

Herring Networks, Inc. 2022 Benefits Enrollment Guide - Effective 1/1/2022



Welcome to the Herring Networks' Employee Benefit Program! We are pleased to present this guide highlighting the comprehensive coverage available to you as a valued employee of Herring Networks. *Please take the time to review the information in this guide so that you are fully informed of all the benefits offered to you. More detailed information is available from the Human Resources Department. If there is any discrepancy between the insurance carrier's certificate of coverage and this guide, the insurance carrier's certificate of coverage is the prevailing document.*

Note: The Cost of Coverage is on page 20.

FOR INFORMATION ABOUT	CONTACT	PAGE
Your Benefits (Herring Networks)	Amber Coakley 858.270.6900 ext. 168 Amber.Coakley@oann.com Krista McClelland 858.270.6900 ext. 105 Krista.McClelland@HerringNetwork.com	2
Medical Plans	<u>Anthem HMO:</u> 833.913.2236 <u>Anthem PPO:</u> 800.888.8288 For PPO – Provider Finder/Away From Home Urgent Care When You're Traveling in the U.S. 800.810.BLUE (2583) Member/Pharmacy/Home Delivery Service 833.261.2460 www.anthem.com/ca	4
Voluntary Dental Plan	Principal 800.247.4695 www.principal.com/dentist	11
Voluntary Vision Plan	Vision Service Plan (VSP) 800.877.7195 www.vsp.com	15
Life/AD&D (employer-paid)	Anthem 800.552.2137 lifeclaims@anthem.com	16
Resource Advisor (telephone consultation & referral services 24/7)	Resource Advisor (for Life/AD&D members) 888.209.7840 www.resourceadvisorca.anthem.com – (program name: ResourceAdvisor)	17
Travel Assistance (Generali Global Assistance or GGA)	Travel emergency assistance services (for Life/AD&D members) - US & Canada: 866.295.4890 Other locations (call collect): 202.296.7482. www.anthem.com/ca	19
COBRA	National Benefit Services (NBS) 800.274.0503 www.nbsbenefits.com	

Eligibility Dates and Coverage

Who is eligible?

- **Full time employees & their eligible dependents** – Full time employees are those who average at least 30 hours per week. Eligible dependents include:
 - **Your legal spouse (unless you are legally separated)**
 - **Your domestic partner (defined under CA law AB2208)**
 - **Your dependent children under the age of 26**

When do you need to enroll?

- **During open enrollment** — You can elect or make changes only one time each year during open enrollment, unless you experience a qualifying life event (QLE).
- **As a new hire** — You must enroll within 30 days of your first day of employment with us. Your benefits will take effect on the **first day of the month following 60 days from date of hire.**

How to make changes during the year

- During the year you can only make changes if you experience a **qualifying life event (QLE)**, which include marriage, divorce, legal separation, birth or adoption, change in residence or workplace, gain or loss of other coverage.
 - **Reminder:** You must make benefit changes within 30 days of the qualifying change in status event date or you will have to wait until the next open enrollment period.
 - You are responsible for notifying the Human Resources Department of any qualifying event and in changing your elections within that timeframe.

When Coverage Ends

- If your employment with Herring Networks ends, your coverage in medical, dental and vision insurance will end on the last day of the month of your termination. All other coverage ends on the date of termination. You may be eligible to continue certain benefit programs on a self-paid basis, after leaving employment (COBRA).

Medical

Herring's medical plan offers comprehensive care through Anthem in certain locations. By making smart decisions about how you use your medical benefits, you can achieve better health and manage your costs.

Anthem (Plans 1 & 2) - HMO

If you live in California, you may enroll in an Anthem HMO. You and your covered family members each select a doctor from Anthem network of physicians to be your Primary Care Physician (PCP) and coordinate your care.

Anthem (Plans 3 & 4) - PPO

Anthem provides coverage for in-network and out-of-network care, so you can see any doctor. You will pay less out of pocket and a lower deductible when you use in-network doctors because Anthem negotiates lower rates and higher discounts with these providers.

Medical Plans – HMO (plan highlights)

Medical Benefits		
Carrier	Anthem	Anthem
	T-Value HMO 30/50/30% (Base)	T-Value HMO 20/40/250 3 day (buy-up)
In-Network Coverage		
Deductible (Individual / Family)	None	None
Out-of-Pocket Maximum (Individual / Family)	\$5,000 / \$10,000	\$2,500 / \$5,000
Coinsurance	30%	N / A
Primary Care Physician Office Visit	\$30	\$20
Specialist Office Visit	\$50	\$40
Preventive Care	No charge	No charge
Emergency Room	\$200/visit (copay waived if admitted)	\$150/visit (copay waived if admitted)
Urgent Care	\$30	\$20
Outpatient Surgery	30%	\$125/visit
Inpatient Hospital	30%	\$250/day up to 3 days/admission
Prescription Drug Deductible	\$150 / \$450	None
Prescription Drug Retail (Tier 1/Tier 2/Tier 3/Tier 4)	5 or 20 / 40 / 60 / 30% up to \$250 max. per Rx - all tiers after Rx ded. except tier 1 generic	5 or 20 / 40 / 60 / 30% up to \$250 max. per Rx
Prescription Drug Mail Order (Up to 90-Day Supply)	2.5x Retail (generic), 3x Retail (brand tiers 2 & 3)	2.5x Retail (generic), 3x Retail (brand tiers 2 & 3)

Medical Plan – PPO (plan highlights)

Medical Benefits		Buy-up PPO
Carrier	Anthem	Anthem
	Solution PPO 1500/20/40/20	Classic PPO 500/20/40/20 (Essential 5/15/30/50/30% to 250)
In-Network Coverage reflected only	plan name change	
Deductible (Individual / Family)	\$1,500 / \$3,000	\$500 / \$1,500
Out-of-Pocket Maximum (Individual / Family)	\$5,000 / \$10,000	\$3,500 / \$7,000
Coinsurance	20%	20%
Primary Care Physician Office Visit	\$20	\$20
Specialist Office Visit	\$40	\$40
Preventive Care	No charge	No charge
Emergency Room	\$150 copay + 20% after ded. (copay waived if admitted)	\$150 copay + 20% after ded. (copay waived if admitted)
Urgent Care	\$20	\$20
Outpatient Surgery	20% after deductible	20% after deductible
Inpatient Hospital	20% after deductible	20% after deductible
Prescription Drug Deductible	None	None
Prescription Drug Retail (Tier 1/Tier 2/Tier 3/Tier 4)	5 or 20 / 40 / 60 / 30% up to \$250 max. per Rx	5 or 15 / 30 / 50 / 30% up to \$250 max. per Rx
Prescription Drug Mail Order (Up to 90-Day Supply)	2.5x Retail (generic), 3x Retail (brand tiers 2 & 3)	2.5x Retail (generic), 3x Retail (brand tiers 2 & 3)

***Note: For PPO, in-network coverage only reflected - refer to the SBC or benefits summary for out-of-network. For Solution PPO, there are some plan changes effective 1/1/2022; please refer to the SBC or benefits summary.**

Anthem - how to find an HMO provider

Medical HMO – Traditional Network

How to Find a Medical Provider Online

STEP 1

- Visit <https://www.anthem.com/ca/find-care/>
- Click **Members** box to access your elected plan; **OR** • Click **Guests** box
- Scroll down to answer questions that will help you narrow your search

STEP 2

Scroll down the screen to complete the following fields:

- What type of care are you searching for? Use drop down to
 - select: **Medical**
- What State do you want to search in?: Use drop down to
 - select **your State**
- What type of plan do you want to search with?
Medical
 - **(Employer- Sponsored)**
- Select a plan/network: Use drop down to select **Blue Cross**
 - **HMO (CACare) – Large Group**
- Click **Continue** button

Anthem – how to find an HMO provider - continued

STEP 3

Enter the Zip Code in the far right box. You now have 2 options to narrow your search:

- Option 1: Enter in the **Physician's Name, Specialty, NPI or license number** in the Search Box. The results will appear below the Search Box and you can either click on the name provided or you may click on the **See All** text.
- Option 2: Scroll down and click one of the Types of Providers listed.
 - The results will appear on a new screen and you can click on the physician's name to obtain additional details.

STEP 4

- View your search results.
- Click the printer icon to print the results of your search.
- Click on a provider name to see more details.
- Click the **Back to Results** button in the upper left hand corner or **Back** box at the bottom the screen to return to results.

STEP 5

- **HMO Plan Participants**
- HMO plan providers in CA only
- Confirm you have selected your Medical Group Affiliation or Location • Record the 3 to 6-digit PCP/ID to enter into your enrollment form.

Anthem – how to find a PPO provider

Medical PPO - California

How to Find a Medical Provider Online

STEP 1

- Visit <https://www.anthem.com/ca/find-care/>
- Click **Members** box to access your elected plan; **OR** • Click **Guests** box
- Scroll down to answer questions that will help you narrow your search

STEP 2

Scroll down the screen to complete the following fields:

- What type of care are you searching for? Use drop down
 - to select: **Medical**
- What State do you want to search in?: Use drop down to
 - select **your State**
- What type of plan do you want to search with?
 - **Medical (Employer- Sponsored)**
- Select a plan/network: Use drop down to select
 - **Blue Cross PPO (Prudent Buyer) – Large Group**
- Click **Continue** button

Anthem – how to find a PPO provider - continued

STEP 3

- Enter the Zip Code in the far right box. You now have 2 ways to narrow your search:
- Option 1: Enter in the **Physician's Name, Specialty, NPI or license number** in the Search Box. The results will appear below the Search Box and you can either click on the name provided or you may click on the **See All** text.
- Option 2: Scroll down and click one of the Types of Providers listed.
 - The results will appear on a new screen and you can click on the physician's name to obtain additional details.

STEP 4

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Voluntary Dental (plan highlights)

Your teeth and gums play an important role in your health. Research shows a connection between periodontal diseases and other health conditions — making routine dental checkups that much more important.

Dental insurance is offered by Principal. Plan benefits for in-network services are based on the percentage of the negotiated fee (the fee that participating dentists have agreed to accept as payment in full). Plan benefits for out-of-network services are based on the percentage of the Reasonable and Customary (R&C) charges. If you choose a dentist who does not participate in the network, your out-of-pocket expenses may be more, since you will be responsible for paying any difference between the dentist's fee and your plan's payment for the approved service.

Voluntary Dental Plan - Amount EE Pays		
Carrier	Principal - POS plan for CA	
In-Network Coverage	EPO / PPO in-network tiers	
Deductible	\$50 / \$150	
Deductible Waived for Preventive?	yes	
Annual Max. Per Member	\$1,000	
Preventive / Type A Coinsurance	0%	
Basic / Type B Coinsurance	20%	
Major / Type C Coinsurance	50%	
Ortho / Type D Coinsurance	N / A	
Orthodontics Lifetime Maximum	N / A	
Out-of-Network Coverage		
Deductible	\$50	
Deductible Waived for Preventive?	yes	
Annual Max. Per Member	\$1,000	
Preventive / Type A Coinsurance	0%	
Basic / Type B Coinsurance	20%	
Major / Type C Coinsurance	50%	
Ortho / Type D Coinsurance	N / A	
Orthodontics Lifetime Maximum	N / A	
Reimburse % of Medicare	UCR 90th percentile	

Coinsurance refers to the amount you pay after any applicable deductible.

Voluntary Dental (plan highlights) - continued

Voluntary Dental Plan - Amount EE Pays

Carrier	Principal - PPO plan for non-CA	
In-Network Coverage		
Deductible	\$50 / \$150	
Deductible Waived for Preventive?	yes	
Annual Max. Per Member	\$1,000	
Preventive / Type A Coinsurance	0%	
Basic / Type B Coinsurance	20%	
Major / Type C Coinsurance	50%	
Ortho / Type D Coinsurance	N / A	
Orthodontics Lifetime Maximum	N / A	
Out-of-Network Coverage		
Deductible	\$50	
Deductible Waived for Preventive?	yes	
Annual Max. Per Member	\$1,000	
Preventive / Type A Coinsurance	0%	
Basic / Type B Coinsurance	20%	
Major / Type C Coinsurance	50%	
Ortho / Type D Coinsurance	N / A	
Orthodontics Lifetime Maximum	N / A	
Reimburse % of Medicare	UCR 90th percentile	

Coinsurance refers to the amount you pay after any applicable deductible.

Principal – how to find an in-network dental provider (CA Members)

1. Visit www.principal.com/dentist
2. Begin your search by picking the state where you would like to find a provider. For Point of Service (POS) plans, the state selected should be California. After selecting California, specify the Principal POS Plan.
3. Enter the name of the provider you are looking for (if known). If you are looking for a nearby dentist, enter the city and state and/ or ZIP code. Be sure to indicate how far you are willing to travel.
4. Select the desired specialty or use the No Specialty Preference default. Click Continue.
5. EPO providers will be listed first. For additional dentists not contracted with the EPO, select Show PPO Providers. The EPO network is a subset of the PPO network, and all EPO providers are also contracted as PPO providers. The EPO network provides the greatest discounts and preferred benefit design coverage.
6. Select a language if your preference is other than English. Click Continue.

Principal – how to find an in-network dental provider (Non-CA Members)

1. Visit www.principal.com
2. Begin your search by picking the state where you would like to find a provider. Next, specify a network. Depending on the network chosen, you may be transferred to a partner site.
3. Enter the name of the provider you are looking for (if known). If you are looking for a nearby dentist, enter the city and state and/or ZIP code. Be sure to indicate how far you are willing to travel.
4. Select the desired specialty or use the No Specialty Preference default. Click Continue.
5. Select a language if your preference is other than English. Click Continue.

Voluntary Vision (plan highlights)

Vision insurance: VSP administered by Principal is offered through VSP. The VSP Vision network is built on one of the largest national vision networks. The plan is designed to provide comprehensive coverage and give the flexibility to receive care from either In-Network or Out-of-Network providers. There are no claims to file and greater benefits when you visit an In-Network provider. When you use an Out-of-Network provider you pay for services and then submit a claim for reimbursement up to the below allowances.

Voluntary Vision Plan - Amount EE Pays		
Carrier	VSP	
Frequency		
	Exam Frequency	12 months
	Frame Frequency	24 months
	Contact Frequency	12 months
In-Network Coverage		
	Exam Copay	\$10
	Frame Retail Allowance	up to \$150 + 20% off amount over allowance. Up to \$80 allowance from Costco.
	Material Copay	\$25
	Single Vision Lenses	\$25
	Bifocal Lenses	\$25
	Trifocal Lenses	\$25
	Lenticular Lenses	\$25
	Contact Lenses Elective Allowance	up to \$150
	Contact Lenses Therapeutic Allowance	\$25
Out-of-Network Coverage		
	Exam Allowance Max.	up to \$45
	Frame Retail Allowance Max.	up to \$70
	Single Vision Lenses Allowance Max.	up to \$30
	Bifocal Lenses Allowance Max.	up to \$50
	Trifocal Lenses Allowance Max.	up to \$65
	Lenticular Lenses Allowance Max.	up to \$100
	Contact Lenses Elective Allowance Max.	up to \$105
	Contact Lenses Therapeutic Allowance Max.	up to \$210

VSP – how to find an in-network vision provider

Visit www.vsp.com

Life/AD&D (plan highlights)

Life insurance provides financial protection for your dependents in the event of your death, and can be important to their future security. Herring Networks pays the full cost of your \$25,000 basic life and AD&D coverage. Coverage is provided by Anthem.

What is AD&D Insurance?

AD&D insurance provides a separate death benefit to your beneficiary if you die as a result of a covered accidental injury. It also can provide a benefit to you if you lose your sight or limb as a result of a covered accident.

Age Reductions

The Basic Life/ AD&D plan benefit will be reduced for employees age 65 and older as follows:

Age	Reduction
65	35%
70	50%

The help you need – when you need it most

Imagine having a counselor, a lawyer and a financial consultant on call whenever you need them. Actually, you don't have to imagine it because with Resource Advisor, you already do. And, it's included with your Anthem Blue Cross Life and Health Insurance Company group life and/ or disability plan at no extra cost.

Best of all, with Resource Advisor, you get resources you can use right away and when you have a claim.

Counseling

You and your family can call the Resource Advisor toll-free number to speak to a counselor at any time, day or night. And they can set up face-to-face or online counseling with a local licensed professional, such as a psychologist or social worker. You and your family members can get up to three counseling sessions, face-to-face or online using LiveHealth Online, for each concern, like job stress or family issues.

Legal

Contacting a lawyer can be intimidating. Resource Advisor helps take the intimidation factor out of it. With a call to the toll-free number, you can get a consultation with an attorney at no charge. If you want to meet with an attorney in person, the legal consultant can set up an appointment. And you can even get a discount on the visit.

Everyone needs a will but many people skip this important task because they don't have access to information they need. But Resource Advisor can help. Log onto the Resource Advisor website and access an interactive tool that guides you through questions and answers about your situation and then creates a will just for you.

Resource Advisor also has an online library of over 100 legal forms to help in situations like creating a power of attorney or a bill of sale.

Financial planning

You can also count on help managing your personal finances. Call Resource Advisor to set up one-on-one financial counseling with a certified professional financial planner. They can help with issues like planning for retirement, saving for a child's education and more. You can get help for each concern.

Resource Advisor - continued

Identity theft victim recovery services

Online tools to help with life's issues

The Resource Advisor website has resources to help with different parts of life, such as parenting, aging, work/ life balance, healthy living, working and more. There's even information about planning a funeral, coping with grief and loss, child care and more.

Resource Advisor

Get support, advice and resources, 24/7.

Call 1-888-209-7840 and ask for Resource Advisor or visit www.ResourceAdvisorCA.anthem.com.

Then, log in with the program name: ResourceAdvisor.

Note: See EaseCentral portal for flyer

Travel Assistance Services – Note: see EaseCentral portal for flyer

Travel assistance services are already part of your group term life insurance. So whenever you're 100 miles or more away from home, help is a phone call away.

We've teamed up with Generali Global Assistance, Inc. (GGA) to help if you or your dependents have an emergency **when you travel more than 100 miles from home for 90 days or less.*** And it's already part of your group term life insurance, so one phone call can help with all your travel needs!

If you have an emergency when you travel, call GGA. They'll coordinate the help you need. Travel assistance is available 24 hours a day through the Generali Global Assistance, Inc. Coordination Center, which can offer help in many languages. **All services must be coordinated and arranged in advance by GGA to be covered.***

To find out more, go to anthem.com/ca.

***Exclusions and limitations apply. You must call Generali Global Assistance, Inc. first for services to be covered. You may need to guarantee funds up front for certain services. See travel assistance brochure for full terms and conditions. GGA must make or approve all transport-related services in order for them to be eligible.**

✂ Cut out this wallet card and keep it with you when you travel.

Travel Assistance

Provided by Generali Global Assistance, Inc. for Anthem Blue Cross
For travel emergency assistance services, call the appropriate number below, depending on your location:

US. and Canada: 1-866-295-4890

Other locations (call collect): 1-202-296-7482

For more details, go to anthem.com/ca.

Valid only for eligible members.

Retirees are not eligible for travel assistance services.

Cost of Coverage

Below are the weekly pre-tax payroll costs for participating in the group medical, dental and vision plans. Herring Networks pays 100% of the premium for Basic Group Life/AD&D. In addition, Herring Networks pays 100% of the employee only premium for the Base HMO plan. Employees can buy-up the difference on the Buy-up HMO. Herring Networks pays 100% of the employee only premium for the Solution PPO plan. Employees can buy-up the difference on the Buy-up Classic PPO. Employees pay 100% of the voluntary dental and voluntary vision.

Employee contributions per pay period (weekly payroll/52 weeks) effective 1/1/2022:

	Employee Only	EE + Spouse/ DP	EE + Child(ren)	EE + Family
MEDICAL INSURANCE				
Anthem Value HMO 30/50/30% (Base) – CA only	\$0.00	\$121.71	\$81.14	\$212.99
Anthem Value HMO 20/40/250/3D (Buy-up) – CA only	\$20.04	\$165.80	\$117.21	\$275.11
Anthem Solution PPO 1500/20/40/20	\$0.00	\$103.49	\$65.77	\$187.32
Anthem Classic PPO 500/20/40/20 (Buy-up)	\$9.62	\$132.94	\$91.83	\$225.43
VOLUNTARY DENTAL INSURANCE – CA and non-CA				
Principal Dental	\$8.98	\$18.29	\$22.64	\$33.58
VOLUNTARY VISION INSURANCE (VSP administered by Principal)				
VSP Vision	\$2.32	\$4.82	\$5.71	\$9.06

