

2021
EMPLOYEE
BENEFITS
GUIDE



OPEN ENROLLMENT
NOVEMBER 23 – DECEMBER 4



Dear Employees:

Trumbull Industries is pleased to once again offer a comprehensive benefits package that provides quality plans and programs for you and your family. We remain committed to providing you with the best plan options and tools to optimize your health, wellness and financial security.

Open Enrollment for your 2021 benefit elections will take place from November 23 through December 4, 2020. The choices you make during this time will take effect on January 1, 2021 and remain in place for the entire calendar year. You must elect or waive benefits through ADP during Open Enrollment.

All of our current benefit plans will be offered with only a small increase in cost to the Dental PPO plan to you. There will be no changes to the plan designs (i.e. deductible limits, copays, out-of-pocket maximums, etc.) that are currently offered.

Trumbull Industries will continue to provide medical plan premium incentives for your 2021 participation in our Wellness Program. Your active engagement demonstrate your commitment to improving your health and we applaud your efforts.

To ensure you are selecting the best benefit options for you and your family, please spend some time reviewing the plan information in this guide, including the costs and coverage levels.

We look forward to a successful Open Enrollment campaign. Comprehensive information on our plans and partners are available online at www.mytrumbullbenefits.com

Please email Mary Beth Poweski at mpoweski@trumbull.com if you have questions or need assistance with the enrollment process.

Sincerely,

Mary Beth Poweski
Human Resources

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Your Health Matters



Meritain Health Medical Plan Options

Choose from one of two medical plans to cover yourself and your dependents. Both plans are through Meritain Health Medical Plan and include prescription coverage.

Health Savings Account Plan

Basic Plan with Health Savings Account (HSA) or Enhanced Plan with Health Savings Account (HSA)

With either of these high-deductible plans, you will:

- Enjoy lower per pay period medical plan costs
- Have preventive services covered at 100%
- Be eligible for a Health Savings Account with tax-free deposits
- Receive Trumbull Industries quarterly contributions to your Health Savings Account

POS Plan

POS Plan

With this traditional plan, you will:

- Have a higher per pay period medical plan cost
- Enjoy the predictability of set copay amounts
- Be subject to a lower deductible
- Have preventive services covered 100%

The rates shown below are before any Wellness credits are applied.

Medical Bi-weekly Rates (per pay period)	Employee Only	Employee & Spouse	Employee & Child(ren)	Employee & Family
HSA Plan	\$114.00	\$238.00	\$214.00	\$330.00
POS Plan	\$133.00	\$279.00	\$248.00	\$395.00

Medical Plans Coverage

Comparison

2021 Plan Options:

Point of Service Plan (POS)

Designed for those who prefer the predictability of set payments for doctor appointments and other medical services.

Services	In-Network	Out-of-Network
Deductible	\$2,500 / \$5,000	\$4,000 / \$8,000
Annual Out-of-Pocket Maximum	\$7,500 / \$15,000	\$12,000 / \$24,000
Coinsurance	20% after Deductible	40% after Deductible
Primary Care Visits	\$25 Copay	40% after Deductible
Preventive Care	Covered at 100%	40% after Deductible
Specialist Visits	\$45 Copay	40% after Deductible
Inpatient Visit	20% after Deductible	40% after Deductible
Outpatient Services	20% after Deductible	40% after Deductible
Emergency Room	\$250 Copay	\$250 Copay
Urgent Care	\$75 Copay	40% after Deductible

Rx Retail

Generic	20% Copay, maximum \$50	20% Copay, maximum \$50*
Preferred Brand	30% Copay, maximum \$75	30% Copay, maximum \$70*
Non-Preferred Brand	50% Copay, maximum \$100	50% Copay, maximum \$100*
Specialty	20% Copay, maximum \$250	Not Covered

Rx Mail Order

Generic	\$10 Copay	Not Covered
Preferred Brand	\$40 Copay	Not Covered
Non-Preferred Brand	\$80 Copay	Not Covered

*Covered person will be reimbursed the amount that would have been paid to an In Network Provider less the applicable copay if Prescription Drugs are obtained from an Out of Network Provider.



Website: www.meritain.com

Mobile App: Technology & Wellness

Medical Plans Coverage

Companion

2021 Plan Options:

Health Savings Plan (HSA)

Allows you to minimize the premium you pay from your paycheck while saving for the future with pre-tax contributions to a Health Savings Account.

Services	In-Network	Out-of-Network
Deductible	\$3,000 / \$6,000	\$6,000 / \$12,000
Annual Out-of-Pocket Maximum	\$4,000 / \$8,000	\$8,000 / \$16,000
Coinsurance	0% after Deductible	40% after Deductible
Primary Care Visits	0% after Deductible	40% after Deductible
Preventive Care	0% after Deductible	40% after Deductible
Specialist Visits	0% after Deductible	40% after Deductible
Inpatient Visit	0% after Deductible	40% after Deductible
Outpatient Services	0% after Deductible	40% after Deductible
Emergency Room	0% after Deductible	0% after Deductible
Urgent Care	0% after Deductible	40% after Deductible

Rx Retail

Generic	\$5 after Deductible	\$5 after Deductible*
Preferred Brand	\$20 after Deductible	\$20 after Deductible*
Non-Preferred Brand	\$40 after Deductible	\$40 after Deductible*
Specialty	20% Copay, maximum \$250 after Deductible	Not Covered

Rx Mail Order

Generic	\$10 after Deductible	Not Covered
Preferred Brand	\$40 after Deductible	Not Covered
Non-Preferred Brand	\$80 after Deductible	Not Covered

*Covered person will be reimbursed the amount that would have been paid to an In Network Provider less the applicable copay if Prescription Drugs are obtained from an Out of Network Provider.



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Health Savings Account (HSA)

What is an HSA?

Health Savings Accounts (HSA) are a tax-advantaged medical savings account available to those who enroll in the Consumer Driven Health Plan (CHDHP). The funds you invest are not subject to most taxes. The growth of the invested amount is not taxed and when the funds are distributed, no tax penalties are incurred when applied to qualifying expenses. The funds you contribute to your HSA are yours to keep and can be used not only for medical expenses, but for retirement expenses as well.

Triple-Tax Savings

Tax-Free Deposits - Even if you don't itemize deductions, you don't pay federal income tax on contributions.

Tax-Free Savings - You keep any money you don't spend and it grows tax-free. No use-it-or-lose-it.

Tax-Free Withdrawals - There's never tax on withdraws to pay for qualified expenses.

Employer Contribution

Trumbull Industries contributes to your HSA: Single: \$600
Family: \$1,200

Contribution Limits	2021
Single	\$3,600
Family	\$7,200
Catch-up (55+)	\$1,000



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Examples of Qualified Medical Expenses

Acupuncture	Doctor's fees	Oxygen/oxygen equipment
Alcoholism treatment	Drug addiction recovery	Prescription drugs
Ambulance	Dyslexia language training	Psychiatric care
Artificial limbs	Eyeglasses and examination fees	Therapy/treatments (prescribed)
Braces	Hearing aid and batteries	Transportation (for medical care)
Childbirth preparation classes (mother)	Home modifications for handicapped	Vision correction surgery (e.g., LASIK)
Chiropractors	Insulin	Vitamins (if prescribed)
Contact lenses	Laboratory fees	Wheelchairs
Crutches	Maternity expenses	X-rays
Dental fees	Nursing homes	
Dentures	Optometrists	
Diagnostic fees	Orthodontia	
	Orthopedic shoes	

The above is a brief summary; refer to IRS Publication 502 for confirmation of eligible expenses

Flexible Spending Account (FSA)

What is an FSA?

Flexible Spending Accounts (FSA) provide you with an important tax advantage that can help you pay health care expenses on a pretax basis. By anticipating your family's health care and dependent care costs, you can actually lower your taxable income and that means you get to keep more of what you earn.

There are two types of FSA's that allow you to make deductions to pay for qualified medical expenses. The Health Care FSA allows any qualified medical expense, and the Limited Purpose FSA allows ONLY dental and vision expenses. If you are enrolling in the HSA-qualified medical plan, the Limited Purpose FSA is the only option you have available since other qualified medical expenses can be paid for by using your HSA.

To determine if a Health Care or a Limited Purpose FSA makes sense for you, estimate your eligible expected expenses for you and (if applicable) your dependents for the calendar year. This amount could be your annual election as long as it doesn't exceed the allowed contribution maximum. The amount you elect is available to you at the beginning of the plan year, regardless of how much you have contributed via payroll deduction.

Please review the following information so you are aware of the rules applied to the Health Care FSA and the Limited Purpose FSA plans. This is only a brief summary. More information is available in the Summary Plan Description (SPD)

Important points to remember:

- You may elect to contribute the maximum amount even if your spouse is also contributing to an FSA at his or her workplace.
- The Limited Purpose FSA reimburses you ONLY for qualified dental and vision expenses not covered by insurance, like co-pays and deductibles.
- The Health Care FSA allows any qualified medical expense to be reimbursed.



Website: www.tasconline.com
Mobile App: TASC App

After you enroll, you can't change the amount you contribute for the year, because your election stays in effect during the entire plan year (January 1 through December 31). However, if you have a "Qualified Life Event" you may change the amount of your contribution, but the change must be consistent with the event.

The following "Qualified Life Events" may permit you to change your FSA election outside of open enrollment: a change in your legal marital status; a change in the number of tax dependents; termination or commencement of employment by you, your spouse or dependent; a change in employment status that results in gaining or losing eligibility for health coverage; and Medicare or Medicaid entitlement for you, your spouse or dependent.

Smile Brightly and See Clearly

Sun Life Plan
Aetna Vision Plan

Dental

Select Sun Life Dental and choose providers from the PPO or DHMO networks. DHMO plan allows you to receive discounted health coverage from dentists in the DHMO network.

PPO Benefits are summarized below

- Out-of-pocket costs are likely to be less when you choose an in-network dentist
- Have 100% coverage for periodic oral exams
- Pay an annual deductible — \$50 single / \$150 family
- Pay 20% of basic covered services and 50% of major covered services
- Receive an annual maximum benefit — \$1,500 / per person
- Have a lifetime maximum Orthodontics benefit — \$1,000 / per person (through age 26)



Call 1.800.786.5433 or visit
www.sunlife.com

Bi-weekly Rates (per pay period)	Employee Only	Employee + 1	Employee & Family
Sun Life Dental PPO	\$13.31	\$25.77	\$45.07
Sun Life Dental DHMO	\$4.81	\$7.92	\$12.26

Vision

When you elect Aetna coverage you have:

- Access to the one of the largest panels of eye care professionals
- A nominal \$20 copay for an in-network routine exam
- Potential payment for out-of-network benefits
- Coverage for frames every two years, lenses and contacts and exams every year
- Access to other savings and discounts



Call 1.855.335.1407 or visit
www.aetna.com

Bi-weekly Rates (per pay period)	Employee Only	Employee + 1	Employee & Family
Aetna Vision	\$2.20	\$4.18	\$6.46

Life Insurance

Basic Life Insurance

We know you want to protect your loved ones in case of life's uncertainties. Trumbull Industries offers Basic Term Life Insurance and Accidental Death & Dismemberment (AD&D) coverage at no cost to you. You may purchase additional, supplemental coverage to increase your coverage amounts.

At no cost to you, Basic Term Life Insurance gives you:

- Coverage depending on your class
- AD&D coverage as part of your life insurance
- The ability to convert to an individual policy if you leave the company
- Possible waiver of premiums if you become disabled
- Possible accelerated death benefit if you are diagnosed with a terminal disease

If you purchase Supplemental Life Insurance for yourself, your spouse and dependents, you get:

- Group discounted rates
- AD&D coverage (for employee supplemental life only)
- To purchase up to \$500,000 supplemental life— Evidence of insurability required
- To purchase up to \$500,000 spouse life insurance— Evidence of insurability required
- To purchase up to \$10,000 life insurance for your child(ren)
- Evidence of Insurability is required.

Don't forget to designate a beneficiary for employee life insurance.

Supplemental Life and AD&D and Dependent Life Rates

Monthly cost per \$1,000 of coverage

	Age	Employee	Spouse
Employee & Spouse Life	< 25	\$0.650	\$0.350
	25-29	\$0.750	\$0.400
	30-34	\$0.930	\$0.505
	35-39	\$1.320	\$0.730
	40-44	\$1.880	\$1.050
	45-49	\$3.010	\$1.640
	50-54	\$4.780	\$2.555
	55-59	\$7.350	\$3.925
	60-64	\$11.470	\$6.705
	65-69	\$19.900	\$11.455
>70	\$35.520	\$20.410	

Insurance Rates are based on volume of coverage and age as of January 1 of the plan year. Employee basic and supplemental life includes Accidental Death and Dismemberment coverage (AD&D).

Child(ren) Life

The monthly cost is \$0.775 per \$1,000 of coverage and all eligible dependent children are included in the cost.

*Please refer to Certificate of Coverage for class information



Website: www.unum.com
Mobile App: UNUM Customer

Disability Coverage

SHORT TERM DISABILITY (STD)

We provide you STD coverage at no cost to you. You are eligible for STD benefits after 90 days from date of hire. Disability leave applies to any illness or injury, including pregnancy, resulting in the loss of 6 or more consecutive workdays, not covered by Workers' Compensation or a claim against a third party.

Hourly

If you become disabled, we provide basic STD coverage equal to 66 2/3% of your weekly earnings for 26 weeks after a 12-day waiting period.

Salary

If you become disabled, we provide basic STD coverage equal to 66 2/3% of your weekly earnings for 26 weeks. There is no waiting period for salary exempt employees before short-term disability benefits start.

Benefit Schedule					
Completed Years of Service	Weeks Full Pay	Weeks 2/3 Pay	Completed Years of Service	Weeks Full Pay	Weeks 2/3 Pay
0	1	25	8	12	14
1	2	24	9	14	12
2	3	23	10	16	10
3	4	22	11	18	8
4	5	21	12	20	6
5	6	20	13	22	4
6	8	18	14	24	2
7	10	16	15	26	0



Website: www.unum.com

Mobile App: UNUM Customer

CONTACTS

Find the answers you need

Benefit	Provider	Website	Phone Number
Medical/Rx HSA	Mertain	www.mertain.com	(888) 324-5789
Rx	SouthernScripts Payer Matrix	www.southernscripts.net www.payermatrix.com	(800) 710-9341 (877) 305-6202
FSA	TASC	www.tasconline.com	(800) 422-4661
Dental	SunLife	www.sunlife.com	(800) 786-5433
Vision	Aetna	www.aetna.com	(855) 335-1407
Basic Life & ADD Voluntary Life & ADD Short Term Disability	UNUM	www.unum.com	(866) 679-3054
Human Resources	Mary Beth Poweski	mpoweski@trumbull.com	(330) 393-6624