


Welcome to the PIAG Insurance 2022-2023 Open Enrollment Kickoff Meeting

All microphones will be muted during the call, if you need to ask a question, please use the chat function within Zoom.

All questions will be addressed at the end of the meeting.

OPEN ENROLLMENT
2022-2023 KICKOFF MEETING



REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

1




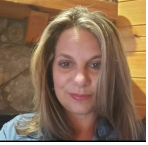
Jon Krueger
President/CEO
PIAG & PIAG Insurance

OPEN ENROLLMENT
2022-2023 KICKOFF MEETING



REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓


2



Heather Paruta
Open Enrollment Specialist
PIAG Insurance


Annata Herman
Insurance Manager
PIAG Insurance

OPEN ENROLLMENT
2022-2023 KICKOFF MEETING




REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

3



HEALTH


4

PIAG Medical Insurance Options 

- Kaiser Permanente
 - Health Maintenance Organization- requires a primary care physician, typical lower premiums, network of providers available to coordinate your care, referrals needed
- Freedom Plan
 - Preferred Provider Organization- Most common, see in-network doctors without a referral, generally more comprehensive coverage and flexible

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

5

Things to Consider 

- 1. Premiums
- 2. Deductibles/ out of pocket expenses/co-pays
- 3. Provider Network
- 4. Flexibility
- 5. Pharmaceutical Coverage


REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

6

Kaiser Permanente Signature HMO Plans

- An HMO plan is based on a network of hospitals, doctors and other health care providers that agree to coordinate care within a network in return for a certain payment rate for their services. An HMO generally only covers care received from the plan's contracted providers, known as "in network" providers. When you're a Kaiser Permanente member, your whole care team is connected — to you, and to each other — through your electronic health record. Every visit is captured, so your doctor can use your health history to inform your care.
- **Jessica Langefield**

7

Kaiser Permanente 

- Kaiser Permanente issued rates with approximately a 9.7% increase.
- No plan changes

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

8

CARE BETTER.

Kaiser Permanente was founded over 75 years ago with a mission to provide high-quality, affordable health care services—and to improve the health of the communities we serve. With our own Permanente doctors working together with our health plan in our own exclusive Kaiser Permanente facilities, it's easier for our members to get quality, coordinated care.

Why Kaiser Permanente?

Manage health care costs While health care prices that protect the health of your business. So focusing on the health of your employees. We offer the power of data-driven insights to deliver high-quality care for individuals and businesses like your own.	Healthcare made simple Your employees will have to coordinate with doctors, specialists, pharmacies, hospitals, and other caregivers. Our members can see their doctors on their terms, and prescriptions of their own care.	Unmatched convenience Your employees can schedule and tips by getting care at our 28 state-of-the-art Kaiser Permanente medical facilities. Our members can see their doctors on their terms, and prescriptions of their own care.
--	--	--

Learn more at kp.org/choosebetter | KAISER PERMANENTE

10

26 Exclusive Medical Facilities

By the numbers in Georgia:

- 1,700+ Corporate customers
- 4,000+ Dedicated employees
- 600+ Top-notch physicians
- 28 Georgia counties served
- 26 Medical offices and specialty centers
- 18 Hospital partners

Learn more at kp.org/choosebetter | KAISER PERMANENTE

11

Cigna Collaboration

Kaiser Permanente's agreement with Cigna will provide more convenient access to care while traveling.

Find care near you

- Beginning August 1, 2022, a new collaboration with Cigna allows Kaiser Permanente members to get urgent and emergency care from Cigna's PPO national network of physicians, hospitals, and urgent care clinics while traveling outside of states where Kaiser Permanente operates.
- Plus, instead of paying up front for their services and submitting a claim to Kaiser Permanente for reimbursement, commercial HMO (deductible HMO, KP/HMO Plus, HDHP) and EPO members will be billed later for their regular copay or other cost share.

*The Cigna PPO Network refers to the health care providers (doctors, hospitals, specialists) contracted as part of the Cigna PPO by Shared Administration.

12

Get care from the comfort of home

We know the coronavirus is a major concern for everyone, but rest assured you can continue to get the high-quality care you depend on for all your health needs. For primary care, specialty care, and mental health services, connect with your care team from the safety and comfort of your home.

- E-visit** - Get a short questionnaire about your symptoms online and get personalized self-care advice from a Kaiser Permanente clinician.
- Phone appointments** - Call an expert to talk with a Kaiser Permanente clinician over the phone - just like an in-person visit.
- Email** - Message your doctor's office with concerns. Clinicians respond through your secure email.
- Video visit** - Meet face-to-face with a doctor by video. You can see your doctor's face and get care as if you were in-office.
- Mail order pharmacy** - Call or message your doctor to get your drug with our mail order delivery service.*

Ready to make an appointment?

Go online
Use the MyKP app or visit kp.org to schedule an appointment with a Kaiser Permanente clinician.

Call us 24/7
Our care team is available 24/7 to help you get the care you need.

- California: 800.898.8888 (TDD) / 711 (TDD)
- Northern California: 925.839.8279 (TDD) / 711 (TDD)
- Southern California: 909.886.8888 (TDD) / 711 (TDD)
- Colorado: 800.898.8888 (TDD) / 711 (TDD)
- Illinois: 800.898.8888 (TDD) / 711 (TDD)
- Michigan: 800.898.8888 (TDD) / 711 (TDD)
- Minnesota: 800.898.8888 (TDD) / 711 (TDD)
- New York: 800.898.8888 (TDD) / 711 (TDD)
- North Carolina: 800.898.8888 (TDD) / 711 (TDD)
- Ohio: 800.898.8888 (TDD) / 711 (TDD)
- Pennsylvania: 800.898.8888 (TDD) / 711 (TDD)
- Texas: 800.898.8888 (TDD) / 711 (TDD)
- Virginia: 800.898.8888 (TDD) / 711 (TDD)
- Washington: 800.898.8888 (TDD) / 711 (TDD)
- Washington, D.C.: 800.898.8888 (TDD) / 711 (TDD)
- Wisconsin: 800.898.8888 (TDD) / 711 (TDD)

Learn more at kp.org/care | KAISER PERMANENTE

13

Keep up with your care on the Kaiser Permanente app and kp.org*

OPEN ENROLLMENT 2022-2023 KICKOFF MEETING

piag Insurance

*Need help? If you're having trouble with the app or the Kaiser Permanente app, you can get help by calling our Website Support helpline at 1-800-955-7277, weekdays, 8 a.m. to 7 p.m., and weekends, 7 a.m. to 3 p.m. (PacifiC Time). This helpline offers real-time, one-on-one help and troubleshooting.

14

MENTAL HEALTH AND WELLNESS | NATIONAL

Support your team with self-care resources

No-cost apps promote emotional well-being

Practicing self-care can help your employees build resilience, set goals, and maintain health and happiness - in every day life and through challenging times. Kaiser Permanente members receive no-cost access to 2 powerful self-care apps: Calm and myStrength. These evidence-based apps are hand-picked by Kaiser Permanente physicians, easy to use at work or at home, confidential, and proven effective.

- Calm**
 - A research-based meditation and mindfulness app that can help calm your mind and ease stress.
 - Reduce anxiety
 - Improve sleep quality
 - Practice mindfulness and meditation
 - Practice mindful parenting
 - Learn from leading experts
- myStrength**
 - A program based on cognitive behavioral therapy offering guided resources and tools for a range of mental health needs and challenges.
 - Manage depression
 - Control anxiety
 - Reduce stress
 - Improve sleep
 - Reduce chronic conditions
 - Manage chronic pain

More information
Your employees can get the apps at kp.org/kpCareapps and explore more great tools at kp.org/kpCare.

These apps are not available in Kaiser Permanente Washington member and plans. myStrength is a newly named subsidiary of iClingo Health, Inc.

kp.org/kpCarecenter **Kaiser Permanente**

15

24/7 emotional support with the Ginger app

The Ginger app offers 24/7 support for many common challenges - from anxiety, stress, and low mood to issues with work, relationships, and more. Ginger highly trained emotional support coaches are ready to help 24/7. Kaiser Permanente members can use the app for 90 days per year (in cycles).

What can employees do with Ginger?

- Use with a coach anytime, anywhere, 24/7 for 90 days.
- Discuss goals, share challenges, and create an action plan with the coach.
- Get personalized, interactive skill-building tools from a library of more than 200 activities.
- Share insight from each coaching session, track progress, and work with their coach to adjust action plans as needed.

Ginger emotional support coaching
24/7 Ginger care with anxiety or depression support

Assess the risk support
Employees can access personalized support at their moment of need

Employees can get Ginger here at kp.org/kpCareapps

OPEN ENROLLMENT 2022-2023 KICKOFF MEETING

piag Insurance

16

ActiveFit

Gym or Home? We'll keep you active either way.

- 1000+ STANDARD FITNESS CENTERS AND FITNESS CENTERS
- 1000+ NEW PREMIUM EXERCISE STUDIOS
- 4000+ DIGITAL WORKOUT VIDEOS
- NO LONG TERM CONTRACTS

Learn More: kp.org/activefit

OPEN ENROLLMENT 2022-2023 KICKOFF MEETING

piag Insurance

17

Multiplan

This is a PPO network plan based on **physicians only** which have agreed to coordinate care within a network in return for a certain payment rate for their services. Unlike an HMO you do not need a referral to seek care from a specialist. Remember you are free to seek care anywhere.

Presenter: Paula Welborn & Carlos Calderon

CONFIDENTIAL & PROPRIETARY imagine360

18

Freedom Plan Conversion

piag
Insurance

Previous Plans		New Plans Beginning 12/1/2022
PIBT Freedom 35-1000 \$35 OV, \$1000/\$2K Ded. 10%+\$300 Hosp., \$4K/\$7K Max OOP, RX 15/30/50 \$250 Brand Ded.	➔	PIBT Freedom 35-1250 \$35 OV, \$1250/\$2500 Ded. 10%+\$350 Hosp., \$4.5K/\$9K Max OOP, RX 15/30/50 \$275 Brand Ded. <i>Specialty Rx Update</i>
PIBT Freedom 40-1500 \$40 OV, \$1500/\$3K Ded. 20%+\$200 Hosp., \$5K/\$10K Max OOP, RX 15/30/45 \$250 Brand Ded.	➔	PIBT Freedom 40-1750 \$40 OV, \$1750/\$3500 Ded. 25%+\$250 Hosp., \$6K/\$12K Max OOP, RX 15/30/45 \$250 Brand \$275Ded. <i>Specialty Rx Update</i>

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

19

Freedom Plan Conversion

piag
Insurance

Previous Plans		New Plans Beginning 12/01/2022
PIBT Freedom 45-3000 \$45 OV, \$3000/\$6000 Ded. 20%+\$200 Hosp., \$7K/\$14K Max OOP, RX 15/30/50 \$250 Brand Ded.	➔	PIBT Freedom 45-3250 \$45 OV, \$3250/\$6500 Ded. 25%+\$250 Hosp., \$7.5K/\$15K Max OOP, RX 15/30/50 \$275 Brand Ded. <i>Specialty Rx Update</i>
PIBT Freedom 50-5000 \$50 OV, \$5K/\$10K Ded. 30%+\$200 Hosp., \$8K/\$16K Max OOP, RX 15/30/50% \$250 Brand Ded.	➔	PIBT Freedom 55-5500 \$55 OV, \$5.5K/\$11 K Ded. 40%+\$250 Hosp., \$8.5/\$17K Max OOP, RX 15/30/50% \$275 Brand Ded. <i>Specialty Rx Update</i>

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

20

Freedom Plan Conversion

piag
Insurance

Previous Plans		New Plans Beginning 12/1/2022
PIBT Freedom HSA 6000 \$6000/\$12000 Ded. 20%+\$200 Hosp., \$7.5K/\$15K Max OOP, RX 10/25/40	➔	PIBT Freedom HSA 6500 \$6.5/\$13k Ded. 30%+\$250 Hosp., \$7050K/\$14,100K Max OOP, RX 10/25/40 <i>Specialty Rx Update</i>

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

21

Your Health Plan

We understand healthcare is complex and are committed to making it easy for you.

We make sure you get the care and guidance you need with our:

- Compassionate support team
- Intelligent technology
- Clinical expertise

Our team is made up of real people who listen and are passionate about answering your questions and advocating on your behalf.



22 CONFIDENTIAL & PROPRIETARY 

22

One Phone Number to Call

Call the number on your ID Card if you:

- Have questions about your benefits
- Need to find a provider
- Need help with a claim
- Would like to discuss a health concern with a nurse

Our cross functional Member Services team is here to help you every step of the way




23 CONFIDENTIAL & PROPRIETARY 


23


Member Guidance

Make informed provider choices with our Care Navigation services



Our team can help identify providers that will work best for you based on quality, cost and acceptance data.



24 CONFIDENTIAL & PROPRIETARY 


24


We take care of you throughout your healthcare journey.

- Disease Management**
 - Management of complex and chronic conditions
 - Provider and community resource coordination
- Health Management & Wellness**
 - Health education and lifestyle coaching
 - Assessments, screenings and incentives
- Utilization Management & Benefit Review**
 - Independent medical reviews
 - Transition of care
- Pharmacy Management**
 - Specialty pharmacy coordination
 - National Pharmacy Network & Mail Order

1:1 patient-nurse ratio with credentialed, compassionate healthcare specialists

*Available depending on your plan

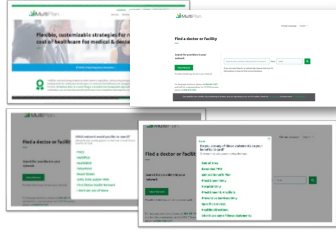


25 CONFIDENTIAL & PROPRIETARY 


25

Multiplan

How to Find a Provider



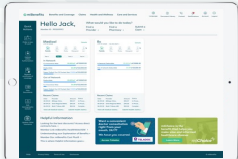
1. Go to multiplan.com.
2. Click on **Find a Provider**
3. Choose the **Multiplan** network
4. Choose **Practitioner & Ancillary**
5. Use the search options to facilitate your search

CONFIDENTIAL & PROPRIETARY 

26


Member Portal & Mobile App

Manage your benefits anytime, anywhere using miBenefits Portal



- Robust provider search**
Search for a provider using **quality, access and cost data** to help you make informed decisions.
- Dynamic member dashboard**
Track all your claims and deductibles in real-time, print ID cards, view plan information, and more.
- Live healthcare support**
Integrated messaging directly with our team via portal or app.

mibenefits.imagine360.com

CONFIDENTIAL & PROPRIETARY 

27

Understanding Your Benefits ID Card

Includes all the information you and your provider need

- Always bring your ID card with you when you go to a provider
- Present your ID card at check-in
- Encourage office staff to call the provider number listed if they:
 - Have questions about your eligibility for benefits
 - Indicate that they don't accept your benefits
- Call the member services number on the card if you are asked to pay upfront at anytime


Always provide your ID card at check-in or registration

Sample Company Name Logo

Sample Company Name
Group: 188XXXX
Employee: JOHN SAMPLE
ID: DAPL001

Member Services
1-800-368-3636
1-800-368-3636
1-800-368-3636

Have questions about your coverage? Call the number on your Benefits ID Card

CONFIDENTIAL & PROPRIETARY 

28

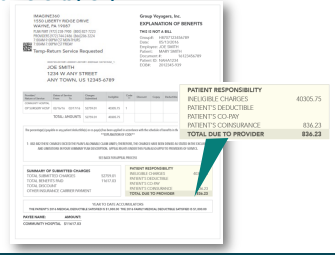
Understanding Your Explanation of Benefits (EOB)

Your EOB is not a bill.

The EOB shows information about services received, the provider and date of service.

It will include:


- A claim number (You'll need this when calling us).
- Deductible: The amount you pay out-of-pocket before the plan pays.
- Total Due to the provider.
- If you receive a bill for more than what your EOB states you owe, contact us.



Financial Summary:

PATIENT RESPONSIBILITY	4035.75
RELIEF CHARGES	
PATIENT'S DEDUCTIBLE	
PATIENT'S CO-INSURANCE	836.23
TOTAL DUE TO PROVIDER	836.23

If a provider bill does not match your EOB, call the number on your Benefits ID Card.

CONFIDENTIAL & PROPRIETARY 

29

UCM Digital Health

- **Because better care is built around the patient.**
- UCM Digital Health offers a digitally integrated, whole person health solution that provides patients with immediate access to care on their terms.
- UCM combines a digital front door platform, multi-disciplinary team of providers, and a 24/7 telehealth triage, treatment, and navigation service to provide a range of patient services, including emergent and urgent care, primary and specialty care, behavioral health, and more. Care begins digitally and can seamlessly integrate across other points of care for a simple patient experience.
- UCM brings together clinical expertise, advanced technology and compassionate care to offer powerful advantages for insurers, employers, patients and providers
- Phone # 844-494-7362

30

Who is Imagine360?

- Provides claim review and audit
- Handles all Balance Bill issues



Member receives care




ELAP will review claim to check for errors & charges above plan's limit.



Imagine360 sends an adjudicated payment to the provider.

If you have a question about the status of your claim, you may contact the Balance Bill Response Team any time:
 Phone: 1-800-827-7223
 Email: balancebills@imagine360.com
 Hours: 9am - 8pm EST

OPEN ENROLLMENT
 2022-2023 KICKOFF MEETING



REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓


31

Questions that may come up...




Question	Answer
My Doctor(Provider) said they don't accept my insurance	You may call or you can have the provider call Imagine360 at 800-827-7223. Imagine360 will explain how the provider will be paid. <u>Please do not pay more than your copayment that is due per your plan benefit.</u>
I can't find any facility (hospital) that is in network.	The Freedom plan does not have in/out-of network coverage for facilities. GPA will pay any facility that you choose to go to as there is no network as mentioned. The facility may call GPA to see how to file a claim.
What if I receive a bill from my provider after the insurance company has paid?	You need to contact ELAP. They will work directly with the provider to resolve the balance due. You may be asked to sign a client relationship agreement and a HIPAA form (medical records release authorization form). This allows ELAP and their attorney to be able to discuss your open balance with the provider. Phone: 1-800-827-7223 Email: balancebills@imagine360.com Hours: 9am - 8pm EST
I have not received my ID card yet and need to use the benefits.	You can log onto GPA's portal (www.imagine360.com) and print an ID card.

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

32



PIBT Freedom is committed to providing you and your family with the right tools to help you manage health care costs and improve your well-being.
 Mon. - Thurs. 9:30 am - 5 pm, Fri. 8:30 am - 4 pm PST
 P. 353.726.8500 or 800.440.4000 | Email: piibt@piibt.org

Resource	Detail	Purpose	Website/Email Address	Contact Information
 (Formerly GPA & ELAP)	Member services assistance	<ul style="list-style-type: none"> • Benefits • Provider search • ID cards • Claim issues • Balance Bill issues 	Member Services: myplan@imagine360.com Balance Bills: balancebills@imagine360.com	P. 800.827.7223 F. 972.838.7900 Mon. - Thurs. 7 am - 9 pm CST P. 800.827.7223 F. 972.838.7900 Fri. 7 am - 7 pm CST
	Virtual care at \$0 copay out of pocket in most cases.	Virtual care with medical professionals from wherever you are 24/7	www.ucmdigitalhealth.com	P. 844.494.7362
	Imaging services for little to no out of pocket with most plans.	Provides you assistance when an MRI, CT or Pet Scan is prescribed.	kisimaging@getkiss.com	P. 888.458.8746 Mon. - Fri. 8:30 am - 6 pm EST

33

PIBT Freedom is committed to providing you and your family with the right tools to help you manage health care costs and improve your well-being.
 Mon - Thurs: 9:30 am - 5 pm, Fri: 8:30 am - 4 pm PST
 P: 323.728.8500 or 800.449.4888 | email: piibt@piibt.org

Resource	Detail	Purpose	Website/Email Address	Contact Information
	Pharmacy management	Handles the process for all covered prescription drugs. Present your card to get your prescription filled. RX BIN: 017449 RX PCN: 6782000 RxIdp: 79009A	www.magellanrx.com	Help Desk P: 800.424.0472 Available 24/7
	A team of dedicated healthcare professionals who we have partnered with to reduce the cost of your high-dollar prescription drugs.	Advocates on your behalf with drug manufacturers to lower the cost of your prescription drugs. Often members end up paying nothing out of pocket once submitted into the program.	customerservice@payermatrix.com	P: 877.305.6202 Mon - Fri 8am - 5:30 pm EST

34

Custom Quotes

OPEN ENROLLMENT 2022-2023 KICKOFF MEETING

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

35

Medicare

- Do you have employees that will be 65 soon?
- Do they need help deciding if they should take advantage of their Medicare benefits vs the group plan?
- PIAG has partnered with Susan Brown at MBA to help your employee see what their options are.
- Contact Susan at 678-461-9841 or Susan.Brown@mba.agency
- Please use **CODE: PIAG** to make sure Susan knows you are a PIAG member.

OPEN ENROLLMENT 2022-2023 KICKOFF MEETING

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓


36

Vision, Dental and Life

OPEN ENROLLMENT 2022-2023 KICKOFF MEETING

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

37

VSP & EyeMed 

- Eyemed:
 - Exam currently \$5 will be \$0
 - Lenses currently \$15 will be \$10
 - Small rate increase
- VSP: No benefit change
- Small rate increase

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

38

vsp vision care | **PIBT**

It's Time to Enroll
Get to Know Your
VSP Vision Benefits.

Printing Industries Benefit Trust (PIBT)
Open Enrollment is October 13, 2022
Effective January 1, 2022

Classification: Confidential



39


Why VSP?




 Classification: Confidential

40


See Well. Be Well.®


Care


As a health-focused company, your well-being is at the core of everything we do. Eye care is essential to your overall health.


Savings

With VSP®, your family can rely on additional savings and offers to get the care you need at low out-of-pocket costs.


Access

From private practice doctors to retail chain locations, VSP is here to help you with safe, convenient access to local eye doctors.

 Classification: Confidential

41


Eye Care is Essential

Keep yourself healthy with a yearly eye exam from a VSP network doctor.

Did you know?

Annual eye exams provide an unobstructed view of the blood vessels and can help detect early signs of serious eye and health conditions like glaucoma, diabetes, high cholesterol, and high blood pressure.

- Nearly **96 million** US adults are living with **pre-diabetes** and **84%** don't know they have it.*



*Centers for Disease Control and Prevention (CDC)

Classification: Confidential

42

Your VSP Plan Options at a Glance

	PST Standard Plan	PST Premium Plan
Exams	<ul style="list-style-type: none"> MultiVision Exam covered every calendar year \$15 Copay Retinal imaging exam covered every calendar year \$10 Copay 	
Essential Medical Eye Care	<ul style="list-style-type: none"> Retinal imaging for eligible members with diabetes Additional exams and services beyond routine care to treat immediate issues from job eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more Coordination with your medical coverage may apply. Ask your VSP network doctor for details. \$20 Copay 	
Frame Allowance	\$150 Frame allowance every 24 months	\$200 Frame allowance every 12 months
Lenses (every calendar year)	<ul style="list-style-type: none"> Fully covered single vision, bifocal, or read bifocal lenses or prescription lenses for dependent children 	
Lens Enhancements	<ul style="list-style-type: none"> Standard Progressive lenses covered with \$20 copay 50% savings on lens enhancements, like Scratch-resistant coating and UV protection 	<ul style="list-style-type: none"> Standard Progressive lenses covered with \$20 copay 50% savings on lens enhancements, like Scratch-resistant coating and UV protection
Contact Lens Allowance (instead of glasses)	\$150 allowance for contacts and contacts lens exam	\$200 allowance for contacts and contacts lens exam

Classification: Confidential

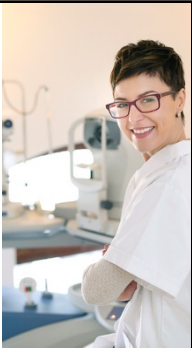
43

Essential Medical Eye Care

Here's what's covered:

- Fully covered retinal imaging for members with diabetes who do not have diabetic eye disease.
- Exams and services to treat immediate issues like pink eye and sudden changes in vision.
- Treatment options to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more.

This coverage is supplementary and in most cases your health insurance will be billed first. You may be able to coordinate with your VSP benefits in order to help reduce out-of-pocket costs. If your VSP network doctor doesn't participate with your medical insurance plan, VSP has you covered with only the cost of your copay.



*2020 employer survey for medical claims. Other covered services are dependent on a member's plan and network. © 2022 VSP. All rights reserved.

Classification: Confidential

44


Exclusive Member Extras

Get the Savings You Need.

Visit [vsp.com](https://www.vsp.com) to see all the Exclusive Member Extras. VSP puts members first by providing you with exclusive special offers from leading industry brands, totaling more than **\$3,000 in savings**. Discover great deals on glasses, sunglasses, contact lenses, and more.

- Enjoy an Extra **\$20** on Featured Frame Brands.
- Enjoy an Extra **\$40** on Featured Frame Brands.
- Save up to **40% Off** on popular lens enhancements*.

*Savings based on state and benefit plan. Brands and offers subject to change. *Savings based on doctor's retail price and vary by plan and purchase selection; savings determined after benefits are applied. Ask your VSP network doctor for more details.



Classification: Confidential

45



Convenient Access You Want

With thousands of in-network doctors, it's easy to find an eye doctor near you.

With Even More Options

Maximize your benefits at a Premier Program location (at no extra cost) including thousands of private practice doctors and more than 700 Visionworks® retail locations nationwide.

- Exclusive bonus offers and savings
- A wide selection of featured frame brands
- Advanced eye exam technology, like retinal imaging

Classification: Confidential

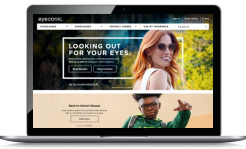

46

Eyeconic

As a VSP-owned company, **Eyeconic** seamlessly connects your VSP vision benefits to your account.

Eyeconic offers a variety of well-known brands and contact lenses. Choose from more than 70 eyewear brands like Calvin Klein, Cole Haan, Nike, and more.

Find your product, customize your order and we do the rest. Start saving today at **eyeconic.com**® today.


Classification: Confidential

47

Participating Retail Chains

There are more than 10,000 retail chain locations in the VSP network in addition to Visionworks, including:

- Costco Optical
- Walmart Vision Center
- Pearle Vision
- MyEyeDr
- Clarkson Eyecare
- RxOptical
- And more



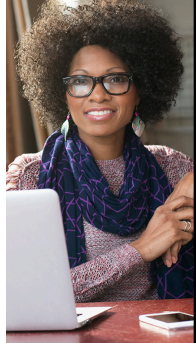
Classification: Confidential

48

Using Your Benefit is Easy

Once you're enrolled...

- Create an account at **vsp.com** and review your personalized benefit information.
- You can find a VSP in-network doctor by visiting **vsp.com** or calling **800.877.7195**.
- At your appointment, simply tell them you have VSP. No ID card needed—and we'll take care of the rest! There are no claim forms to fill out when you see a VSP network doctor.



Classification: Confidential

49

Enroll Today!

VSP helps you see well and be well with the coverage and quality care you deserve.

Questions? Contact us. Call 800.877.7195 or visit VSP.com.

©2022 Vision Service Plan, All Rights Reserved. VSP, VisionSmart, Clear and True, and VSP are trademarks of Vision Service Plan. All other marks are the trademarks of their respective owners. 10/14/22

50

PIBT w/exam High \$200 Frame & CL allowance

Additional discounts	SUMMARY OF BENEFITS	
	In-Network Member Cost	Out-of-Network Reimbursement
40% OFF Complete pair of prescription eyeglasses	Up to \$200	Up to \$200
20% OFF Remaining balance beyond plan coverage	Up to \$200	Up to \$200
20% OFF Remaining balance beyond plan coverage	Up to \$200	Up to \$200

51

PIBT w/exam High \$200 Frame & CL allowance

Take a sneak peek before enrolling	SUMMARY OF BENEFITS	
	In-Network Member Cost	Out-of-Network Reimbursement
40% OFF Complete pair of prescription eyeglasses	Up to \$200	Up to \$200
20% OFF Remaining balance beyond plan coverage	Up to \$200	Up to \$200
20% OFF Remaining balance beyond plan coverage	Up to \$200	Up to \$200


52

EyeMed Retail Locations

- Sears
- Target
- Lenscrafters
- Pearl Vision
- Independent Provider
- And More

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

53

Dental plan changes eff 12/01/2022 



- Cigna DMO Dental to Delta Dental DMO (pay only your copay, no deductibles, no claim forms, minimal limitations and exclusions, out of area emergency allowance, specialty care with referral, choice of your own network dentist) refer to your schedule of benefits
- Humana Advantage EPO 15 to Humana Advantage EPO 25 (No charge for composite fillings, no charge for oral surgery)
- Humana Traditional PPO \$1,000 annual max to Humana PPO \$1,500 annual max

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓


54

Compare your options

<p>PPO</p> <ul style="list-style-type: none"> ❖ Visit any dentist, but save money by staying in network ❖ Pay amount (%) not covered by plan ❖ Annual maximums may apply 	<p>DeltaCare USA</p> <ul style="list-style-type: none"> ❖ Choose a primary care dentist from the DeltaCare USA network ❖ Pay set copayment (\$) for the procedure ❖ No maximums
--	---

55


Symetra Life Insurance 

- No benefit changes
- Possible rate change if employee moves to a different age bracket
- Voluntary term life available
- Guaranteed Issue for employee \$120k
- Spouse \$25k, children \$10k or \$5k

Presenter: Evie Banaga

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

56

Employee Assistance Program 

- EAP is an employer sponsored plan. Employer pays 100% of the premium therefore 100% employee participation is required.
- Anyone living in the EE's home can use the plan
 - \$5.47 per employee (paid by employer)
- Offers many types of services such as:
 - Personal Wellness Coaching
 - Online wills and trust prep
 - Financial Consulting
 - Identity Theft Assistance
 - Dependent Care Assistance
 - Referral Options
 - I.E. : pet care, home contractors and travel arrangements
 - Presenter Evie Banaga


REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

57

TASC

- Flexible Spending Account Option
 - Employers save money when employees elect the FSA pre-tax as it reduces your FICA.
 - Employees can increase take home pay by reducing taxable income.
 - For more info – see yearbook
- <https://fsastore.com/>
- **Presenter: Evie Banaga**

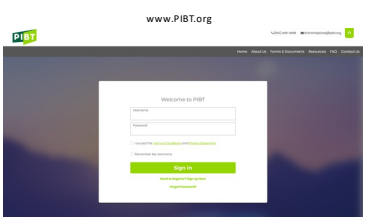
**OPEN ENROLLMENT
2022-2023 KICKOFF
MEETING**




REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

58

PIBT Portal




**OPEN ENROLLMENT
2022-2023 KICKOFF
MEETING**



REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

59

Renewal options: Portal or Paper



Employers can renew on the portal (www.pibt.org) or send in paper Participation Agreement

- Once the renewal has been completed you are able to get 2022-2023 documents
- Prefilled enrollment forms for all currently enrolled employees
- Custom enrollment form for NEW employees
- Link to PIBT's website to get all general documents
- **REMINDER: \$35.00 late fees** will be charged if payment is not received by the 15th of the month. Payments are due by the 1st and past due on the 15th. You can have your bill emailed to you on the 1st or you can pull off the portal instead of waiting for the mail.

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

60

PIBT 2022 PARTICIPATION AGREEMENT

* Complete sections 1-8 and sign all required areas.
 * Failure to complete required fields will result in significant processing delays.
 * Submit your agreement by email to pibt@pibt.org, by fax to 325-215-1796, or upload at www.pibt.org. Enrollment forms will be emailed to you within 2-3 business days.

SECTION 1: COMPANY INFORMATION				
Company Name	Federal Tax ID	Effective Date Required	Account #	
Physical Address	City	State	Zip	
Mailing Address	City	State	Zip	
Additional Company Information (REQUIRED)				
Additional Information: _____ Email: _____				
Number of Full Time W2 Employees	Number of Part Time W2 Employees	Federal COBRA (20+ employees)	State COBRA (15 or less employees)	Annual Gross Sales
Billing Method Selected - Select all that apply				
<input type="checkbox"/> Bill Me	<input type="checkbox"/> Email PDRs	<input type="checkbox"/> Email Enrol Files	Billing Contact	
Full Name		Email		
Waiting Period - For Future Hires (Please check one option)				
<input type="checkbox"/> 90 Days		<input type="checkbox"/> 60 Days	<input type="checkbox"/> No Waiting Period	
Company Contribution (per person)				
Medical	Dental	Vision	Dollar Amount	
For Employees:				
For Dependents:				
Note: Thereafter, the Company agrees to participation guidelines as follows:				

61

1. The Company wishes to offer its "eligible" employees, as defined by the Printing Industries Benefit Trust (the "Trust") coverage under the employee benefit plans controlled by the Company (the "Plan") and offered by the Trust.
2. The Company shall participate in the Trust pursuant to the Awarded and Reimbursed Agreement and Declaration of the Trust of PIIBT.
3. The Company shall send a statement of the full employees working 30 or more hours per week to be considered a group 70% of all full-time employees must participate in medical and in ancillary plans offered. Valid waivers will be required and do not count against participation.
4. A copy of a waiver's age report may be requested by the Trust in a group.
5. The Company shall pay a minimum of 50% of the employee's monthly premium (not for the least expensive medical plan offered) and 50% of the monthly premium for the least expensive ancillary plan(s) (i.e., dental, vision, etc.). (These costs: Employees with 50 or more employees may be subject to penalties under the Affordable Care Act if they do not offer coverage to a sufficient number of employees or require an employee to contribute more than 2.0% of AGI to wages for self-only coverage under the lowest cost health option. See discussion of "Potential Liability under the Affordable Care Act" on the Administrative Guidelines.
6. The Company shall give each eligible employee the opportunity to elect coverage from any plan offered by the Company for Self, Spouse, and/or Children based on the employer's contribution.
7. The Company shall review the statement received from the Trust each month to verify that the coverage will forth those for each eligible employee is correct and that all required contributions to the Trust within 20 days following receipt of such statement.
8. Failure to remit to the Trust the contributions required under the Plan when due will cause the termination of coverage under the Plan for all eligible employees of the Company and their spouses and children. In no such event, the Trust shall further be entitled to take any appropriate legal action, including, but not limited to, action to recover all amounts due, interest thereon and expenses incurred, including reasonable attorney's fees, and coverage will not be reinstated.
9. The Company shall remit to the Trust by the 15th day of each month the total contributions required under the Plan for the month. Contributions not received will incur a \$200 fee. The Trustee shall incur and reimbursement in an amount of \$200 fee will be required prior to reinstatement.
10. The undersigned may voluntarily terminate its participation in the Trust 30 days after receipt by the Trust of written notice thereof.
11. Terminations are effective at the end of the month in which the employee was terminated. Terminations should be reported to the Trust prior to last day of coverage to ensure continuation of coverage is sent in a timely manner.
12. This Agreement supersedes any prior agreements related to the subject matter of this agreement.
13. In the absence of anything to the contrary, this agreement will be construed and will be deemed valid, including any changes to plans or replacement to plans offered.

SECTION 2: PARTICIPATION AGREEMENT CERTIFICATION (Required)


Authorized Representative Name:	Signature:	Date:
Email:	Title:	

62

Next Steps:

- Time to make a decision!
 - Do you want to renew with Printing Industries Benefit Trust?
 - No? Please contact Heather at heather@pia.org to let her know to shop your company with other carriers.
 - Yes? Complete your Participation Agreement in PIBT portal or send in paper copy to pibt@pia.org.
 - Once the PA has been processed you can pull your custom enrollment form with all your new plans.
 - PIAG staff can provide virtual enrollment meeting with your staff, if requested.
 - Changes with a 1/1 start date will need to be submitted by 11/23.
 - Changes with a 1/1 start date will need to be submitted by 12/22.

OPEN ENROLLMENT
2022-2023 KICKOFF MEETING




Call Imagine360: 800-827-7223
Or 973-238-9193
Email: openenrollment@pia.org
Bilingual language support provided
Hours:
Mon-Thu: 8a - 5p EST
Fri: 9a - 5p EST

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

63

It's said that you protect what's important to you, **so what are you insuring?**



Business Personal Property

- Building
- Workers Compensation
- Commercial Auto Cyber
- Crime/Data Breach

Home Personal Auto

- Boaters
- Personal Umbrella
- Individual Life
- Medicare

Group Health

Group Dental

Group Vision

Group Disability

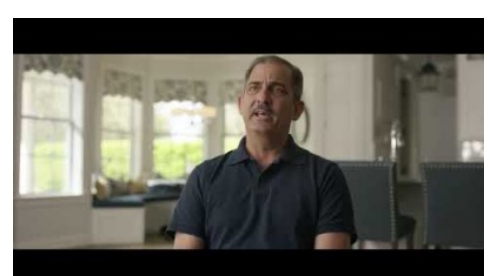
Help us help you by comparing with our other products.

PIAG Insurance

get a FREE quote on Insurance at www.piainsurance.com
call us today at (770) 433-9960

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

64



65



PIAG Insurance is partnering with **AFLAC** to offer extensive voluntary benefits.

- STD covers employees up to 60% if out for accident or illness. Illness to include Covid-19.
- CI Rider pays employee up to \$5K if diagnosed with Covid-19, Flu, or Pneumonia and admitted to the hospital.
- Individual life products
- Cancer products
- Aflac cost the employer nothing. Paid 100% by employee.

For more information contact Phillip @ 706-575-9931 or email pwbenefits@yahoo.com

**OPEN ENROLLMENT
2022-2023 KICKOFF
MEETING**



REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

66

Printers 401k

Contact Information:
Joe Trybula
Diversified Financial Advisors, LLC
Tel: 800-307-0376
Email: joe@printers401k.com

Association 401k Plan

- Multiple Employer Aggregation Plan
- Easy Administration and Operation
- Compliant 401k Program
- Protection from Fiduciary Liability
- Reduce Plan Cost
- Easy Plan Transition
- No Set-Up Fee

How we help members

Results | 32 Plan Participants

- 103%** Increase in the plan participation rate from 54% to 103%. More employees are now saving for their future retirement needs.
- 518%** Increase in the average deferral % from 1.02% to 6.30%. Overlays and loan employees can now contribute more money towards retirement.
- 22%** Reduction in overall 401k plan expenses. Provided Fiduciary delegation of trustee, administration and investments, which reduced company liability and staff workload.
- 1.3.5** Better investment returns 1-, 3- & 5-year averages.

REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓


67

Your open enrollment questions answered

1. I want to keep my current plan. What do I do?
Complete the 2022 participation agreement online or email to me at heather@piag.org.
2. How do I know what plans is best for me?
Make a list of healthcare services you used last year including prescription you need filled on a regular basis
3. If I change plans can I keep my current doctor?
Check to see if the doctor is in network before moving to another carrier

Please send all questions through the app

**OPEN ENROLLMENT
2022-2023 KICKOFF
MEETING**



REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓


68

Questions?

All microphones are muted!

Please send questions in the chat below!
Video available on the PIAG website in the coming days
2022-2023 Benefit yearbooks are available on www.pibt.org

**OPEN ENROLLMENT
2022-2023 KICKOFF
MEETING**




REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

69

THANK YOU!!!

For questions:
Heather Paruta
heather@piag.org
678.816.1161

OPEN ENROLLMENT
2022-2023 KICKOFF
MEETING



REMEMBER! All microphones are muted. If you need to ask a question, please use the chat function below. ↓

70