

Caldwell Manufacturing – Benefit Brochure Highlights



WORK / LIFE INTEGRATION

- * Company Holidays – 11
- * Bereavement Leave
- * Paid Time Off / Vacation Days – Ability to Purchase 1-5 additional PTO days

Caldwell employees have the option to buy up to 5 PTO/Vacation days for 2021. The cost for this benefit comes out of each paycheck as a pre-tax benefit. Next Opportunity is OE 2022.

HEALTH AND CALDWELLNESS

MEDICAL PLANS

Two plans to choose from – 30-500 Hybrid or High Deductible with HSA.

	30-500 Plan	HDHP Plan
	In-Network	In-Network
Deductibles	\$500/\$1,500	\$1,400/\$2,800
Coinsurance	20%	20%
Out-of-Pocket Maximum	\$4,200/\$12,600	\$3,000/\$6,000
PCP	\$30 adult – \$0 children under 19	20% after deductible
Specialist	\$50	20% after deductible
Hospital – Inpatient	20% after deductible	20% after deductible
Hospital – Outpatient	20% after deductible	20% after deductible
Emergency Room	\$250	20% after deductible
Prescription RX	\$5/35/70 \$0 generics for children to age 19 After Deductible	\$5/35/70 After Deductible



DENTAL PLAN

Deductible	\$50/\$150
Annual Maximum	\$1,000
Preventative	100%
Basic	80%
Major	50%
Ortho	50%
Ortho Lifetime Maximum	\$1,500

EMPLOYEE PAID VISION

Service/Material	Member Cost	OON Allowance
Exam with dilation as necessary	\$10 copay	\$30
Frames: any available frame at provider location	\$125 allowance	\$63
Standard Plastic Lenses		
Single Vision	\$25 copay	\$25
Bifocal	\$25 copay	\$40
Trifocal	\$25 copay	\$60
Contact Lenses (includes fitting, follow-up and materials; in lieu of standard plastic lenses)		
Conventional	\$0 copay; \$125 allowance, plus 15% off balance over \$125	\$100
Disposable	\$0 copay; \$125 allowance, balance over \$125	\$100
Medically Necessary	Paid in Full	\$200
Frequency		
Exam	Once every 12 months	
Frame	Once every 24 months	
Lenses or Contact Lenses	Once every 12 months	



WELLNESS/HEALTH INCENTIVE PROGRAM

We continue to offer the Blue4U health incentive program, providing a report to each Integrated Health participant on their current health.

Employees who participate in both the assessment and the health risk questionnaire in the Fall will receive \$5. If qualified, you will receive an additional \$5 incentive for a maximum of \$10 per week off the health care premium cost. This will appear as a reimbursement on your paystub each payroll period. This incentive only applies to employees that take Caldwell Medical Insurance.

HEALTH SAVING ACCOUNTS WITH COMPANY MATCH

- ❖ You must be enrolled in a qualified HDHP plan.
- ❖ You cannot be covered by any other non-HDHP plan.
- ❖ You cannot be claimed as a dependent on another person's tax return (except married filing jointly).
- ❖ You cannot be enrolled in Medicare A or B or in Tricare.
- ❖ If you currently have a FSA account with a balance, you must have a zero balance in that account by December 31, 2020 to enroll in a Health Savings Account.

	Single	2-Person	Family-NS	Family
HSA Match Program	\$600	\$1,200	\$1200	\$1,200

MEDICAL FSA

Two types of FSAs: Medical and Dependent Care.

Medical FSA

- ❖ Medical FSA contribution to be determined annually.
- ❖ Anyone can enroll in the Dependent Care FSA.
- ❖ You are eligible to enroll in the Medical FSA only if you are enrolled in the 30-500 plan.
- ❖ Reminder: OTC (over the counter) medications are not reimbursable without a prescription.

Dependent Care FSA

- ❖ Dependent Care FSA contribution to be determined annually.

EMPLOYEE ASSISTANCE PROGRAM

Through Compsych via Lincoln Financial Benefits.



FINANCIAL WELLNESS

401 (K) – THROUGH FIDELITY

Eligibility for full-time employee on hire date.

COMPANY PAID LIFE INSURANCE AND AD&D

VOLUNTARY LIFE INSURANCE FOR EMPLOYEES

\$10,000 Increments – Additional voluntary life available.

VOLUNTARY LIFE FOR SPOUSES AND CHILD(REN) – TWO PLANS TO CHOOSE FROM

Two plans to choose from \$10,000 Spouse Life with \$4,000 Child Life (for all children in the family). Flat monthly rate, or \$5,000 Spouse Life with \$4,000 Child Life (for all children in the family). Flat monthly rate.

VOLUNTARY ACCIDENTAL DEATH AND DISMEMBERMENT

Voluntary AD&D available for either employee or employee+family.

NEW YORK STATE MANDATED DISABILITY

50% to \$170 per week