



2022 Benefits Guide









Prepared by Marsh & McLennan Agency

Insurance Contacts

Refer to this list when you need to contact one of your benefit vendors. For general information, contact Human Resources.

MEDICAL

Blue Cross & Blue Shield of NC Network: Blue Options PPO 877.258.3334 www.bcbsnc.com

DENTAL

Mutual of Omaha Network: Mutual PPO 877.999.2330

www.mutualofomaha.com/dental

LIFE & DISABILITY

Prudential 800.842.1718 www.prudential.com

VISION (EXAM ONLY)

Blue 2020 Network: EyeMed 855.400.3641

www.eyemedvisioncare.com/bcbsnc

Your dedicated benefits advocates:
Marsh & McLennan Agency
Employee Benefits Services
855-313-1075
ebservices@marshmma.com

The information in this Benefits Summary is presented for illustrative purposes and is based on information provided by the employer. The text contained in this Summary was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies, or errors are always possible. In case of discrepancy between the Benefits Summary and the actual plan documents the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about this summary, contact Human Resources.

WHO IS ELIGIBLE?

If you are a full-time employee working 30 or more hours per week, you are eligible to enroll in the benefits described in this guide on the first of the month, following 60 days of service. Eligible dependents include your legally married and dependent children. Dependent children are eligible for medical, dental, and vision coverage up to age 26.

HOW TO ENROLL

Each person must complete an enrollment form and turn into HR.

WHEN TO ENROLL

The benefits you elect during open enrollment will be effective from February 1, 2022 through January 31, 2023. If you are enrolling as a new hire, outside of the open enrollment period, benefits are effective on the first of the month following 60 days of service.

WHEN YOU CAN MAKE CHANGES

Unless you have a qualified change in status, you cannot make changes to the benefits you elect until the next open enrollment period. Qualified changes in status include, for example: marriage, divorce, legal separation, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, change in residence, commencement or termination of adoption proceedings, change in employment status or change in coverage under another employer-sponsored plan.

Pre-Tax Advantage: Section 125 Plan

Your share of dental and/or vision payroll deductions are taken on a pre-tax basis through an IRS Section 125 Plan. This saves you approximately 30% in taxes. However, due to Section 125 Plan rules, **you may only make changes in your payroll deductions at the annual Open Enrollment or at the time of a Qualifying Event** such as marriage, divorce, birth of a child, loss of insurance, or court order. Any Qualifying Event must be reported to Human Resources within 30 days of the event. If there has not been a Qualifying Event, you may not make any changes to your payroll deductions until Open Enrollment for 2023. **These are Internal Revenue Service rules and there can be no exceptions.** Contact Human Resources for more information.

You have the option of 2 plans to choose from. Both plans cover preventive care at 100% in network. Under the core plan you will have a deductible to meet for any services outside of a primary care office visit. Under the buy up plan you will have a copay for a specialist office visit.

Services (In Network)	Core You Pay:	Buy-Up You Pay:
Deductible (Plan Year 2/1 – 1/31) - Individual - Family	\$3,500 \$10,500	\$5,000 \$10,000
Out-of-Pocket Max - Embedded - Individual - Family	\$8,700 \$17,400	\$8,700 \$17,400
Primary Care Visit	\$25 copay	\$35 copay
Virtual Visit - Teladoc	\$10 Copay	\$10 Copay
Specialist Visit	Deductible, then 40%	\$70 copay
MRI, CT, PET scans	Deductible, then 40%	Deductible, then 30%
Outpatient Hospital Services Inpatient Hospital Services	Deductible, then 40% \$250 per admission, deductible then 20%	Deductible, then 30% Deductible, then 30%
Emergency Room Urgent Care	Deductible, then 40% \$100 copay	\$500 copay \$70 copay
Out-of-Network Deductible Coinsurance Out-of-Pocket Maximum	\$7,000 Individual / \$21,000 Family 50% after deductible \$17,400 Individual / \$34,800 Famiy	\$10,000 Individual / \$20,000 Family 60% after deductible \$17,400 Individual / \$34,800 Family
Prescription Drugs (30 days) - Tier 1 - Tier 2 - Tier 3 - Tier 4	\$10 copay 100% cost up to a \$100 max 100% cost up to a \$100 max 100% cost up to a \$100 max	

Embedded Deductible: All individual deductible amounts will count towards meeting the family deductible, but an individual will not have to pay more than the individual deductible amount.

Embedded Out-of-Pocket Maximum: All individual out-of-pocket limit amounts will count towards meeting the family out-of-pocket limit, but an individual will not have to pay more than the individual out-of-pocket limit amount.

MEDICAL EXPENSE REIMBURSEMENT PLAN (MERP)

Uwharrie Lumber Company will reimburse the employee for out of pocket costs above \$6,350 to a max of \$2,350 for the Core Plan and reimburse for out of pocket costs above \$6,600 to a max of \$2,100 for the Buy Up Plan. Provide Human Resources with your BCBS Explanation of Benefits (EOB) which can be downloaded from your BCBS website to apply for reimbursement.

Teladoc BCBS of NC

Teladoc provides members with on-demand, 24/7 phone/video/online access to US based, licensed physicians. You and your family members can connect instantly with their network of physicians for information, advice, and treatment including prescription medication when appropriate. For more information, please contact Teladoc at 800.835.2362 or go to www.teladoc.com. This benefit is only available if you are enrolled in the company's BCBS medical coverage.

See a doctor from home, at work or on the go

Your Blue Cross and Blue Shield of North Carolina (Blue Cross NC) health plan includes telehealth services from Teladoc.* Because telehealth is such a convenient and effective option, Blue Cross NC encourages you to set up your account today.

Convenient care for your total health

- Range of services. Your telehealth offering includes acute care as well as mental health services and substance use support.
- Affordable care. Costs vary depending on your benefits and whether you have a copay or deductible/coinsurance plan. Telehealth is typically less expensive than a visit to urgent care.
- · Available 24 hours a day, seven days a week (even holidays) for acute care
- Low wait times and no appointment needed¹
- Prescriptions sent electronically to your local pharmacy if needed2
- On the couch, at work or traveling you can use Teladoc anywhere in the
- Pediatricians available if your child gets sick⁴

Get started today

Whether you've caught a severe cold, or are dealing with anxiety, depression or substance use issues, telehealth services are a great way to get the care you need when you need it.

Sign up for your Teladoc account today. There are several ways to get started: Mobile app, online or by phone (see details at right).

Once your account is set up, you can see a board-certified doctor or behavioral health specialist via secure online video or phone from your mobile device or computer. Teladoc's doctors can diagnose symptoms, prescribe non-narcotic medication¹ and send prescriptions to your pharmacy.

Acute/non-emergency health problems

- Allergies
- Insect bites
- Cough, cold and flu
- Nausea and vomiting
- Diarrhea
- Sinus problems
- Ear problems
- Sore throat
- Fever⁴
- Urinary problems⁴
- Headaches
- And more

3 ways to sign up today

So it's ready when you need it!



Download the Teladoc mobile app

(iOS- / Android-supported)



Go to *Teladoc.com* and click "Log in/Register"



Call 1-800-835-2362 (1-800-TELADOC)

Please Note:

You must wait until your health plan effective date before registering for telehealth services.

Behavioral health

- Addictions
- Anxiety
- Depression
- Grief and loss
- Relationship issues
- And more

Learn more at www.Teladoc.com or by calling 1-800-835-2362 (1-800-TELADOC)

^{*}Teladoc is an independent company that is solely responsible for the telehealth services it is providing.

¹ www.teladoc.com/start (Accessed June 2021).

² In some states, laws require that a doctor only prescribe medication in certain situations and subject to certain limitations.

³ Consults can only be held within the United States.

⁴ Children under 36 months who present with fever must be referred to their pediatrician (medical home), child friendly urgent care center or emergency department for clinical evaluation and care. Teladoc doctors may not treat any children with urinary symptoms. Parent/guardian will be required to complete a different medical history disclosure form for children under the age of 36 months prior to making an appointment with an Teladoc doctor.

Dental Mutual of Omaha

This plan allows you to seek treatment from the dentist of your choice.

Benefits	In Network	
Preventive Services Exams, cleanings, x-rays	Covered at 100% of usual and customary Deductible does not apply	
Deductible (Basic & Major Services Only)	\$50 Individual / \$150 Family	
Basic Services Fillings, simple extractions root canals	80% of usual and customary	
Major Services Bridges, dentures, crowns	50% of usual and customary	
Annual Maximum	\$1,000 (plan year 2/1-1/31)	

*If your charges will be more than \$300, it is wise to obtain a benefit estimate.

You have the option to use an in-network provider with Mutual of Omaha. If you go in-network you will not be balance billed. To find an in-network dentist go to: www.mutualofomaha.com/dental and select the Mutual PPO network. You may also call the number on the back of your ID card.

Vision

Blue 2020 / Eyemed

When you enroll in the BCBS medical plan for you and/or your dependents, you will automatically be enrolled in the vision plan at no cost to you. You will have coverage for one eye exam every 12 months. Discounts only off glasses at in network providers. Please call Eyemed or go online www.eyemedvisioncare.com/bcbsnc to find a network provider.







Should you experience a non-work related illness or injury that prevents you from working, disability coverage acts as income replacement to protect important assets and help you continue with some level of earnings. Benefits eligibility may be based on disability for your occupation or any occupation.

	Voluntary Short Term Disability	Voluntary Long Term Disability
Benefits Begin	8 th day accident/illness	After 180 days
Benefits Duration	Up to 25 weeks	SSNRA
Percentage of Income Replaced	60% of weekly income	60% of monthly income
Maximum Benefit	\$250 weekly	\$5,000 monthly
Pre-Existing Condition Limitation	None	If you are treated or diagnosed with a condition within 3 months of your effective date, that condition will not be covered until you have been enrolled for 12 months.

Basic Life Insurance

Prudential

Your company provides full-time employees with group life and accidental death and dismemberment (AD&D) insurance in the amount of \$15,000 and pays the full cost of this benefit. Benefits begin reducing at age 65. Contact Human Resources to update your beneficiary information.

Voluntary Life Insurance

Prudential

Employees may elect to purchase additional life insurance on themselves or their dependents through the convenience of payroll deduction. If you elect when first eligible, you may elect coverage up to the Guaranteed Issue amount without having to answer any medical questions. Employee and spouse benefits begin to reduce at employee age 65; employee and spouse rates are based on employee age. At open enrollment you may increase current coverage up to 4 increments.

Guaranteed Issue	Employee: \$100,000 Spouse: \$20,000 Dependent Child: \$10,000	
Employee Coverage	You may elect coverage in \$10,000 increments up to a maximum of 5x your base annual earnings or \$300,000, whichever is less.	
Spouse Coverage	You may elect coverage for your spouse in \$5,000 increments up to a maximum of 50% of the employee elected amount or \$150,000, whichever is less	
Child Coverage	You may elect coverage for your dependent child(ren) up to age 21 (or 25 if full time student) up to a maximum of \$10,000.	