Required)	Facility Charges: \$500 copay per Admission; then 80% Non-Facility Charges: 80% after ded.	Facility Charges: \$1,000 copay per admission; then 50% Non-Facility Charges: 50% after ded.	In-Patient Hospital (Pre-cert Required)	90% after ded.	Facility Charges: \$500 copay per admission; then 50% Non-Facility Charges: 50% after ded.	
Outpatient Surgery (Pre-cert Required)	80\$ after ded.	Outpatient Surgery (Pre-cert Required)	Facility Charges: \$250 copay per Admission; then 80% Non-Facility Charges: 80% after ded.	Facility Charges: \$500 copay per Admission; then 50% Non-Facility Charges: 50% after ded.	Outpatient Surgery (Pre-cert Required)			
Emergency Room Services	80% after ded.	Emergency Room Services	\$300 copay		Emergency Room Services	\$200 copay		
Urgent Care Visit	80% after ded.	Urgent Care Visit	\$35 copay	50% after Ded.	Urgent Care Visit	\$30 copay	50% after Ded.	
Primary Physician Services	80% after ded.	Primary Physician Services	\$25 copay	50% after Ded.	Primary Physician Services	\$20 copay	50% after Ded.	
Specialist Physician Services	80% after ded.	Specialist Physician Services	\$35 copay	50% after Ded.	Specialist Physician Services	\$30 copay	50% after Ded.	
Preventive Care	100%, no ded.	Preventive Care	\$0 copay	50% after Ded.	Preventive Care	\$0 copay	50% after Ded.	
Well Woman Care	100%, no ded.	Well Woman Care	\$0 copay	50% after Ded.	Well Woman Care	\$0 copay	50% after Ded.	
Prescriptions	80% after ded.	Prescriptions	\$5 Tier 1 \$25 Tier 2 \$50 Tier 3	Appropriate copay + 50% of the full cost of prescription	Prescriptions	\$10 Tier 1 \$20 Tier 2 \$40 Tier 3	Appropriate copay + 50% of the full cost of prescription	
Mail Order Prescriptions	80% after ded.	Mail Order Prescriptions	3 x retail copay, minus \$10	N/A	Mail Order Prescriptions	2 x retail copay	N/A	
Maximum Out of Pocket (Individual/Family)	\$6,550 / \$13,100 (includes ded.) (\$6,850 Ind w Family)	Maximum Out of Pocket (Individual/Family)	\$5,000 / \$12,700 Includes ded. & copays	\$10,000 / \$30,000 (includes ded. & copays)	Maximum Out of Pocket (Individual/Family)	\$2,500 / \$7,500 (excludes ded.)	\$10,000 / \$30,000 (excludes ded.)	
Lifetime Maximum	Unlimited Per Member	Lifetime Maximum	Unlimited Per Member			Lifetime Maximum	Unlimited Per Member	

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Dental

We are happy to provide two PPO dental plans with Cigna. PPO's allow you to see a dentist of your choice. However, by utilizing In-Network providers, you will maximize your benefits while minimizing your out-of-pocket cost. Please see the Cigna packet for information regarding the ability to "rollover" a portion of your unused Calendar Year Maximum to the next year.

Dental PPO (Low Option)		
	In-Network	Out-of-Network
Deductible	\$50 Individual \$150 Family	\$100 Individual \$300 Family
Deductible waived for Preventive	Yes	Yes
Calendar Year Maximum	\$1,000	\$1,000
Basis of Payment	Negotiated Fees	Fee Schedule
Preventive	100%	100%
Basic	80%	50%
Major	50%	25%
Periodontics & Endodontics	Covered under Basic	
Orthodontia	Not Covered	
Waiting Periods	Late Entrants Only	

Dental PPO (High Option)		
	In-Network	Out-of-Network
Deductible	\$50 Individual \$150 Family	\$50 Individual \$150 Family
Deductible waived for Preventive	Yes	Yes
Calendar Year Maximum	\$1,500	\$1,500
Basis of Payment	Negotiated Fees	90th Percentile of UCR
Preventive	100%	100%
Basic	80%	80%
Major	50%	50%
Periodontics & Endodontics	Covered under Basic	
Orthodontia	Not Covered	
Waiting Periods	Late Entrants Only	

401(k) Retirement Plan

One of the easiest ways to save for your retirement is with the Kass Shuler, P.A. 401(k) Plan. If you enroll, the plan has the convenience of having your contributions automatically deducted from your paycheck reducing your taxable income. The amount contributed to your 401(k) plan is not taxed. Your contributions – plus earnings – are taxed only when withdrawn from the plan (subject to IRS regulations).

Alternatively, you may elect to treat all or any portion of your deferrals as "Roth deferrals". Roth deferrals do not reduce your taxable income when made so that you still pay taxes on the amount contributed as a Roth deferral. However, if you take a "qualified distribution" of your Roth deferrals, you will not be taxed on any amounts attributable to those Roth deferrals.

Employees can contribute up to \$18,000 and an additional \$6,000 if you are over 50 years of age. Kass Shuler, P.A. will match your contribution on a dollar for dollar basis up to \$1,000 each year.

Eligibility—All employees, age 21 and over, who have completed 6 months of service with the Firm.

Enrollment dates—January 1, April 1, July 1 and October 1 of each year.

Change dates - You may change your rate of saving as of any January 1 or July 1. You may stop saving at any time.

You will receive an Individual Account Statement showing all activity in your account once a year.

For Hardship and Distribution request, email Bneely@kasslaw.com.

Life/Accidental Death and Dismemberment

Kass Shuler, P.A. provides, at no cost to you, a \$30,000, Life/AD&D insurance benefit through Cigna. All full time employees are eligible. In the event of your death, this benefit is paid to your designated beneficiary.

Vision - Ameritas		
	In-Network	Out-of-Network
Exams	\$10 copay	Reimbursed up to \$35
Lenses		Reimbursed up to \$25
<i>Single Vision</i>	\$25 copay	\$25
<i>Bi-Focal</i>	\$25 copay	Reimbursed up to \$40
<i>Tri-Focal</i>	\$25 copay	Reimbursed up to \$55
Frames	\$130 allowance	Reimbursed up to \$65
Contact Lenses		Reimbursed up to \$104
<i>Elective</i>	\$130 allowance	\$104
<i>Medically Necessary</i>	Covered in Full	Reimbursed up to \$200
Laser Vision Correction		No Benefit
<i>Lasik or PRK</i>	15% of retail or 5% off promotional pricing**	

Flexible Spending Account (FSA)

You may elect to participate in the Flexible Spending Medical Reimbursement Account and/or the Dependent Care Reimbursement Account. By doing so, you are able to pay for necessary medical, dental and vision benefits or dependent care expenses with before-tax dollars. This results in a significant savings to you.

The Medical Reimbursement maximum contribution per plan year is \$2,550. The Dependent Care maximum contribution per plan year is \$5,000 if married filing jointly or a single parent / \$2,500 if married filing separately.

Claim forms should be submitted to Karen Paskert .

Employee Assistant Program (EAP)

- Employee Assistant Program is available to all employees working 30 or more hours per week.
- This valuable benefit offers confidential counseling and referrals, elder and child care resources, and legal and financial consultation.
- You will have immediate access to a professional EAP Counselor by telephone or in person.
- Access to a wide array of resources via their website such as Child and Elder care information, Reference Libraries, Legal & Financial Resources, Webinars, Self-Improvement Programs and Healthcare Link.

All of this is offered at **no charge** to you.

In-person counseling for 1 to 3 sessions per issue, per year is available as well as 24/7 telephonic support for immediate needs.

Toll Free#: 1-800-538-3543
Web Address: www.cignabehavioral.com/cgi

Did You Know?

You can get certain generic medications for less than \$5 a month. Select retail pharmacy chains are now offering generic medications at low costs, even **FREE**. There is no need to show your medical insurance card for the savings...just go to your local pharmacy and ask about their generic medication program.

Kmart	\$15	90 day supply	Certain Generic med.
Publix	Free	Up to 14 day supply	8 Oral Antibiotics
Winn Dixie	\$4	Up to 30 day supply	Over 400 Generic med.
	\$10	90 day supply	Over 400 Generic med.
		*Must be a Reward Card customer	
Target	\$4	Up to 30 day supply	Over 300 Generic med.
	\$10	90 day supply	Over 300 Generic med.
Walgreens	\$12.99	90 day supply	Over 300 Generic med.
		*Annual enrollment fee will apply	
Wal-Mart / Sam's Club	\$4	Up to 30 day supply	Over 350 Generic med.
	\$10	90 day supply	Over 350 Generic med.

**This is not part of the medical insurance policy and will not be applied to any out-of-pocket insurance expenses. The above is only a summary of the each pharmacy discount and is subject to change. Please contact your local pharmacy for detailed information.*

Benefit Plan Reference Numbers

Ameritas, Vision
Customer Service: 1.866.289.0614
Website: www.eyemedvisioncare.com

Cigna Medical, Dental & Life
Customer Service: 1.800.244.6224
Website: www.mycigna.com

Cigna, EAP
Customer Service: 1.800.538.3543
Website: www.cignabehavioral.com/cgi

HIPAA Notice of Privacy Practices can be found online at www.mycigna.com. Click on "Privacy Notices & Security" at the very bottom of the homepage.

If you do not have access to the internet and wish to have a copy of the Privacy Notice, please contact Paula St. Clair for benefit assistance.

Information on Kass Shuler, P.A. Benefits:

SharePoint Site: [Departments](#)
[Payroll & Benefit Site](#)
[Benefit Documents](#)

Voluntary Benefits

Voluntary Benefits are available the first of the month following a 60 day waiting period. Products through TrustMark, TransAmerica and Ameritas are offered pre-tax through the Flexible Spending Program except for short-term disability and Universal Life. AFLAC products can be purchased directly from AFLAC's agent Patricia Holmes at (727) 709-5796 after taxes so you can join or leave the products at any time. The firm wants to provide you with recommended products to compare from various sources and the ability to purchase them in the way that is best for you.

Paid Time Off (PTO)

All regular full-time and part-time employees regularly scheduled to work a minimum of 20 hours per week are eligible for PTO. The amount of PTO is based on your length of service with the Firm as shown below. If you work fewer than 40 hours per week, your PTO hours will be prorated accordingly.

40 Hours

Credited Years of Service	Bi-weekly Accrual Rate	Maximum Annual Accrual	Maximum F-T Days (8 hrs)	CAP
0 to 3 years of service	4.62 hours	120 hours	15 days	150
After 3 years of service	6.15 hours	160 hours	20 days	200
After 5 years of service	7.69 hours	200 hours	25 days	250
After 15 years of service	9.23 hours	240 hours	30 days	300
After 20 years of service		280 hrs	35 days	340

Minimum hours that have to be used annually = 80 hrs
Cap at 125% of "Maximum Annual Accrual"
One time bonus of 40 hours of PTO in your 20th year of service + every 5 years thereafter. Not to be included in the cap.

30 Hours

Credited Years of Service	Bi-weekly Accrual Rate	Maximum Annual Accrual	Maximum F-T Days (8 hrs)	CAP
0 to 3 years of service	3.47 hours	90 hours	11 days	113
After 3 years of service	4.61 hours	120 hours	15 days	150
After 5 years of service	5.77 hours	150 hours	19 days	188
After 15 years of service	6.92 hours	180 hours	23 days	225
After 20 years of service		210 hours		255

Minimum hours that have to be used annually = 60 hrs
Cap at 125% of "Maximum Annual Accrual"

20 Hours

Credited Years of Service	Bi-weekly Accrual Rate	Maximum Annual Accrual	Maximum F-T Days (8 hrs)	CAP
0 to 3 years of service	2.31 hours	60 hours	8 days	75
After 3 years of service	3.08 hours	80 hours	10 days	100
After 5 years of service	3.85 hours	100 hours	13 days	125
After 15 years of service	4.62 hours	120 hours	15 days	150
After 20 years of service		140 hours		170

Minimum hours that have to be used annually = 40 hrs
Cap at 125% of "Maximum Annual Accrual"